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**GENDER AND NON-GENDER DISTURBED BOYHOOD SEPARATION ANXIETY
DISORDER: THE ROLE OF AGGRESSION AND OBJECT RELATIONS AS
MANIFESTED IN RORSCHACH IMAGERY**

City University of New York

Ph.D. 1986

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GENDER AND NON-GENDER DISTURBED BOYHOOD SEPARATION ANXIETY DISORDER:
THE ROLE OF AGGRESSION AND OBJECT RELATIONS AS MANIFESTED IN RORSCHACH
IMAGERY

by

RODGER GODDARD

A dissertation submitted to the Graduate Faculty in Psychology in
partial fulfillment of the requirements of the degree of Doctor of
Philosophy, The City University of New York

1986

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This manuscript has been read and accepted for the Graduate Faculty in Psychology in satisfaction of the dissertation requirement for the degree of Doctor of Philosophy.

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Abstract

GENDER AND NON-GENDER DISTURBED BOYHOOD SEPARATION ANXIETY DISORDER; THE ROLE OF AGGRESSION AND OBJECT RELATIONS AS MANIFESTED IN RORSCHACH IMAGERY

by

Rodger Goddard

Adviser: Professor I.H. Paul

This study utilized Rorschach scales to examine the role of internal aggression, object relations and cognitive abnormalities in separation anxiety disorder. Nineteen urban separation anxiety disordered boys were compared to a group of fourteen normal controls. The hypotheses of the study postulated that separation anxiety disordered boys as compared to normals would: 1) score higher on scales measuring aggressive projective imagery, 2) evidence significantly lower developmental object relations scale scores, and, 3) have a significantly greater incidence of thinking abnormalities as measured by a Rorschach thought disorder scale.

Results confirmed hypothesis II and III. All separation anxiety disordered boys ranged significantly lower in their object relations scoring ($p < .05$) and had significantly more thought disordered responses ($p < .01$) than the controls. Two distinct subgroups of the separation anxiety disordered boys were clearly differentiated in this study; those with an additional diagnosis of gender

disturbance of childhood and those without the additional diagnosis.

It was concluded that in general the internal objects of separation anxious boys are potentially more dependently or symbiotically merged, controlled by outside forces, prone to destruction, disregarding of boundaries, overpowering and/or subject to violence or annihilation than those of the controls. The object relations of the ten gender disturbed boys, however, were found to be much more pervasively disturbed than both the non-gender disturbed subgroup and the controls. The non-gender disturbed subgroup was found to have significantly more symbiotic/ dependency type Urist object relations scores than both the gender disturbed subgroup and the controls.

The findings with reference to cognitive functioning indicated that both separation anxious subgroups possess thinking and imagery that is unstable, boundary compromised and psychotic-like (i.e., cognitive type thought disordered responses). The gender disturbed subgroup was again found to possess a more pervasive level of disturbance. They additionally had more affective type thought disordered responses than the controls (e.g., confabulations). Thus this subgroup possessed a greater potential to have ideas and images that are idiosyncratic, bizarre, fluid, tangential, and not isolated from impulse and affect. The above findings are viewed by the author as indicative of severe and pervasive internal psychopathology.

Hypothesis I was only partially substantiated in this study. The non-gender disturbed subgroup was found to score a higher amount of aggressive imagery on the Holt scale than the controls only on their initial percepts. When the entire Rorschach protocol was taken into consideration, no differences were found between any of the groups. This finding lends support, however, to a previously postulated notion that these children may have heightened needs to repress their aggression.

Dedication

This paper is dedicated to Victoria Grosso whose love patience and aid brought me through this project to its completion, and to Philip Goddard, my father, whose strength, wisdom, determination, and love of life will live on in me and all those he knew.

Acknowledgments

I wish to thank Irv Paul, my committee chairperson, for adjusting my speedometer throughout this project and giving me an understanding of how to approach this research. I can not thank Steve Tuber enough for his never-ending patience with my phone calls, meetings, questions and more questions. He gave this project direction and meaning. I also can not thank Lou Gerstman enough, beyond and above the call of duty, for his endless help at the wheel of the computer. I am indebted to him for his never failing statistical advice. Special thanks go to Susan Coates, for her helping me initiate this project and guiding the research whenever needed. She created an environment of communicating her unique ideas in this area and enabling my own ideas to grow. I am indebted to, and wish to express special gratitude to, John Fogelman and the Department of Child and Adolescent Psychiatry, Roosevelt Hospital for their research grant and generous accomodation of this project.

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Chapter 1: Introduction

Although the category of separation anxiety disorder was first included in the Diagnostic and Statistical Manual in its third edition, published 1980, pathological separation anxiety in childhood has long been viewed by theorists and clinicians as an area of great concern. James (1890) was the first to acknowledge the importance of this area in his statement, "The greatest source of terror in infancy is solitude." (p.64). In 1905, Freud briefly turned his attention to the anxiety observed when an infant is separated from the person it loves. Eventually, Freud came to view separation anxiety as one of the central elements in his understanding of anxiety. He wrote, "...missing someone who is loved and longed for (is)...a key to an understanding of anxiety" (Freud, 1926 p. 136-7). In Freud's revision of his theory of anxiety he understood signal anxiety to have evolved from the infant's fear of separation from his mother. The prototype of this anxiety was believed by Freud to be birth, and its later manifestation, castration anxiety (i.e., fear of separation of the penis from the body).

Broadwin (1932) was the first to describe the syndrome which would later be known as pathological separation anxiety of childhood. He differentiated school refusers into two groups: truants, and children suffering from "a deep seated neurosis of the obsessional type" who while at school thought that something terrible was happening to

their mothers (p.43). This second group of children usually felt compelled to go home to see their mothers to assure themselves of her safety.

Partridge (1939) was the next to differentiate the symptoms of this subgroup from those of truants who he defined as not manifesting the behavioral needs to be at home or with mother when not in school, or possessing anxiety concerning her safety. Johnson in 1941 was the first to coin the phrase, "school phobia". This phrase has often been viewed as a misnomer for describing these children. Even Johnson at that time described the syndrome in the eight cases she documented as a fear of leaving home and separating from mother, rather than a fear of going to school. Since that time, numerous efforts have been made to gain a more in-depth understanding of this symptom complex.

The major thrust of the literature in this area has included theoretical speculation from case studies, treatment descriptions, and outcome studies of school phobic and separation anxious children. There have been numerous empirical studies to define the age, sex, intellectual, demographic, family and ethnic variables of these children. Other empirical studies have been concerned with the personalities of the mothers of school phobic and separation anxiety disordered children, the family dynamics, and heightened needs for dependency in mother and child.

The other major areas that have been postulated as having significant etiological importance in this area, often have not been investigated in an empirically systematic way. These less empirically researched areas generally concern the child's inner experience. These areas include Oedipal issues, latent or overt hostility, inadequate ego development, omnipotence, narcissism and bio/chemical variables. For the most part these areas refer either to the impact of the family system and/or mother upon the child, or to the child's intrinsic make-up. It is readily apparent why the child's inner experience would remain somewhat unexplored in empirical fashion owing to the difficulty in quantifying such areas as emotions, impulses, internal psychological structures and so on. Although case studies have been useful in these areas to explore aspects of these children's dynamics, their findings have been too haphazard, inconsistent, contrary to one another and dependent on the therapist's conceptual framework to substantiate or discredit the major theoretical notions in the field. Therefore, a clear perspective concerning the nature of these children's inner experience has been difficult to document. Consequently, an understanding of why their experience would lead them to their characteristic states of anxiety and clinging has remained puzzling. This has led many authors to suggest that school phobia and separation anxiety may be multidimensional constructs of

great complexity, not reducible to a single causative agent but to a host of interacting etiological factors (Bolman, 1970; Briety, 1982; Rodriquez, 1959). If this is the case, then we are faced with the need to determine the nature of their interaction and obtain a finer understanding of which factors are critical and dominant, and which are supportive. To these ends, many authors have called for more research in this area to obtain greater empirical validation of etiological perspectives (Gordon and Young, 1967). Reger's (1962) concern is echoed here, "Unwarranted emphasis tends to be placed on understanding the label rather than the child with the problem. It is not the phobia we are interested in, it is the child" (p. 356).

Purpose, Objectives and Rational of the Study:

This study will examine the role of aggression and internal object relations in separation anxiety disordered middle and low class urban boys. Much of the research that has been conducted in this area has focused on the environmental variables found in these children's lives to the neglect of the child's inner experience. This occurs in sharp contrast to a significant amount of literature in this area which has viewed the child's inner experience, and hostility in particular, as critical in the formation of his clinging and anxious behavior. Likewise, the child's internal object relations have been viewed by many as the

significant intervening variable between the child's family dynamics and his unusual behavior.

Among the many questions left unanswered by the research to date in this area are the following: 1) What role does internal, possibly latent hostility play in this symptom complex, and 2) Does the child's behavior reflect an isolated, family reinforced symptom, or does it reflect an anxiety that grows out of an internalized disturbed view of oneself and others. The purpose and specific objectives of this study are, 1) To demonstrate that these children do, indeed, possess heightened internal hostility, and 2) To demonstrate that the projected visual imagery of these children consists of self, other and interactional images which are disturbed.

The rationale for exploring the first proposition is derived from several areas. Some researchers investigating the overall environmental factors and behavior of these children have incidently found that these children, who were often considered to be meek, passive and shy, harbored and covertly expressed marked levels of aggression. Waldron (1975), for example, in studying 35 children with the related symptom of school phobia found these children to express aggression to a significant degree. This finding, however, was based on observational, somewhat subjective data which although suggestive of the importance of hostility, does not substantiate its occurrence.

A significant amount of research in this area has found the mothers of school phobic and separation anxious children to be dependent, separation anxious themselves, and to foster a dependency in their children by being overprotective and overindulgent with him (Berg and McGuire, 1974; Breit, 1982; Coolidge et al., 1957; Pritchard and Ward, 1974). These authors generally view the child as possessing heightened dependency or libidinal urges in reaction to his mother's anxious concerns about separation and independence. An opposing body of research, however, has found the mothers of school phobic and separation anxious children to be disturbed, ambivalent, and to some extent limited in their capacity to provide adequate caretaking (Agras, 1959; Berg, 1964; Butler, 1974; Davidson, 1962; Eisenberg, 1958; Hersov, 1960b; Leger, 1979; Tennes, 1966; Waldron et al., 1975; Weiss et al., 1964). It follows that the impact upon the child of an unstable, possibly intensely anxious, aggressive or ambivalent mother is likely to lead to either an anxious child, craving for supplies he never received, or an enraged child, possibly fearful of the impact of his tremendous anger. The research has been insufficient in determining the relative amount of aggression, dependency and anxiety in these children.

In addition to preliminary empirical findings in this area, there has been a large amount of theoretical and clinical speculation that suggests that the child's own high

level of reactive or intrinsic aggression is a central factor in the child's concern for the safety of, and desire to be close to, his primary caretaker.

The rationale for exploring the child's internal object relations stems from the controversy in the field concerning the relative influence of environmental versus endogenous factors. On one end of the spectrum are family theorists and behaviorists who place strong etiological and treatment emphasis upon the child's environment. On the other end of the spectrum are those with psychoanalytic perspectives who focus their concerns upon the child's internal experience, psychological make-up and/or instinctual factors. Research in this area has been very limited although numerous theorists and clinicians cite disturbance in the child's object relations and psychological make-up as crucial in the formation of this behavior complex.

Numerous psychoanalytic theorists have viewed an individual's object relations as indicative of a developmental level of functioning (Klein, 1935; Mahler et al., 1975). These theorists view interactionally destructive, nonautonomous, boundary compromised, internalized object percepts as occurring on the primitive end of the developmental continuum and integrated autonomous object percepts, on the developmentally mature end of the continuum. Thus, many authors suggest that separation

anxiety disorder is not an isolated behavioral disturbance, solely reinforced by, or intrinsic to a family situation, but particular to a child's unique internalization of his environmental situation and indicative of a developmental immaturity concerning his object representations and general psychological make-up. It has been reasoned that if a child is lacking in his ability to utilize internal representations as stable integrated objects to provide soothing for his anxiety, and as a basis from which to build ego and interpersonal skills, than he will be in need of an actual physical caretaker to provide such functions (Wieland, 1966). Furthermore, if the child lacks a stable internalized view of others as integrated and autonomous, than he will have difficulty in being assured of his caretaker's safety when not in his or her physical presence. The proper treatment of these children certainly calls for a knowledge and understanding of the severity of their disturbance which is likely to be reflected in their projective representations. In order to answer the questions, How and to what degree does the child's internal psychological make-up predispose him to these symptoms, it will be necessary to examine his internal object relations.

Chapter 2: Literature Review

This chapter will be divided into four areas: A) definition of separation anxiety disorder, including an evaluation of how separation anxiety disorder compares with school phobia, B) empirical findings concerning ethnic, sociocultural and descriptive characteristics of separation anxious/school phobic children and their families, C) an evaluation of the long term effects and consequences of pathological separation anxiety and school phobia, and D) the major etiological viewpoints as they have been discussed theoretically, observed in individual cases and evaluated empirically. Although the literature in this area has numerous accounts of treatment considerations and outcome in the form of case studies, and to a lesser extent, empirical studies, these will not be addressed here except in so far as they relate to the above listed areas.

A) Definition

Separations anxiety disorder as defined by the Diagnostic and Statistical Manual of Mental Disorders, Third Edition (1980) appears in brief form as follows:

Diagnostic Criteria For Separation Anxiety Disorder

- * A) Excessive anxiety concerning separation from those to whom the child is attached as manifested by at least three of the following.
 - 1) Unrealistic worry about possible harm befalling major attachment figures or fear that they will leave and not return.
 - 2) Unrealistic worry that an untoward calamitous event will separate the child from a major attachment figure, e.g., the child will be

lost, kidnapped, killed, or be the victim of an accident.

3) Persistent reluctance or refusal to go to school in order to stay with major attachment figures or at home.

4) Persistent reluctance or refusal to go to sleep without being next to a major attachment figure or to go to sleep away from home.

5) Persistent avoidance of being alone in the home and emotional upset if unable to follow the major attachment figure around the home.

6) Repeated nightmares involving themes of separation.

7) Complaints of physical symptoms on school days, e.g., stomachaches, headaches, nausea, vomiting.

8) Signs of excessive distress upon separation, or when anticipating separation from major attachment figures, e.g., temper tantrums or crying, pleading with parents not to leave (for children below age 6 distress may be of panic proportions).

9) Social withdrawal, apathy, sadness or difficulty concentrating on work or play when not with a major attachment figure.

B) Duration of disturbance of at least two weeks.

C) Not due to a Pervasive Developmental Disorder, Schizophrenia, or any other psychotic disorder.

D) If 18 or older, does not meet the criteria for agoraphobia.

According to the manual these children may additionally display clinging behavior with the parent, be unable to stay in a room by themselves, be unable to visit at a friend's house and/or go on errands. The manual states that children with this disorder often have fears of animals, monsters and situations that are perceived as presenting danger to the integrity of the family or themselves. Consequently, they may have exaggerated fears of muggers, burglars, kidnappers, car accidents or plane travel. Concerns about dying are common. The manual states, "On occasions a child may become

violent toward an individual who is forcing separation...Adolescents with this disorder, especially boys may deny over-concern about their mothers or the desire to be with her; yet their behavior reflects anxiety about separation...Fear of the dark is common and some children have fixed fears that may appear bizarre. For example, they may report that they see and feel eyes staring at them in the dark, that mythical animals are glaring at them or that bloody creatures are reaching for them" (p.59).

Gittleman-Klein and Klein (1973) have found that a fear of separation from the home may be substituted for fear of separation from mother.

Technically, school phobia and separation anxiety are distinct entities. In school phobia, as defined by the DSM III, "the child fears the school situation, whether or not he or she is accompanied by their parent" (p.50). Unfortunately, however, use of the diagnostic label separation anxiety disorder by the DSM only began with its third edition, printed in 1980. Previous to this the terms school phobia, school avoidance and school refusal were widely used by clinicians to denote a form of childhood pathology that for the most part is synonymous with the currently used terminology of separation anxiety disorder.

School refusal "neurosis" was first differentiated from truancy on the basis of the increased anxiety, fear of harm befalling mother, and lack of sociopathic-like behavior

(Broadwin, 1932). In 1939, Partridge, in analysis of 50 cases, further differentiated the class of school phobic children from that of truancy. As previously stated, when the term school phobia was coined in 1941, its usage was meant to refer to children who possessed a fear of leaving mother, rather than one of attending school (Johnson et al., 1941). Numerous authors since that time have agreed that the basis of "school phobia" is a fear of leaving and separating from a significant parental figure. (Bowlby, 1960; Breit, 1982; Coolidge et al., 1957, 1960; Davidson, 1957, 1960; de Sousa and de Sousa, 1980; Eisenberg, 1958; Estes et al., 1956; Gittleman-Klein and Klein, 1973; Goldberg, 1953; Hersov, 1960; Leroy and Derdeyn, 1976; Miller, 1972; Nurstein, 1958; Olsen and Coleman, 1967; Radin, 1967; Reger, 1962; Salvarnoser, 1967; Schultz, 1982; Szyrnski, 1976; Vaughan, 1954; Velkamp, 1975; Warren, 1948; Wakabayashi, 1965; Warnecke, 1965).

Gordon, (1977) in the most recent and extensive review of this question found separation anxiety to be the most prevalent and influential view to explain and be associated with the symptoms commonly referred to as school phobia. Likewise, Eisenberg (1958) states, "Systematic study of these children reveals that, almost without exception, the basic fear is not of attending school, but of leaving mother, or less commonly, father." (p.713). Hersov (1960) in an empirical study of 50 school phobics found the most

common underlying factor to be fear of separation from home and the most often expressed concern was that of mother's safety. Waldron et al.(1975), in an empirical study of 35 school phobic subjects and their families, found twice as many of them had separation anxious concerns as compared to a matched sample of children with other neurotic categories and that 75% of the school phobic subjects had greater than minimal separation anxiety. Other empirical investigations support these findings (Rodriquez, 1959; Weiss, 1964).

Other authors, however, have questioned this generally accepted assumption by pointing to the fact that many school phobics are not fearful of going out of the home to play without mother (Gordon, 1977; Levanthal, 1964).

Gittleman-Klein and Klein (1973) explain this observation by pointing out that these children often feel safe going out into the neighborhood knowing that mother or the home is close by when they need it, whereas school represents having no control over when they can see mother. Roberts (1973), in a study of 56 school phobics found only 1/4 of these cases to be explainable by a separation anxiety formulation.

It is reasonable to assume, however, that the past use of the terms school phobia, school refusal, and school avoidance created an overinclusive category as far as separation anxiety is concerned. In reviewing findings of past studies involving school phobics, as will be presented in the following pages, it will be necessary to

view school phobia as a predominantly overlapping category with that of separation anxiety disorder, but not synonymous with it. It is likely that a very high percentage of the school phobics studied in the past were indeed pathologically separation anxious. The overinclusivity of the school phobic category, however, may involve a proportion of children who have real phobias concerning the school situation and their school performance and/or children who possess a psychotic or pervasive developmental disorder. Therefore, caution must be used in generalizing findings of studies concerning school phobics to separation anxious children, particularly where results may have been biased by non-separation anxious disordered subjects. In consideration, however, of overwhelming agreement in the field, supported by empirical findings concerning the immense overlap of these categories and previous incorrect use of the term school phobia, it is also advisable to utilize studies of school phobics to enhance our understanding of pathological separation anxiety in children.

B) Description

Prevalence: Leton (1962) found school phobia to occur in three out of 1000 primary school students and 10 out of 1000 high school students. Kennedy (1965) found an average of 17 school phobia cases per 1000 students in all grades. The increased percentage is often viewed as being a result

of increased public awareness of the problem at that time. Kahn and Nurstein (1962) found between 2 to 8% of child referrals in the child guidance clinics they surveyed to be school phobia related.

Sex: At first, school phobia was generally believed and documented to be more prevalent in girls than boys (Berg et al., 1969; Coolidge et al., 1957, 1960; Davidson, 1960; Leton, 1962; Jacobson, 1948; Suttentfield, 1954; Talbot, 1957; Van Houten, 1948; Waldfogel, 1959). Some authors have found there to be more male cases (Eisenberg, 1958; Goldberg, 1953; Hersov, 1960a; Rabiner and Klein, 1969; Rodriguez et al., 1959; Waldfogel et al., 1957). Other investigators found its occurrence to be equal in girls and boys (Gittleman-Klein and Klein, 1973; Kennedy, 1965). Gordon (1977) in reviewing the literature and totaling the subjects from 17 studies found the figures to be almost equal in boys and girls.

