



PARENTAL  
SURVIVAL  
AND THE  
HYPERACTIVE  
CHILD

— PART TWO

# CHALLENGES OF THE CHILD'S MIDDLE YEARS

*This is the second part of a two part feature on hyperactivity. The first part was published in the Winter 1983 edition. It focussed upon how to recognise hyperactivity and parenting the pre-school child who is hyperactive.*

*In this second part, the focus is upon introducing the hyperactive child to kindergarten and later to school. The authors offer practical suggestions on how to work with the child and his/her teachers to help the child through a difficult time.*

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## SCHOOL ENROLMENT

Your child's world expands greatly with school enrollment and, while necessary, this expanded world is full of pressures and has the potential of upsetting his/her progress. The classroom is a place where your youngster will be expected to conform, yet you cannot become a part of this except by your own initiative. It also is an environment that is difficult to predict, control or influence *unless* you put yourself in the situation and do so in a positive way. Fortunately, today's schools are becoming more accustomed to parental appearances and involvements which go beyond the traditional open house, parent-teacher organisations and disciplinary sessions.

In reality, school enrollment opens a Pandora's Box of troubles and potential trouble for your hyperactive youngster. Your child, who we shall call 'Pete' has learned the limits of home and neighborhood and you have arrived with him at a certain understanding. Your 'arrangement' for living is something like a zipper with periodic splitting apart and rejoining. The school, however, presents jeopardy to this arrangement and equilibrium, and you must make the years before formal school enrollment a time for action.

Part of this preliminary action is to locate a cooperative play group where you can participate and Pete can have some planned exposure to a group of children. An hour or two each week in such a setting where you are on hand as partner to the leader, as referee, or as an observer will serve to provide your youngster with group experience which will aid and assist him when he is enrolled at the 'big school'. Even if your presence is neither required nor welcomed in the setting, the shadow of your presence will be a steadying influence for Pete. Essentially, if available, the brief sojourn in the play group environment will reduce Pete's feeling of being catapulted into a group of children, a thrust which can be dramatic and traumatic for any child going into the formal school environment. The observations of and discussion with the play group personnel may help you, too, in your later contacts with the regular school system. Many parents, with some prior experience with play group personnel, seem better able to strike a positive posture with personnel in the school system rather than a girded-for-battle posture.

Whether you have the play group opportunity or not, the cake with four candles will suddenly be on the horizon. With birth certificate in hand, you will sally forth for kindergarten registration. Your feelings will be as mixed or varied now as they will be on that all important first day departure for school. For five years you have been living with Pete and loving him and, despite the side glances, open conflicts and muttered undercurrents, you have done the best you could. Is it any wonder your mind and heart hops, skips and jumps, as much as Pete's legs on this important day? You are very

aware of the decisions — right or wrong — that you have made; in some ways you feel that you must give an accounting of your actions. You ask yourself: Are you bestowing school upon Pete *or* are you bestowing Pete upon the school? You may feel relief as well as anxiety because now the responsibility for Pete will be shared, hopefully shared with competent people who will also 'understand'.

The underlying feelings of anxiety and apprehension likely are prompted by the hunch that there are still some personnel in the school system who will cause your youngster to be labeled, ignored or exploited. They are the teachers, trained in a piecemeal fashion, who will fail to respond to the challenge of Pete's condition and who will permit him to be exploited as the class scape-goat.

The registration day is *not* the day to share the facts and information on your youngster's condition; it is the time to request the morning or afternoon kindergarten session — whichever best suits his activity pattern. Many hyperactive children have an activity pattern or cycle which is fairly consistent unless there is a major disruption of the daily ritual. If your Pete's 'best time' is in the morning, that is, he is *usually* better controlled in the mornings, it is logical to request this kindergarten session. This kind of request is seen as reasonable in most systems, and it can be granted without much discussion, except where bus schedules and fixed administrative decisions preclude it.

