Serving Children and Families in the Inner Cities through the Development of Professional Human Services Workers

by

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There are three categories of need that must be addressed in the development of human services personnel for serving inner-city populations: (a) attracting and holding a critical mass of appropriate persons for this work; (b) determining the demands of the work and the qualities of the persons who are to do this work; and (c) preparing professional personnel who can meet these standards. This paper focuses special attention on the demands of the work and the qualities that must be developed in the professional personnel who provide human services to inner-city populations.

The Shortage of Human Services Professionals in the Inner Cities

Two forces appear to have contributed to the shortage of human service professional workers in the inner cities of our nation: the increased democratization of opportunities for members of ethnic minority groups to participate in the mainstream of economic and social intercourse; and the increased concentration and isolation of low-income African Americans, Hispanic Americans, Native Americans, and recent immigrants from Asia and other countries in our inner cities. The two factors are not unrelated. As upwardly mobile members of various ethnic minority groups have found increased opportunities and have improved their economic positions, they have also taken advantage of opportunities to live and work outside of the central city. In those inner cities that have not been gentrified, less upwardly mobile and less affluent persons have moved into the residential space left by those who have chosen to escape the inner city. The result has been large urban ghettos that are economically depressed and greatly lacking a variety of human services institutions and personnel.

For many years, those who have been motivated to help other people with their problems have gone into medicine, the religious ministry, social work, education, guidance, psychology, or psychotherapy. They have been influenced by assumptions such as the following:

- Educational, personal-social, and psychological problems tend to be reflections of aberrant conditions or patterns of function unique to or within the individuals or groups in whom or in which the problems are manifested;
- Personal-social, particularly verbal, interactions or relationships are the essential vehicles by which insight, changed attitudes, and changed behavior are achieved;
- Abrasive, difficult, or deprived atypical complex conditions of life are destructive to wholesome development, and people should be protected from them;
- Understanding, or rather the acceptance, of an explanation of one's problems in the context of one's reconstructed history or some psychodynamic assumption leads to resolution or reduction of the problem and changed behavior.

These are called "assumptions" because the evidence necessary for their support is sparse, if not nonexistent. They are not postulates developed as the result of tested hypotheses. While they seem reasonable enough, I have serious questions about each of them.

Environmental Factors and the Human Condition

Evidence suggests that most human problems are reflections of disturbed interactions between individuals or groups and the phenomena of the environmental field in which they exist.[1] Under changed environmental conditions, the particular problem may not be manifested. There are some conditions or disorders in human subjects which will result in aberrant behavior no matter what the environmental conditions. However, most of the garden variety maladjustments and problems reflect or signal environmental conditions which are incongruent with, or non-complementary to, the desired human condition.

It is doubtful that artificial or clinical personal social interactions are the source of changed attitudes and changed behavior, except in those interactions where new environmental conditions are created which require changed behavior, which results in changed attitudes and feelings.

I am fully persuaded that one's consciousness, one's attitudes, and one's feelings are products of environmental encounters—with "environment" defined to include the physical environment (objects, things, people, etc.), the perceptual or effective environment (those aspects of the environment to which one responds, including objects as well as conditions such as poverty), and the conceptual environment (including ideas such as mystic forces, love, friendship, and obligation).[2] Without these encounters, these human organismic-environmental interactions, human consciousness, and possibly even human life would not exist. Our tendency to focus exclusively on the interpersonal interactions of these interpersonal counseling contacts, and to treat the environmental interactions primarily as history, attributes greater weight than I can accept to the power of individuals—even if they are professional helpers.

The difficulties and complexities of conditions of life to which we attribute much of the blame for maladjustment and from which we would protect our clients may not be the culpable agents. In recent years, I have been considering the possibility that the destructive element is the sense of powerlessness that so often accompanies these conditions. I am less convinced than I used to be that poverty is demeaning; rather, it is the sense of powerlessness that is so often forced upon the poor in an effort at keeping them poor that is demoralizing and destructive. It is not so much the fact of being Black, or the segregated experience that has been our lot, that is handicapping to Black people. It is the sense of powerlessness that this society has systematically imposed on Black people in order to exploit them.