Age: There exists considerable disagreement among researchers as to at what age school phobias are likely to occur. Some investigators have found school phobia to occur more frequently in younger children around the age of 5 to 7 years old (Coolidge et al., 1957; Davidson, 1961; Goldberg, 1953; Leton, 1962; Smith, 1970; Waldfogel et al., 1957). A few researchers have found a higher incidence in older children and adolescents between the ages of 9 to 13 years old (Chazan, 1962; Choi, 1961; Rabiner and Klein, 1969; Van

Houten, 1948). Many researchers have found a bimodal distribution which peaks around the ages of 5 to 7 years old and then again at the ages of 11 to 13 years old, to describe these children (Leger, 1979; Smith, 1970; Wakabayashi, 1982). Talbot (1957) and Kennedy (1965) found there to be an even age distribution from 5 to 15 years of age. Gordon (1977) in review of the various studies, and in agreement with Talbot, concludes that there is a fairly even distribution of age levels from 5 to 15 years of age.

Intelligence: It was long believed that school phobic children had higher than normal I.Q.. A number of studies have found school phobic childrens' I.Q.s to be slightly above normal (i.e., 106 to 110) (Berg et al., 1969, 1975; Baker and Wills, 1978; Chazan, 1962; Goldberg, 1953; Hersov, 1960; Kraft, 1973; Jackson, 1964; Rodriguez, 1959; Sletten, 1971; Szykynski, 1975). Other researchers have found school phobic children's I.Q. to be normal (Adams, 1966; Hampe et al., 1973). Berg (1975) and Chazen (1962) found an average I.Q. of 117 among grammar school students and an average I.Q. of 100 among secondary school students.

Gordon (1977) in totaling the I.Q. scores of nine major studies found the mean I.Q. of the children to be 107. He suggests, however, that the slightly higher than normal I.Q.s found in school phobics could be a product of sampling bias, as most I.Q.s were tallied from school phobic children whose families were "smart enough" to seek help and bring

them to a clinic. However, one study, Jacobson (1948) which took its sample from the school system, found a mean I.Q. of 107 among school phobics. Hampe et al. (1973) also sampled these children in the community at large and found their mean I.Q.s to be 98.9 and distributed in similar fashion to the entire population. The question as to the mean I.Q. of these children presently remains an open one.

School performance: It was previously assumed that school phobics were better than average students. Various controlled studies have lent support to this view. Talbot (1957) found school phobics to be high achievers. Hersov (1960b) found this population's standard of work and behavior in school to be adequate to good. Likewise, Chazen (1962) and Kraft (1973) on the whole found these students to possess at least adequate school performance ability. However, Chazen found 1/2 of his older than grammar school phobic subjects to have had serious educational problems. Berg et al. (1975) comparing the reading quotients of 100 school phobics to 100 other psychiatric patients found the former to possess significantly higher reading quotients and no evidence of poor educational attainment. Berg et al. (1970), however, found grammar level school phobics to have no abnormal academic problems whereas roughly half of the secondary school phobic students in his study were found to have some academic difficulties. The finding of poorer intellectual and academic performance in older school

phobics may reflect a more serious pathological process at an older age, or a culmulative scholastic and achievement disadvantage from a greater number of years of latent or overt emotional difficulties interfering with learning, intelligence and school performance.

Cox (1982) in a study of medication treatment of 14 inpatients, found separation anxiety disorder to produce an irritable, preoccupied state which produced symptoms indistinguishable from attention deficit disorder. Thus, these children may be mistaken for underachievers and manifest symptoms that interfere with their scholastic functioning.

Somatic Complaints: Many researchers have found school phobics to evidence an extremely high number of real and imagined somatic illnesses (i.e., abdominal pain, nausea, vomiting, headaches, etc.) (Agras, 1959; Berg et al., 1969; Buell, 1962; Choi, 1961; Davidson, 1969; Eisenberg, 1958a; Goldberg, 1953; Hersov, 1960b; Jackson, 1964; Jacobson, 1948; Kahn and Nurstein, 1962; Kennedy, 1965; Millar, 1961; Radin, 1967; van Houten, 1948; Waldfogel et al., 1957). On weekends, holidays, or after gaining permission to stay home from school, the school phobic's complaints often dissappear (Buell, 1962; Millar, 1961; Radin, 1967; Waldfogel et al., 1957).

Ethnicity: Most ethnical groups and races are generally represented in proportion to the general client

characteristics of the reporting clinics (Millar 1972, Talbot 1960) with one important exception: the black community. Gittleman-Klein and Klein (1973) in a study of 35 separation anxious and school phobic children found only one to be black. Their study was conducted in a clinic situated in a predominantly black community with a normally 50% black clientele! Others have also found an absence of school phobia in the black community (Adams, 1966; Glazer, 1959; Kraft, 1973; Thompson 1972).

Socio/economic class: Miller (1972) and Talbot (1957) found no significant relationship of school phobia to socio-economic status. Others, however, have found a significant correlation of school phobia to families from lower economic class with financial instability in the home (Adams et al., 1966; Dunn, 1968; Roberts, 1973). Baker and Wills (1978) found a greater proportion of acute school subjects to come from an upper social class, whereas a greater number of chronic subjects were found to come from the lower social classes. Leger (1979) found the majority of his school phobic subjects to be from middle class families. Choi (1961) and Jackson (1964) found a tendency for these families to be of good economic standing. Hersov (1960a) reported finding a higher percentage of school phobics as coming from families with higher economic class standing. Thus, the findings in this area tend to be mixed yet imply representation of all socio-economic classes.

Family characteristics: Pritchard and Ward (1974) found high maternal age to correlate with school phobic children. Adams et al. (1966) found a correlation between school phobic children and a family birth position of being the second child. Other researchers have found school phobia to occur more frequently in younger siblings within a family (Kraft, 1973; Mitchell and Shepard, 1967; Smith, 1970). Goldberg (1977) in assessing five cases found these children to most often be the oldest child in the family, or the last one left at home. Baker and Wills (1978) in a study of 99 school phobic children found that over 50% of his subjects were the oldest in the family and 80% of his subjects were either the oldest or youngest in the family. Berg (1972) and Hersov (1960a) found no relationship between school phobia and being an only child. Other authors have found no significant differences in birth order or family size concerning school phobics (Chotiner and Forrest, 1974; Kennedy, 1965).

In a review of 44 outpatient cases, McGlashan (1962) found half of this population to be missing a parent and 1/6 of the families to be bereaved. Leger (1979) found a high percentage of father absence in these families. Most other researchers, however, usually report a predominance of intact family units (Butler, 1974; Chotiner and Forest, 1974; Gittleman-Klein and Klein, 1973; Hersov, 1960a).

Level of psychopathology: Berg (1979) found school phobics to have a high incidence of at least neurotic proportions as measured by the Eysenck Personality Scale and the Social Worker Personality Scale. Waldron et al. (1975) in a controlled study found significant defects in the character development of his school phobic subjects. Many authors have expressed the belief that within the population described as being school phobics, there exists at least two or more distinct subgroupings which are usually ranked by degree of pathology. The most common division, put forth particularly by Coolidge et al. (1960), of school phobics is between those of younger school phobics, who are usually considered to possess a higher degree of separation anxiety, and older, adolescent school phobics, who are usually considered to possess a higher degree of more serious depression or characterological personality disturbance. Various authors have supported this dicotomy (Berg, 1960; Kelly, 1973; Kennedy, 1965; Millar, 1961; Rodriquez et al., 1959; Rubenstein and Hastings, 1980; Sperling, 1967; Waldfogel et al., 1956; Warren, 1960; Weiss and Cain, 1964). Coolidge described the younger group as possessing intact personalities, the ability to express affect, utilize fantasy and derive satisfaction from inner experience. He believed the symptom to reflect an acute repression reaction in the face of an exacerbated conflict. The older group was believed to be fixated at the pregenital stage with limited

ability for affective display, utilization of fantasy and possessing a more primitive defense and personality organization.

This has led Gordon (1977) to postulate that a "neurotic" school phobia, if not adequately treated or attended to will later turn into a more serious characterological disturbance. Kahn and Nurstein (1962) add a third category to Coolidge et al.'s dicotomy, that of a latent psychotic group where flight from school represents a strategy to avoid the precipitating stress that could lead to a psychotic break. Likewise, Millar (1961) believed there to exist a third group of school phobics, those with an incipient psychosis. Johnson (1957) believed that no such distinction, based on severity of pathology between early and late school phobia existed, and that anxiety and a mother-child relationship problem was responsible at either age. Similarly, Gittleman-Klein (1975), in reviewing subjects from her study, asserts that the onset of school phobia and separation anxiety in adolescence does not signify the development of a more pernicious disease process.

In an empirical study of school phobic adolescents, Baker and Wills (1978) found depression to be the most common characteristic of adolescent subgroups of school phobia, rather than a severe characterological disturbance.

They concluded that adolescent school phobia is therefore not a forerunner of a recurrent mental illness.

The controversy as to whether school phobia at a later age may carry with it a more severe level of pathology at this point remains undecided. Likewise, it still remains a question as to the level of pathology of school phobics and separation anxious disordered children in general. It appears likely that many of the children traditionally grouped with those under the category of school phobics may indeed possess serious personality disturbance. Utilization of the overinclusive category of school phobia no doubt obscures the problem tremendously. However, the modern DSM III usage of separation anxiety disorder specifically excludes children with a psychotic or developmental disturbance. This may help enable researchers to more clearly understand the meaning of this symptom complex in reference to age of onset and level of psychiatric severity. Due to the present lack of empirical exploration into the psychological and intellectual make up of separation anxious and school phobic children, it remains to be determined if these children possess an overall psychopathological disturbance or a more circumscribed problem.

Precipitating factors: It is a commonly shared belief among clinicians and researchers in this area that the onset of school phobia and pathological separation anxiety often follows a traumatic or disturbing event in the child's life

(i.e., death or illness in the family) (Davidson, 1962; Radin, 1967; Skynner, 1974; Talbot, 1957). Waldron et al. (1975) found that 47% of their school phobic children were influenced by a precipitating factor. Gittleman-Klein (1975) found the onset of school phobia to follow a change in the child's life in 80% of her cases. Weiss (1964) found precipitating events in 16 inpatient adolescents to include moves to a new school, entrance to junior high school, hospitalization of the child and illnesses in mother or child. Hersov (1960a) found the most common precipitating factor in the 50 school phobics he studied to be transfer from a junior high school to a senior high school, or promotion to a higher class. Precipitating causes are seldom viewed as etiological factors in themselves. Although many of these children receive an additional diagnosis of adjustment disorder, the disturbing event is rarely viewed as sufficient in itself to explain the following prolonged anxieties concerning separation from a loved one.

Gender disturbance: Several investigators have noticed a high incidence of gender disturbance associated with school phobia and separation anxiety disorder (Burns, 1959; Coolidge et al., 1957; Greenbaum, 1964; Kagan, 1956; Malniquist, 1965). Adams et al. (1966) in an exploration of 21 school phobic cases found that one half of the girls and 6 of 7 of the boys that he studied had bisexual conflicts.

Waldron (1975) in his controlled empirical study of 35 school phobic children, found 56% to lack a well defined sexual identity. Levenson (1961) found that of the ten Jewish school phobic boys he studied, a significant number had inadequate male identifications. A follow up of school phobic children by Weiss and Burke (1967) revealed a significant number to have hesitations about establishing heterosexual ties. Lippman (1962) in a case study review of a limited number of subjects, found school phobic girls in his sample to be subtly aggressive and masculine identified and the boys to be passive and withdrawn. In an empirical study of 67 school phobics and their families, Pritchard and Ward (1974) found that boys in the study had not been provided with a positive gender role identification to enable them to move away from their mothers.

It is readily apparent that boys who exhibit separation anxiety symptoms will be viewed by societal standards as being "momma's boys" and "sissies" (A.U. Kahn, 1973). The occurrence of gender difficulty in separation anxious girls is more baffling. The exact interplay between separation anxiety and gender conflict is yet to be determined (e.g., which may lead to the other). It is likely that separation anxiety and gender disturbance of childhood are related and overlapping entities.

C) Course of Illness: Possible Consequences of Separation
Anxiety Disorder and School Phobia

There exists marked disagreement as to whether pathological separation anxiety of childhood is a benign transient state, or the embryonic form of severe psychopathology in the future. Freud (1905) intimated that the latter might be the case in his statement, "One of the clearest indications that a child will later become neurotic is to be seen in an insatiable demand for his parents' affection" (p.223). Bowlby states, "...there can be little doubt that separation anxiety is an exceedingly common component of neurotic anxiety" (1966, p. 105). Research in this area has been mixed. Investigations into the future course of separation anxiety, explored in the form of follow up studies of school phobics, is biased on three accounts. First, as previously discussed, school phobia is an overinclusive category which, at least to some extent, extends beyond that of separation anxiety. Second, most follow up studies involve subjects have received treatment for their difficulty rendering it difficult to assess the meaning and possible consequences for those whose symptoms go untreated. Third, the parameters of investigation and conclusions in this area are a function of, and limited by, the empirical measures used to look at later personality functioning and the theoretical orientation of the investigators.

It may be that the pathological version of separation anxiety in middle childhood is only a transient, age specific state of anxiety and intense vulnerability which is later sealed over by defense, character formation or other psychopathology, not bearing direct resemblance to its original state. Thus, authors have viewed childhood pathological separation anxiety as responsible for a multitude of future personality and psychiatric difficulties. Kahn (1967) views separation anxiety as a central causative agent in the genesis of the adult schizoid character. Horner (1976) and Glazer (1978) view separation anxiety as a crucial variable in the later formation of borderline psychopathology. Burnham (1965) views it as a critical etiological factor in schizophrenia. Brennan (1982) posits that separation anxiety can lead, in adult life, to a number of self destructive defenses and actions such as indulgence in loveless sexuality, omnipotence, overeating, interpersonal intrusiveness, pathological idealizing, and paranoid ideation. Fairbairn (1952) viewed separation anxiety as the causative agent of war neurosis and breakdown on the battlefield. He also regarded it as the basic cause of the schizoid process. Tuber and Coates (1983) view separation anxiety as a critical etiological factor in gender disturbance of childhood. Greenson (1978) views it as an important formative dynamic in the characters of transvestites. He views the use of a woman's clothes by

a man to serve as a defense against separation anxiety by means of the partial identification with the mother's body that such behavior affords. It has been commonly held by various authors that separation anxiety and school phobia are the forerunners of work phobia, agoraphobia and other adult phobic states (Frances and Dunn, 1975; Kelly, 1973; Radin, 1972; Shapiro and Jegede, 1973; Warren, 1960).

Research into the possible future consequences of separation anxiety has been contradictory. Numerous behavioral case studies have documented an extremely high success rate in the alleviation of the short term behavioral symptoms of school avoidance. Parker and Reiss (1962) in a study predominantly confined to the investigation of the recurrence of school phobic symptoms, found only 1 of 18 school phobic subjects to have further difficulty in school attendance after treatment. Nurstein (1963) found former school phobics to be slightly, but not significantly more fearful than controls on follow up. Berg et al. (1974) contrary to previous expectations, found separation anxiety not to be a major factor in the genesis of adult agoraphobia. Childhood separation anxiety only accounted historically for 22% of the agoraphobic subjects studied (Berg, et al., 1974).

Lichter et al. (1962) found a significantly high percentage of high school dropouts had a history of school phobia. Pittman (1968) found 9 of 11 work phobic subjects

he studied to have a history of school phobia stemming from separation anxiety, and to have a relationship with their wives that paralleled their previous separation anxious attachment to their mothers.

Weiss and Burke (1967) in a five year follow up study of 16 hospitalized school phobics found their adulthood adaptive functioning in the work place to be good. However, their ability to function as mature adults in loving relationships was found to be in question. One third of these subjects were found to be anxious or depressed and over one half were found to be constricted bland people with limited ability to enter into close adult relationships. Weiss and Burke (1970) in their ten year follow up of these subjects found their school and/or work performance to be adequate to good. However, they again were found to possess numerous problems in social adjustment, significant feelings of loneliness and compulsive, constricted, repressed personalities. Only one of their subjects was found to be free of personality problems. Roberts (1973) found that over half of the treated school phobic subjects he investigated had further school attendance problems in short term follow up and 1/4 of the subjects were found to have significant adjustment problems in the long run.

Berg (1970) in a follow up study of 21 discharged inpatient adolescent school phobics found 1/3 of these cases to be well adjusted, 1/3 of these cases to possess limited

functioning and 1/3 of these cases to be severely incapacitated by neurotic problems and interpersonal difficulties. Capstick and Seldrup (1977) found separation anxiety to be of great etiological importance in the formation of obsessional neurosis.

In an empirical study of 68 15 to 59 year old asthmatic patients, Dirks et al. (1979) upheld the commonly supported finding that the occurrence of asthma in adulthood significantly correlates with separation problems in childhood.

The studies cited above suggest that there is a definite correlation between childhood separation difficulties and later problems. The impact appears to center on the individual's ability to enter into relationships and negotiate anxiety. The consistent finding that past school phobics are usually able to function in an economically productive way, yet may possess significant emotional and interpersonal difficulties is supportive of those who claim that separation anxiety can play an important role in borderline pathology.

D) Etiological Factors

Etiological viewpoints in this area can be conceived of as falling along a continuum from environmental to endogenous factors. Most etiological perspectives fall in the middle and involve an interplay of familial and intrinsic causes. Thus, the different theoretical viewpoints in their varying external to internal emphasis can approximately be ordered as follows: family systems, traumatic events, learning theory, Oedipal issues, heightened dependency in mother and child, heightened aggression in mother and child, inadequate psychological development and bio/chemical causes. The categories themselves are rough approximations and/or conglomerate groupings of etiological viewpoints that share certain common elements. Overlap and complexity of interaction among these factors can be expected. Therefore, in research endeavors it will be important to understand the nature of their interaction and work toward establishing a hierarchy of their importance. The bulk of research in this area, as previously stated, has overwhelmingly favored environmental exploration. In the following pages, these etiological groupings will be examined by first describing the clinical and theoretical assertions in that area and then the empirical studies that have subsequently supported or counter-indicated such viewpoints.

Family systems: Many authors have asserted that pathological separation anxiety and school phobia are not essentially a component of the child's intrinsic psychological makeup, but actually a symptom or acting out of a disturbed family matrix (Baideme et al., 1979; Barker, 1968; Bonnard, 1952; Broadwin, 1932; Davidson, 1960; Eisenberg, 1958; Garvey and Hegrenos, 1966; Hersov, 1960b; Jarvis, 1964; Levanthal, 1968; Levenson, 1961; Luchini, 1978; Mattejat, 1981; Messer, 1964; Methven, 1968; Nurstein, 1958; Radin, 1967; Stratten, 1966; Talbot, 1957; Waldfogel, 1957). There have been significant findings in this area which support the notion that the interactional constellations and individual members of families with school phobic children tend to be disturbed.

Leader (1978) believes that the parents of school phobics have excessive abandonment fears and that family members try to competitively prove to the other members that they are the most abandoned. Rodriguez (1959) believed these parents to give contradictory verbal and behavioral cues to their children which act to communicate the high level of anxiety in the family.

Hersov (1960b) in a study that compared 50 school refusers with 50 truants and 50 normal controls, found that the former came from families with higher incidences of serious neurosis and affective disorders. Pritchard and Ward (1974) in a study of 64 school phobic families found

at least one psychologically disturbed parent in over 48% of their cases. Although the disturbance was proportionately higher in the mothers of these families (i.e., 2:1), the fathers too were found to be exceeding distant, rejecting or ambivalent toward their sons, opting out of family interactions, and/or inappropriately close with their daughters. These families in general were found to be exceedingly close, inward looking, and possess marital dischord and an anti-father bias.

Waldron (1975), in a study of 110 school phobics parents, using rating scales and questionnaires without controls, found only one father and no mothers in the entire group to be entirely psychologically healthy. Only six of these families, however, were thought to have more than moderate pathology. It was concluded that 79% of these parents had mild to moderate psychopathology (i.e., borderline type psychopathology). Baker and Wills (1978) in a study of 48 families found a significant number of parents to have mental illnesses. Berg (1974) found 1/5 of the parents of 29 hospitalized school phobic adolescents to have a history of psychiatric disorders.

It is a commonly held belief among some family clinicians in this area that separation anxious children come from families with a long intergenerational tradition of inculcating and acting out separation anxiety and unresolved dependency (Johnson et al., 1941; Milner, 1961;

Waldfogel et al. 1957). Estes (1957) describes school phobic mothers as having hostile dependent relations to their own mothers. Szyrnski (1976) asserts that these families often have frequent contact with an overindulging and over protective grandmother who attempts to gratify her own need to be needed by others. Waldron et al. (1977) found school phobic parents to have substantial problems with dependency, hostility and resentment toward their own parents. They also found over 1/2 of school phobic parents to feel, or have been, neglected by their fathers. Davidson (1970) found 17 of 30 mothers of school phobics to telephone their own mothers 6 to 7 times per week and half of the mothers to live in close physical proximity to their own mothers.

Excessive closeness and being cut off from the outside community has often been cited as a characteristic of these families. Gittleman-Klein (1975) in summarizing the majority of her subjects investigated in a past medication intervention outcome study, described these parents as rarely going out without their children. If the mothers worked, it was usually only during the child's school hours and this was often terminated at the onset of the child's difficulties. Children in these families were included in most of the parental activities. Gittleman-Klein notes that this closely parallels the findings from studies of families with psychotic children. Talbot (1957) in his empirical

study of school phobics, found an unhealthy, inappropriate amount of family closeness and attachment.