If the kindergarten permits a pre-enrollment visiting period, you should available yourself of it, but make it short and pleasant. Time is a difficult item conceptually for your youngster, so it is well not to dwell on the kindergarten starting date or to over prepare Pete for kindergarten being something very special. The tasks of tying one's shoes, of personal cleanliness, or of listening carefully are all necessary and are a part of growing whether one enters kindergarten or not. Sometimes mothers tend to use one idea to strengthen another when no strengthening is needed; children learn to tie their shoes so they don't trip, or lose a shoe, but not as a 'pass' to kindergarten.

Most parents reduce anxiety for children by preparing them for new experiences; for the hyperactive child, preparation *usually* enables and enhances control. However, for your Pete or another hyperactive child, the preparation for kindergarten often goes awry. It may be hazardous to tell your youngster what kindergarten will be like, for the things you cite as important and a joy may be a pain in the neck to him. It is better to let him begin kindergarten with the child's eye for new experiences. Since this is his first real solo flight into an expanded environment, the patterns for getting ready and for arriving home should be constant, clearcut and ritual. All children benefit, for example, in having clothing selected and

laid out the evening before and, for your Pete, this is as necessary as wearing clothes. A calm preparation of things and self before will reduce the bedlam of the morning. Routine is not only necessary but can be a velvet-lined rut for both of you as you start the day. His memory is always good when it comes to remembering the one break in routine even when this is set against the one hundred times of doing things exactly as before!

The beginning of the year is an exceedingly busy time for the teacher, but you can let her know you will welcome an appointment with her when it is convenient. In kindergarten the unstructured setting makes it less imperative that this discussion occurs before the first day; in subsequent years the conference will have to happen in the first week of classes.

In kindergarten, the first weeks will be something of a period of discovery for the teacher and for your child. Very often the hyperactive child reacts with a beguiling enthusiasm or a passive resistance. Usually your first communication will be a telephone call from the teacher noting your child's polar reaction to all of the kindergarten activities. At least, contact will enable you to give the teacher a cursory briefing on Pete and will prevent any wholesale rebellion in the other children or a summary rejection of Pete. The hyperactive youngsters in the kindergarten group are usually overly aggressive, possessive of toys and very active; fortunately, the setting can accommodate this without immobilizing the whole group. The contacts with the teacher can give you a chance to discuss goals and to support and reinforce the plan you and the teacher agree upon as suitable for Pete.

In enrollments subsequent to kindergarten, you must make an overture which will enable you to become acquainted with your child's teacher. As mentioned before, this needs to be *before or during the first week of school*, if it is to serve the child's needs. This should be a face-to-face meeting in which you share information on your child's condition. You will need to be specific, giving examples of the danger zones as well as repeated assurance of your willingness to cooperate. Many parents, acting on the advice of the youngster's physicians or that of other professionals, do not give the school complete or written evaluations on the child. Labels can be prejudicial and to permanently label a child whose growth is fluid and promising is often an injustice. If your Pete receives medication, you should share this with the school nurse rather than have the fact relayed by the teacher. Some adjustment in scheduling may be required because school personnel — in most systems — are not permitted to be the agents for administering medication.

Complete honesty, however painful, should be the hallmark of this discussion with the teacher. Only you will be able to

inform the teacher on those areas where Pete's fuses are short. Too, the shared concern must be mutual so your attitude must be one of a willingness to cooperate and assist in all ways possible.

You will need to establish a working arrangement with the teacher for those 'bad days' when Pete is unable to take the normal and usual class activities in stride. Lunch at home, for example, may be all the separation the teacher and Pete need 'to make it' for the afternoon session. When he needs to be removed from the class, the reason is less important than the fact of removal. If the teacher sends you the message: 'Pete is having a difficult time' this should be sufficient for you to respond and take the prearranged action. Discussions can be postponed until later, as the important thing is to act on the teacher's judgement in the matter. Most often the message means Pete should be brought home for the balance of the day. Lectures and recriminations are out of place, as they will heat up the situation, exaggerate it, or prevent later calm discussion where Pete can learn from the incident. Sooner or later your youngster will want to talk about the 'bad day', whatever his level of understanding. Some discussion may enable your youngster to avoid the same trouble 'next time'.