It is unnecessary to discuss my reservations concerning the extent to which explanations or "understanding" contributes to problem resolution or changed behavior. Our casebooks are full of examples of clients who can offer explanations of their conditions. Some of them are better at psychodynamic formulations than many of us. These efforts at fiction or reconstruction of history do

make some of them and us feel better, but we don't see much evidence that they are making our clients live better. We do see people living better as they begin to assert power, and participate in changing the environmental interactions which dominate their lives.[3]

Modifying the Environment to Meet Individual Needs

Mankind has existed on earth for millions of years. Until recently most of us have assumed that mankind will somehow continue to exist. However, our attention is increasingly focused on the possibility that what the destructive forces of the natural environment have been unable to do in the contest between humans and nature, manmade changes in the physical environment may quickly accomplish. We now come face to face with the possibility that without radical shifts in our relationship to our physical environment, mankind may be destroyed by the pollutant-induced changes in that environment. In these days of emphasis on correcting the pollution of the physical environment, what may not be as clearly recognized is the equally urgent need to correct and prevent further pollution of the social or spiritual environment.

The advanced technology of modern communication has created a condition in which the human spirit is constantly bombarded with contradictions of complex social orders; the atrocities of interpersonal, intertribal, and international conflicts; the inequities inherent in practically all of our social systems; and the richness of our cultural and technical accomplishments. Human beings, accustomed to far simpler social environments, have reacted to these inputs with habituation or adaptation. As these inputs increase in complexity and intensity, the process of habituation is likely to accelerate, and the processes of adaptation must become more complex.

Some observers see these processes reflected today in the following: (a) growing insensitivity to social and moral indignation or shock; (b) increasing insulation and isolation in personal-social interchange; (c) alienation from the concepts, institutions, and affiliations which heretofore have provided stabilizing points of reference; and (d) disaffection, or loss of a sense of faith in nature, in society, in

authority figures, or in oneself as continuing influential forces. These adaptations are probably enabling us to exist in a progressively threatening environment. They may also, however, be the mechanisms of our extinction, since adaptive behavior at one stage of development may be counteradaptive at another. Reptiles once started on a course of evolutionary adaptation. They gained in number and complexity of protective structures, until as dinosaurs they dominated the earth and the sea. But the adaptive armor developed in order to survive the rigors of that premammalian period became too heavy a superstructure to be supported by the accessible environmental resources. Or to put it differently, the dinosaur may have become extinct because its adaptation to one aspect of the environment precluded its effective utilization of another aspect which was an essential source of sustenance. Similarly, the protective adaptation of the human personality to the rigors of the increasingly polluted social environment may result in the isolation of humans from essential sources of support for personal and spiritual survival.[4]

What seems essential to our continued development and survival, then, is a concern with reciprocal adaptation. Our survival will increasingly depend on our capacity to adapt to a changing environment, and on our ability to adapt the environment to special needs without accelerating the production of pollutants. It is the latter half of this proposition that in part distinguishes humans from such animals as dinosaurs. We are capable of conceptualizing our environmental requirements and planning the modification of environments to meet those requirements. We are the only living creatures who combine the capacity to perceive reality, to change reality, to anticipate the outcome of our perceptions as well as our efforts at change, and thus to design and, to some extent, control interactions with the objective and subjective realities of life. It is in the quality of these interactions that man's destiny, individually and collectively, is determined.

The Individual and the Environment: Dimensions Necessary for Adaptation

We have noted that the human being, more than any other creature, has the power to change the environment to suit his or her needs, and thus is not limited, like other animals, to changing only himself or

herself to ensure survival. Keeping in mind this need for reciprocal modification, what, then, are the dimensions of the relationship between the individual and his or her environment which are essential for continued adaptation and development? What is required is a complex balance which must be maintained in three essential areas. [5]

The first dimension involves the balance between congruence and incongruence, which must be maintained in such a manner that the organism and environment are "at home" with each other, yet still in a state of sufficient tension that the relationship and its components do not become static. Thus it is necessary to maintain enough incongruence between the human and his or her environment to ensure this minimum tension, but always at the risk of an incongruence so great as to be confusing, frustrating, disruptive, and potentially destructive.

In what might be called the constancy-change dimension, the nature of one's interaction or experience with his or her environment must be sufficiently stable or consistent to allow for orientation of self with objects and phenomena, yet at the same time must maintain a certain level of and capacity for change so as to keep the system dynamic, and to support a perception and acceptance of change as an essential existential process. This state, which I choose to call dynamic-constancy, provides for change while simultaneously providing logic and stability on which the organism can depend. A central task of human intelligence in dealing with change is to recognize its many features. There exists at all times a minimum requirement of regular but modest amounts of change, which may occur without dissonance and may allow for easy adaptation. However, there are certain times when radical change may be required as necessary for the development of some phenomena. This degree of change may be necessary to dislodge a recalcitrant force or to re-energize a moribund system. The problem, of course, is to recognize the circumstances that call for which kind or what degree of change.