It has been vigorously asserted by many writers in this area that the parents of school phobics and separation anxious children are involved in unsatisfying or destructive marital relationships (Choi, 1961; Chotiner and Forrest, 1974; Estes et al. 1956; Goldberg, 1953; Miller, 1972; Talbot, 1957; van Houten, 1948). It is often believed that the child is utilized by one or both parents in political ways to influence the spouse, or to obtain their unfulfilled emotional and marital needs (Berlin, 1965). Leroy and Derdyn (1976) believe that the separation anxious child often symbolizes an unhappy marriage and an uncaring husband to the mother. Therefore, she is viewed as having unconscious hostility toward her child and filled with guilt and anxiety when threatened with separation from him.

Several authors have described the parents' relationship as remaining intact in the face of poor communication and unsatisfying sexual relations (Choi, 1961; Chotiner and Forrest, 1974; Talbot, 1957). Waldron (1977) in his study utilizing rating scales and interviews found that over two thirds of these parents had more than minimal, overt marital dissension and over three quarters of these parents had more than minimal lack of pleasure and satisfaction from their spouses. The child in these families was found to act as a

substitute for a parent or protect one from another spouse. He also found school phobic children to be more important to the mother than the father was, in almost 50% of his 35 school phobic subjects as compared with 9% of the parents of "other neurotic" disturbed children. Talbot (1957) found most parents to believe that their spouse paid more attention to their children than themselves. Estes (1957) found marital discord and greater maternal interest in the child than husband in the families of the school phobics that he studied.

Clinicians and researchers have found the fathers to not only be involved in difficult marital relationships but also to be passive, depressed, ineffective, disinterested, estranged and/or peripheral to the family. (Agras, 1959; Davidson, 1960; Goldberg, 1953; Jackson, 1964; Leton, 1962; Levison, 1961; Skynner, 1974; Weiss and Cain, 1964). Miller (1972) describes these fathers as remote, hardworking and difficult to engage. Yamazaki (1973) characterized the fathers of his school phobic treatment cases as socially maladjusted and lacking authority. These fathers have been noted to be heavy drinkers (Agras, 1959; Choi, 1961). They have been found to display a higher incidence of psychiatric illness than the fathers of normal children (Agras, 1959; Berg, 1974; Jackson, 1964; Suttentfield, 1954). Waldfogel (1957) viewed these fathers as having uncertain sexual identifications. Lippman (1957) and Coolidge et al. (1957)

viewed them as having difficulty fulfilling a paternal role, being excessively anxious and undermining their wives by attempting to usurp her role in the family.

The mothers in these families were noted to be contemptuous of their husbands, be the dominant spouse and to take on the father's role (Davidson, 1960; Jackson, 1964; van Houten, 1948). Skynner (1974) views the family matrix in which the father does nothing to help loosen the original exclusive mutual attachment between mother and child as characteristic of her five treatment cases and fundamental in the etiology of school phobia and separation anxiety.

A somewhat contrary view of these fathers describes him as impulsive, violent, sadistic and philandering (Goldberg, 1977). Skynner (1974) in reviewing the literature and his own cases, suggests that the exceptions to the generally accepted view of these fathers as weak and dependent, usually turns out to be more apparent than real. These seemingly stronger, forceful fathers according to Skynner are actually exhibiting a defensive rigidity in which other family members collude as part of a denial of the fathers' inadequacies. The father with his pseudo show of masculine force is viewed as still unable to weaken or disrupt the initial primary maternal preoccupation of the mother with the child. Likewise Makita et al. (1967) describes the father of school phobic children as tyrannical, yet passive and emotionally distant.

Weiss (1964) in an observational study of the families of 16 inpatient adolescent school phobics found the fathers to be peripheral to the family, openly derogated by the mother and viewed as ineffective by the child. When these fathers joined the family activities, their participation echoed the mother's anxious concerns and restrictive overprotectiveness. Weiss viewed these children as eventually giving up their futile hope of being rescued by the father from the mother's overinvolvement.

Talbot (1957) in studying 24 school phobic families consistently found these fathers to be excessively worried about their own parents. Their wives tended to view them as placing more importance on the families they came from than their present families. A study of 30 cases of school phobics families by Davidson (1962) portrayed the fathers as being passive, immature, ineffectual and competitive with their children for their wives attention. Their wives were found to disparage them and rapproach them for their sexual demands.

Other authors have argued against the case that school phobics are enacting a family dynamic and that the problem solely reflects the interactional problems of the family network (Lazarus, 1965; Leventhal, 1967, Milman; 1961; Reger, 1962). These authors have posed questions such as, If the family dynamic is responsible for yielding such a

child then why does one child in a given family become pathologically separation anxious while another does not? Gittleman-Klein and Klein (1973) have argued strongly against the view that the family matrix and dynamics play an important role in separation anxiety disorder. They base their conclusions on their findings that separation anxious children who received medication while their families received counseling showed significant improvement in their emotional and behavioral functioning while children on placebo, whose families also received counseling continued to exhibit symptoms of separation anxiety. They assert that this indicates that a bio/chemical process, intrinsic to the child must be the critical agent in consideration of the family variable being held constant. This finding will be evaluated in the bio/chemical section.

Berg (1981) explored the values, propensities and activities of 19 school phobic families and compared these findings to 30 non-school phobic families. He found no differences in any of these areas between the two families. Caution must be taken here, however, due to the limited nature of Berg's inquiry in this study. He surveyed the values and activities of these families and not the style of interaction among members or interpersonal tendencies. Thus, it is possible that these families enjoy "normal" activities but carry them out in unique and anxiety provoking ways.

It appears evident from the majority of empirical studies in this area that the family constellation of school phobic children tends to be unique and disturbed. However, most of the studies cited here, when controlled, compare school phobic families to those of normal children. It remains to be determined if and how these disturbed families differ from the families of other neurotic children. This leaves the question open as to whether the family situation in evidence here is a causative, predisposing or supportive variable in the etiology of separation anxiety. This can only be answered when a fuller understanding of the child's experience of his "anxious, disturbed" family system is obtained.

Traumatic events: Although traumatic events have rarely been viewed as an isolated etiological factor, or one of primary importance, its precipitating and supporting effect should not be underestimated. The consistent finding of precipitating events preceding separation anxiety symptomology has been previously discussed. It is likely that significant disturbing events, such as the death or sickness of a family member or relative, exacerbates a pre-existing disturbed family situation or internal vulnerability in the child.

Bowlby (1960) among others has suggested that early, real separations between child and caretakers can lead to heightened anxiety and fears concerning separation at a

later date. Bowlby bases his conclusions on his observation of early infant/mother separations and consequent infant separation anxiety.

The limited data in this area is contradictory. McGlashan (1962) found 18 of his 44 cases to have suffered separations under the age of 4. Hersov (1960b), however, found only 4 of his 50 school phobic subjects to have had significant separation experience before the age of 5. He found early separations to be more true of truants and concluded that school phobics have less experience of parental absence in infancy and early childhood. Davidson (1962) also found there to be a low incidence (11 of 30 subjects) of separation or illness in the family before the age of 5 for these children. If these two studies are considered alongside the common finding of precipitating and traumatic events in middle childhood, it may be theorized that these children, in lacking early, actual separation experience when confronted with a later one, have greater difficulty in coping. Evidently, more research needs to be performed to assess the separation and traumatic experience of these children and the meaning assigned to such events by them.

Learning theory: Although the research in the area of school phobia is flooded with successful case studies of behaviorally treated school phobics and separation anxious children, there is relatively little written by learning

theorists that systematically describes etiological factors. The specific variables in the family interactions that reinforces this symptom complex have usually not been addressed by these authors. Likewise, the child's evaluation and cognitive understanding, which learning theorists would view as providing meaning to the reinforcers, is relatively unaddressed. The etiological considerations of learning theorists can be, to some extent, inferred from the behavioral treatment strategies they utilize.

The three most notable target areas of behavioral interventions include, decreasing parental verbal cues that reinforce the child's fear of losing or being separated from his mother, desensitization of the child's situational anxiety connected with either leaving mother or going to school, and increasing the positive reinforcers that will bring about the child's attendance at school (Fowler, 1978; Miller, 1972). Garvey and Hegreves (1966) suggest that the child's intense fear of losing his mother is paired with a previously neutral stimulus (e.g., the mother saying, "One of these days when you come home from school I won't be here") and the neutral stimulus, the school, becomes a new conditioned stimulus which elicits the response, fear. Thus, learning theorists view learned maladaptive avoidant behavior that is operantly and classically conditioned, combined with an intense fear of leaving mother or the

school situation, to be of central importance in bringing about and terminating school phobia and separation anxiety disturbance (Lazarus et al., 1965; Patterson, 1965).

Jarvis (1975) and Lazarus and Shaw (1964) have also stressed the importance of secondary reinforcers and gains which includes attention from parents, siblings and therapists for being helpless, sick or special. Other behaviorists view the dangers of the school and outside world as instrumental in the child's flight back to mother. These authors believe that these children have an intense aversive reaction to a disturbing event that occurred within the school (Estes, 1956; Eysenck and Rachman, 1965; Lundin, 1969; Vaal, 1973).

In general, it appears that the learning theorists are addressing themselves to a wide range of variables that are responsible and crucial in the child's development of these symptoms. Thus, they have been concerned with the familial permissiveness that would effect or support the child's motivation to stay home, the maternal messages about the dangers to herself or the child should they separate, the child's high level of anxiety, and the aversive nature of some aspect of the school experience. Intervention in these areas utilizing the entire array of behavioral techniques has led to consistent reports of successful school attendance in very short periods of time. Empirical investigation is insufficient, however, concerning the

persistence or absence of separation anxious behavior in other modes of the child's functioning. Given the previously discussed possible long term effects of school phobia and pathological separation anxiety, we should not be too quick to conclude that returning the child to school is in itself full treatment for this syndrome.

Oedipal issues: E. Klein (1945) was the first to view school phobia and separation anxiety as an outgrowth of Oedipal difficulties in the child. A combination of Oedipal and pre-Oedipal issues, with the latter often being used defensively against the former, were believed to be intensified to a dangerous level in the child. These children were viewed as possessing strong erotic urges, masturbation guilt, repressed aggressive impulses toward the rival parent, and intense castration anxiety (E. Klein, 1945). In boys, an increase of sexual longing toward the mother and murderous fantasies toward the father was conceived of as leading to fears of retaliation by the father toward mother or son. Thus, the boy's fear of sexual or physical assault on the mother by the father was activated particularly when reinforced by a generally harsh father. Girls were viewed as having strong, repressed hostility to a thwarting mother which led to a fear of desertion by her, or, in projecting their aggression unto father, fear of sexual injury of the mother by the father.

These fears of danger to mother on behalf of both sexed children were intensified when the child was at school and believed to lead to regressed, defensive clinging. Klein also suggests that a child may be Oedipally jealous of the relations between the mother and a younger sibling who remains at home, leading to fears of being replaced by the sibling or harm befalling the sibling. Additionally, the child who earlier in life has grappled with the problem of the return of sexuality from his unconscious in the form of obscene words, may have difficulty with the use of such words by other children in his school. Performance, and possible failure at school was associated with masturbation guilt, humiliation, fear of loss of the object and its love, and paranoid shame over the inability to control one's sexual impulses (E. Klein, 1945).

Several other clinicians have viewed school phobia as, at least in part, a result of Oedipal conflict (Coolidge et al., 1958; A. Freud, 1966; Kagan, 1956; Leroy and Derdeyn, 1976; Radin, 1968). Skynner (1974) among others suggests that the increase of school phobia in adolescence is due to the renewal of Oedipal conflicts at that age. Likewise, the increase in school phobia around the ages of 5 to 7 can also be viewed as lending some credence to the importance of Oedipal issues in separation anxiety disturbance.

Sperling (1967) views the boy's failure to leave a dependent relationship with his mother as part of his

negative Oedipal defense against dealing with castration anxiety and aggressive feelings toward the father. The boy here is viewed as becoming passive and entering into a masochistic submissive relationship with a seductive and sadistic father. Where the girl is concerned, Sperling asserts that her cases usually involve an overprotective, controlling mother and a seductive father. The phobic attachment to the mother in these girls, with its homosexual colouring is seen as covering up her underlying Oedipal hostility, competition and death wishes vis a vis her mother.

Johnson (1957) viewed the mother as jealous and begrudging of her growing daughter and consequently enticing her into a regressed homosexual relationship, or in the case of her son, having perverted libidinal need to solidify an erotic bond.

Davidson, in a review of 30 school phobic cases, viewed the child's attachment to mother as a defense against Oedipal conflict. Kagan (1956) examined the Rorschachs and Thematic Apperception Tests (T.A.T.) of a pair of identical twin girls. One of these girls had been diagnosed as school phobic. He interpreted the projective results to demonstrate that the school phobic girl had strong Oedipal desires toward her father which led to anxiety, masturbation guilt, fear of rejection by her mother and behavior designed to prevent abandonment by, or separation from, her mother.

Pritchard and Ward (1974) in their study of 64 school phobic children and their families utilized interviews and rating scales to evaluate the family dynamics. They found disturbed family dynamics yet concluded that Oedipal issues in the child and the family were critical in the formation of the child's problem.

These psychoanalytic authors generally tend to view the school as taking on sexual significance due to the child's displacement of his libidinal impulses and/or prohibitive punitive superego unto the school. These claims are largely unsubstantiated. It can be adequately reasoned, however, that the child may experience these difficulties given the dynamics of what has been found to be a disturbed family system in which anxiety, guilt, libidinal urges, aggression and so on are likely to be present to an intensified degree. However, we are again faced with the lack of systematic exploration of the child's experience to as of yet determine the extent and significance of Oedipal issues for these children.

Heightened dependency needs/libidinal urges: This category and the next will more closely examine the mothers of these children and how their personalities have interacted with the emotional and instinctual life of their children. There basically exists two viewpoints concerning the mother child dyad. The first suggests that the child has heightened libidinal, dependency and affection needs

which are most often brought about and fostered by an excessively needy, dependent, anxious, overprotective and overindulging mother. The mother is viewed as heightening the child's libidinal needs by either spoiling him with too much affection or depriving him of true affection. The second viewpoint asserts that the mother and child share a mutually hostile relationship. Here, the impact of the mother's ambivalent, disturbed personality is seen as frustrating the child and heightening his internal aggression and rage. The child is most often viewed as clinging to his mother in defense, and as an attempt to contain his aggressive inclinations toward her. This second view of the mother/child dyad will be discussed in the next section.

The intensity of dependency, affection needs and erotic feelings in these children have been repeatedly noted by clinician and researcher alike (Berg et al., 1969, 1971; Coolidge et al., 1962; Estes et al., 1956; E. Klein, 1945; McGuire, 1971). Both mother and child have been observed to enter into a mutually dependent relationship (Coolidge et al., 1957, 1960; Eisenberg, 1958b; Johnson, 1957; Kahn, 1958; E. Klein, 1945; Leton, 1962; Morgan, 1959; Nurstein, 1958; Talbot, 1957; Warren, 1948). Indeed, the diagnostic symptomatic picture of separation anxiety disorder is itself one in which the child is explicitly assumed to be dependent.

It has been extensively postulated and observed by many authors that these mothers are excessively needy, affection seeking and tend to have dependent personalities. It is also commonly stated that these mothers, in consideration of their personalities, tend to be overprotective, overconcerned and overindulgent with their children (Agras, 1959; Baideme et al., 1968; Eisenberg, 1958, Goldberg, 1953; Hersov, 1969b; Jackson, 1964; Kahn, 1962; Makita et al, 1967; Miller, 1972; Suttentfield, 1954; Waldron, 1975; Weiss and Cain, 1964). These mothers are described as unable to set strong limits, shielding their child from experience that teaches (Choi, 1961; Waldfogel et al., 1957). They are said to protect their children from painful situations, shock and frustration, communicating that the world is dangerous (Miller, 1972). She has been considered unable to separate from her child due to an over identification with his fears and dislikes (Berryman, 1959). These mothers are viewed as preferring their children to be dependent on them (Berg and McGuire, 1974; Coolidge, 1957; Estes, 1956; Glazere, 1978; Johnson, 1957; Leton, 1962; Pappenheim and Sweeney, 1952). The child's strivings for growth and independence are viewed with alarm and dislike by these mothers (Choi, 1961; Eisenberg, 1958; Johnson, 1964; Weiss and Cain, 1964).

Estes (1957) believes that these mothers in previously receiving inadequate gratification of their own needs,

become overly solicitious and attending to the child's every need. The mothers, having a memory of her own deprived, frustrated childhood and dependency needs, may perceive any frustration of the child's needs as a sadistic act (Coolidge et al., 1962). Pritchard and Ward (1974) describe these mothers as seeking an emotional response incongruous with the child's age, sex and cultural norms. Kahn states that these mothers need too great a share of life's pleasure from the child. These mothers have been portrayed as having dependent relations with their mothers, having never been taught to trust themselves (Miller, 1972). They are often considered to be separation anxious themselves and to communicate this to their children (Bowlby, 1963; Breit, 1982; de Sousa and de Sousa, 1980; Hirsch, 1975; Veltkamp, 1975). They are said to exploit their childrens' fear and project their own fear of losing their child onto them (Estes et al., 1956; Warnecke, 1964). Many authors have advanced the belief that the mother's submissiveness to and indulgence of the child stems from her intense guilt over harboring repressed aggression or being an inadequate mother (Agras, 1959; Coolidge, 1957; Estes et al., 1957; Model and Shepard, 1959; Waldfogel, 1957).

Estes et al. (1956) observed excessive seductive behavior on the part of these mothers toward their male children. Mothers were noted to have overly close physical contact, help their pre-adolescent and adolescent boys with

their bath, wrestle with them on the floor and ignore bathroom privacy. Other writers have observed that these mothers often let, or have, their children sleep in their beds past the age of 10 years old (Davidson, 1960; Goldberg, 1953; Jackson, 1964).

The theoretical basis of the etiological viewpoint that a child's separation anxiety is caused by heightened dependency needs which grow out of a relationship to a mother who is overindulging and dependent herself, is straightforward. The child is viewed as becoming spoiled by, or habitually addicted to, the affection and libidinal pleasures offered by his mother. Her indulgence creates an immature, needy child, desirous of symbiotic-like attachment. Bowlby (1960) viewed Freud as, in part, postulating this line of explanation. Freud has written that some children are "spoiled" by an excess of early libidinal gratification; they therefore demand more of it when not gratified and miss it more in its absence. According to Freud, "An excess of parental affection does harm by causing precocious sexual maturity and also because by spoiling the child, it makes him incapable of being content with a smaller amount." (S.E. 7, p.223).

Mahler (1975) and Winnicott (1968) have been among the many psychoanalysts who have highlighted the salutary effects of maternal frustration when it occurs as part of the normal course of the child's development. In so far as

the child is not exposed to a normal course of frustration in his development, he is viewed as unable to cope with it at a later date and subject to great anxiety when it arises.

Empirical studies have to a great extent supported the view that these mothers are overprotective, indulgent and desire dependency with the child. Less research has been undertaken to determine whether the child's dependency urges occur in isolation or exist as part of other deficiencies and problems. Berg (1969) in a study of 29 adolescent inpatient school phobics used various dependency questionnaires to compare acute and chronic subjects. High dependency scores were found in both groups, with the chronic school refusers scoring significantly higher on all dependency measures.

Coolidge et al. (1957) in an observational study of 27 school phobic subjects and their mothers found these mothers to be plagued by unresolved dependency needs and feelings of inadequacy. These feelings were covered up by her attempts to appear strong and protective, and led to difficulty during the stage when the child started to move away from her. These mothers were observed to have made themselves the child's indispensable companions, involving themselves in all aspects of the child's life. The children were found to be helpless, very regressed and needing to cling to their mothers.

Pritchard and Ward (1974) using rating scales and checklists in interviews of 67 inpatient school phobic adolescents, found the mothers to be overprotective and in 85% of the cases, to be separation anxious themselves. These mothers were found to inappropriately gratify their sons and to form an overinvolved relationship with him while excluding the father. The mothers of school phobic girls were viewed as dependent and overinvolved with both her daughter and family in an attempt to defend against her own anxieties.

Berg and McGuire (1974) studied the mothers of 39 school phobic cases and 58 mothers of other psychiatric cases to compare subscale scores of the Self Administered Dependency Questionnaire. They found school phobic mothers to be overprotective compared to controls. These mothers were found to encourage affection and communication to an abnormal extent. Torma and Halsti (1975) in a study of 73 inpatient school phobics and truants, found their mothers to be overprotective and symbiotic with them.