Discipline for the hyperactive youngster always raises conflict and confusion. If it is to have meaning for the child, it must be appropriate, direct and immediate. It is appropriate when it is *not* for an error in judgement, for he has so little judgement; it is appropriate when it is a correction connected to the event. One might ask how the child will learn from repetitive lists of sentences or spelling words when the problem was pushing another child in the school hallway? Or, what connection is there between dumping two garbage cans on the driveway and losing your television-watching privileges? Is discipline a punishment to make the adult feel better or a learning opportunity for the child? These questions are of even greater significance in the adult-hyperactive child relationship because of his poor mental associations, poor memory and distractibility. If your Pete breaks school or classroom rules, this is the school's problem to solve with your being informed.

Very often the number of incidents requiring adult intervention will be fewer if trouble spots are anticipated. Can you 'arrange' for Pete to miss the field trip if it is too much for him? Can you get him to school just when classes start? Can you get him started home a few minutes before the other youngsters? These are some of the important anticipations you can make that will enable you and the teacher to reduce the number of trouble incidents.

In developing your working agreement with your youngster's teacher you will need to be candid and tactful. You might, for



example, note the ways this youngster could, without her awareness or alert attention, disrupt her class. You might note the poor attention span, the easy excitation, the need to move, the poor peer relationship and his glib tongue with adults. Miss Withit, Pete's teacher, will probably read this sharing as suggestive of your interest in her survival, too!

Miss Withit is probably typical of the kind you will draw in today's school. There are, however, a few teachers of the 'other kind' still around. If the teacher seems inexperienced or ill-informed on the hyperactive syndrome, you may need to challenge her with tactful comments about ways she might deal with Pete to make him 'less of a burden to her' in the classroom situation. Should she persist in thinking that you are permissive or that 'Pete is not trying', you may need to expand the discussion to include the school principal. This will re-focus the situation and make your interest and willingness to cooperate a matter of record. This joint conference would give you the opportunity to restate some of the earlier suggestions you made in your efforts to interest the teacher and to prompt the accommodation you seek. You might have noted your Pete should be in a front seat so he will be in front of the classroom activity and so she might keep eye contact with him. When he becomes fidgety she can ask him to run an errand or do something responsive to his need to move. She might establish clear paths of travel for him in the classroom (the route to the wastepaper basket or the pencil sharpener) to reduce incidents enroute. Or she might ask him to clean the blackboard. As these matters are discussed she may begin to see the minimum adaptations which will maximize con-

trols. Very likely the teacher will translate the seat position into his being first in line for any group movement in the halls or on the playground. In essence, as she begins to understand his inability to stick with activities and his need to move, she may discover other adaptations which can be made with no need for the rest of the class to be aware of them. The teacher may, for example, expect pupils to stand when reading from a book, yet it is a near impossibility for your hyperactive youngster to stand still, hold the book, and read with any degree of competence. Is it not possible other youngsters can read better when seated and when their hands are free? Some of these ideas may stir the teacher to an effort which will make the school hours more tolerable for her as well as for your child.

And there must be a firm commitment to keeping your youngster 'supplied' with the necessities in the school scene. Pete will use up a rather astonishing amount of school supplies and these should be provided rather than making the heavy usage a point of contention with the teacher. He will, for example, enjoy grinding up pencils in the sharpener, will make each crayon several mini-crayons and use more paper than the local newspaper. To add to the local color, he will wear as much paint as he uses, and will collect more junk in his desk than the local recycling station. The teacher will need to dole out these extra supplies in a way not embarrassing to Pete or disruptive to the class.

And a special word on paper usage. Miss Withit can help Pete by not allowing him to yield to his tendency to crush his paper and start over when his efforts go awry. His

tension and fatigue build rapidly as he writes, and many papers have a well-walked-on, slightly chewed look about them. Neatness, however, seems less important than the approximate completion of the work. The well-thumbed offerings he brings home warrant praise, and a wise parent will take the long view. Would you refuse a mink coat just because it was wrapped in butcher paper?