A third dimension involves the collective-idiosyncratic-needs balance, which we seek when we deal with the problems of recognizing, allowing for, and respecting individuality within the context of the

"essential" requirements of group survival. Obviously, it is not beneficial to either the individual or the society if he or she is developed in such a way that individual needs are no longer compatible with the survival of the group. On the other hand, group life is threatened and certainly will not be enriched if provisions are not made for the idiosyncratic needs and interests of the individuals comprising it.

Human Services Development and the Medical Field: A Comparison

The need for the establishment and maintenance of these three areas of ecological balance or personal-politico-social homeostasis has implications for what we do in the process of helping people with their problems. An approach which combines ecological and personal-social concerns seems indicated. The human services field has been greatly influenced by the traditional concern in the behavioral sciences with the characteristics and behavior of individuals and groups. Psychology, education, and social work, in particular, have tended to neglect the study of the characteristics and behavior of environments in which people develop and learn.[6] Our strategy has been to work on the individual directly to make a change within the individual, and seldom to modify the environment or to involve the individual in the deliberate modification of the environment to more appropriately complement unique personal developmental needs.

Counseling and Guidance

All of the helping professions in many ways parallel the medical profession in its development as such they may be moving in a patter nsimilar to the development followed by that profession. Let us review some of that history. One of the earliest conceived goals of medicine was the control and elimination of evil spirits, with the witch doctor standing as the symbol or practitioner of the science. In a sense, guidance in its early days was also concerned with evil spirits as causative agents, with moralistic exhortation serving a function parallel to the witch doctor's incantations. It was not by accident that the religious leader was the first chief dispenser of guidance and continues to function actively in this field.[7]

A somewhat higher level of scientific procedure was reached in medicine with the introduction of herb therapy, which involved the identification and administering of substances in nature which seemed to

be associated with recovery in the infirmed; in the guidance field, information came to serve a similar purpose, with the emphasis on supplying the specific information thought necessary to adjustment and decision-making. In guidance, the parallel to medicine's treatment with herbs was our treatment with information.

As scientific knowledge increased, surgery became the primary technique in medicine, its purpose being to correct disordered physical conditions causing illness or interfering with normal functions. Surgery so dominated the profession that its importance came to be reflected in the title, "physician and surgeon." Similarly, counseling came to be the technique of central importance in guidance, the procedure being directed at emotional disorders causing maladjustment or interfering with functioning. Counseling so dominated this profession that "counseling and guidance" came to be the common title by which the profession is known.

With the development of the germ theory of illness, germ control became a central concern of medicine, and growing success in the control and treatment of germs accounted for major strides in the profession. Anxiety control became a similar concern in the field of guidance when anxiety came to be considered a central feature in maladjustment, emotional disturbance, and mental illness. The treatment and control of anxiety greatly influenced the practice of guidance despite many admonitions that this technique constituted psychotherapy and was beyond the scope of guidance. Nonetheless there hardly exists a counselor who does not directly or indirectly turn attention to the control, treatment, or utilization of anxiety in his or her work as a guidance specialist.

Supportive Therapy

The next development in medicine, supportive therapy, was made possible as a result of germ theory. Supportive therapy was aimed at strengthening the organism as it naturally combated germs by three methods: (a) enriched nutrition; (b) control of environmental conditions to reduce the competing demands on the system; or (c) the introduction of drugs which directly attacked germs or provided support

for the system. The field of guidance was influenced by similar methods, also known as supportive therapy and also utilizing drugs for treatment of certain conditions. Just as germ theory influenced the course of medicine, so anxiety theory led practitioners in the guidance field to develop supportive procedures designed to: (a) provide psychological support as the individual struggles with personal anxieties; (b) structure the environment in order to reduce the competing demands on the individual; or (c) attempt to insulate the individual from the disruptive effects of anxiety, as in chemotherapy with the use of sedative drugs. We have not yet discovered, in this area, a chemical treatment for the anxiety itself.