Breit (1982) compared the T.A.T. stories of 15 mothers of separation anxious outpatient children to those of 26 mothers of behaviorally disordered children and 21 mothers of non-psychiatric children. She found the mothers of separation anxious children to be differentiated by their heightened concerns about abandonment, rejection and desires for proximity. Although Breit concludes that these mothers

are more separation anxious than mothers of behaviorally disturbed children, she found them not to be differentiated in reference to fears of harm befalling themselves or others, and their needs for nurturance. Ruscelli (1974) in a study comparing 30 school refusing children with 30 behaviorally disordered children, in the same experimental format, had similar results with the children as Breit had with the mothers. Breit interpretes this finding to signify that fears of physical harm befalling others and needs for nurturance, may not be of significant concern for separation anxious children and their mothers. She draws her conclusion, however, from comparing the mothers of separation anxious children to the mothers of behaviorally disordered children. Nurturance concerns, however, were still found to be 5 to 9 times greater for both the mothers of separation anxious and behaviorally disordered children than for the mothers of normal children. This category that she used to rate the T.A.T. stories can also be seen as conceptually overlapping with that of proximity needs. It is likely that a subjects' inclination to give a nurturance story on the T.A.T. may be overshadowed and subsumed by an inclination to give a proximity story (which were found to reach significance). In so far as these categories are not quantitative, we can not, like Breit, be too quick to draw conclusions about the exact role of nurturance needs in these mothers. Safety concerns, on the other hand, were not

significantly high in any of the three groups, or distinguishing of the groups. In so far as concern for others' safety was of lesser importance to the mothers of Breit's study and the children of Ruscelli's study, this can be viewed as lending support to the notion that these mothers and children are regressed, egocentric and self concerned, rather than having an actual concern for others (or of the impact of their aggression upon others). Overall, this study supports the viewpoint that affection needs in mother and child, and not heightened aggression, may be responsible for the behavior under question. However, the four categories used in both Breit's and Ruscelli's study may not have been able to effectively measure aggressive tendencies and concern about the impact of one's own aggression.

Leventhal (1964) argues against the view that intensified dependency needs are at the root of pathological separation anxiety. He states that if this were the case, than it would begin at a much earlier date. Hersov (1960b), although finding the mothers to be overprotective and allowing themselves to be dominated by their children, found excessive attachment and dependency to occur in only 1/3 of his 50 school phobic cases as measured by dependency scales and clinical raters. This study, however, compared the school phobic children to other psychiatric cases who also

may possess high dependency urges which consequently may not have differentiated the two groups.

There exists a different conception concerning the impact of the mother's personality when it is viewed as dependent and/or regressed. It has been argued that a mother's overindulgence, particularly when motivated by guilt over her latent hostility, or in order to satisfy her own affection or narcissistic needs, is not a true gratification of the child's needs, but a frustration and deprivation of them. This is viewed as creating a child who is anxious and craving of affection. In contrast to the view that the child is dependent and clinging because he has been spoiled by too much libidinal indulgence, the child may be attempting to demand or obtain what he never got. The mother, although consciously desiring a mutual, dependent tie to her child is viewed as putting fulfillment of her needs first. The child may let himself be utilized by his mother in the hope of future emotional reimbursement for himself. The mother who grew up anxiously attached and now seeks to make her own child her attachment figure may produce a child who is overburdened by having to care for his own mother; an "inverted" mother child relationship or "adult child". The mother's intense needs, anxiety and latent ambivalence here are seen as creating a confused, anxious child who learns he must protect his vulnerable mother (Masterson, 1973).

Freud devoted more of his attention to the child who experiences his mother as unavailable than to the child who has been spoiled by an excess of her gratification. In his revision of his theory of anxiety in 1926 he states that, "missing someone who is loved and longed for is a key to an understanding of anxiety... anxiety appears as a reaction to the felt loss of the object" (p. 136-7). Freud in postulating the importance of signal anxiety at that time, viewed real and fantasized separations in the mother infant dyad, birth trauma, and castration anxiety as central in his new formulation. Freud asserted that these anxieties obtained their importance from the economic danger that arises within the infant when mother is not available to help the child discharge his excess of excitation. He writes,

The reason why the infant in arms wants to perceive the presence of its mother is only because it already knows by experience that she satisfies all its needs without delay. The situation then which it regards as a danger and against which it wants to be safeguarded is that of non-satisfaction, of a growing tension due to need, against which it is helpless... This is analogous to the experience of being born... What both situations have in common is an economic disturbance caused by an accumulation of amounts of stimulation which require to be disposed of. It is this factor, then, which is the real essence of the danger... To avoid this (traumatic situation) the infant... displaces the danger it fears... from the economic situation on to the condition which determined that situation, viz., the loss of object. It is the absence of the mother that is now the danger; and as soon as that danger arises the infant gives the signal of anxiety, before the dreaded economic situation has set in" (p.137-138).

Thus, Freud laid the foundation for conceptualizing the impact of an unavailable mother upon the child. An excess of endogenous stimulation and lack of discharge can lead to signal anxiety, and if not attended to over a period of time, traumatic and/or neurotic anxiety.

Although Freud tried to maintain an emphasis on the child's endogenous experience, other authors have viewed the interpersonal situation as equally worthy of consideration. Mahler (1963) asserts that the "pleasures in separate functioning in the atmosphere of libidinal availability of the mother enables the child to overcome...separation anxiety" (p.2). Therefore, an unavailable mother is likely to lead to prolonged separation anxiety in the child. Wieland (1966) likewise views the mother's availability and care for the child as essential in providing him with the security to cope with his separation anxiety. If this is unavailable then the child's ability to generalize the expectation of relief from anxiety will be compromised and the "primitive mechanism of clinging will tend to predominate the child's functioning" (Weiland, 1966, p.62). Fairbairn (1952) also asserted that unsatisfied love needs create a dangerous situation for the child and undue separation anxiety. Suttie (1935) and Herman (1936) viewed the infant's attachment to mother as a primary motive. Frustration of this motive was seen as leading to separation anxiety and clinging behavior. Likewise Bowlby (1960),

although placing emphasis on the separation anxious child's enraged reaction to maternal deprivation (as will be described in the next section) also viewed his attachment to his caretaker as a primary instinctual force which if frustrated leads to evolutionally determined separation anxiety.

Weiss et al. (1964) studied 16 neurotic inpatient school phobic children ranging in age from 8 to 16 years. They developed a portrait of the typical mother and child from social histories, previous outpatient summaries, psychological tests, casework reports, interviews with the therapists involved, observation, and the child's daily behavioral reports. On the basis of these findings, two groups were differentiated; the first corresponds to the former view of the mother child dyad discussed in this section, while the second corresponds to the latter. Below is a summary of their findings.

The typical mother in the first group was...depressed, agitated and burdened with phobic concerns. Longing for supplies sparsely and begrudgingly offered in her early years this mother resented the demands and appetites of her child but nurtured him as she wished to be nurtured ...This mother characteristically wallowed in her child's dependency, equating his tenacious clinging with love, viewing his growth and individuation as abandonment ...This mother burdened (her child) with the painful facts of her personal life, made him audience to her particular life tragedy, emphasizing the personal injustices, abuses and grievances she had endured. For example, a scene within one home found this overindulgent mother spreading butter on toast for her adolescent daughter while recounting her marital squabble of the evening before and

seeking the child's adult consent...Besides being her confidante, advisor and marriage counselor, the child was also the mother's ever present adult companion often present at adult social functions, frequently befriending the parents contemporaries in preference to his own peers. Moments after an infantile temper tantrum, 11 year old Janet could be found sedately sipping evening cocktails with her parents and their friends...The mother induced in (her child) enough guilt to insure his exclusive attention. The maternal overindulgence and deception kept him ill-equipped, unenlightened, helpless and further bound by the heightened symbiotic attachment. A second group...with strikingly different clinical features emerged...The child in this group was tantalized, expectant and only partially gratified. Left with more than her share of dependency yearnings, this mother became her own love object, foundled her own body, nourished her own narcissism and could only promise to include her child. Though she went through the motions of maternal care, met the child's physical needs, even these were too much for her ...Feeling burdened, put upon and at times overwhelmed, the mother withdrew into hostile silence and grimly awaited her child's independence. Aware of her affectual limitations, apologetic about her deficiencies, this mother would plan out loud to make amends. Her good intentions were voiced by promises for trips ...all of which were postponed ...She would wet the child's appetite but leave him hungry ...To these children...separation from the mother meant complete desertion, a reminder of the mother's very real threats to abandon the child ...We find our second group of neurotic children to be more limited in their capacity for relationship... (1964, p. 105-108).

Eisenberg (1968) clinically observed school phobic mothers in a study of 26 school phobic children in nursery school. Separation was discovered to be as difficult for the mothers as for the children. There was a continued communication of anxiety between the dyad due to threat of separation by the mother. The mothers were seen as strongly identified with their children in viewing them as pathetic, lonely and unhappy. The mother was described as

re-experiencing with each of the child's tears her own memories of loneliness and being misunderstood. These mothers had difficulty setting limits. The child, accustomed to having his every whim gratified sooner or later drove the mothers into states of exasperation. At these junctures, the mother would explode in disproportion to the precipitating incident. This led to guilt and another cycle of overindulgence, compensatory overprotectiveness and latent resentment. The child was "...told that he must go to school at the same time he is shown that he dare not; he was told that he is loved at the same time that his needs were lost in the morass of his mother's" (p.48). The child was found to respond to his mother's contradictory verbal and behavioral cues with overdependence and craving for consistent love and caretaking. Thus, the systematic observational data of these last two studies provide some evidence for the notion that these children may, have heightened separation concerns due to a serious mystifying neglect of their affection needs.

Intensified aggression in the mother and child: Many authors tend to view aggression and hostility in the child as central in the etiology of his pathological separation anxiety. These writers and researchers have asserted that pathological separation anxiety does not evolve from an essentially overindulgent, gratifying mother and a dependent

passive, anxious, meek and needy child. On the contrary, these authors tend to view the mother as frustrating, ambivalent, rejecting and narcissistic, and the child as defensively clinging to, and worried about, his mother due to his intense level of reactive internal hostility (Haught and Johnson, 1956). The interaction between mother and child here is seen as giving rise not only to an insecure and anxious child but to one who is intensely frustrated, angry and harboring internal rage (Estes et al., 1956; Davidson, 1961; E. Klein, 1945; Miller, 1961). Sperling (1967), although viewing Oedipal concerns of great importance as previously described, views the separation anxious child to be preoccupied with anal sadistic concerns. Thus, the mother child dyad has often been viewed as one of hostile dependency (Davidson, 1961; Kelly, 1973; Johnson, 1957; Lassers et al., 1973; Pappenheim, 1952; Weiss, 1964).

In accordance with this viewpoint these mothers have very commonly been perceived as being psychologically unbalanced (Berg et al., 1974; Jackson, 1964; Suttentfield, 1954). They have been described as having an emotionally deprived childhood (Eisenberg, 1958a; Goldberg, 1953; van Houten, 1948). They have been viewed as depressed (Agras, 1959; Davidson, 1961; Takagi, 1973). They are often seen as being perfectionistic (Davidson, 1960; Jacobson, 1964). This mother is said to set high self standards and to feel incompetent when unable to live up to them (Buell, 1962;

Talbot, 1957; Waldfogel, 1957). These mothers are said to have an impaired sense of their worth (Millar, 1961). She is said to be full of self doubt and to feel that she is not a good mother (Agras, 1959; Davidson, 1961). She is socially isolated, lacking friends and interest in things outside the family (Talbot, 1957). She is often considered to not have adequately resolved her dependent relationship to her mother (Buell, 1962; Coolidge et al., 1957; Davidson, 1960; Eisenberg, 1958; Skynner, 1974; Talbot, 1957).

The mothers of school phobic and separation anxious children have been assessed as intensely ambivalent toward their child (Buell, 1962; Choi, 1961; Davidson, 1960; Eisenberg, 1958; Goldberg, 1953; Kahn, 1958; Model, 1958; Talbot, 1957; van Houten, 1948; Waldfogel et al., 1957; Weiss and Cain, 1964). These mothers were often found to not have wanted to become pregnant (Davidson, 1960; Eisenberg, 1958a). Davidson (1961) in observation of 30 school phobic cases viewed the mother as ambivalent and guilty about her latent aggression which was expressed in the form of outbursts of exasperation. He states, "By ambivalent, I do not mean the alternation of love and anger but a more primitive relationship where the two emotions exist side by side. The mother gives with one hand and takes away with the other" (p.276).

Several authors believe that the mother's nurturance and fostering of dependency leads the child to make demands and

exploit her indulgence. This in turn makes the mother feel trapped by, and furious at, the child (Choi, 1961; Eisenberg, 1958; Talbot, 1957; van Houten, 1948; Waldfogel, 1957; Weiss and Cain, 1964). Likewise, Miller (1972) views the mother as reacting with hostility against a self created suffocating dependency which leads to a cycle of repressed hostility, overindulgence, aggressive outbursts and guilt.

The mothers of these children are said to be overtly rejecting and/or distant and unavailable (Angel, 1975; Kagan, 1956; Levenson, 1961; Suttentfield, 1954; Weiss, 1964). Mohacsy (1976) found some of these mothers to believe that she must effect separation by pushing the child away at a certain age rather than letting it occur naturally.

The hostile aspect of the mother's ambivalence is often felt as dangerous to her, thereby calling up guilt and necessitating intense repression of her and her child's aggression (Jackson, 1964). The child is also viewed as repressing his intense aggressive urges (Jakal and Howard, 1969; Kelly, 1973). Coolidge et al. (1957) in his study of 27 school phobic cases found the mother to repress her own hostility and her child's.

Many authors who view the child's aggression as central to separation anxiety believe it to be displaced and projected unto the school situation and fellow students (Alexander, 1962; Coolidge et al., 1962; Kelly, 1973; E. Klein, 1945; Levanthal, 1964; Suttentfield, 1954; Waldfogel,

1959). Estes (1957) believes that the child views the teacher as a limit setting controlling, depriving parent. Jarvis (1964) asserts that the child transfers his sado-masochistic relationship with his mother unto school personel.

The built up or possibly intrinsic aggressive impulses that the child struggles with are viewed for several reasons as leading to pathological separation anxiety. The child may fear that his mother may go away forever due to his badness (E. Klein, 1945). The child may then project his oral sadistic aggression, and fear that injury may occur to his mother (Gardner, 1956). Talbot (1957) viewed the child's wish for the death of his mother as leading to intense guilt in the child. Coolidge (1964) believes that the child's murderous wishes and aggressive fantasies toward his mother are felt to be too dangerous to tolerate, necessitating regression to dependency. Goldberg (1977) presented six cases that he believed supported his view that the unconscious death wishes toward mother leads to a protective closeness on behalf of the child, to overcompensate for these urges and to assure himself of her safety.

Bowlby (1960, 1961) has been at the forefront in advancing the theoretical position that the mother's overt or covert aggression and inadequacy in caring for the child leads to frustration and anger in the child which brings

about pathological separation anxiety. Bowlby believes that separation anxiety is a form of "primary anxiety." "Primary anxiety", according to Bowlby, occurs due to the activation of an instinctual response system without its termination from appropriate activity within a given period of time. Attachment here is viewed as an instinctual, primary response. The attachment instinct drives the child to gain fulfillment of his needs through clinging to mother or by obtaining close proximity to her. Unlike other instinctual responses, the fulfillment and termination of the attachment response is totally dependent upon the initiative of the child's caretaker and not himself. When over time, this instinctual response system is activated without consistent activity by the caretaker that leads to its termination, pathological separation anxiety occurs. The most common conditions that bring about pathological separation anxiety according to Bowlby are: a) actual separations, b) excessive use by parents of threats of separation or withdrawal of love as sanctions used to induce behavioral compliance, c) the child's experience of rejection by the mother especially when her positive feelings are mixed with unconscious hostility, and d) any actual event such as someone's illness or death for which the child has come to feel responsible and therefore guilty and unloved. Even a mother's show of an excess of affection

Bowlby asserts, can not be equated with genuine affection. Children who receive the latter according to Bowlby, later in life show the highest degree of security.

The central intervening variable between the parents' real or threatened abandonment of the child and his separation anxiety according to Bowlby is the child's reactive, or possibly intrinsic aggression, particularly when such urges are viewed as dangerous by mother or child and therefore need to be repressed. At this point Bowlby states that with the exception of placing more emphasis on the environment and the child's reactive aggression, he is in agreement with the theoretical viewpoint of M. Klein concerning the role of the child's aggression in the formation of pathological separation anxiety.

Melanie Klein (1952), although not directly concerned with separation anxiety disorder in childhood or school phobia, may be viewed as responsible for putting forth a view that places the child's postulated high level of aggression at the forefront of etiological concern for many authors including Bowlby. Klein has observed that some children with unusually strong attachment to mother also possess strong unconscious hostility directed toward her. According to Klein, neurotic anxiety "derives from the infant's apprehension that the loved mother has been destroyed by his sadistic impulses or is in danger of being destroyed by them (1952, p. 288). In contrast to Freud

Klein writes, "...when the infant misses his mother and his needs are not satisfied her absence is felt to be the result of his destructive impulses" (p.269-270). According to Klein the "...internal forces of the death instinct and of aggression are felt to be the cardinal danger threatening the organism" (p. 44). These forces which are more active during periods of separation from mother leads the child to desperately fear for his, and his mother's safety, from annihilation. The child's heightened anxiety may be persecutory in nature, wherein the infant fears for its own safety due to its fear of retaliation by real or internal objects. Alternatively, his anxiety may be depressive in nature, wherein the child fears it is responsible for destroying and/or losing the mother. The child may have an intrinsically determined heightened level of aggression or have rage and anxiety in reaction to a mother who is experienced by the child as deserting, rejecting, inadequate or unavailable. Klein believes that a child's heightened aggressive urges and fantasies will lead to heightened expectation of rejection, loss, and self annihilation. Thus, the child defensively clings to his mother to minimize the potential threat felt from his own aggression.

Fairbairn (1943) and Guntrip (1968) also believe that a child with heightened frustration and anger due to a mother who fails him, will fear his aggression and love to be of further danger to his caretaker.

Empirically, the view that these mothers are psychologically unstable and ambivalent toward their children has to some extent been supported by various studies. The research investigating whether the child possesses intensified reactive or instinctual aggression has been limited, but suggestive of conflict concerning his own aggression.

Berg (1964) utilized the Eysenck Personality Inventory and Social Work Clinical Evaluation Scale to investigate the level of psychological disturbance in 29 mothers of inpatient school phobics. They were found to have elevated scores, demonstrating a high degree of neuroticism.

Butler (1974) studied the mothers of 100 hospitalized school phobics in comparison to 113 mothers of non-school phobic children and found 22% of the former to have psychiatric illness. This, although similar to the mothers of other psychiatric inpatients was significantly higher than the mothers of normal controls. Leger (1979) in a study of 50 5-15 year old school phobic children used interviews and personality tests to find these mothers to have hostile feelings toward their children. Davidson (1962) evaluated 30 mothers of school phobic children using clinical scales and interviews and found them to be immature, dependent, rigidly perfectionistic and severely self rapproachful. Agras (1959) found 6 of 7 school phobic mothers to show overt signs of depression and a tendency to

utilize and exhibit denial, projective mechanisms, paranoid ideation, hypo-manic defenses and psychosomatic disturbances. Coolidge et al. (1962) in observations over a six year period of over 50 school phobic children concluded that their mothers failed to provide adequately for their children due to their own repressed rage. Estes et al. (1956) and Warnecke (1964) in examination of Waldfogel's (1957) contention that these mothers' affection for their children is primary, spontaneous and not an attempt to deny their hostility, reviewed their cases and by observation reached the conclusion that these mothers are separation anxious themselves, their love is inadequate and their anger results from feelings of exasperation and helplessness.

Eisenberg (1958) studied 26 cases of school phobia by means of psychiatric evaluation and observation in school of outpatient children and their mothers. He concluded that without exception these mothers were dependent, anxious and ambivalent. The child's strivings for independence led to feelings of personal rejection and reactive hostility. Most of these mothers were themselves in the throes of a struggle to escape the overprotective domination of their own mother.

Tennes (1966) in a longitudinal study of 27 infants during their first two years of life found the best predictor of intense separation anxiety in the child to be

the mother's inhibition of her child's aggression and the mother's level of hostility toward her child.

Hersov (1960b) in his study of 50 separation anxious children differentiated two groups on the basis of clinical data, interviews and observation. The first group were separation anxious children who were timid, fearful and inhibited with a markedly overprotective mother. Although these children did not verbalize feelings of aggression toward their mothers, they were discovered to evidence covert hostile non-verbal behavior toward both their parents at home. The second group was more assertive and outgoing but dominated and controlled by their mothers. These children gave even clearer evidence of negative hostile feelings in their verbal discussions and in the form of disobedience, criticism and overtly aggressive behavior.

Gittleman-Klein and Klein (1973) although viewing the etiological causes of separation anxiety to be bio/chemical describes these children as frequently angry, demanding, and occasionally physically violent when forced into a distressing situation.