As you sit in the conference with your youngster's teacher these matters can be tossed back and forth in a friendly, non-defensive way. All of this is rather like the chips and dips preliminary to the dinner party. The small matters of pencils, crayons and papers are an addition to the main course: the conference time, limited as it must be, is the main course portion of Pete's growth, development and your mutual expectations.

Relationships with other children of his age group — his peers — will undoubtedly be a point of frustration to all, including your Pete, through the early school years. While Pete will approach other children — single and in a group — with enthusiasm and verve, the social situation may dissolve into bedlam. As he becomes excited easily, he rapidly gets giddy, even hilarious, with pushing and grabbing toys. This makes him 'Mr. Outside' very quickly — especially in group games. He will find a 'best friend' with some frequency and you will be pleased by his enthusiasm and interest. All too soon you will discover his newest best friend is either new to the group or 'another Pete' on the fringe of the play group. This can be bruising, too; for, as children can be compassionate and loving to other youngsters, they have a parallel capacity for harshness and cruelty. When the words which are provocative and demeaning get into the exchange you have to intervene in the relationships at home, in the neighbourhood, or in the school.

Because of your youngster's flow of 'best friends', you may be tempted to arrange friendships by inviting a child to lunch or by sending Pete to school with a treat or toy to push him up the popularity ladder. These parentally connived arrangements invite disaster and are the type of interventions which parents should avoid in the child-to-child relationship arena.

Very often the hyperactive child who relates well to adults will transfer some of his dependency. Parents often speak of the hyperactive child's tendency to seek out youngsters somewhat younger in the scheme of relationships. Apparently there is less pressure and more comfort in the non-competitive relationship with a younger companion and a comparable comfort in the dominance and direction of a somewhat older child. The first is harmless except for maintaining a developmental status quo; the second can be harmful if he appears to have a 'sitter companion'. Both will pass and, while both warrant awareness in the parents, intervention probably

will prove unnecessary.

Often your hyperactive child's 'very best friend' will be an adult on the fringe of his home or school environment. With careful listening you may be surprised to discover the much quoted super person, 'Sam', is the school caretaker. Only rarely are these exploitive relationships. Most often this super person is the one who has machinery which runs. And what parent can fault a Super Sam who has a riding power mower, or has interesting and noisy jobs to help with like putting down folding chairs in the gymnasium! Probably Sam accepts your Pete as a grandparent accepts a grandchild — a worthy human being to be accepted as he is without qualification or condition.

Other adult friendships will also develop. These are other teachers, such as those in physical education and art, and the school nurse. The physical education teacher can help your Pete immeasurably. You should take time to get to know these people. Your clues to their importance to Pete will be apparent in his talk of school. The teacher in physical education, for example, will undoubtedly be an ally who will work hard to have your youngster fit into the programme. The child usually is very fond of these special class opportunities which give him a chance to move. He will, however, be a bit of an itch because of his nature and because he becomes too involved. His offerings from the art efforts may be especially drab and dark, yet they are evidence he has stuck to the effort and completed the assignment. These types of special adult relationships can be marvellous for Pete because they entail fun activities and can be the glue to keeping him active in *all* school efforts. The art teacher may get some delight in the special 'Pete things' as she hears later of the playground set admiring his tempera fingernails after art class!

The actual school learning will be on a deficit basis throughout the primary school years, but you should regard each new school year as a fresh opportunity to reduce the deficit. Beware of the trap of trying to give Pete a head start by 'teaching' ahead in any area. You will be caught in the middle between Pete's acting-up or dreaming while the teacher covers this same material in class but in a manner different from yours. Your role is to reinforce and support what is taught in the classroom. This does not mean pressure on homework but supporting what is being done. You and the teacher might agree, for example, that you will copy the arithmetic homework and your youngster will do the problems; the arithmetic problems are more important than the copying. Your child fatigues rapidly and he has a better chance of completion if you copy and he problem-solves. If the teacher has more than one hyperactive child in her room, she may decide to hand them homework assignment slips because of the communication breakdown possibilities between school and home. This level of

cooperation will reassure Miss Withit, who is interested in lessening the detours and sidetraps as she pulls your Pete through the learning scene.