Public Health

Germ theory was also responsible for a further development in the field of medicine, public health. When correction of diseases through the application of germ theory proved to be inadequate, it became clear that preventive measures were needed. Medical specialists began to turn their attention to the treatment of conditions which produce disease. When malaria became a health hindrance to the exploitation of underdeveloped peoples by the so-called civilized countries, attention was turned to the control of the mosquito and the swamps in which it breeds. When the source of tuberculosis was understood, steps could be taken to correct the conditions out of which it developed. The effort to change was influenced by a similar concern for mental hygiene and community mental health. As the causes of emotional disturbance and mental illness were increasingly recognized to derive from the life experiences of the victims, the mental hygiene movement became prominent in the schools. Increasingly, mental hygiene specialists and the communities they served turned their attention to eliminating conditions which might create problems or interfere with wholesome development. Racial and economic discrimination became matters of public concern, and the concept of the democratic, as opposed to the authoritarian, classroom was given some attention. The theories of Dewey gained prominence, and educators came to recognize the importance of the student's learning to appreciate himself or herself and his or her relationships with other people. The conditions under which people lived began to draw almost as much

concern as mental illness itself, and all aspects of school service were seen as part of these conditions, influencing the children equally with their classroom experiences. It should be emphasized, however, that at this stage the ideas and theories were considerably more honored than their practice.

Prevention

This concern for the prevention of disease and disorder through control of physical and social health conditions came to be reflected in an equal concern for developmental processes. In medicine in the current period, for example, pediatric specialists are trying to change their image as a group of doctors concerned only with diseases of children to that of a medical specialty concerned with the child's total course of development and the contribution this makes to health or illness.[8] Pediatricians on the cutting edge of the field are increasingly viewing themselves as specialists in environmental and developmental medicine. As such they are concerned on the one hand with the monitoring and management of developmental processes and related environmental conditions, to the end that optimal health conditions prevail, and on the other hand with the manipulation of these processes and conditions, to the end that disease and malfunction are corrected.

We see a similar trend in guidance, where the natural and directed development of young people is increasingly seen as the field's principal concern and where the study and manipulation of environments are increasingly viewed as crucial vehicles for the achievement of guidance objectives.[9] Concern with theories of career development and concern with the theories underlying social development reflect the growing emphasis in the field on understanding the developmental process as a first step toward the goal of directing that process. In my own work, drawing on philosophical materialist concepts, I have argued for years for greater attention to the influence of environmental-organismic interactions on development and the need for guidance specialists to concern themselves with the analysis, design, and control of environmental encounters. When this concern is combined with an understanding of the developmental process, and the two are used to complement each other rather than being left to chance, we will find that

we have provided the basis for more successful guidance work, and that means the opportunity for making real differences in the lives of young people.

This concern with environmental encounters in medicine and other human services, and a reconsideration of the nature-nurture controversy, should lead to greater attention to the interaction between intrinsic and extrinsic factors involved in the development of human behavior.[10] This concern with the interactive nature of these many factors is likely to lead to a confluence of interests and division of labor within these professions, with all being concerned with human developmental ecology, with medicine continuing to be focused on physical and biophysiological functions and the others focusing on psychological, sociological, and political/economic vectors, where the quality of function is largely determined by the nature of the individual and the individual's reciprocal relationships with the vectors operative in the individual's existential field (his or her perception of the people, objects, conditions, and structures of his or her environment).

The Developmental Ecology Model

For all of these professions, the history of knowledge and of human development makes it clear that the dynamics of the ecosystem (the living community and its nonliving surroundings, both in their objective reality and as they are subjectively perceived) should be and will be their ultimate joint concern. In a paper that I wrote some 25 years ago, I called for a turn to a new knowledge base for the human services. I called it human developmental ecology.[11]

In order to understand the relevance of the ecological model, it is helpful to review the role the system plays in providing the physical, psychosocial, and sociocultural phenomena necessary for one's successful adjustment to one's environment. Within any system, both supportive and restrictive forces are present, facilitating or interfering with reception of the basic life supplies and placing the population at varying degrees of risk. It would appear, then, that the central functions of physical, mental, or social health workers are to assess these forces and to examine their interactions in order to develop preventive

measures to preclude serious disturbances in or restore the homeostatic balance between humans and their environment. This is not an easy task. In its essence, it is similar to the task of applied biology that ecologists have been attempting since the days of Haeckel.

Basically the ecological model provides a synthesizing function when superimposed on a social system. By providing a conceptual frame encompassing the human and nonhuman environment, the model offers a framework for gathering data of a multidisciplinary nature without disturbing the natural interplay of environmental forces. Rather than the operant approach of behavioral psychology which attempts to control certain forces and concentrates on events and processes in reference to contrived data, ecology employs a transducer data system in which conditions "in situ" are assessed. This kind of dynamic analysis is needed by the behavioral specialist who is trying to examine many of the environmental forces impinging on the individual's behavior and also the status of his or her adaptation to the environments in question—the school, home, community, etc. While the individual is being understood, the model simultaneously permits the worker to examine the environment, looking for ideas for changing the total structure, redefining the goals, and exploring the ability of the system to survive in its present state, the ability of the student to survive in that state, and the potential of both for changed existence in improved states.

