



INTRODUCTION

The Old Is Now New: A Brief History of Conflict in the Classroom

Fifty years ago, *Conflict in the Classroom: The Education of Emotionally Disturbed Children* was written and edited by Drs. William C. Morse, Ruth G. Newman, and Nicholas J. Long.

Conflict in the Classroom is not a generic book. In this edition, we have made no attempt to present other competing theories and practices. *Conflict in the Classroom* is based on a specific theoretical point of view labeled the *psychoeducational model*. The historical roots of the psychoeducational model are complicated, and the development of this model has involved numerous contributors. To understand its history, a brief and condensed timeline of change is presented.

Historically, the psychoeducational model started with the writings of Sigmund Freud and his classic book *Psychopathology of Everyday Life* (1901). His daughter, Anna Freud, became a psychoanalyst and modified her father's psychodynamic theories to better explain the development of children. She emphasized the role of the ego and the need for social learning. In 1936, Anna Freud published her advanced theories in a book titled *The Ego and the Mechanisms of Defense*. Her writings started the psychoanalytic child psychology movement in Europe, and Anna was identified as the founder.

At this time, Fritz Redl was studying the treatment of delinquent boys with August Aichhorn in Vienna. After receiving his PhD, Dr. Redl was analyzed by Anna Freud and eventually became a lay psychoanalyst himself. When Hitler came to power, Redl emigrated to the United States, where he taught at the University of Michigan and the University of Chicago. Because of his insightful writings and personality, he quickly rose to become a national leader in the

residential treatment of aggressive youth. His concepts challenged the child psychiatric focus on deviancy and dysfunction and emphasized the importance of milieu therapy, the “here-and-now skills” of the staff members who spent the most time with these boys, and the crisis intervention skills of Life Space Interviewing. In 1951, Dr. Redl and Mr. David Wineman, a social worker at Wayne State University, published their classic book *Children Who Hate*, which summarized their residential study of aggressive boys at Pioneer House in Detroit. The book, an instant success, provided mental health professionals with an alternative model to the prevailing psychiatric treatment of emotionally and behaviorally disturbed youth.

When Dr. Redl taught at the University of Michigan, his graduate assistant was a doctoral student named William Morse, who later became a nationally recognized professor at the University of Michigan’s School of Education and Psychology. For the next 31 years, Dr. Morse was the most effective advocate and teacher of Redl’s revolutionary concepts. In addition, Dr. Morse directed the University of Michigan Fresh Air Camp for 15 years. This summer camp was the country’s first multidisciplinary 8-week graduate program training psychologists, social workers, and special educators to work with juvenile delinquents. Dr. Redl served as the visiting psychological consultant, and hundreds of educational and mental health professionals left this life-changing clinical training program as missionaries of Redl’s milieu treatment concepts.

I spent two summers at this therapeutic camp (1953–1954) and became Dr. Morse’s graduate assistant and doctoral student. Ten years later, Dr. Larry Brendtro also became Dr. Morse’s graduate assistant and doctoral student. Simultaneously, Dr. Morse was developing new graduate degrees in emotional disturbance and psychology while promoting special education classes for emotionally disturbed students in public schools on a national level. His blend of psychodynamic psychology and education gave birth to the psychoeducational movement.

In 1953, Dr. Redl was appointed director of the Child Research Branch at the National Institutes of Health in Bethesda, Maryland. He replicated his Pioneer House study by studying the eight most aggressive boys east of the Mississippi River for the next 6 years. This was the most comprehensive and expensive research study on aggressive youth in a residential center ever funded by the National Institute of Mental Health.