But Pete must have a life beyond school and you must have one also. Home management after long hours in school can be complicated by the fatigue of being in a structured situation. Home should be uncluttered and a welcoming place. Too often these children are overscheduled into other group experiences — Cubs or Brownies, Little Athletics, dance classes, etc. — and harmfully so.

*The hyperactive child needs less of such group extra-curriculars than most and needs none which are competitive.* Parents must learn to say 'no' with authority to these opportunities, especially during the school year.

Basic to this stability in home management and activity selection is the decision making. You must be informed and make decisions for him based on the frequency, duration and appropriateness of an activity. You can select those activities which suit your youngster's abilities and interests, yet are appropriate. Generally, parts can be as enjoyable as wholes; so, part of the circus, or the last part of the cartoons on Saturday afternoon, or the ice cream and cake phase of the birthday party are enough for him. Usually you will need to make these decisions, as he tends to over estimate this staying power in keeping control and must rely on your discretion and good sense. This applies to selection of clothing as well. *Remember, when you give your child the choice on the decision, you must live with the choice or the decision he makes.*

## THE FATHER vs MOTHER ARENA

When you selected a marriage partner you very likely considered that person's potentials as a parent to the children you planned to have. Later, as a couple happily anticipating your parenting roles, you psychologically prepared yourself for the roles. A part of that discussion may have been consideration of the ways you expected to improve on your parents' handling of you as a child. Yet in all of this discussion you had no cause to project yourself into the roles of parents to a child somewhat 'different' or one with very special needs. The reality then of having a child in this special needs group is always a shock to parents. It is for this reason the reality can almost immobilize you and seriously disrupt your emotional balance when confirmed by a diagnosis.

The first test of your ability to withstand stress, to adapt, and to emotionally accept the diagnosis your child is victim of the hyperactive child syndrome comes at the time of the diagnosis and in the hours, days, months and years which follow. The diagnostic evaluation and examination is usually prompted by the mother who has had the daily intimate tasks as child-carer through infancy and the pre-school years.

Often she greets the diagnosis at first with some relief because of her anxiety about being defective in the mothering role; later, she joins her husband in denying the diagnosis as they thrash about 'doctor-shopping and hopping' in the hope of a magical cure of the discovery of error in the diagnosis. Underlying this denial and the activity it prompts, is guilt about having such a child, grief about what this means for the future, and a quaking fear of being all the parent must be to meet the child's needs.

Too often, parents seize upon the glimmer of hope which inheres in the diagnostician's reference to the condition easing in early adolescence; this hopeful glimmer is then translated in to the idea 'he will grow out of it'. When this convenient reading of the situation is permitted to occur, the parents can avoid the accommodation the child's needs require. To assume a 'life-as-usual' posture is to invite tragedy and waste the child's potential for the future.

When you were told of Pete's condition, all of these kinds of feelings and ideas were probably a part of the situation. Your emotional reactions were complicated because of the confusion and indefiniteness about cause and the fact Pete looked like other children — his limiting condition had no physical fact to it.

Perhaps the period of denial and non-acceptance of the diagnosis was longer for Pete's father. As his father, you were busy in your efforts to provide for the family and you had less exposure to the daily demands of his care. You became more aware as you observed the physical and emotional exhaustion of Pete's mother. Her fatigue caused her to be less responsive — perhaps thin-skinned and short-tempered — in meeting the needs of the total family as well as your marriage relationship. While you sought to aid her and support her, you often found it difficult to discover ways to do so. Too often you reacted to her fatigue with anger as your whole life situation seemed geared to and dictated by one small child. Somehow you felt you should both be better able to cope so you alternated between anger and guilt over being angry.