In addition to integrating the physical, psychosocial, and sociocultural milieu, the ecological model is based on evolutionary principles stressing the process of development. By allowing the analysis of both structure and function, the model is congruent with the developmental nature of the learner. An essential weakness in much of our work has been our focus on the assessment of the status of the individual in terms of achievement level, personality type, and measured intelligence. These procedures arbitrarily freeze and extract isolated evidences of development or "learning," negating the dynamic character of the teacher-learning and developmental processes. The result is that we view the data as they

are received in static categories, while what is more helpful to the improvement of the developmental process is the way in which the person is functioning in the maintenance of progressive equilibrium.

All of the professions concerned with the actualization of human potential must place greater emphasis on primary prevention, while continuing to support both secondary and tertiary methods of intervention. Primary prevention seeks not only to lessen the impact of harmful forces and immunize the population from their effects as do tertiary and secondary methods, but also to eliminate these harmful forces from the environment.

At first the focus of the ecological model on the individual primarily as a member of a community or other organizational system may seem incongruent with our professed concern with the development of the individual. But such concern does not limit the worker to interacting with individuals only as members of groups. The ecological model permits us to be truly respectful of the individual by placing greater attention on the multiple forces impinging on him or her and to help the individual grow through the adequate definition and control of the effective environments which are unique to him or her. Mounting evidence suggests that a substantial impact in reducing risk can be made on individual development by altering deleterious aspects of the system in which the individual functions. The developmental-ecological model makes understanding the system and its multiple interactions equally important to understanding the individual, and makes control and modification of the system crucial to the development of the individual, and uniquely appropriate as a model for the reconceptualization of approaches to guided behavior change.

Professional Tasks of Urban Human Services Delivery

What are the professional tasks of human services delivery in modern times and especially in our inner cities? They should be:

- to make expanded alternatives available for choice referable to subjects' own development;
- to optimize decision behavior in these expanded situations of choice; and
- to facilitate development and movement toward the objectives specified by these choices.

Each of these tasks has a dual focus: one on the individual, the other on the environmental field in which the individual exists. Having been greatly influenced by the early medical model, the other human services have focused almost exclusively on the individual: What does he or she bring to the situation? What predictions can be made relative to the individual's function? What can we do to change the individual? The early individual psychological model is now being challenged by the developmental-ecological model as a more appropriate frame for the conceptualization and implementation of guided behavior change. Put simply, the choices an individual makes and the quality with which these choices and personal total development are implemented are largely dependent on the nature of the interaction between whatever is given or possible in the individual, and that which is given or possible in the system in which the individual functions.

Implications for Human Services Professionals

With this framework, it is possible to examine some of the implications for human services professions:

1. The logical first step is a shift from appraisal of individuals to appraisal of environments or individuals in environments, with attention to such questions as, "What is the nature of the conditions of learning and development?" And, "What is the reciprocal relationship between this individual and his or her developmental-learning environment?" The new focus calls for a shift from the study of pupils or clients to the study of systems—the family as a social system, the school as a social system, the plant or office as a social system, and education and development as social processes.
2. Also required is a shift from the assessment of behavioral product to the assessment of behavioral process. With less emphasis on quantitative summary and classification, the guidance specialist will examine the nature of intellectual and social functioning for the individual and describe those functions qualitatively.

3. This shift in focus of appraisal will result in a movement away from prediction to prescription. The more sophisticated and sensitive appraisal process will provide information, making possible the prescription or design of learning experiences and learning environments. This should be followed by a shift from identification of and placement in available opportunities to the creation of and placement in appropriate opportunity situations.
4. The educational function should be vastly broadened from our traditional concern for the discovery of the talented few to the development of talent in all. This entails a fundamental commitment to those policies and practices which ensure universal optimal development.
5. In education, counseling, social work, and related areas of services delivery, we will also need a shift in method from didactic exhortation to supported experience, discovery, and modeling as vehicles for learning, with more attention given to use of naturally occurring or contrived environments to provide interactions supportive of learning and development in specified new directions.
6. The ecological model implies a shift from interpretation to environmental orientation as the principal focus in counseling and other forms of directed learning. The skills the behavior change specialist helps to develop in young people should include the use of environmental clues and relationships to analyze and interpret behavior and experiences, to manage information, and to bring order to confusion and chaos as essential steps in problem-solving.
7. Emphasis on consultation should come to be greater than emphasis on counseling, and the focus in consultation should include active efforts to influence persons and groups who have the power to make necessary and relevant changes in the conditions which determine the course of the subject's life.
8. In addition to these changes in focus and method, a significant consideration is style; namely, what is needed is a shift from diplomacy to advocacy. Our clients don't need so much to be apologized for and have their troubles explained away, but need to be more actively involved in the decision-making processes that control their lives. Their rights need to be more appropriately defended, and

