

# Community Child Guidance Centers of Chicago

## A REPORT

The Annual Meeting of the Community Child Guidance Centers was held on June 9, 1950, at the Stevens Hotel. The guest speakers were: Dr. Thelma Q. Thurstone, Director of the Department of Child Study, Board of Education of the City of Chicago, who spoke on "Every Child and His Problems"; Dr. Carl Rogers, Professor of Psychology, University of Chicago, who spoke on "The Child and the Adult"; Dr. S. I. Hayakawa, Editor of *Et Cetera, A Review of General Semantics*, who spoke on "Respect for the Child."

Dr. Thurstone emphasized that every child, not only the problem child, has problems. Close cooperation between the schools and the guidance centers, and the mutual assistance of both, has been of especial value. Dr. Rogers elaborated on the need for mutual understanding between parent and child. If each one could fully understand the point of view of the other one, cooperation and harmony could be obtained. Dr. Hayakawa stressed the creative ability and imagination of the young child, which is so often ignored and even stifled by the adult, who is far behind in his ability to keep up with and to follow the child's imaginative powers. It is regrettable that the full content of their thought provoking addresses cannot be given here. However, the Presidential Address, and the report of the Medical Director will be presented.

### PRESIDENTIAL ADDRESS

Dr. Curtis W. Reese, Dean of Abraham Lincoln Centre

Eleven years ago, Dr. Rudolf Dreikurs started the Child Guidance Clinic at Abraham Lincoln Centre. This clinic has become an integrated part of the program of the Centre, with satisfaction to all concerned. The movement has spread, with Centers now operating in Austin on the Near West Side, and in the Loop, and there are calls from other parts of the city. The recognition of the need for child guidance and parent guidance services is all but universal. The movement is limited only by financial resources and available personnel.

The Community Child Guidance Centers is characterized, first, by the integration of personal and group counselling. Each client is dealt with as an individual, but the counselling is done largely in a group setting. The accompanying educational process is, therefore, out of all proportion to the number of individual clients served.

A second characteristic of the Community Child Guidance Centers is its emphasis on the individual in his total family and community setting. Children are what they are in large part because of what other people are and have been.

A third characteristic is the importance given to enlightened common sense. Most parents are able to deal with problem situations as they arise, if

they are informed on the significance of behavior—the behavior of both the children and themselves. Hence, the importance of the educational process that accompanies counselling in particular situations.

A fourth characteristic of the Centers is the recognition of the value of preventive measures. It is even more important to guide people away from difficulties than it is to get them out of difficulties that they are already in, although this, too, is important.

Throughout these characteristics of the Centers is the understanding conviction that mental health can be fostered and that its fostering is of the utmost meaning to the well-being of persons and society.

## REPORT OF THE MEDICAL DIRECTOR

Rudolf Dreikurs, M.D.

This is the first anniversary of the Community Child Guidance Centers. Last year, a preliminary Board arranged the first Annual Meeting, on which occasion the new organization was presented. It may be necessary to recall briefly the history of its development.

The first Child Guidance Center—patterned after the Guidance Centers which Alfred Adler and his co-workers have conducted in Vienna and Europe since 1921—was established eleven years ago at Abraham Lincoln Centre, with the support and sponsorship of Dr. Reese. Since then similar Centers were conducted in several other settlement houses in Chicago, which employed the services of trained Adlerian counsellors. This arrangement proved ineffectual; the individual Centers did not have sufficient stability, as their existence was affected by changes in the administration of the settlement houses. For this reason the Individual Psychology Association of Chicago took over the establishment and maintenance of the Centers three years ago as its main activity. It soon became obvious that it was necessary to separate these two organizations, as public support was directed more toward participation in the Centers than to the Adlerian movement as such. For this reason it was decided in March, 1949, to set up a separate Board for the Centers, which would function for one year under the sponsorship of the Individual Psychology Association, and under its charter, but independent as an organizational structure. During this year, the preliminary Board resigned and gave way to a new Board, which includes a wide representation of community leaders throughout the City. Today we are at the birth of the new organization which will now obtain its own charter, independent of the Individual Psychology Association. The staff of the Community Child Guidance Centers will be still trained by the Individual Psychology Association, which will also be represented on the Board, to permit continuity of policy and techniques.

For the first time, four Centers were conducted throughout the year. A total of 129 sessions were held, 133 families and 295 children were enrolled for therapy and counselling. The total attendance was 1,391 children and 2,799 adults, of which 456 were teachers. The staff consisted of 5 counsellors (3 psychi-

artists, 1 psychologist, 1 adjustment teacher), a social worker, 3 alternating gameroom workers, 1 psychodramatist, 1 clinical psychologist (for testing), 1 clerical assistant. The Centers could not have functioned without the valuable and faithful assistance of volunteer workers to whom we are especially grateful. There were 4 recorders, 4 registrars, 19 gameroom workers, of whom 9 worked for the entire year.