As Pete's mother, you were often overwhelmed by the feeling you were expected to be all-things-to-all-people and this created both anger and guilt. Too often, all of the ordinary give-and-take in close relationships seemed to be heaped on Pete's situation, and this, in your mind's eye, was downright unfair.

The total situation was and is laced with such opportunity for doing battle it can, if unattended, destroy a marriage and a family. Both of Pete's parents need to be at one in covering his needs throughout childhood and they need to secure help from some emotionally neutral *outside* source *before* the total family situation erodes to the point of explosion or ultimatum. As Pete's father you should share some of the school conferences on Pete; as his mother

you should not be seduced by the information the teacher gives when Pete makes a small gain. The problem will not magically disappear, as it requires constant attention and continuous effort *all* through the years of childhood.

While the disagreement between you as Pete's parents is most likely to boil over in questions about management, it also inheres in the sacrifices each makes in adjusting, changing, or giving-up personally gratifying pursuits. For a father interested in outside leisure time activities for the whole family, some changes may be necessary. If a sailing buff, for example, Pete's father can easily anticipate the hazards. The changing and foregoing of pleasurable pursuits only happens at great personal cost to the individual and, if the person is to avoid an almost overwhelming guilt and anger, he or she must come to grips with feeling love as well as hate and resentment at the same time. Parents should realize it is normal to love a person yet deeply resent — even hate — the limits our responsibility to that person entails. If you have an aged and demanding relative, it is par to resent these demands and their intrusion upon your life, yet have a deep affection for the person.

Perhaps the important thing here is to recognize the deal with the numerous mixed feelings Pete's condition and needs prompt. If you do not manage these emotional factors with some security and maturity *or* seek the outside help to manage, you may not only fail Pete but yourselves as well. It is important you survive as individuals as well as a family.

### ABOUT MEDICATION, NUTRITION AND SURGERY

A discussion of the hyperactive child would be incomplete without reference to the avenues of treatment which go beyond environmental and situational accommodation. Medication can assist a large percentage of the youngsters victim of this condition, and much research has been done and is being done in this area. One of the most constant and confusing factors is the hyperactive child's *reverse reaction to stimulants and depressants*. For this child, the calming sedative or anticonvulsant is a stimulant and the stimulant is a depressant. If your physician prescribed phenobarbital, you both were likely surprised to find your child's agitation worsened; if he prescribed amphetamines or a combination of other stimulants, the youngster's gyrating and activity probably lessened. Ritalin may have been prescribed and may have proven helpful but it may have adversely affected his sleep.

Many parents resist *any* medication because of fear arising out of the drug abuse scene. However, medication may help to bring the youngster into the range of home management and make him a better candidate for learning because of reduced distractibility. Parents should understand

that there has been little evidence of habituation, addiction or withdrawal symptoms when stimulant drugs have been used as prescribed by a physician. Usually a period of experimentation is necessary to determine the types and amounts of medication appropriate and parents should be prepared to cooperate closely with the physician during this period. Recently, Pemoline, a drug known for 67 years and widely used outside of the United States as an appetite depressant and mild anti-depressant, is the subject of much research. The drug is non-addictive and is being tested on several hundred American youngsters between the ages of 9 and 12 in 21 clinics across the nation. The preliminary reports are favourable and an application is pending before the Food and Drug Administration to permit its sale commercially.

Some physicians and nutritionists suggest the addition of supplementary vitamins, especially niacin, and the offering of foods high in natural sugar have a salutary effect on the hyperactive child. They suggest that many of these youngsters are well served by such nutrients and specific foods, especially if the child's activity peaks at certain hours. Perhaps you have found that a couple of oranges given to your child have been helpful at that special hour when his activity level seems especially high.