Waldron et al. (1975) in a matched study of 35 school phobics with 35 "other neurotic" children and their families utilized 83 six point clinical rating scales to assess overall personality functioning along a multitude of dimensions. The mothers in this study were found to exhibit significantly greater resentment toward and scapegoating of

their children than the mothers of "other neurotic" children. School phobic children were found to possess significantly high levels of separation anxiety and depression. More specifically to the subject under discussion, school phobic children were found to have significantly more problems with aggression than the neurotic controls. This was determined, however, by inference from observation of the school phobics' preoccupation with mistreatment at the hands of individuals outside the family and an extremely high level of inhibition of their aggressive fantasies. Thus, it was concluded that these children tend to project their aggression onto others and fear aggressive thought in themselves. This study needs to be viewed with caution for several reasons. Most importantly its findings are based on the rating scales of two clinicians evaluating chart material and not the subjects themselves. A subjective element is likely to exist in the clinicians' ratings of chart material in addition to the subjectivity and theoretical biases of the original clinicians' chart noting. The children and families themselves were not directly interviewed or evaluated for this study. In addition, the conclusion that these children have problems with aggression is based on their noted preoccupation with mistreatment by outsiders which is considered to be a projection and inhibition of their aggressive fantasies. This conclusion, however, is

more a theoretical proposition of the meaning of these childrens' fears of being in dangerous situations, than a direct measure of their aggression or difficulty with their aggression. This speculation assumes that because these children were less prone than neurotic children to express their aggressive fantasies in their original psychiatric evaluations sessions, that they are "inhibiting" such fantasies. Although this study may be viewed as an initial first step in investigating the role of aggression in these children, it is far from convincing or substantiating of high levels of aggression or problems with aggression in these children.

Sinowitz (1972) studied the expression of aggression in 30 6-11 year old school phobics and 30 normal children. The attempt in his study was to show that school phobics have greater difficulty in expressing behavioral aggression, and are more prone to utilize fantasy to deal with aggression as compared with normals. Subjects were divided into two groups. One group, the fantasy release group, was shown a film of an adult aggressing against a Mr. Magoo doll, exposed to a brief anger arousing situation, administered the T.A.T., and then exposed to a toy filled playroom. The second group, the non-fantasy release group, viewed the film, was exposed to the same anger arousing situation, placed in the playroom full of toys, and then administered the T.A.T.. School phobics were found to display less

behavioral and verbal hostility than normals. The second hypothesis, however, that these children would tend to use a fantasized rather than behavioral expression of aggression was not supported (i.e., school phobics were not found to utilize T.A.T. stories as a release of aggression). School phobics were also found to experience less of a cathartic effect from the release of either fantasy or behavioral aggression than normals.

Although this study demonstrated support of the author's hypothesized disturbance of the expression of behavioral aggression in school phobics, it failed to find there to be any greater manifestation of internal fantasized aggression in school phobics as compared to normals. This may lend support to Bowlby's notion that it is the internal repression of aggression in these children that is crucial in their pathological process. However, this study investigated these children under conditions of aggression arousal. The theorized surplus, or intensity of latent aggression that these children are said to harbor, may have been overshadowed on the T.A.T.s by a heightened showing of the normal childrens' fantasized aggression due to the situational arousal. Thus, this study leaves open the question as to how much aggression is harbored by these children under normal conditions. Additionally, it is still unknown whether these children: have only a heightened restriction of expression of aggression (e.g., repression,

inhibition) with normal aggressive impulses; have heightened restriction of expression of their aggression due to having to contend with greater than normal aggressive urges; or have less expression of aggression due to an actual low level of aggressive impulses owing to the possible primacy of their heightened libidinal/dependency urges. The author of this study also noted that a number of school phobics were found to not differentiate in their expression of aggression from the normal controls. Thus it is also important here in utilizing this study to provide us with information on separation anxious children to question in what way the possible non-separation anxious, yet school phobic, subjects may have biased the results as to not be applicable to understanding the role of aggression in separation anxious children.

Many authors have noticed these children to exhibit symptoms of depression (Agras, 1959; Roberts, 1973; Talbot, 1957; Tsuji, 1981). Various empirical findings have supported this view (Baker and Wills, 1978; Davidson, 1962; Leger, 1979; Livingston et al., 1984; Waldron et al., 1975). In so far as depression can be theoretically interpreted as aggression turned inward, these findings would support the view that these children feel frustrated, deprived, angry and in some way responsible for their felt loss of their love object. Hersov (1960b), however, in empirical investigation found anxiety more common than depression in

his 50 school phobic subjects. Gittleman-Klein and Klein (1973) assert that depression (found in only 1/3 of their subjects) is not a central feature of separation anxiety. They base their conclusions on their observation that these children can anticipate pleasure, feel competent and exhibit no signs of depression when in the presence of their loved ones. It is evident that more direct empirical investigation needs to be undertaken to understand the exact role of aggression in these children.

Inadequate psychological development: Emphasis has been placed by a number of authors on elements concerning the child's internal psychological makeup in their search to define the critical etiological variables of pathological separation anxiety. These authors tend to view the child's evolving internal psychological structures and makeup as having great importance. Environmental factors help to shape and influence these psychological structures but do not in themselves account for the formation of the child's personality and behavior. Thus it has been asserted that the following elements largely account for the child's behavior under examination; inadequate ego development, inadequate self esteem regulation or self concept development, grandiosity and pathological internal object relations.

Many authors have viewed the child's inadequate ego development as growing out of, or necessitating his

dependency on his mother. Johnson (1941) expressed the view that faulty ego development in these children leads to inadequate individuation from their mothering ones. The child, in utilizing his mother as an alter ego to bolster his adaptive functioning and abilities, in turn suffers further deficits (Coolidge, 1960; Millar, 1961; Radin, 1972).

Szyrnski (1976) points to the low frustration and anxiety tolerance in these children. He asserts that ego development in these children was compromised due to the introjection of inadequate parental models who possess poor adaptive functioning capacities themselves. The child's parents are seen as failing to provide him with any basis for a stable system of inner controls (Szyrnski, 1976).

Many authors have drawn attention to the high degree of narcissism in these children (Levant and Sills, 1964; Radin, 1968). The child's ego ideal has been seen as strict and perfectionistic (Takagi, 1973). His self concept is unrealistic and he tends to overvalue his capacities and achievements (Leventhal et al, 1964, 1967). Leventhal (1964), utilizing several case studies to support his view, describes the child as using helplessness, feigning somatic illness, being stubborn, getting his mother to gratify his infantile demands and avoiding threats that would challenge his self image in order to support his idealized overestimated sense of self. The child is therefore often

viewed as harboring repressed inferiority feelings and a sense of failure (Radin, 1972; Roberts, 1973).

Many authors assert that the parents' inadequacy or indulgence leaves the child with an impaired self view. The child's self system then may be too weak to cope with the demands of reality without being overwhelmed (Weinberger et al, 1973). E. Klein (1948) views the high parental expectations placed on the child as leading to his unrealistic ambition. Radin (1972) presents two cases in support of his view that the parental aspirations for these children are so out of reach that a consequent blurring of the child's ego and ego ideal occur. Waldfogel et al. (1957) summarizes the child's difficulty in these areas as follows, "...The parents fail to provide the child with any basis for a stable system of inner controls. At the same time, the child internalizes their rage at his parasitic demands, and is left without any substantial source of narcissistic support except even greater reliance on his parents to bolster his self esteem." (p. 765).

Guntrip (1969) views separation anxiety as initiated by a mother who fails her child. The child's inability to draw an adequate caring response from her is experienced as a withdrawal and desertion. This leads to an underdeveloped psyche and sense of identity. The child's fear of losing the mother, his separation anxiety, is viewed by Guntrip as

related ultimately to his fear of losing his ego, sense of selfhood and entering into states of depersonalization.

The child has also been said to maintain a heightened grandiosity and internal sense of omnipotence. These have been viewed as fundamental in the child's intensified concern for, and desire to be with, his primary caretaker (Coolidge et al, 1964; Radin, 1968; Skynner, 1974).

Waldfogel (1957) described school phobic children as exploitative of their subservient parents. The parents' inability to limit the child's tyrannical demands were said to nurture the child's omnipotent fantasies and inflated needs for gratification.

Coolidge et al. (1957) viewed the central disturbance in the child's ego development as occurring in the area of his magical thinking and infantile omnipotence. He conceives of the child as having a tenacious conviction of owning the mother. The child sees her reason for existence as taking care of him. The child controls his mother through his crying, teasing, bossiness, temper tantrums and so on. The child, however, has an underlying fantasy that he would perish without his mother and is helpless when faced with stressors on his own. He reacts to challenges to his omnipotence with frustration and rage; the latter being felt to have magical destructive and annihilatory power. Coolidge et al. view the impact of the school upon the neurotic type of grandiose school phobics as a rude

awakening, while the more character disordered grandiose school phobics are likely to find their limited resources drained until they are overwhelmed.

Millar (1961) describes the child's remarkable tyrannical control of, and ability to manipulate his parents, as stemming from his ability to mobilize and exploit their guilt feelings and self doubt. Kahn and Nurstein (1962) state that a framework of discipline from the parents has been lacking. Other authors agree that school phobic youngsters dominate their mothers, rule the house, and control their parents (Choi, 1961; Talbot, 1957; van Houten, 1948). Other writers consider both parent and child to alternately dominate each other (Gordan, 1977; Hersov 1960b; Johnson, 1948). Hersov (1960a) described these children as timid, fearful and inhibited when away from home yet wilful dominating and demanding at home. This conception would help to account for some of the conflictory portraits of the separation anxious child.

Radin (1967, 1968) describes the school situation in which self worth is based on realistic personal performance as challenging and threatening the child's sense of omnipotence. The child reacts with rage directed at his parents for their deception concerning his worth. This leads to further parental succor and displays of affection that serve to reestablish and again inflate the child's omnipotent self and false pride. Thus, Radin concludes that

pathological separation anxiety does not stem from a fear of losing one's parents or their love, but from a fear of losing one's own sense of self and omnipotence.

Empirical findings in these areas have been supportive of this theoretical viewpoint. Levenson (1961) in close observation of 10 Jewish middle class school phobics found their intense grandiosity to be supported by their mothers. Eisenberg (1958) in observing 11 nursery school phobic children and their mothers stated that an element of infantile omnipotent manipulation was at times more predominant than anxiety in their overall functioning. In a comparison of six school phobic children with six non-school phobic children, Chotiner and Forrest (1974) found the parents to place an unusually high premium on school performance.

Berg (1974) in an empirical study of school phobics and conduct disordered children undertaken to investigate their level of wilfulness concluded that school phobic children are not unduly wilful toward their parents. This result, however, compared these children to a group that is often considered to be intensely oppositional. Controls were not used to determine how school phobics compare on this measure to normal children. In this study school phobics were found to not be more significantly wilful than conduct disordered children. They were also not found, however, to be

significantly less wilful, thereby intimating a high degree of wilfulness on the part of school phobics nonetheless.

Waldron et al. (1975), in their previously described study, used rating scales to analyse interviews and case report material to investigate 35 school phobics and 35 neurotic controls and their families. School phobic children were found to possess faulty development of their autonomy and self esteem, an inhibition of fantasy expression, excessive needs to control others and excessively high self expectations. These authors concluded that although a mutually hostile-dependent interaction was in evidence in a majority of the school phobic families, the development of school phobia was dependent on defects in the character development of the child. Thus, although both finding and concerned with a high level of family pathology, these authors assert that intrinsic psychological impairments in the child are of the highest priority in the evolution of school phobic symptoms. Similar caution in accepting the validity of this study needs to be taken as previously discussed. That is, subjective rating scales utilized by two clinicians to assess a patient from other clinicians' chart notes of evaluation sessions may more reflect their theoretical conceptualizing than an objective representation of the child's experience. However, this study does present a strong preliminary case for the importance in these children's difficulties as lying in the

sphere of their ego development, self esteem and level of hostile urges.

Coolidge et al. (1962) drew various conclusions from direct observation of more than 50 school phobic children studied at the Judge Baker Guidance Center (Mass.) over a six year period. Their etiological formulations viewed the mother as having primary responsibility in fostering a child with heightened separation difficulties. They base their conceptions on the theoretical developmental framework put forth by Winnicott (1953). These authors found these mothers to provide more than adequate early nurturance of the child and an early appropriate fostering of the illusion of the child's sense of magical omnipotence. These mothers were viewed as faltering, however, at the time when a natural frustration of the child, a challenging of his omnipotence, and an allowance of his hate to be directed toward his mother (in order for the child to experience her as separate, real and of use to him) should take place. The disillusionment of the child's omnipotence and frustration of the child were viewed by the mothers as sadistic. Due to her own unfulfilled oral dependency needs the mother views the child as having extraordinary insatiability and endless devouring demands. Implicit in the mother's behavior is the thought that anger will destroy the love object, or drive it away. She can not conceive of love and anger as co-existing. Discipline, control, limit setting, and

frustration of minor wishes are viewed by her as cruel and damaging. Her indulgence was said to lead to cycles of resentment, anger, explosions, guilt, repression and compensatory overindulgence. The indulgence of the child's omnipotence and communication that his aggression is toxic and dangerous may continue for years before an outbreak of separation anxious symptoms are precipitated by an event that threatens separation. The authors claim to witness this pattern in an overwhelming majority of their cases.

Many authors have stressed the importance of the child's disturbed internal object relations. It is apparent that the effect of a pathological caretaker or family situation upon the child is a function of his evaluation and unique internalization of his surrounding environmental influences. The question has been raised as to why one sibling in a family would come to exhibit separation anxiety while another may not. Although differing family interactions with each of the various siblings can account for some of the variance, it is clear that internal endowment and the individual's unique cognitive apperception and subjective assignment of meaning is of tremendous importance. In accordance with this viewpoint authors have speculated that these children possess disturbed internalized object relations which make it difficult for them to be assured of their caretaker's and their own safety, when not in the physical presence of the significant other. Thus, these

authors view the child's internalized images of others as being fragmented, fearsome, or malevolent, having distorted boundary definition or bodily integrity, being unavailable for soothing purposes and/or unresponsive to the individual's volitional control.

Wieland (1966) believes that a failure to develop internal recognition of a whole integrated object predisposes the child to separation anxiety and clinging behavior. E. Klein (1945) described the importance of the child's internalized image of the parent as primitive and punitive which may be projected onto the teacher or others.

Angel (1972) depicts the separation anxious individual as having successfully experienced and left the symbiotic stage of development. However, during the differentiating subphase, wherein some degree of psychological separation between internalized self and object representations has taken place, the individual may experience difficulty with his mnemotic or imagery evocative capacity to consistently summon up a view of the object as benevolent and/or integrated. This difficulty leads to a failure to achieve mature object constancy. The individual with mature object constancy is able to entertain his frustrations and aggression toward the depriving object without losing his integrated view of the object. The individual without mature object constancy, on the other hand, in the face of his frustration and anger, loses his view of the object as

integrated stable, nurturing and/or protective. According to Angel this child is said to similarly experience his not fully differentiated self view as also unstable, precarious and perhaps excessively dangerous. The child's fantasized aggression and destructiveness toward his internal object representation, particularly brings to bear the child's developmental inadequacies. He therefore comes to intensely desire the physical presence of his caretaker to provide him with the internal help that mature object constancy would have provided.

Jarvis (1964) views the child as internalizing the sado-masochistic aspects of his relationship with his mother. Waldron et al. (1975) speak of the child's markedly ambivalent and possibly disturbed object relations in the context of their previously described finding of generalized character disturbance. Miller (1972) describes the need for the child to have an early integrated memory of mother as going away and coming back to lessen the intensity of separation anxiety. Vikar (1982) demonstrated how fantasy formation can help to master separation anxiety. Greenson (1967) believes that pathological separation anxiety will occur when the child is unable to call up an internal image of his feared-to-be lost object. This may lead to an inability on the child's part to utilize his internal objects for identificatory purposes and consequently to a loss of ego functioning and development (Greenson, 1967).

Mahler (1975) has differentiated her view from that of Bowlby. Bowlby, she believes, is primarily concerned with actual physical separation of the child from his mother as leading to separation anxiety. Mahler, on the other hand, asserts that more importantly the child is involved with intrapsychic separation of his self representations from his libidinal object representations. The child's developmental task is viewed by her as a breaking apart of his internal narcissistic self/object fused representations. According to Mahler, the child needs the differentiated maternal image available to him in the same way his actual mother had been libidinally available. If the child only partially differentiates himself intrapsychically from his mothering one, he will sense the absence of the other without the object image or fantasy to assure himself of the other person's safety or return.

Unfortunately systematic investigation into the nature of the child's internalized object representations (e.g., as manifested on projective psychological tests) is almost totally lacking. Thus, the nature and role of the child's developmental object relations remains an open question.

Bio/chemical variables: Relatively few authors with the exception of Gittleman-Klein and Klein (1973) have viewed intrinsic bio/chemical or instinctual processes in the child as being primarily responsible for pathological separation anxiety. Certainly, a number of authors have viewed

intrinsic and inherited processes as vital in interacting with environmental forces. Eisenberg (1959) although steadfastly viewing separation anxiety as an outgrowth of a pathological caretaker, states, "The history of early sensitivity to change in these children as infants suggests that an intrinsic anxiety proneness may exist which renders them more susceptible to the acquisition of these patterns (p. 717).

Gittleman-Klein and Klein (1973) conceptualize separation anxiety as an evolutionary adaptive mechanism whose initial elicitation does not require learning by the infant. The child's distress is viewed as releasing retrieval and caretaking behavior in the parent. Gittleman-Klein and Klein view its pathological form to be endogenously and bio/chemically determined. According to them, this view is "in sharp contrast to that which regards the child's anxiety as a response to the mother's neurotic needs" (p. 214). They base their conclusions on their double blind study of 35 6-14 year old separation anxious and school phobic children treated in one group with medication (imiprimine) and family counseling and treated in a second group with placebo and family counseling. Although both groups were found to return to school, the children of the medication group were found to usually have no relapse after the medication was withdrawn (i.e., the bio/chemical imbalance was believed to be treated). This was in contrast

to the placebo group which was found to have a high relapse rate. They argue that given that both groups received counseling, the bio/chemical intervention must have relieved the critical causative factor in the etiology of pathological separation anxiety. This finding offers support that the anxiety leading to avoidance of the school situation can be brought under control with the use of anxiety controlling medication. This study, however, does not investigate change in the child's overall functioning. In a similar fashion to the behavioral treatment of these children wherein successful school attendance results, it is not yet known if the entire syndrome has been treated. Certainly, school refusal is only one aspect of their pathological disturbance. The medicinally treated child's level of anxiety may have fallen below the threshold level that would inhibit his attendance at school, yet may not have changed other aspects of his functioning (i.e., clinging to mother behavior) or generalized psychological disturbance if such is the case. Further investigation into the child's personality functioning by Gittleman-Klein and Klein would be needed in order to substantiate their claim that by eliminating the school avoidant behavior, they successfully treated and found the etiological root of pathological separation anxiety. Given the generally accepted overwhelming correlation of the occurrence of separation anxiety and school phobia with disturbances in

the child's family and primary caretaker, it is likely that predisposing bio/chemical constitutional factors interact with psychological and environmental ones.

Chapter 3: Methods

This chapter will present the methods and procedure of the study. For the purpose of presentation this chapter will be divided into five sections: 1) statement of the hypotheses, 2) description of subjects, 3) description of the research instruments, 4) description of the procedures, and 5) treatment of the data.

Statement of the Hypotheses:

Hypothesis I: Separation anxious disordered boys as compared to a matched control group of non separation anxious normal boys will evidence a significantly higher incidence of internal hostile fantasies and imagery as measured by Holt's Scoring of Primary Process Manifestation in Rorschach Responses (1968).

Hypothesis II: Separation anxious boys as compared to non separation anxious normal boys will evidence a significantly greater amount of pathological and developmentally low level object relations Rorschach responses as measured by the Mutuality of Autonomy Scale (Urist, 1977), Rorschach Penetration Scale (Fisher and Cleveland, 1954) and The Developmental Analysis of the Concept of the Object (Blatt et al., 1976).

Hypothesis III: Separation anxious disordered boys as compared to a matched control group of non separation anxious normal boys will evidence a significantly higher incidence of pathological disordered thinking on the

Rorschach as measured by The Rorschach Thought Disorder Scale (Blatt and Ritzler, 1974).

Characteristics of the Target Group: The subjects for the first group of this study were chosen on the basis of a verifiable separation anxiety disorder diagnosis that fulfills the behavioral criteria as listed in the DSM III. Diagnosis of the subject population was confirmed by hospital intake/evaluation chart material and/or, independent ratings by therapists that specified target behaviors (in addition to having previously received a diagnosis of separation anxiety disorder by the initial evaluating clinicians). These subjects were selected from present and past patients in the Department of Child and Adolescent Psychiatry, at Roosevelt Hospital (428 West 58th Street, New York, N.Y.). This study was therefore limited to subjects from an urban, middle to low income class background in accordance with the clientele served within the hospital catchment area.

The subjects that were studied were de-limited to boys. The maintaining of the sex of the subjects as constant aided the study by eliminating possible sex differences on the variables under examination. The Rorschach test data on these subjects was collected during the normal course of clinical evaluations and psychological testings performed on children referred to the clinic. The subjects were those presently being evaluated and treated at the clinic and

those who have been evaluated and tested within the past three years. This data selection aided in establishing a random sample of boys treated for this symptom complex. Thus, all children evaluated and tested at this clinic within the past three years with a verifiable diagnosis of separation anxiety disorder will be included in the first group. The psychological (i.e., projective testing) of these children was performed to enhance treatment recommendations and therefore occurred either during the evaluation process or the initial stage of their treatment.