The service rendered by the Centers consisted of group therapy. The total family was drawn into the counselling procedure, while gameroom and psychodrama was exclusively used for observation and therapy of the children. The whole community was represented through visiting parents, teachers, psychologists, and other interested adults. Some sessions had an attendance of up to 80 adults. It is difficult to specify the types of cases which were seen or dealt with. The only limitation which was set was the upper age level. We did not accept children over 14 years of age, with one or two exceptions. The youngest child was a half year before birth. There was no restriction in enrollment on the basis of the seriousness of the case. We did not make any distinction, to follow the terms of Dr. Thurstone, between a normal child and his problems and a problem child that might be considered pathological. We feel that any child's behavior is logical and understandable if we know how he interprets the experiences to which he is exposed. In this sense, all children can be considered normal, regardless of the gravity of their social maladjustment. Neither did we exclude children because of their low mentality. Retarded children need more and better care than those with average intelligence, and it was our obligation to help their parents meet the situation more adequately. As we are mostly concerned with psychological dynamics and educational procedure to improve disturbed social relationships within the family, we used psychological tests sparingly, relying on active agencies on the case, or using our own clinical psychologist.

One of the advantages of our services is the availability of immediate help, at a time when there are long waiting lists in other agencies. Only parents who enrolled at the end of the year had to wait for consultation for the next season; but they, too, received immediate help through participation in the group discussions. Another advantage of our services is the fact that in some Centers a wide cross section of the population was present: colored and white, different races and religions, wealthy and poor. This increased the awareness amongst the adults of the similarity of their problems regardless of the differences in family background. It helped to clarify the essential factors in the maladjustment of children and indirectly affected the whole community in its human relationships.

Considerable progress was achieved during the past year in improving the effectiveness of our Centers. A group therapy for mothers was set up, to which emotionally disturbed mothers who could not benefit sufficiently from counselling, and who needed help in their personal adjustment, were referred. A closer relationship with the schools was achieved. Principals of schools in the community accepted positions on the local Boards; school psychologists and adjustment teachers worked closely together with the counsellor and social worker; a number of teachers became actively associated with our organization,

giving their time and effort to the growth of the organization. The growing interest of the community was evidenced by the increasing number of members and supporters. The West Side Board was enlarged to include a true representation of community groups and received substantial support from agencies and civic groups in Austin.

During the past year, two training courses were held: training courses for volunteer workers, for two months in the summer of 1949, and a training course for counsellors, for four months in the winter. Twelve students, with the academic background and training required for counselling, participated in the latter course. This was the beginning of the training program which will insure that sufficient counsellors will be available whenever new Centers are opened.

The plans for the coming year provide for the discontinuance of the Downtown Center and the opening of new Centers in new communities. Originally, a Downtown Center had been the goal of the organization. When it was in operation during this past year, however, it became obvious that such a Center in the downtown area has disadvantages which were not anticipated. While the Center was well attended by parents, teachers, and students from various districts, the children enrolled in this Center were almost all extremely disturbed. It seems that only parents with more serious problems made the effort to bring their children downtown regularly. Consequently, there was an accumulation of most difficult children—and parents—which proved to be a hardship, not only on the counsellor, but also on the morale of the group. Never before in our experience have we encountered so many very young children—between the ages of 4 and 7—who were veritable tyrants, with frightened and intimidated mothers. In a community Center, we find a greater variety of more simple and of extremely disturbed cases, which presents a more accurate cross section of the type of problems found in almost every community. This offers a better opportunity for the training and education of the parents and teachers of the community. For this reason, the re-opening of the Downtown Center will be contemplated only when the organization is in a position to conduct an Institute on a larger scale, with daily sessions, research, and teaching facilities.

Our next steps will be the opening of new Centers. Communities on the North Side, the South Side, and of the north and west suburbs have indicated interest in the establishment of Centers. Negotiations are under way. Additional services provided by the Centers are contemplated, such as group therapy for adolescents. The West Side Suburban Center in Austin will probably be the pilot project, exploring the possibilities in this direction, as the Principal of the High School in that community, who is a member of the Board, is instrumental in arranging cooperation between the school and the Center.

The need for Guidance Centers of this type becomes increasingly obvious as the present deficiencies in child training reach the proportion of a national emergency, at a time when the existing facilities for treating parents and children are exceedingly limited. The child cannot wait until more psychiatrists and counsellors are trained and become available for individual therapy. Group therapy of the type used in our Centers provides the opportunity to reach large segments of the population with a minimum of professional staff. When our

goal of twenty Centers within the Metropolitan area of Chicago is reached, the needs of the parents and the children in this area may well be met, not only for the therapy of already severely disturbed children, but for the prevention of maladjustment and delinquency.

REPORT ON OPENING OF THE COMMUNITY  
CHILD GUIDANCE CENTERS  
OCTOBER 1950

The four Guidance Centers in Chicago all resumed their counseling services this fall, fully staffed by trained workers to serve the unusually high enrollment.

Two have moved to larger quarters and one is now located in a public school. A new Board of Directors has been organized for this Northside Center, which has delayed its opening until the return of Dr. Dreikurs from Europe.

Preceding the opening of the Centers, there was a training class for volunteer workers led by members of the staff, in which 34 were enrolled. Upon its completion assignments for recording, registration desk, and playroom were made.

The case load for all four Centers is 28 continued from last spring, and 32 new families. Many of the families are referred by school principals and adjustment teachers.

HAROLD P. MARLEY