Another course of treatment, advocated by some and strongly opposed by others, is psychosurgery. Essentially, this is surgery on the limbic system. Recently, a researcher on the faculty of the Washington School of Psychiatry, Doctor Peter R. Breggin, completed a 25,000 word copyrighted study on psychosurgery. The study was inserted into *The Congressional Record* by Representative Cornelius E. Gallagher of New Jersey. Both Doctor Breggin and Congressman Gallagher advocate the outlawing of psychosurgery in the United States just as it has been outlawed in the Soviet Union. Significantly, Doctor Breggin reports the resurfacing of such surgery, with hyperactive children one of the new target groups. His report is based on material presented by approximately 100 psychosurgeons who met in the summer of 1970 in Denmark for the Second International Conference on Psychosurgery.

Perhaps parents of the hyperactive youngster for whom psychosurgery is proposed will want to proceed cautiously and to consider *all* of the alternative treatment possibilities.

### EARLY TEENS AND LATER

With the advent of puberty and high school age, certain changes occur which will seem to you to be unexpected and fairly dramatic. By that time, your youngster will have gained a certain language facility and will have undergone a physical growth spurt. Too, his self-perception or how he

sees himself will have changed because he will have incorporated expectations and controls, and he will feel more competent. Most importantly, he will want 'to belong' to his age group and he will make an effort to muster all of the control he can in most situations. While he will retain many of his symptoms such as sudden furies, anger, stubbornness — these blend well with his peer group who are like this anyway so he does not feel 'different'. He will have learned, too, to avoid many of the people and situations which endanger his control.

Probably parents would be well advised to meet his volatility with a cool, detached calmness, as this may assist him in maintaining his control; another track is to help him by assuming a 'no compromise' posture on expectations. While the latter route may seem overly strict to some, it may be a real security-inducer for the child fearful of really going out of control.

Concurrent with the changed self-perception and a better blending into the teeny-bopper set, the child is helped by a changed school milieu. In high school, the opportunities are usually different from those of primary school. Your youngster, for example, is no longer confined to a single classroom and a single teacher; he moves about to more varied vocational and physical education activities. Because the school environment accommodates his need to move and be active, he seems

better able to maintain control and to meet expectations. Finally, the youngster may have some choices on scheduling and topics — opportunities denied him heretofore — or he may have his first experience with a male teacher.

You may observe your child has become more discerning and loyal in the matter of friendships and relationships. Probably for the first time his radar as to whether associates are dangerous to his equilibrium and control will be fully operational and as his parents you will derive some benefits. If his physical development permits, he may have the chance to engage in some of the sports activities which please him, such as swimming and athletics. If he has progressed to the level of some real competence in a sport, he may be able to compete in some competitive activities and not be overwhelmed by anxiety.

Whether maturational or situational, there surfaces during these early teen years a sense in the youngster and parents that there *can* be some order in the child's world. Despite strong residuals, the child may use his need for motion and activity to insure a certain social success. He may, for example, take up the drums. While this may seem the ultimate assault on the long-suffering parents, this fits well into the noisy, gyrating early adolescent scene so he is less 'different' than in the early years.

As a young adult with a sense of self and stability, your hyperactive youngster can

find his place with your continued patience and understanding. With your help he can engage in myriad vocational pursuits which are action occupations. It is only for the parents and the youngster to discover in an unpressured way what these routes are for him.

As his parents, you will have had little time or energy to reflect and feel gratification over the singular contribution you have made to turning him into a stable, productive adult able to manage what life presents to him. As time passes, and the immediacy of each day's demands recede, you *will* have time to reflect. You will remember the events which were really amusing, but you had no time or were too close to appreciate. You will remember him at three years old watching you pick pin feathers from the turkey, and when he queried as to what you were doing, his indignant comment: 'Momma, why you no tell me turkeys pin their feathers on!' Or you may recall his own wonderful brand of logic at age nine when he decided he didn't believe in God. When you asked him why, he said you had first erased the Easter Bunny, then Santa Claus, and just when he would 'get used to being good all the time', he expected you would tell him there was no God!

Most importantly, you will know you have enabled him to survive and this will be the greatest satisfaction after all those hard and troubled years of pulling and tugging with crises.