In 1956, Dr. Redl invited me to replace the chief of the Children’s Residential Program. Actually, I became the housefather to these boys. During this time, I met Dr. Ruth Newman, who was the talented director of education on this research project. We became friends and lifelong colleagues. The project ended in 1958, and in 1961, we collaborated and wrote *The Teacher’s Handling of Children in Conflict*, which was published by Indiana University School of Education. This was our first attempt to translate Dr. Redl’s concepts for classroom teachers. In 1962, we met with Dr. Morse and proposed writing a textbook to

meet the growing needs for teacher training programs in this field. We agreed that most of Redl's concepts from psychodynamic theory could be modified and taught to educators. We also thought the textbook had to be based on a specific conceptual model with stated psychological and educational concepts and beliefs. In order to distinguish ourselves from other conceptual models of child variance, we organized *Conflict in the Classroom* around the psychoeducational model based on the following concepts and beliefs:

- Cognitive and affective processes are continuously interacting. Feelings influence behavior, and behavior influences feelings.
- Although it is important to acknowledge mental illness, our task is to describe the student in terms of functioning skills that highlight areas of strength and pinpoint areas of weakness for remediation.
- The psychoeducational process involves creating a specific therapeutic milieu so that students can function successfully at their present level.
- The ability to understand a student's characteristic pattern of behaving begins by identifying how the student perceives, feels, thinks, and behaves during a conflict.
- There are no special times during the school day. Everything that happens to, with, for, and against the student is important and can have therapeutic value.
- Emotionally troubled students are vulnerable during many normal developmental tasks and relationships, such as competition, sharing, testing, closeness, and so forth. Teachers are responsible for being aware of these areas and modifying their own behavior.
- Under stress, emotionally disturbed students will behave in immature ways. They will lie, fight, run away, regress, and deny the most obvious realities. We can anticipate immature behavior from children. We also expect mature behavior from adults.
- Students in conflict can instill their feelings and behaviors in teachers: Aggressive students can create counter-aggression in others; hyperactive children can create hyperactivity in others; withdrawn students can get adults to ignore them; passive-aggressive students can get others to behave in passive-aggressive ways. If troubled students succeed in getting the adult to act out their feelings and behavior, they succeed in perpetuating their self-fulfilling prophecies of life, which reinforces their defenses against change.
- Emotionally troubled children have learned to associate adult intervention with adult rejection. Our goal is to reinterpret adult intervention as an act of protection rather than an act of hostility. Students must be told over and over again that the adults are here to protect them from real dangers, contagion, psychological depreciation, and so forth.

- We are here to listen to what the students say and to focus on what they are feeling.
- We should expect and accept a normal amount of hostility and disappointment from students and colleagues.
- Students' home and community lives are important sources of mental health that must be considered by any remedial process. However, if all attempts fail, the school milieu becomes an island of support for students.
- We must demonstrate that fairness sometimes means treating students differently.
- Student crises are excellent times for teachers to teach and for students to learn.
- Behavioral limits are a form of protection and psychological comfort.
- Teaching students social and academic skills enhances a student's capacity to cope with stressful situations.
- Students learn through a process of positive and negative reinforcement, personal insights, and unconscious identification with significant adults in their lives. This means that the teacher's personal history, appearance, attitudes, and behaviors are important factors in teaching troubled students.

Conflict in the Classroom was first published in 1965. Dr. Redl gave it his blessing by writing the introduction. The textbook received outstanding professional reviews, and the following year, it was picked as the Book-of-the-Month Club selection. This decision came as a complete surprise because *Conflict* was a book for professionals, not the public. We learned that the public's interest in *Conflict* was sparked by our first chapter, "How Does It Feel to Be Emotionally Disturbed?" which consisted of 22 excerpts written by famous authors describing the plights and emotional struggles of children and youth. Each excerpt was followed by a brief psychological diagnosis that added additional interest. By 1976, *Conflict* had sold more than 100,000 copies and was the basic textbook for the majority of universities with programs in emotional disturbances. The psychoeducational model dominated the field at this time.

In 1975, Congress passed Public Law 94-142, the Education for all Handicapped Children Act, which was later known as the Individuals With Disabilities Education Act (IDEA). This law, which guaranteed that all students with disabilities would have an appropriate education and be placed in the least restrictive environment, initiated a flood of new classes in public schools and the need for additional university teacher-training programs in special education. In the late 1960s and 1970s, new educational models were being developed and tested in public schools. This was an exciting time of innovation and change. For example, Drs. Nicholas Hobbs and William Rhodes were developing the

ecological model at Peabody University. Called the Re-ED Project, this program was based on 12 treatment principles and continues to be one of the most active and successful programs for troubled students. The PEP (Positive Education Program) in Cleveland is a prime example.

