

# The Age of Danger and Delight



Articles from lectures under the general title: "The Development from Infancy to late Adolescence" 1952

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## EDITORIAL NOTE

This issue contains further material from the Easter School. Dr Lowenfeld has sent us an article containing the substance of her second lecture, and we are printing the greater part of Dr Biggar's first one. Miss Marshall has contributed an article dealing with an often neglected subject, the problems of the daughter who lives at home with her parents.

Instead of the January issue we are hoping to publish a booklet entitled "The Difficult Child."

## The Age of Danger and Delight

The second stage in development, that which comes between infancy and school years, is the period in life when sensations are at their keenest and emotions at their strongest. The healthy child of three to six lives W every moment of its waking life—sights, sounds, smells and the fascination of different textures are at their height, and the one sense that lags behind is that of taste. Children, as a whole, are conventional about — their taste experiences, enjoying keenly the tastes they do enjoy but, on the whole, being conservative in choice. Keen enjoyment of qualities of taste, if it comes at all, tends to develop in later years.

In regard to all the other senses, however, healthy children are keenly exploratory. The chief characteristic of children in these years is the catholicity of the child's enjoyment. Adults have long ago agreed that certain sights and smells are "nice" and to be encouraged, and certain "nasty" and to be discouraged, but a child left to itself will have none of this. Smells, for example, they find fascinating and as often as not it will be the smell that the adult calls "bad" that will seem to the child most intriguing.

Emotions, too, are at their height—the child of four or five finds itself constantly swept by gusts of feeling, excitement, anger, jealousy, possessiveness, eager anticipation, the sheer delight of rapid movement, the excitement of adventuring, or grief, all sweep through a small child in turn with a bewildering force and variety. While it is the grip of strong feeling the child, for the time that the feeling lasts, becomes wholly possessed by it, he becomes a little piece of rage, as it were, or of loving tenderness; time is obliterated, all that exists is the "now". A child has not the knowledge that adults have that this feeling will pass; this present feeling, in its intensity, has probably not happened to him before, he cannot gauge its reality in

comparison with other moments of a similar kind. A child therefore, in this period, urgently needs the support and understanding of his surrounding adults. His feelings are so intense, that, at times, he feels they may shatter him into pieces, and as he cannot yet think of himself as apart from his world, may shatter also the whole of the world about him.

Parents so often make the mistake of expecting children to be able to check their own storms of passion from within, by themselves, as the adult can. But this is wholly beyond their capacity and to expect too great a control of feeling by children, before their development has reached a stage where this is possible for them, leads only too often to their turning away from feeling altogether.

Heaven and the fairies, robbers (in the romantic sense) and “Indians” are just round the corner for children of this age, their imaginary world, and the world of dreams and wishes has the quality of reality, to them, and this “reality” outshines the reality of the outside world.

If therefore their feelings and their excitements are not welcomed by the grown ups, if too great a degree of quietness and of control is expected of them, and adults do not assist the development of their faculties of control by being undisturbed by the violence of their desires, and able at all times to back the child’s struggles with himself by a calm control of the child by voice and manner, then, in the main, four types of trouble can arise: —

(1) The child gets completely out of hand. Too often in these days parents give up the attempt to assist the child by controlling him and pass the burden of responsibility over to the child, allowing themselves to be controlled by the child’s desires. Anxiety is then added in the child to the tyranny of wishes already too strong and the child gets completely out of control. Then arises a state, which is equally miserable for the child and for his parents, and often only skilled psychotherapy can put matters straight.

(2) The child becomes withdrawn and begins to endow his inner world with the quality of reality that should belong only to the outer world. Such a child becomes reserved, difficult to make contact with; he becomes absorbed in his interior life, invents imaginary companions, or becomes passionately attached to toys or even to domestic objects, has strange fears and odd reactions both to people and to things.

With time and patience and sympathy on the part of grown ups, such children sometimes find their way out by themselves. But they are not always so fortunate and in many cases only skilled psychotherapy can help them to find the road leading from their inner world to enjoyment of reality and give their parents contact once again with their children.

(3) A third, most common, happening is that children of this age who have become afraid of their inner feelings and unable any longer to take delight in the world of their sensations develop asthma or fall victims to a long series of minor illnesses, return to enuresis or develop night terrors. All these are curable and, as knowledge and techniques develop in the hands of those

who undertake study and treatment of such children, can be resolved and the child brought back again into the line of normal development.

(4.) The last and least common road of retreat of the child who has lost confidence in himself is into a mood of depression. It is a common experience in a treatment centre for children to be referred to the centre by parents for “sadness,” for lack of ability to enjoy themselves or to join other children in play. This is a more serious condition with deeper roots and less often recognised by teachers and families as representing a failure in normal development for which expert advice should be sought. It needs to be more fully recognised than it is that the child who cannot play is a sick child who is desperately in need of help: and for whom, if help is not brought, many of the possibilities of life will be permanently closed.

How then can the child be helped to maintain his contact with his own nature, to develop a centre of his own from which he can ultimately come to exercise control over his own feelings and desires? To help children to keep their own vigour adults need to learn to become tolerant of standards not their own; to grow able to view life from the child's point of view and to expect a child to develop within his own standards and not to approximate immediately to an adult code of behaviour.

In this subtle and exciting work a careful balance needs to be maintained. Adults have their own lives to live in the presence of children, as have children in the presence of their surrounding adults, and place needs to be made for both. It is as damaging to children (and incidentally to the adults also) for the life of a family to be dominated by the needs and desires of the children in it as it is for the children's lives to be dominated by standards proper to adult life. A child's life grows in depth and richness if it is lived among adults who have achieved depth and richness in their own lives, and adults keep fresh and vital if in their family life there is space and opportunity for children, safely enclosed in the secure world of ultimate adult control and responsibility, to live out their own individual and personal lives and experiences. So arranged and so balanced each enriches the experience of the other and the whole family grows together in an ever deepening community of enjoyment of each other and of the internal and external life they share.

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