opportunities for meaningful involvement need to be more vigorously advanced. Equally important, the role of the professional in the human services should not be that of ambassador for the establishment, conning clients into cooperation with the system, but that of ombudsperson protecting the individual, the family, and unprotected groups from accidental, incidental, or intentional abuse by the establishment or its representatives.

9. Finally, we will need to bring about a shift from a primary concern with socialization to a major concern with politicization. Probably one of the most important contributions we can make to the optimal development of disadvantaged people is to help them to learn not only what is expected of them by the social order (the traditional concern of socialization), but also how they can effectively use themselves in relation to other people to cope with the systems which in large measure control their lives. Increasingly, I see social coping and systems management or systems maneuvering skills as the skills essential not only to the development of an adequate concept of self, but also to future survival. This means that participation with inner-city clients by the professional workers who serve them in the politicization process must be raised to the level of urgency, if their life chances are to be improved.

Conclusion

In the present climate, as professional workers and representatives of the institutions by which we are employed, we often appear to be contributing more to the separation of this process from the main line of human service and development. Low-status members of our inner cities often move vigorously on this front without us. Too many of us have lined up behind the protectors of the status quo. Conservation is an essential process and can be a respectable stance. However, at present, too many of our disadvantaged fellow citizens see this concern as a camouflage for advancing executive, economic, judicial, and police repression. Under these conditions, when they proceed without more tutored guidance, their need for politicization sometimes leads them to express their protest in irrational and explosive ways. But as professional specialists in the human services, concerned with the improvement of their conditions and

democratic change, we cannot turn our backs to their endeavors or join the opposition against them. We must join with them and hope that we will influence them and that they will influence us, as together we seek to make our inner cities places of hope, of opportunity, and of humane community living.

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[1] In this chapter, an interactionist perspective with respect to the nature and orgins of human behavior is asserted. This position is elaborated in the chapter by Edmund W. Gordon and Melissa P. Lemons "An interactionist perspecitve on the genesis of intellignece" which was published in Intelligence, Heredity and Environment; edited by Robert J. Sternberg and Elena Grigorenko. Cambridge University Press, New York: 1997.

[2] Bronfenbrenner, U. (1979). The Ecology of Human Development. Cambridge: Harvard University Press.

[3] Alexander Thomas and Samuel Sillen, Racism and Psychiatry; Brunner/Mazel, Publishers; New York; 1976.

[4] This notion of double edged behavioral adaptations which may be constructive at one stage and destructive at another is more fully developed in my paper, "The Human Aspects of Racial Conflicts," which was published in The Dimensions of Human Conflict, edited by Ross Stagner, Wayne State University Press; Detroit, Michigan, 1967.

[5] See Alexander Thomas and Stella Chess, The Dymanics of Psychological Development; Brunner/Mazel, Publishers; New York, 1890.

[6] Barker, Robert, (1968). Ecological Psychology: Concepts and Methods for Studying the Environment of Human Behavior. Stanford, CA: Stanford University Press.

[7] Some of these parallels between the fields of medicine and guidance counseling were initially identified by Gordon in an article published in The Counseling Psychologist, 1970, Vol. 2, No. 2, as "Perspectives on Counseling and Other Approaches to Guided Behavior Change."

[8] Melvin D. Levine, William B. Carey, Allen C. Crocker, and Ruth T. Gross, Developmental Behavioral Pediatrics; W.B.Saunders Company, Philadelphia; 1983.

[9] Edmund W. Gordon, "The Guidance Specialist and the Disadvantaged Student," in Guidance for Education in Revolution; David Cook, editor, Boston: Allyn and Bacon, Incorporated; 1971.

[10] . op cit. See note #1, Gordon and Lemons, 1979.

[11] op cit. See note #7, Gordon, 1970