During this time, the behavioral model, based on Dr. B. F. Skinner's original research, was being studied and expanded by Drs. Haring and Whelan at the University of Kansas Medical Center. Dr. Frank Hewett at the University of California, Los Angeles, developed the engineered classroom using a token economy system. Dr. Hill Walker at the University of Oregon was studying the use of behavioral principles to control the behavior of aggressive students. Dr. N. Haring at the University of Washington had the most sophisticated behavior modification program—each student in his experimental school had a personal behavior modification program. Dr. Haring believed that if a teacher used this prescribed behavior modification system, the teacher's personality would become secondary to the student's learning and behavior. This belief was the exact opposite of our psychoeducational belief. However, the structure and clarity of the behavioral model for educating emotionally disturbed students were very appealing and easy to implement. By the 1980s, the majority of public school special education programs were using behavior modification skills.

In the meantime, advocates of the psychoeducational model, such as Drs. Berkowitz and Rothman in New York City, Dr. Stan Fagan in Maryland, Dr. Frank Wood in Minnesota, Dr. Mary Wood in Georgia, and Dr. Larry Brendtro in North Dakota, were developing new social learning curriculums, strength-based programs, and the more practical here-and-now skills. These important changes were included in the 1971, 1976, and 1980 revisions of *Conflict in the Classroom*.

The 1990s saw another shift in conceptual models. Cognitive therapy (CT) and rational emotive therapy (RET) emerged as new programs, questioning the rationale of the behaviorists. The cognitive model is based on the assumption that thinking causes feelings and subsequent behaviors. Negative or irrational thoughts such as "all or nothing thinking" encourage self-destructive student behaviors. The focus of the cognitive model was on restructuring a student's inner life, not on his or her behavior. If you wanted a student to eliminate inappropriate behaviors, you had to help change his or her thinking. This gave credibility to the use of cognitive restructuring techniques as an additional way of reeducating troubled students. Behaviorists responded to this criticism by promoting the integration of cognitive and behavioral concepts. Their studies documented that it was more effective if both programs were used instead of one model. This resulted in the development of cognitive behavioral therapy (CBT).

It appeared that the problems with the conceptual models of educating troubled students were finally being resolved, and then along came the neuroscientists and their MRI studies. Suddenly, there was an explosion of new

research findings. Their data changed the understanding of human behavior, resulting in a surprisingly new paradigm change. Neuroscientists and their brain-scan studies documented that human beings are, first, not cognitive but emotional beings. We feel before we think. During a stressful situation, our emotions (i.e., the limbic system) shut down the functions of the prefrontal lobes, creating an immediate cognitive brain freeze. In addition, neuroscience researchers, such as Dr. B. D. Perry, found that children who had been chronically abused and rejected became brain-traumatized and overreacted to normal stressful situations in aggressive and self-destructive ways. Behavior modification and cognitive restructuring techniques are not effective with these students at these times. They work, but only when a student's emotions are under rational control.

The reclamation of brain-traumatized and emotionally troubled students begins with caring teachers—their ability to see beyond the troubling behaviors and their capacity to form meaningful relationships with these students. These are the essential skills of our psychoeducational model. Suddenly, what seemed old in 1965 and 1975 is now, in the 21st century, the cutting edge of working with troubled students. Thus, many of the classical articles are included or revised in this seventh edition of *Conflict in the Classroom*. These articles have endured the test of time. They detail effective management skills, which, like Euclid's propositions, Mozart's symphonies, Charles Dickens's novels, and the movie *Casablanca*, are as relevant today as when they were first created. To ignore them would be a mistake. To use them returns *Conflict in the Classroom* to a dynamic new beginning for teachers.

We recognize there are many unresolved psychological and educational issues about how to reclaim troubled students. Different points of view will always exist, but we can agree that the majority of troubled students are in general education classes and not in special classes, that there are more at-risk students now than there were in the past, and that multicultural issues will continue to increase. We also advocate for the school-wide positive behavioral support program and emphasize the importance of strength-based programs. However, our fundamental belief is that *all significant student learning evolves from and revolves around meaningful teacher–student relationships*. This is our mission today, as it was 50 years ago.

Nicholas J. Long