Nineteen subjects were found to meet the criteria. A number of other subjects had received a diagnosis of separation anxiety disorder but were found to have either been given this diagnosis incorrectly, or to have had insufficient evaluation and chart information to verify such a diagnosis. Ten of the nineteen separation anxious boys had an additional DSM III diagnosis of gender identity disorder of childhood (302.60). This percentage is in accordance with previously found percentages of gender confusion in separation anxiety disordered children (Waldron, 1975).

The data on the second group of subjects, the matched controls, were gathered from children attending various schools in the hospital district and similar geographical areas, and kept on file at the Child and Adolescent Psychiatry Department of Roosevelt Hospital for use in

departmental research. Fourteen control subjects were found to approximately match with the separation anxious children on the variables of intellectual level, age, sex, and socio-economic status. These controls consisted of boys whose parents have agreed to their participation in a clinical study conducted at Roosevelt Hospital. The parents were uninformed concerning the nature of the present study. The parents, once found to fit the matching criteria, were invited to participate, and given fifty dollars as an incentive for their child's participation. This money came from a departmental research grant at Roosevelt Hospital awarded to the Child and Adolescent Psychiatry Department. A summary of the mean and standard deviations of the demographic characteristics of the different groups can be found in Appendix A.

Description of The Research Instruments:

Holt's Scoring of Primary Process Manifestations in Rorschach Responses (Holt, 1968): Holt's Primary Process Manifestation Scale was used to measure the level of hostile imagery on the Rorschachs of the separation anxious and control subjects. Holt devised his scale to measure the relative amount of libidinal and aggressive imagery in a subject's projective responses to the Rorschach. His attempt was to not only assess the content of the responses for their degree of impulse manifestation, but also to assess the formal characteristics of the responses and the

individual's reaction to his verbalizations. This, Holt believed, would more fully take into account and measure one's capacity to integrate their impulses, and one's means of coping with their urges. Thus Holt attempts to rate the: primary and secondary process level of a response; its formal characteristics (i.e., appropriateness/form level, perceptual organization, style of thinking involved and so on); creativity of a response; the control and defense operations involved in a response; and finally, the demand for, and effectiveness of defense needed or used in reference to the response. Holt distinguishes two types of aggressive responses; those with a sadistic implication, and those with a masochistic implication. He labels these categories subject and object aggression to define whether the percept implies that one is identified with the aggressor, or is the recipient of the aggression. He further divides aggression into potential, active and resultant categories to account for the activation level of the aggression.

Many researchers have explored the reliability of Holt's scoring categories. Reliability has been generally found to be very high, particularly in reference to Holt's content scoring (Lerner and Lewandowski, 1975). McMohan (1964) found inter-rater subcategory reliability correlations to be between .89 and .95. Bachrach (1968) found it to be .90. Benfari and Cologeras (1968) found interjudge reliability

coefficients to be .90 for content scoring, .95 for mean defense demand scoring and .90 for defense effectiveness. Others have similarly obtained high reliability coefficients for raters scoring these categories (Allison, 1967; Blatt et al. 1969; Rabkin, 1967; Rogolsky, 1968).

The construct validity of Holt's scoring system has been consistently supported by research (Lerner and Lewandowski, 1975). This research has investigated behaviors and characteristics theoretically related to primary process thinking, the impact of experimentally induced emotion or impulse producing situations, and individual/group differences based on diagnosis and personality types. Holt himself found various aggressively tinged personality correlates (e.g., oversensitivity to challenge and threat, use of projection and externalization, reserved and mistrustful feelings, possession of social and ethnical prejudice and so on) to be associated with his various aggression measures. Holt, however, found some expected correlates to be inverted and cautions that one must be on guard for instances where individuals may consciously or unconsciously seek to disguise an impulse or turn it into its opposite.

Maupin (1965) and Allison (1967) found Holt's scoring to correlate positively with an individual's capacity to regress adaptively. Blatt et al. (1969) found several of Holt's scoring categories that measured an individual's

capacity to modulate and integrate primary process material, to correlate with a subject's ability to analyse and synthesize abstract and logical relationships. Pine and Holt (1960) employed Holt's adaptive regression score, amount of primary process, and effectiveness of control of primary process to predict quality of imaginative production across a variety of experimental tasks. Goldberger (1961) found effectiveness of control of primary process scoring to correlate with subjects' ability to cope with isolation experiences. Induction of subliminal situational aggression with schizophrenic patients was found by Silverman (1966) to correlate with Holt's subject aggression and results of aggression scoring. Similar results were found with aggressive stimuli presented subliminally to a group of nursing aids (Silverman, 1965). Saretsky (1966) found clinically improved medicinally treated schizophrenics to have significantly greater mean defense effectiveness scoring and less sum level primary process scores than controls. Silverman et al. (1962) found adolescent schizophrenics to have significantly greater density of scores for all level 1 and 2 primary process scores as compared to normals. Zimet and Fine (1965) found process schizophrenics to have a greater amount of primary process scoring compared to reactive schizophrenics. Benfari and Calogeras (1968) found the Holt scale significantly useful in providing support for the proposition that a more

primitive ego is associated with a more punitive and conflictual conscience by finding high primary process scores to correlate with subjects possessing a harsh, restrictive conscience. M.W. Kahn (1965) found level 1 aggression scores to correlate with independently assessed aggressive psychotic and/or psychopathic individuals.

Many researchers have confined their use of this scoring system to a number of relevant categories, rather than employing the entire system (Lerner and Lewandowski, 1975). Thus, for the purposes of this study only the aggression content scoring for primary and secondary process thinking and demand for defense scoring will be used. That is, this study will not use Holt's formal scoring. Lerner and Lewandowski (1975) in review of Holt's scoring system found reliability concerning Holt's formal scoring to be problematic.

Rorschach Mutuality of Autonomy Scale: This scale utilizes a seven point system to assess the interactional quality between two Rorschach object representations on the dimension of autonomy. Urist (1977) developed his scoring system to "address the structure of the individual's world of mental representation." Previous investigators such as Hertzman and Pierce (1974), Schachtel (1966), and Piotrowski (1958) according to Urist have utilized Rorschach content to gain an understanding of an individual's internal repertoire of self and object representations. Urist's attempt was to

demonstrate the structural argument that individuals tend to experience self-other relationships in consistent, enduring, characteristic ways that can be defined for each individual along a developmental continuum. This continuum corresponds to the various stages in the development of object relations, ranging from primitive narcissism to emphatic object relatedness... These scales were constructed in an attempt to demonstrate a correlation across several independent measures of level of object relations... to suggest that individuals do in fact demonstrate an intrinsically consistent capacity to experience self and other in characteristic ways that reflect the developmental level of underlying psychic structure... For the theoretical underpinnings of the scale the reader is especially directed to the works of Kohut (1966, 1970) and Kernberg (1966, 1975)... The scales focus on the developmental progression towards separation individuation, with particular emphasis given to the issue of ... autonomy. The Rorschach scale grows out of the assumption that the portrayal of relationships between both animate and inanimate figures on the Rorschach ought to reflect the individual's experience and definition of human relationships (p. 3-4).

Inter-rater reliability of Urist's scale has been demonstrated to be good. Exact agreement between raters has been found to range from a .52 to .73 correlation coefficient, while agreement within 1 scale point has been found to range from a .72 to .98 correlation coefficient (Urist, 1977; Urist and Shill, 1982; Tuber, 1983; Maranz, 1984).

Urist successfully demonstrated the construct validity of his scale . He found ratings on his Mutuality of Autonomy Scale to significantly correlate with the independent ratings of ward staff of the interactional styles of 40 inpatient subjects and independently rated written autobiographies of these patients. Tuber (1983)

utilized the scale with children's Rorschachs and found it to significantly correlate with the individual's future adult level of functioning. He demonstrated a significant association between Urist ratings of Rorschachs administered upon initial evaluation of 70 children in a residential treatment center and incidence of rehospitalization upon 5 to 20 year follow up of these subjects.

Tuber and Coates (1984 personal communication) view the scale as indicative of an individual's level of object relations, characteristic of different types of psychopathology (i.e., scores of 1-2 indicating normal or neurotic personality organization, scores of 3 indicating narcissistic personality organization, scores of 4 indicating dependent personality organization, scores of 5-6 indicating borderline psychopathology and scores of 7 reflecting psychotic process). They suggest that a person's modal score is the most useful index for clinical assessment in that it indicates the person's predominate experience of self and others (1984 personal communication).

Developmental Analysis of the Concept of the Object on the Rorschach (Blatt et al., 1976): Blatt et al. have devised a scale for use on the Rorschach which they believe reflects an individual's developmental level of representation of the human object. They believe this scale to be useful in assessing the individual's level of normality and pathology. Blatt and Berman (1984) assert

that the myriad of isolated overlapping Rorschach variables can be condensed into "more molar variables that can be scored reliably and that measure central dimensions of personality organization" (p. 226).

The Blatt et al. (1976) scale in particular attempts to examine an individual's object representations for his level of developmental maturity. This scale examines human percept responses on the Rorschach in reference to their developmental level. Accordingly, it assesses the accuracy of a human percept response, its degree of differentiation as a human figure, and its articulation (i.e., perceptual/functional attributes, intensity of articulation, motivation of action, degree of integration of the object with its action, benevolency or malevolency of its action, and the nature of its interaction with other percepts).

Blatt et al. have found scale points to accurately differentiate normal and psychotic populations. Blatt and Berman (1984) found their Rorschach measures, which assessed an individual's degree of investment in appropriate and inappropriate interpersonal relationships (e.g., object relations) and those which assessed integration of primitive thought to correlate with independent estimates of ego functioning and development in opiate addicts and psychiatric patients.

For the purposes of the present study, the measures of perceptual characteristics of the object, degree of

differentiation, motivation of action of the object and object-action integration, will be excluded as they have not been found to significantly differentiate between clinical subjects, and possess less relevance to the variables under examination here. This study will therefore employ Blatt et al.'s assessment of the developmental level of the human percept, degree of malevolency versus benevolency in the human percept and thought disorder scale.

Rorschach Penetration Scale (Fisher and Cleveland, 1954): Fisher and Cleveland have devised a scale to assess the degree to which an individual's projective Rorschach imagery reflects a repertoire of stable, coherent object boundary delineations or ill defined, insubstantial penetratable object boundary delineations. They have found this scale to significantly differentiate patients with symptoms involving the body interior from patients with symptoms involving exterior body layers, subjects with particular modes of self expression, and subjects with particular values, areas of interest and attitudes toward parental figures (Fisher and Cleveland, 1955, 1958).

Rorschach Thought Disorder Scale (Blatt and Ritzler, 1974): Blatt and Ritzler have devised a Rorschach scale that they believe assesses an individual's level of cognitive and perceptual functioning. They have consolidated the theoretical speculations and research of authors investigating the relationship between cognitive

boundary disturbances on the Rorschach and psychosis. Their scale was designed to measure various levels of cognitive boundary disturbance which they believe "relate to disruptions in reality testing, impairments in cognitive processes and the capacity to become involved in interpersonal relationships" (p. 373, Blatt and Ritzler, 1974). They assume that individuals having more severe boundary disturbance responses on the Rorschach are correspondingly more disturbed and have more seriously impaired ego functions. Their research utilizing this scale confirmed their hypothesis. They found that patients with greater Rorschach boundary disturbances were more likely to be considered psychotic, more likely to have impairment in complex cognitive functions, less likely to be in contact with conventional reality, less likely to have normal affective control, more likely to have distorted object relations, less responsive to therapeutic intervention, and less interpersonally involved. These findings were consistent with the findings of other researchers who studied correlates of boundary disturbed responses on the Rorschach (Jortner, 1966; Quinlen et al., 1972; Rapaport et al., 1945; Weiner, 1966; and Zucker, 1958). Blatt and Ritzler's scale then provides a continuum of boundary and thought disordered Rorschach responses with which to assess the degree of pathology of the cognitive and ego functioning of an individual.

Descriptions of Procedures: Initial psychological (i.e., Rorschach) testing of separation anxious disordered subjects was administered by Roosevelt Hospital, Child and Adolescent Psychiatry Department psychologists and clinical psychology doctoral trainees. Initial testing of the matched controls was likewise performed by psychologists and doctoral trainees in the department. All psychological testers administered the tests under the assumption that the individuals were undergoing normal clinical evaluation. These testers were blind as to the nature of the study. The Rorschach test protocols were scored by a Ph.D. candidate in clinical psychology and the author of this study. The rating clinician was blind to the exact nature of the study and the hypothesis in question. All subjects' Rorschachs were randomly mixed in order to blind scorers to the group identity of the individual's protocol being rated. The independent clinician rater was paid twenty dollars for each Rorschach scored. Financial resources for the above payments came from a departmental research grant from the Department of Child and Adolescent Psychiatry at Roosevelt Hospital.

Treatment of the Data: The scores of the separation anxious disordered children and normal controls were statistically compared by use of non parametric statistics, namely, the Mann Whitney U Test of significant differences.

Chapter 4: Results

I Introduction:

This chapter will be divided into five sections: introduction, intergroup comparisons of demographic variables, discussion of interrater reliability, determination of whether to control for Rorschach productivity, and summary of findings. The summary of findings will be presented by instrument (i.e., Rorschach scale) employed. The summary of findings will include an evaluation of whether the relevant hypothesis to the instrument being discussed was accepted or rejected.

The subject population was often found to statistically differentiate into two distinct subgroups: gender disturbed separation anxious boys and non gender disturbed separation anxious boys. The statistical differences between these subgroups and between these subgroups and the controls will be presented where they are relevant. For purposes of presentation the three subgroups will be referred to as the separation anxious only group to designate separation anxious boys without gender disturbance, gender disturbed group, to designate separation anxious boys with an additional D.S.M. III diagnosis of gender disturbance, and the control group to denote such.

Analysis Model:

The Rorschach and demographic data collected from the subjects and controls were analyzed by use of non parametric

statistics, namely, the Mann Whitney U test, to determine whether any significant differences existed between the various groups. A Winsorizing statistical approach was employed to adjust one of the gender disturbed subject's score on the variable of Holt's defense demand score. His excessively high score of over four standard deviations above the mean was re-evaluated as two and one half standard deviations in the same direction in order to not bias statistical analysis. Another gender disturbed subject gave no Urist scores. Past researchers have interpreted the absence of Urist scoring to be a pathognomonic indicator in so far as an individual is unable to see any relationship between objects (Tuber, 1981, Mayman, 1967). Tuber (1981) interpreted such scores as falling at the end of the Urist scale (i.e., Urist # 8) which in that study led to a greater statistical stringency. In the present study, however, greater statistical stringency was believed to be obtained by excluding this subject from Urist statistical analysis (i.e., treating him as having "no data") rather than rating him the low end of the Urist object relations developmental continuum.

Summary Statistics:

A summary of the central tendency and the variability of the demographic variables measured for all groups can be found in table 2. A summary of the central tendency and the variability of the Rorschach variables under examination can

be found in Appendix A. An inter group comparison summary of non significant z and p Mann Whitney U values between the groups for the demographic and Rorschach variables can be found in Table 1 and Appendix B respectively. Significant z and p Mann Whitney U values for inter-group comparisons of Rorschach variables can be found in the tables within this chapter where they are relevant.

II. Intergroup comparisons: Demographic Variables:

The subjects, controls and subgroups were statistically compared on the variables of verbal, performance and overall intelligence, age, Hollingshead socio-economic index, grade in school, number of siblings, birth rank, public versus private school, religion, ethnic background and intactness of family to assess the possibility of extraneous intervening factors on their Rorschach performance. As can be seen from the statistical analysis summarized in Table 1, no significant differences were found between the various groups in reference to their demographic variables.

Table 1: Intergroup Statistical Comparisons of Demographic Variables (Mann Whitney U Test - z values)
(all p values non significant)

	All SAD vs Control	Gender SAD vs Control	SAD only vs Control	Gender vs SAD only
Overall I.Q. N=33	1.40	.64	1.74	.74
Verbal I.Q. N=33	1.31	.67	1.54	.12
Performance I.Q. N=33	.84	.15	1.61	1.43
Age N=33	.15	.32	.60	.21
Hollingshead N=30	1.25	1.44	.37	.85
Grade N=32	.18	.00	.30	.21
Number of Siblings N=33	.43	.00	.78	.52
Sibling Rank N=33	.34	.34	.23	.04
Public/Private School N=30	.33	1.12	.55	1.46
Religion N=28	.79	.21	1.01	.84
Ethnic N=30	.09	.77	.68	1.23
Intact or not Family N=33	.55	.34	.58	.24

1 Mann-Whitney U Tests corrected for tied ranks and expressed as normal deviates.

Table 2: Mean and Standard Deviation of Demographic Variables (Total population N=33 unless otherwise noted)

	Controls N=14	All SADs N=19	Gender N=10	SAD only N=9
Overall $\bar{x}$	104.50	98.74	99.70	97.67
I.Q. S.D.	9.52	16.93	19.87	14.08
Verbal	106.60	102.50	105.10	99.56
I.Q.	8.79	14.30	17.41	10.90
Performance	107.93	105.05	108.30	101.44
I.Q.	8.54	11.92	14.60	7.20
Age (in months)	100.21 36.62	106.47 33.47	103.50 39.44	109.78 27.33
Hollingshead N=30	35.23 14.10	38.38 15.38	41.56 16.16	34.29 14.44
Grade N=32	3.90 2.93	4.26 2.51	4.10 3.07	4.44 1.89
Number of Siblings	2.00 .68	1.90 .81	2.00 .94	1.78 .67
Sibling Rank	2.36 1.01	2.21 .98	2.20 1.14	2.22 .83
Public/Private School N=30	1.50 .52	1.44 .51	1.25 .46	1.63 .52
Religion N=28	1.54 .88	1.26 .59	1.33 .52	1.22 .67
Ethnic N=30	2.46 .69	2.42 .84	2.20 .79	2.67 .87
Intact or not Family	1.43 .51	1.53 .51	1.50 .53	1.56 .53

II Inter-rater Reliability:

Reliability between the two raters was found to be good with reference to the various Rorschach rating scales employed. As can be seen from table 3, inter-rater reliability ranged from 80% to 86% agreement. Once reliability was calculated, the two raters discussed non corresponding scores and came to agreement as to which would be included or changed in the final scoring. In general, non corresponding scores were the result of one rater missing a particular Rorschach response rather than disagreement as to which score should be given on a particular scale.

Table 3: Inter-rater Reliability

	Holt	Fisher	Urist	Blatt #1	Blatt #2	Blatt #3
Percent Agreement	83.5%	80.4%	83.3%	81.8%	86.2%	81.4%

Blatt #1: Thought Disorder Scale.

Blatt #2: Rating of the human object.

Blatt #3: Rating of benevolency versus malevolency.

IV. Determination of Whether to Control for Productivity:

An analysis of differences between groups on the variable of total number of Rorschach responses was performed to determine if Rorschach productivity may have exerted an influence on subsequent Rorschach scores. The Mann Whitney U tests performed found no significant differences to exist between any of the groups under examination on the variable of total number of Rorschach responses both with and without spontaneous inquiry responses included (see Table 4). The mean and standard deviations of the total number of Rorschach responses for each group appears in Table 5. The various groups were likewise compared using Mann Whitney U tests to determine if the total number of Urist responses, total number of initial Urist responses and total number of Blatt Analysis of the Concept of the Object responses given by each subject were significantly higher in any of the groups (Table 6). (Note: The Urist Mutuality of Autonomy scores were examined both as initial Rorschach responses without inquiry elaboration and as whole protocol responses which were elaborated upon and/or given during inquiry; see below for reason.) The results of the analysis in Table 6 demonstrate that no significant differences were found to exist among the groups on the various total number of responses given for these particular Rorschach scales.

Kalter and Marsden (1969) present a method to determine if controlling for Rorschach productivity is necessary. In accordance with this method, the total number of initial Urist responses, total number of Urist whole protocol object relations responses, total number of Blatt thought disorder responses and total number of Blatt Analysis of the Concept of the Object responses were each subtracted from the subject's total number of Rorschach scores (including spontaneous inquiry percepts). The total number of Rorschach responses minus the individual totals for the scales (i.e., adjusted productivity scores) were then compared among groups using the Mann Whitney U test and found to not significantly differentiate any of the groups (see table 6). The subjects' resulting distribution of adjusted productivity scores were then additionally correlated with their corresponding total number of instrument scale scores (e.g., total number Urist responses). Three of these 16 intra group correlations were found to reach significance (see Appendix C). In accordance with the Kalter Marsden criteria, evaluation of inter and intra group correlations determined that there was no need to control for Rorschach productivity on these scales.

The Holt and Fisher scales utilize a scoring method in which a single percept may receive more than one scoring. Consequently, the compounded nature of scoring on these scales prohibited the use of the Kalter and Marsden method

as a test for the effect of productivity. There is no reason to believe, however, that productivity exerted a significant impact on these scores in so far as no difference in Rorschach productivity was found between groups. Correlations were performed between total number of Rorschach responses and the total number of responses for these scales and their subscores. No significant correlations were found to exist between these variables. Thus, the determination was also made to not control for productivity on these scales.

