

Finding Normal: A Temperament Prelude

I started graduate school when my first born was two years old. Ryan had a coveted spot in a small university run daycare center. It was well equipped; parents were required to participate and the staff was warm and supportive. Nevertheless each morning I had to get us both ready to get out the door I felt a bit unglued by the time I dropped my son off. He had skipped the manual on infancy and young childhood. He simply wasn't in any of them. From birth he slept little and woke often. He abandoned naps at an early age. He was the only child at day care who could not be induced to nap, ever. An early attempt at exchange childcare bombed out when the other mother (whose baby slept like a baby) handed Ryan back to me and suggested I paint his room lavender. Transitions of any kind were trying. He was very reticent. The head teacher was surprised to hear that at home Ryan sang the songs the other children were singing at school. He could not ever be coaxed she said, to participate in music with them. While he was stoic rather than disruptive she found his quiet refusal to engage in a fun activity disheartening, and perhaps worrisome. She had never, she said, encountered a child like him. I tried not to think about how many children she might have encountered. My pediatrician knew the challenges I was experiencing. She was not concerned but also had no suggestions. I once called her when Ryan was screaming persistently and asked if it could be in reaction to teething. She was adamant that it could not. A short while later a tooth broke through Ryan's gum. My mother said I had been just like Ryan, precociously alert, sensitive and exhausting. Once when in the middle of trying to get me to sleep while visiting relatives my bleary eyed mother came downstairs to ask her brother and sister-in-law if they had a hammer. They looked at her in alarm until my mother explained that the borrowed crib required a quick repair. On a cross country trip as a baby with four adults, my grandparents, a great aunt and my mother I was said to have worn out all the adults.

Chess and Thomas

The friend who rode with me to school suggested I read Chess and Thomas. In the 1950's husband and wife psychiatrists Stella Chess and Alexander Thomas (Thomas died at 89 in 2003 and Chess at 93 in 2007) were among the first to describe temperament in its current usage. Chess and Thomas began to question the popular belief that child behavior problems were the result of poor parenting, or more specifically, poor mothering. In their practices they observed parents who seemed to be doing an excellent job whose children were having difficulties and parents who didn't seem to be doing such a good job whose children seemed to be doing fine. They speculated that in addition to the influence parents had on their children, parents were also influenced by their children. These observations prompted Chess and Thomas to initiate a longitudinal study beginning with a group of 131 infants. This study led to the identification of nine distinct differences in how children respond to the world around them. Those differences reflect temperament, the how rather than the why of behavior. A child's temperament is their style of behaving. One child plays quietly while another talks and sings animatedly as he/she plays (intensity). One child whines and gives up in the face of frustration while another child persists (persistence, sometimes referred to as frustration tolerance). These are examples of temperament. Each of the traits can be placed on a continuum from high to low or from a mild to strong reaction.

Normal isn't Always Average

Most children's temperament falls in the middle of the continuum and it is that constellation of moderate temperament characteristics which is usually conveyed in parenting books and classes. A significant minority of children (10-15%) however, have temperament traits that fall on the outer edges of the continuum. Generally speaking, the more extremes there are in a child's temperament the more challenging they will be to care for and the less applicable standard advice is apt to be.

I learned that Ryan was low in adaptability, explaining his difficulties with transitions. Because he was also very withdrawing novelty held no appeal for him no matter how 'fun' it was. Withdrawing children react

negatively to novelty, any novelty; content is irrelevant. If given time and space without pressure to assimilate they may warm to novelty though Ryan's low adaptability, low activity level and high sensitivity all worked to heighten his reservations. On the other hand, children who are high in energy, even if they are also withdrawing and low in adaptability, may find novelty appealing because their appetite for life is so great that at least initially it often overrides their reservations. Later when the honeymoon wears off they may balk or protest (seemingly out of the blue unless you know how to read it) and want to move on to some other novelty. While discovering Chess and Thomas was a relief in that it offered me the first descriptions of normal children that included Ryan's behaviors, they offered little in the way of parenting advice at that time nor had any other parenting books that incorporated temperament issues been published yet.

Prevention and Early Intervention

I worked at Kaiser Hospital for awhile in the San Francisco San Bay Area. A lead staff psychiatrist had a keen interest in temperament and was put in contact with the East Bay nonprofit temperament agency I worked, for who in turn contracted to do temperament work for Kaiser. Parents of four month old infants had the option to fill out a temperament questionnaire for their baby and receive feedback in the mail or in person. Parents who were experiencing temperament related difficulties were able to receive ongoing education and support. While there is no such thing as an abnormal temperament, children who are temperamentally extreme are at higher risk of developing behavioral problems. When parents receive early individualized feedback this risk is greatly reduced. Learning to understand temperament and to choose parenting responses best suited to their child's temperament is huge for parents of temperamentally challenging children. Parents of temperamentally challenging children, who need the information and support the most, have the least available to them.

Assessing temperament is often a good first step when there are concerns about a child. It is a minimal intervention and sometimes with education and support, enough. Further interventions can be added if necessary. When parents call a therapist having already decided or having been already advised, often by a

child's teacher or other school staff that a child is in need of counseling it assumes a certain level of problem and need which in fact may not exist. When a temperamentally extreme child is not recognized as such and the parents and child aren't receiving appropriate support, that child's behavior can sometimes seem alarming. Parents and teachers may feel over their heads, especially when that child is compared with easier children. An experienced and nurturing head childcare teacher (although she apparently didn't have an understanding of temperament) told me she'd never seen another child like mine in response to what I thought of as a non issue (so he doesn't chose to participate during music circle time, if you are required to participate in a 'fun' activity how fun is that?). It doesn't take too many comments like that to get a parent thinking something must be seriously amiss. And such comments often take a much more serious tone than that one did. While certainly all behavior problems and parenting difficulties are not temperament based, every child has a temperament. A child with other issues, medical problems, learning disabilities, having suffered trauma, etc., will have responses and needs that relate to their temperament. A full understanding of that child's style of response and appropriate interventions will take into account that child's temperament.

Adults of course also have temperaments. A caretaker's own temperament can affect how they perceive and handle children of various temperaments. Adult temperament issues sometimes bring people to therapy either as an individual, maybe worried because he/she is so sensitive or has a hard time coping with change, or in relationships, such as when temperaments are different and partners feel that a different temperament is wrong or means their partner is being difficult. An understanding of temperament has helped me to appreciate normal differences and to honor more variations as normal than I otherwise would have. And Ryan by the way has turned me on to some great music in the last few years.