Table 4: Intergroup Statistical Comparisons of Total Number of Rorschach Responses (Mann Whitney U Test- z values; all p values non-significant)

	Extended Rorschach Responses including inquiry		Rorschach Responses for initial percepts only	
	For all Scales N=33	For Urist Only N=32	For all Scales N=33	For Urist Only N=32
All SADs vs. Control s	1.20	1.18	.84	.80
Gender SADs vs. Controls	1.20	1.17	.71	.63
SAD only vs. Controls	.79	.79	.70	.70
Gender SADs vs. SAD only	.08	.00	.04	.09

- 1 Mann-Whitney U Tests corrected for tied ranks and expressed as normal deviates.
- 2 Intrepretation of Urist scores excluded "no data" subject in gender S.A.D. subgroup. Statistical analysis was therefore performed with and without this subject.

Table 5: Mean and Standard Deviation of Total Number of Rorschach Responses

		Number of Extended Rorschach Responses (including inquiry)		Number of Rorschach Responses for ini- tial percepts only	
		For All Scales	For all Ss minus "no data"i.e., Urist scale	For all Scales	For all Ss minus "no data"i.e.,
Urist scale					
Controls	$\bar{x}$	16.79	16.79	16.57	16.57
	S.D.	5.34	5.34	5.20	5.20
All SADs					
	$\bar{x}$	19.68	19.78	18.39	18.39
	S.D.	6.77	6.95	6.30	6.30
Gender					
SAD	$\bar{x}$	19.50	19.67	17.33	17.33
	S.D.	5.68	6.00	3.94	3.94
SAD only					
	$\bar{x}$	19.89	19.89	19.44	19.44
	S.D.	8.16	8.16	8.14	8.14

Table 6: Intergroup Statistical Comparisons of Productivity Measures (Kalter and Marsden Method)
(All p values non-significant)

	All SAD vs Controls	Gender SAD vs Controls	SAD only vs Controls	Gender SAD SAD only
R-IUR	1.24	1.33	.633	.57
R-TPUR	.34	.73	.16	.49
R-BTDR	1.30	1.79	.32	.78
R-BACOR	.91	1.18	.32	.57
TNIUR	.22	.00	.80	.94
TNTPUR	1.53	1.17	1.36	.40
TNBACOR	1.07	.56	1.24	.54
R-IUR:	Total number of extended Rorschach responses minus total number of initial Urist responses.			
R-TPUR:	...minus total number of whole protocol Urist responses.			
R-BTDR:	...minus total number of Blatt thought disorder responses.			
R-Bacor:	...minus total number of Blatt Developmental Analysis of the Concept of the Object (Human) responses.			
TNIUR:	Total number of initial Urist responses.			
TNTPUR:	Total number of whole protocol Urist responses.			
TNBACOR:	Total number of Blatt Developmental Analysis of the concept of the Object (Human) responses.			

V. Summary of Findings (by instrument)

Holt The Holt's aggressive content scale data collected from the various groups was analyzed by Mann Whitney U tests for each of the variables involved. No significant differences were found between any of the groups for any of the variables of this scale in analysis of the subject's entire protocol (see Appendix B). Thus, no differences were found on the variables of primary process aggressive content scores, secondary process aggressive content scores and intensity of need for defense for aggressive content scores (i.e., defense demand)

It has been hypothesized that separation anxious children may have a greater need to repress their aggressive fantasies. Therefore, these childrens' scores were examined for differences not only in overall aggressive content scores as discussed above, but also in their initial, immediate responses (i.e., percepts only). This analysis was also performed for Urist scores for the same reason. When the Holt aggressive content scores were analyzed with reference to initial Rorschach percepts only (discounting subsequent inquiry responses and later spontaneous verbalizations), the separation anxious only subgroup was found to have significantly higher secondary process aggressive content scores and defense demand scores than the control group ($z = 1.77$, $p = .0385$; $z = 1.64$, $p = .05$). This lends support to the conception that these children are

dealing with greater than normal aggressive imagery yet may be inhibiting this content a short time after its expression. Thus, the initial inclination of these children toward more aggressive imagery may be subject to later censorship. An alternate explanation may be, however, that these children are quicker to project aggressive imagery than normals and not inhibiting its later expression, but only continuing to give responses within normal limits in the long run. Hypothesis I with reference to the Holt scale was supported by this finding but not accepted in so far as the combined separation anxious groups failed to score significantly higher than the controls on this measure.

Mutuality of Autonomy Scale (Urist, 1969)

Significant differences were found with respect to the Urist scores among all groups. The lowest developmental object relations scores of all separation anxious subjects and each of the two subgroups (gender disturbed separation anxious boys and separation anxious only boys) were found to range significantly lower developmentally than the controls (i.e., developmentally low = high Urist scores; see Table 7). Thus, all separation anxious children appear to possess a repertoire of imagery (concerning interactions between objects) that is more primitive than that of normal children. The two separation anxious groups in combination were found on their initial Rorschach responses to have scored significantly less Urist # 1 scores than the controls

(see Table 7). This score describes the developmentally highest object relations score on the scale. Thus, separation anxious boys tended to range significantly lower in their object relation projective imagery, and not reach up to as high developmental levels as normal boys. Thus hypothesis II with reference to Urist scoring was accepted at the less than .05 level of probability.

The separation anxious only subgroup was found to give a significantly greater amount of Urist # 3 scores (both initially and throughout) than both the controls and gender disturbed separation anxious boys ($p < .01$ and $p < .05$ level, see Table 7). The separation anxious boys on the whole were likewise found to score significantly higher in this regard, probably owing to the influence of the separation anxious only group. The separation anxious only subgroup was also found to have significantly less entire protocol Urist 1 scores than the controls (Table 7). This finding confirms the tendency of this group to view interactions as implying a dependency or symbiosis, and not in terms of mutuality and autonomy.

The gender disturbed subgroup was found to possess a significantly lower mean Urist score than both the normal and separation anxious only subgroups. The separation anxious boys on the whole were found to score significantly lower with regard to their mean Urist response. This last

statistic is probably due to the influence exerted by the gender disturbed subgroup.

Mode scores were reasoned to be of importance because they may represent the person's most comfortable or familiar perception of interactions (Tuber and Coates, 1985).

Bimodal scores similarly may represent a person's tendency to fluctuate between two modes of perceiving object interactions. With reference to the above, the gender disturbed subgroup was found to have significantly lower bi-modal scores than both the controls and separation anxious only subgroups. This probably led to the additional finding that separation anxious boys as a whole tend to give lower bimodal scores than the controls (table 7).

The gender disturbed subgroup was also found to give significantly less Urist 1 and 2 scores combined than the control group. The high side of their bimodal scores (both on initial response and throughout) likewise tended to be significantly less high than the control group.

In comparison to the separation anxious only subgroup, the gender disturbed subgroup was found to give significantly less Urist 2 scores, significantly more Urist 6 scores and significantly lower mean scores.

Table 7: Inter-Group Statistical Comparisons of Urist Mutuality of Autonomy Scale (n=32)

		All SAD vs Control	Gender SAD vs Control	SAD only vs Control	Gender vs SAD only
U #1	z	2.16	1.32	1.97	1.00
	p	.0156	NS	.0242	NS
U #2		.37 NS	1.42 NS	.80 NS	1.67 NS
U #3		3.12 .0009	1.44 NS	3.79 .0001	2.10 .0360
U #4		.28 NS	.71 NS	.29 NS	.90 NS
U #5		1.19 NS	1.11 NS	.88 NS	.36 NS
U #6		.15 NS	1.01 NS	.86 NS	1.16 NS
U #7		.83 NS	1.03 NS	.39 NS	.48 NS
U 1+2		.80 NS	1.65 .0495	.32 NS	1.53 NS
U 5+6+7		1.19 NS	1.50 NS	.48 NS	.99 NS
U Mean		1.92 .0275	2.46 .0070	.73 NS	1.99 .0469
U Lowest Score		2.15 .0160	1.76 .0390	1.75 .0398	.56 NS
U Highest Score		1.24 NS	1.57 NS	.49 NS	1.16 NS
U Low bi- modal score		1.80 .0357	2.79 .0027	.23 NS	1.99 .0461
U High bi- modal score		1.55 NS	3.39 .0085	.19 NS	1.44 NS
IUR #1		2.03 .0212	1.46 NS	1.46 NS	.00 NS

IUR #2	.47 NS	1.19 NS	.33 NS	1.13 NS
IUR #3	2.11 .0176	1.06 NS	2.57 .0051	1.49 NS
IUR #4	.26 NS	.47 NS	1.16 NS	1.46 NS
IUR #5	1.22 NS	.70 NS	1.34 NS	.65 NS
IUR #6	1.56 NS	.74 NS	1.11 NS	.48 NS
IUR #7	.38 NS	.32 NS	.32 NS	.00 NS
IUR 1+2	1.01 NS	1.73 .0418	.03 NS	1.13 NS
IUR 5+6+7	.56 NS	.43 NS	.50 NS	.29 NS
IUR Low bi-modal score	.62 NS	.58 NS	.45 NS	.42 NS
IUR High bi-modal score	.74 NS	1.08 NS	.15 NS	.79 NS

- 1 Mann-Whitney U Tests corrected for tied ranks and expressed as normal deviates.
- 2 All p values 1 tailed except column 4, Gender vs. SAD only, which is 2 tailed
- 3 "U" stands for Whole protocol Urist responses.
- 4 "IUR" stands for initial Urist responses.

Rorschach Penetration Scale (Fisher and Cleveland, 1954)

There were no significant differences found among any of the groups on the measure of boundary penetration scores. Thus Hypothesis II was rejected with reference to this measure (see Appendix B).

Analysis of the Concept of the Object (Blatt et al., 1954)

Separation anxious boys as a whole were not found to have significantly lower developmental scores than the controls with reference to Blatt et al.'s Analysis of the Concept of the Object scale. Thus, hypothesis II was rejected in regard to this Rorschach scale. However, separation anxious only boys were found to have significantly more "fantasy", and quasi human benevolent responses than both the control group and the gender disturbed subgroup ($z = 1.84$, $p = .0331$, one tailed for control comparison; $z = 2.14$, $p = .0322$, two tailed for gender SAD comparison). Similarly, the separation anxious only subgroup was found to exhibit significantly more "fantasy" or quasi human (i.e., benevolent and malevolent, part and whole) responses in general than the controls ($z = 1.70$, $p = .0449$). This finding suggests that separation anxious only children possess a greater than normal repertoire of supra-human imaginary figures than normal boys.

Rorschach Thought Disorder Scale (Blatt and Ritzler, 1954)

Hypothesis III was accepted with regard to the scoring of the Blatt thought disorder scale. All separation anxious

subjects and each of the two separation anxious subgroups were found to have given significantly more total thought disorder responses, and cognitive type thought disordered responses (i.e., fabulized combination regular, fabulized combination serious and contamination responses combined; see table 8) than the controls. These findings suggest that separation anxious boys tend to exhibit imagery and thinking that is more boundary compromised, primitive, influenced by unconscious fantasy, bizarre and/or idiosyncratic than normal boys.

The separation anxious only boys were found to have significantly more fabulized combination regular and fabulized combination serious scores than the controls (see table 8). These categories rely heavily on boundary disturbance both between objects and within objects. This implies that the separation anxious only boys possess a greater potential for viewing objects in and of themselves as unstable. When the two separation anxious subgroups were combined, they were found to collectively possess significantly more fabulized combination regular and serious responses than the controls. This last statistic may be due, however, to the influence of the separation anxious only subjects.

The gender disturbed separation anxious group was found to give significantly more confabulation responses and affective type (i.e., fabulized combination tendency,

fabulized to confabulation and confabulation scores combined) thought disordered responses than the controls. Thus, these children have a greater potential for bizarre, personalized, arbitrary and tangential, associative elaborations than normals. When the two separation anxious subgroups were combined they were found to collectively possess significantly more confabulation and affective type thought disordered responses than the normals. This is most likely due to the influence of the gender disturbed subgroup.

Table 8: Inter Group Statistical Comparisons of Blatt et al. Thought Disorder Scale (N=33)

	All SAD vs Control	Gender SAD vs Control	SAD only vs Control	Gender vs SAD only
Total T.D. z Responses p	2.43 .0076	2.05 .0200	2.01 .0222	.37 NS
Contamination Responses	1.17 NS	.99 NS	1.05 NS	.00 NS
Fabulized Comb. Serious	1.91 .0281	1.25 NS	2.06 .0198	1.14 NS
Confabulations	2.03 .0210	2.50 .0063	.89 NS	1.49 NS
Fabulized Comb. Regular	2.13 .0167	1.43 NS	2.25 .0122	.47 NS
Fabulized to Confab.	.26 NS	.81 NS	.53 NS	1.15 NS
Confabulation Tendency	.89 NS	1.06 NS	.94 NS	.68 NS
Cognitive type T.D. response	2.40 .0083	1.87 .0308	2.17 .0150	.62 NS
Affective type T.D. response	2.09 .0182	2.29 .0111	1.24 NS	1.46 NS

- 1 Mann-Whitney U Tests corrected for tied ranks and expressed as normal deviates.
- 2 All p values 1 tailed except column 4, Gender vs. SAD only, which is two tailed.

Chapter 5: Discussion

The fifth chapter will be divided into seven sections. The first section will briefly review the purpose and objectives of this dissertation and the emphasis of the past literature in the area of separation anxiety disorder. The second section will review the hypothesis of this dissertation. The third section will briefly review the methods of this study. The fourth section will discuss the present findings. The fifth section will examine the theoretical implications of the present study in regard to the psychological profile of these children and etiology of their symptomatology. The sixth section will review the problems and limitations of this study. The last section will summarize the practical implications and suggest areas of future research in this field.

I. Review of the purpose and objectives of this study with reference to past literature

The purpose and objectives of this study were to examine the role of aggression, object relations and cognitive functioning in separation anxiety disordered middle and low class urban boys. The present study was undertaken in order to more precisely understand the etiological roots of these childrens' clinging behavior and anxiety. There exists marked controversy concerning the beginnings, nature and cause of separation anxiety, both in its childhood pathological manifestation and later adult development.

Writers in this area have alternately emphasized environmental and endogenous factors to explain this syndrome. These diverse theorized etiological viewpoints have included an emphasis on the family system, interpersonal learning and conditioning, maternal influence, oedipal issues, the child's defense against his aggression, pathological internal object relations, and inadequate psychological (ego or self) development.

The objectives of the present study were to demonstrate that these children do possess heightened internal aggression, developmentally lower object relations and a greater amount of cognitive/ perceptual disturbances than normal children. The first finding would lend support to the theorized viewpoint that these childrens' clinging behavior and anxiety acts as a defense against, and occurs in response to, the disruptive influence of their internal rage or anger. The second finding would simultaneously support the etiological viewpoint that the symptoms of these children reflect a deep ingrained psychopathological process; one in which their self and object perceptions, affective repetoire, and internalized view of object interactions are disturbed. The third finding would support the view that the ego functions, cognitive abilities and psychological development of these children are immature and disturbed. This underdevelopment of cognitive structures and abilities would lend credibility to those who assert

that the symptoms of these children can be understood in terms of their need to supplement their cognitive and ego functioning.

The research in this area has been limited. The majority of this research has attempted to define the demographic variables associated with these children. Some studies have investigated the dynamics of the family system, the personalities of the mothers of separation anxious children, and the levels of dependency in mother and child. However, empirical research to examine the validity of the main theorized etiological causes thus far presented to explain this syndrome have been sparse. This is particularly true concerning explanations which involve the child's personality and/or psychological make up. Therefore clarity about the nature of these childrens' inner experience and reasons for exhibiting separation anxiety disorder has been insufficient.

II. Review of the Hypothesis

The hypotheses posed for testing in this study are as follows:

Hypothesis I: Separation anxious disordered boys as compared to a matched control group of non separation anxious normal boys will evidence a significantly higher incidence of internal hostile fantasies and imagery as measured by Holt's Scoring of Primary Process Manifestation in Rorschach Responses (1968).

Hypothesis II: Separation anxious boys as compared to non-separation anxious normal boys will evidence a significantly greater amount of pathological and developmentally low level object relations Rorschach responses as measured by the Mutuality of Autonomy Scale (Urist, 1977), Rorschach Penetration Scale (Fisher and Cleveland, 1954) and The Developmental Analysis of the Concept of the Object (Blatt et al., 1976).

Hypothesis III: Separation anxiety disordered boys as compared to a matched control group of non separation anxious normal boys will evidence a significantly higher incidence of pathological disordered thinking on the Rorschach as measured by The Rorschach Thought Disorder Scale (Blatt and Ritzler, 1974).

III. Review of the Methods

The present study utilized the Rorschach protocols of separation and non separation anxious boys to investigate the projective images of these children. Nineteen boys ages 5 to 13 treated at Roosevelt Hospital, New York, N.Y. within a three year period were found to have a diagnosis of separation anxiety disorder. Ten of these subjects had an additional D.S.M. III diagnosis of childhood gender disorder. This percentage was in accord with similar previously found percentages concerning the incidence of gender confusion in separation anxiety disordered boys. These children were psychologically tested at Roosevelt

Hospital at the beginning of their treatment process. Fourteen control subjects who were administered psychological testing at Roosevelt Hospital for research purposes were also used. The fourteen control subjects were found to achieve ratings of normalcy on the Achenbach Child Behavior Checklist (Achenbach, 1981). All psychological testing was performed by doctoral level externs and interns who were blind to the nature of the present study.

The Rorschachs of these children were then scored utilizing aggression, object relations and thought disturbance Rorschach rating scales by a doctoral candidate in clinical psychology and the present author. The outside rater was blind to the hypothesis of the study and to which group the various Rorschach protocols belonged. Reliability between the two scorers was found to be good (ranging between 80% and 86% agreement). Differences in scoring between both raters were discussed and agreement was reached concerning disparate scores. The scores were then statistically analyzed by non-parametric statistics to evaluate differences among any of the groups.

IV. Discussion of the Results

The discussion of the results section will first present an evaluation of findings concerning the separation anxious group as a whole and then evaluate any differences found between any of the subgroups. Due to the more pervasive findings of object relations and cognitive disturbances

among separation anxiety children, the second and third hypothesis will be reviewed first.

The results of this study led to the acceptance of hypothesis III. The finding that separation anxious boys give significantly more pathological thinking disordered responses than normals (i.e., the Blatt and Ritzler Thought Disorder Scale) is extremely important. In comparison to the other instruments of this study, the Blatt thought disorder scale is perhaps the most direct index of pathological personality functioning. Both groups were found to have significantly more thought disorder scores than normals. The separation anxious only children were found to have significantly high fabulized combination serious and fabulized combination regular responses and, likewise, cognitive styled thinking disorder responses. The gender disturbed boys were found to have significantly high cognitive type thinking disordered scores (i.e., contamination, fabulized combination regular and fabulized combination serious scores in combination), confabulation scores and affective type thinking disordered scores.

These findings suggest potential developmental impairment in cognitive/ perceptual thought processes. In general, high scores in the area of the cognitive styled thinking disordered categories indicates a tendency toward thinking and imagery that is boundary compromised, idiosyncratic, bizarre, arbitrary and blurred. Ideas and

images, which should merit their own stability and independence in order to be contrasted with other ideas and images may lack discrete boundaries for these children.

The gender disturbed subgroup was found to additionally exhibit more confabulation and affective type thought, disordered scores than the controls. The confabulation scoring category implies an affective interference with thinking processes. Confabulized responses often indicate a pressured intrusion from primary process thinking. These responses potentially suggest fluid, tangential or associational thinking and/or difficulty in isolating ideas and images from impulse and emotion. The differences between gender and non-gender disturbed separation anxious boys point to the conclusion that both forms of separation anxiety carry with them the possibility of cognitive thought disturbance. However, gender disturbed separation anxious boys are likely to have a more pervasive cognitive and affective thinking disturbance.

The possession of thoughts and ideas that are boundary compromised by these children is directly analogous to their clinging and symbiotic behavior. Among a multitude of possibilities their behavior may serve as a manifestation of their ideas concerning how individuals and objects interact, an attempt to utilize an auxillary ego to fill in the gaps of their inadequate cognitive thinking abilities and/or, a physically present interpersonal mirror that solidifies a

self in the face of such a confusing, unstable internal world which fails to provide a sense of security or identity.

The results of the present research also led to the acceptance of hypothesis II. The separation anxious subgroups were both found to range to lower, more primitive developmental object relations levels, and not range as high as the controls on the Urist Mutuality of Autonomy Scale. Separation anxious boys as a group were found to possess developmentally lower object relations, more primitive imagery and greater intrusion from unconscious processes than normal boys. The projective imagery of these children's objects in interaction are potentially more dependently or symbiotically merged, likely to violate boundary, controlled by outside forces, lacking autonomous functioning, depowering of one party, aggressive, and prone to destruction or annihilation. The above discussed findings from the Blatt and Ritzler Thought Disorder Scale can be viewed as additionally supporting the view that these boys' internalized objects are more bizarre, unstable and psychotic-like than normal children.

The issue of being controlled and controlling is likely to be very important for these children. Separation anxious boys, in their tendency to view interactions as out of control, dependent, and aggressive, may correspondingly

possess an intense sense of personal vulnerability and powerlessness.

The gender disturbed separation anxious children were found to have much lower developmental objects relations than either of the other two groups. Their mean object relations scores and their bimodal object relations scores were found to be significantly lower than both other groups. Their Urist # 6 scores were found to be significantly greater than the separation anxious only group. Urist #6 scoring indicates a severe imbalance in the power relationship between objects wherein one party has violated the physical boundaries of another in a violent and destructive manner. The gender disturbed subgroup seems to wrestle with a more pervasively primitive view of interactions as being violent, attacking, and annihilating than the separation anxious only subgroup. When the specific low level object relations responses of the gender disturbed boys are looked at more closely, there is a suggestion that these object perceptions can take on a sado-masochistic tone. The gender disturbed boys additionally tended to give less initial and later higher level Urist scores than the controls (i.e., Urist # 1 and # 2, and high bimodal scores). They also tended to give less moderately high level Urist responses than the separation anxious boys (i.e., Urist # 3 scores). Thus, they may be lacking as great a potential as the separation anxious only

children to re-evaluate their view of human interaction and to function with greater faith in the possibility of mutuality, respect and non aggressivity in interpersonal relations.

The specific nature of the separation anxious only boys' object relations is dominated by a view of interactions as symbiotic and/or dependent. This is upheld by their greater tendency to give more Urist # 3 responses than both other groups, and greater tendency not to give as many Urist # 1 scores as the controls. In fact, not one child in this group received a single Urist # 1 (i.e., high developmental level) object relations score. This finding of a high number of Urist # 3 responses and no # 1 responses may provide a possible alerting signal for the diagnosis of separation anxiety disorder without gender disturbance. Thus, the separation anxious only boys are more prone to view interactions as dependent and symbiotic while the gender disturbed separation anxious boys are more prone to view interactions as destructive and violating.

Hypothesis II was also found to gain some support from the Blatt Analysis of the Concept of the Object Scale concerning the separation anxious only subgroup. This subgroup gave a significantly higher number of quasi whole human benevolent responses and quasi-human responses in general. Quasi-human responses on the Rorschach have been noted to imply a lower level object relations process.

These responses consist of fantastic, make believe, benevolent, human-like figures or animals involved in human activity (e.g., bears talking). These percepts usually consist of objects with super human power and abilities (e.g., superman). This finding suggests that these children, in the face of low level, unstable, self and object images, may possess a latent grandiose ideal self which they use to provide themselves with a secure sense of self. Alternately, these figures may represent the strong, powerful, protective ideal object to which they cling to in hope of gaining support for their own weak, vulnerable self. These all powerful benevolent figures may be seen by these boys as the only objects capable of possessing the strength needed to stand independently. Whether utilized as self or object images by the separation anxious only children, these quasi human percepts stand in contrast to the previously found high incidence of idealized and/or omnipotent feminine Rorschach object images in gender disturbed boys (Tuber and Coates, 1985).

Quasi-human Rorschach percepts have been viewed by clinicians as implying a schizoid retreat into a private internal fantasy world. The inner world of these children in the present study has been found, however, to be disorienting and fearsome, making a possible schizoid retreat a strategically perilous one.

Although the findings in reference to hypothesis I are not as pervasive as hypothesis II and III, the results of the present research indicate that separation anxious boys have a greater tendency to exhibit aggressive projective imagery in comparison to normal boys. The separation anxious only children tended to give significantly more Holt secondary process aggressive responses and have significantly higher defense demand scores in their initial percepts than the controls. They were also found to range lower in their Urist scores than the controls. The gender disturbed boys, in scoring lower than the controls on the Urist scale, showed a greater tendency to exhibit aggressive projective imagery for objects in interaction (i.e., Urist mean, Urist low bimodal scores and Urist low scores). The low end of the Urist scores portray objects that are most often aggressing against another object or being aggressed upon. Both separation anxious groups then were found to possess potentially aggressive laden imagery.

The fact that the Holt scoring of the separation anxious only children reached significant levels in their initial percepts but not in subsequent inquiry, lends support to the previously discussed conception that these children may have both increased aggressive imagery and a tendency to inhibit their hostile ideation.

V. Psychological Profile and Etiology: Summary and Speculations

The results of this study strongly suggest that low level object relations, cognitive abnormalities, and internal aggressive concerns play a significant role in separation anxiety disorder. Whatever environmental factors may act as formative or sustaining of separation anxiety disorder, they do not in themselves appear to account for the etiology of the entire syndrome. These children are likely to be deeply psychologically troubled. This study strongly suggests that their perceptual and cognitive functioning is impinged upon by their affective concerns. Their thinking is subject to boundary distortion, idiosyncracies and bizarre ideation. These children seem to live in an internal world where self and object images can be potentially over-powered, controlled and annihilated. Separation anxiety disordered boys are likely to see the world as a more aggressive and hostile place than normal children. They may be more desirous of power and control, more enraged and/or more vengeful than normal children who are more likely to feel stable and protected from threats to their personal boundaries.

The findings of this study clearly differentiate two subgroups of separation anxiety disordered boys: namely, gender disturbed separation anxious boys, and separation

anxious only boys. The former group was found to be a much more psychologically disturbed group. Their object relations and thinking abnormalities were found to be more pervasively disturbed than the separation anxious only boys. Separation anxiety disorder when it occurs in concert with gender disturbance is likely to be a much more severe variety of the disorder and of psychopathology in general.

The development of the sense of self may be of major importance for both groups of separation anxiety disordered boys. This speculation stems from previous observations of separation anxiety disordered children in the literature and some unexplored implications of the present data. Low level, primitive, dependent, and unstable object relations (as has been found in this study) usually implies a corresponding unstable sense of self. The nature of the object relations differences found between non gender disturbed and gender disturbed separation anxious boys suggests a somewhat distinct repertoire of self images for each group. These differences in self images may be delineated, most simplistically, along the lines of symbiotic self images and fragmented self images for the two groups respectively. Although not investigated in this study, it is possible that these children may differentiate into groups with distinct object relations, aggression and cognitively disturbed sets of images. Thus it can be postulated that the intensity of psychological disturbance

underlying separation anxiety disorder may fall along a continuum of disturbed self development. It is possible to conceive of four points along this continuum into which various separation anxiety disordered children may fall.

The first and lowest developmental point may be that which includes the gender disturbed separation anxious boys. At this point the self is only partially differentiated. The threat of annihilation of the child's precarious sense of self is extremely severe at this level. This point on the continuum corresponds to M. Klein's (1948) paranoid schizoid stage wherein phobic fears and fragmentation of experience leave the child vulnerable to intense anxiety. The gender disturbed separation anxious child at this level has only accomplished a unique yet incomplete differentiation from his mother. His tenacious gender identification with the feminine highlights the partial self development which is perceived by him, given his level of object relations, to be in a constant danger of dissolution.

The second point on this continuum may be that of the non gender disturbed separation anxious boys who also have not achieved differentiation. This group consists of those boys who scored significantly high Urist # 3 responses. These children seem to emphasize, and be preoccupied with, images of dependency and symbiosis. These children have achieved a somewhat greater sense of stability and security than the previous group due to their sense of being enmeshed

with, and protected by, the self/object identification. These boys' psychological symbiotic interdependence leaves them open to tremendous anxiety when not buffered by the physical presense of their caretaker.

The third point pertains to the separation anxious only children who scored significantly high benevolent quasi human responses. These children may possess a moderately differentiated sense of self, but one that is in formation. This sense of self may be an archaic, grandiose one. This somewhat differentiated self, in order to stand alone, is viewed by these children as having great strength and power. These children may be those who have been described in previous literature as manipulating others into supporting an omnipotent, blameless self. This category may also apply to some gender disturbed separation anxious boys who have been viewed in their feminine identifications as clinging to images of an ideal, all powerful queen or matriarch (Tuber and Coates, 1985).

The final point into which separation anxiety disordered children may fall consists of children who are dealing with a "bad self". Here, a much greater degree of differentiation has taken place, yet the child remains fearful of his destructive potential. The children who scored a significantly high number of aggressive percepts but may not possess as poor object relations as the others (i.e., separation anxious only boys with initially high Holt

scores) fall into this category. These children may be angered or enraged yet fearful of hurting or alienating the one(s) they love. These children may feel trapped between not wanting to be too close to their mothering ones, which may destroy them or lead to rejection and being too independent of their mothering ones which may bring about their anguish or abandonment.

Of these four points, two major categories of separation anxiety disorder can be conceptualized. The first two points on the continuum may belong to a class of children with a largely undifferentiated sense of self who are dealing with issues of self and other annihilation. The latter two points on the scale may belong to the class of children who possess a somewhat differentiated sense of self and are dealing with issues of their power and aggression. It is logical that pure varieties of these separation anxious children may not necessarily be found. The child who is grappling with the formation of his self may fluctuate between these different points at different times. Further research into these childrens' self conception is recommended to determine the accuracy of viewing the child's self development as having crucial importance in separation anxiety disorder. Further examination of the present data would be important to assess the degree to which the separation anxious boys may fall into the above postulated categories.

The question arises as to whether the low level object relations, thinking abnormalities and aggressively tinged images are causative and/or sustaining in separation anxiety disorder. Do these children suffer from internal difficulties and therefore come to be more intensely in need of others to act as an auxiliary ego and stabilize their internal world? Alternately, do these children, in experiencing an interpersonal environment that allows or encourages their clinging behavior, tend to suffer an inhibition of their psychological development? There is no doubt that it is an interactive process between environmental and inner development that these children fall sway to. The present findings, however, do indicate that a more intensely internal pathological process is in operation for these children than has been previously demonstrated to be true.

VI. Problems and Limitations of the Study

There were a number of problems and limitations that were encountered in the process of implementing this research study which should be considered when interpreting these data. To begin with, the control group boys were not individually matched in terms of their demographic variables with the separation anxious boys. An attempt was made, however, to as closely as possible match age, socio-economic status and intelligence between the two groups. As presented previously, no significant differences on any of

the demographic variables were found to exist between the groups. The individual members of the various groups were, however, not identically paired.

A second problem encountered was the number of subjects and controls examined. Due to the limits of the control pool, and attempts to match subjects, the total number of control group boys was limited to fourteen. The number of acceptable separation anxious subjects was also limited due to insufficient hospital chart material, the weeding out of boys with even borderline psychotic symptomatology and/or possibilities of pervasive developmental disorder. Therefore, the total number of subjects in each of the two subject subgroups was only nine and ten.

It is also important to take into consideration the possible differences between the subjects and controls in their appraisal of the testing situation. The separation anxious subjects were not only in a strange environment which they might have been fearful of, but also probably aware that they were being evaluated for help. This may have made them more anxious and perhaps angrier than the controls who were for the most part probably aware that they were participating in a study and not being evaluated for future contact with the hospital and doctors.

In terms of the instruments utilized in this study, questions may be raised concerning the adequacy of the Holt and Fisher scales. The Holt scale may not have been graded

enough in its ratings to differentiate groups in terms of their aggressive imagery. The Holt aggressive content scale is divided into fundamentally only two major scoring categories. Most scorable responses fall into the secondary process aggression category. This category tends to include items of potentially different values. The later defense demand scoring may not adequately weight the various aggressive items within a category to make up for this homogenizing of scores. Thus, a dangerous animal may receive the same score as unelaborated murder. The aggressive responses of the controls therefore may have been of a milder type than the subjects but masked due to the limited potential of this scale to differentiate such. This possible scale deficiency may be magnified in its use with children whose ability to verbalize and elaborate aggressive content may be more limited than adults.

No significant results differentiating any of the groups were derived from the Fisher Penetration scale. This scale may have been inadequate to differentiate groups on this variable due to its one point, no weighting of items, construction. This scale ranks diverse penetration type responses under only one ranking. Therefore mild penetration responses may be mixed with more severe ones (e.g., water and penetration of body surface both receive a score of one).

VII. Practical Implications and Suggestions for Future Research

The findings of this study, as stated above, strongly suggest that these children suffer from a more pervasive psychological disturbance than was often previously suspected. Although environmental factors may have initiated or acted as a catalyst for separation anxiety disorder, it appears that, after a certain point, they are unlikely to be acting in isolation. These boys' thinking difficulties, low level object relations and aggressively coloured emotional experience appears to sustain behavior and anxiety that can severely limit their future development and potential. Clinical interventions with these children therefore must take into account the intensely disturbed psychological nature of these childrens' problem. Therefore, interventions that have been widely used to rid the child of his behavior and "phobia" such as medication and behavioral reconditioning are viewed by this author as insufficient in restructuring his internal resources. Thus, the development of a secure and positive sense of self, integration of the child's anger, aiding in the normal course of object relations development, help with ordering and clarifying cognitive thinking processes, and clarifying of interpersonal boundaries through psychotherapy and educational intervention is recommended for these children.

The findings of the present study, as previously discussed, are suggestive of possible inadequate self development. It would be useful for future research to further investigate these childrens' sense of self. Furthermore, the exact relationship of these children to their aggressive images and impulses is still unclear and deserves further attention. It is still uncertain, for example, to what extent, if any, do these children repress their aggressive ideas and impulses.

Appendix AMean and Standard Deviations of Rorschach Variables

	Controls	All SADs	Gender SADs	SAD only
Holt Primary $\bar{x}$	.64	.58	.70	.44
Process Agg. S.D.	1.01	.77	.82	.73
Holt Secondary	13.86	18.00	18.10	17.89
Process Agg.	6.85	7.36	7.72	7.40
Holt Defense	30.14	38.11	39.20	36.89
Demand scores	15.30	15.39	16.80	14.57
Initial Primary	.36	.21	.30	.11
Process Agg.	.63	.42	.48	.33
Initial Second-	8.64	11.05	10.01	12.11
ary Process Agg.	3.73	5.23	5.84	4.57
Initial Defense	18.93	22.74	21.10	24.56
Demand scores	7.84	10.25	12.02	8.17
Fisher Penetra-	8.79	11.84	12.5	11.11
tion Scale	5.91	5.55	5.80	5.51
Urist #1	.50	.06	.11	.00
scores	.86	.24	.33	.00
Urist #2	1.93	2.06	1.33	2.78
	1.39	2.16	1.94	2.22
Urist #3	.43	1.72	1.11	2.33
	.65	1.18	1.17	.87
Urist #4	.50	.50	.67	.33
	1.09	.86	1.00	.71
Urist #5	1.50	2.44	3.00	1.89
	1.79	2.50	3.08	1.76
Urist #6	.79	.89	1.11	.67
	.99	1.37	1.05	1.66
Urist #7	.07	.22	.22	.22
	.27	.55	.44	.67
Urist 1 & 2	2.43	2.11	1.44	2.78
combined	1.83	2.11	1.88	2.22

Urist 5&6&7	2.29	3.56	4.33	2.78
combined	2.56	3.39	3.43	3.34
Urist Mean	3.16	3.82	4.18	3.47
	.95	.80	.69	.77
Urist low	1.71	2.17	2.22	2.11
score	.61	.51	.67	.33
Urist high	4.64	5.50	5.78	5.22
score	1.69	1.04	.97	1.09
Urist Low bi-	3.57	4.56	5.33	3.78
modal score	1.40	1.58	.87	1.79
Urist high	2.64	3.44	3.67	3.22
bimodal score	1.50	1.62	1.87	1.39
Rorschach respon-	11.14	12.21	12.11	11.67
ses minus U res.	4.99	5.33	4.29	6.40
Initial Urist	.21	.00	.00	.00
#1 scores	.43	.00	.00	.00
Initial U #2	1.07	.94	.67	1.22
score	.83	.87	.50	1.09
Initial U #3	.14	.56	.33	.78
	.36	.62	.50	.67
Initial U #4	.21	.17	.33	.00
	.58	.51	.71	.00
Initial U #5	.57	1.06	.78	1.33
	.85	1.26	.83	1.58
Initial U #6	.43	.22	.22	.22
	.65	.55	.44	.67
Initial U #7	.07	.11	.11	.11
	.27	.32	.33	.33
Initial U 1 & 2	1.29	.94	.67	1.22
	.99	.87	.50	1.09
Initial U 5+6+7	1.07	1.39	1.11	1.67
	1.27	1.65	.93	2.18
Initial U low	3.79	4.44	4.56	4.33
bimodal score	2.29	2.06	2.19	2.06

Initial U high	1.89	1.83	2.00	1.67
bimodal score	1.10	.92	.87	1.00
Total Initial	2.71	2.90	2.20	3.67
Urist scores	2.09	2.38	1.62	2.29
Rorschach respon-	14.07	16.79	17.30	16.22
ses minus Tot. IUR	5.92	6.63	4.45	7.53
Blatt total	2.00	6.84	7.60	6.00
Thought Dis.res.	2.72	6.21	6.80	5.77
B Contamination	.14	.37	.40	.33
scores	.36	.60	.70	.50
B Fabulized com-	.57	1.68	1.00	2.44
bination serious	1.02	2.03	1.05	2.60
B Confabulation	.57	2.37	3.10	1.56
scores	1.09	2.75	2.81	2.60
B Fabulized com-	.89	1.63	1.90	1.33
bination regular	.47	2.31	3.04	1.23
B confabulation	.14	.21	.30	.11
tendency	.05	.54	.68	.33
B Fabulization to	.29	.58	.90	.22
confabulation	.61	1.17	1.45	.67
B cognitive type	1.00	3.68	3.30	4.11
T.D. scores	1.18	3.53	3.53	3.69
B affective type	1.00	3.16	4.30	1.89
T.D. scores	1.75	3.45	3.92	2.47
Rorschach Respon-	14.79	12.84	11.90	13.89
ses minus B.T.D.	5.52	5.82	5.07	6.72
Blatt DACO	3.90	5.16	4.30	6.11
total scores	3.06	3.72	2.67	4.60
B whole human	1.79	1.47	1.20	1.78
benevolent	1.89	1.58	1.48	1.72
B whole human	.57	.95	1.00	.89
malevolent	.65	1.55	1.63	1.54
B part human	.29	.47	.60	.33
benevolent	.47	.70	.84	.50

B part human	.29	.50	.30	.89
malevolent	.47	.84	.48	1.05
B quasi whole	.21	.47	.10	.89
human benevolent	.43	.84	.31	1.05
B quasi whole	.43	.95	.90	1.00
human malevolent	.94	1.72	1.60	1.94
B quasi part	.07	.05	.10	.00
human benevolent	.27	.23	.32	.00
B quasi part	.21	.21	.10	.33
human malevolent	.58	.42	.32	.50
B whole human	3.00	3.84	3.20	4.56
responses	2.66	2.97	2.82	3.13
B part human	.86	1.32	1.10	1.56
responses	1.35	1.53	1.52	1.59
B quasi human	.93	1.68	1.20	2.22
responses	1.07	1.86	1.55	2.11
B regular human	2.93	3.47	3.10	3.89
responses	2.50	2.80	2.60	3.10
B benevolent	2.36	2.47	2.00	3.00
responses	1.99	2.29	1.89	2.69
B malevolent	1.50	2.68	2.30	3.11
responses	1.70	3.13	1.95	4.17
Rorschach respon-	12.93	14.53	15.20	13.78
ses minus BDACO	3.67	5.41	5.10	5.95

Appendix BIntergroup Non Significant Comparisons of Rorschach Variables:

Mann-Whitney U Test- z Values (all p > .05)

	All SAD vs Control	Gender SAD vs Control	SAD only vs Control	Gender vs SAD only
Holt Primary Process Agg.	.10	.43	.30	.74
Holt secondary process agg.	1.37	1.17	1.10	.12
Holt defense demand	1.40	1.54	.76	.08
Initial Holt primary pro.	.59	.04	1.01	.98
Initial Holt secondary pro.	1.30	.44	*	1.23
Initial Holt defense demand	.93	.03	*	1.31
Fisher Penetra- tion Scale	1.39	1.47	.82	1.46
Blatt DACO whole human benevolent	.28	.56	.10	.80
B DACO whole human malevolent	.08	.13	.28	.24
B DACO part hu- man benevolent	.66	.13	.24	.57
B DACO part hu- man malevolent	.94	.07	1.53	1.34
B DACO quasi whole human benevolent	.77	.72	*	*
B DACO quasi whole human malevolent	1.11	.91	1.01	.09
B DACO quasi part human benevolent	.22	.24	.80	.95

B DACO quasi part human malevolent	.38	.36	.92	1.21
Whole human responses	.91	1.15	1.40	1.12
Part human responses	1.15	.71	1.26	.68
Quasi human responses	1.16	.28	*	1.40
Regular human responses	.59	.24	.76	.54
Benevolent hu- man response	.11	.31	.62	.87
Malevolent hu- man responses	1.11	1.02	.81	.04

* Significant at $p < .05$ level see chapter 4)
 1 Mann-Whitney U Tests corrected for tied ranks and
 expressed as normal deviates.

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