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Client-Centered Behaviorism with Children. Review of *Working with Troubled Children*

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Client-Centered Behaviorism with Children

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Victor Savicki is associate professor of psychology at Western Oregon State College (Monmouth, Oregon).

Rosemary Brown is child development specialist in the Salem (Oregon) Public School System.

Product

Working With Troubled Children Victor Savicki and Rosemary Brown New York: Human Sciences Press, 1981. 408 pp. \$24.95

History

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Abstract

Reviews the book, *Working With Troubled Children* by Victor Savicki and Rosemary Brown (1981). This book provides an excellent introduction to basic communication skills, especially as applied to children. It is rich in clinical insight and experience. Many of the discussions centering around specific intervention strategies (e.g., confrontation, using reinforcers) provide the reader with the type of details necessary for program implementation. A weakness in this clinical approach is its coverage of the behavioral area. Overall, the book represents a good attempt to combine somewhat divergent (and occasionally contradictory) practices. (PsycINFO Database Record (c) 2017 APA, all rights reserved)

Keywords

intervention strategies; client centered behaviorism; communication skills; troubled children

Review Text

Recent years have seen a continued search for an effective clinical approach to human problems. This quest has led clinicians and writers (e.g., [Lazarus, 1976](#)) to acquire and integrate a variety of applied procedures from somewhat disparate theoretical camps.

Although Savicki and Brown's application of this growing movement to the treatment of children is not entirely novel ([Gardner, 1977](#)), it is reflective of our eclectic, or to use the author's term, *pluralistic* times. Unlike Gardner's emphasis on the behavioral end of a behavioral-humanistic continuum, Savicki and Brown's book clearly favors the latter end, both in theory and practice.

The contents are structured by a training sequence divided into four basic parts: A discussion of personal qualities and characteristics of the therapist; a description of basic communication/interview skills (e.g., attending, probing, reflecting); a relatively brief section on behavior modification (less than 20% of the book); and a discussion of treatment-related issues such as using groups and play for intervention. As the authors acknowledge, their approach represents a skill-oriented, nuts-and-bolts guide for people who work with troubled children.

The book provides an excellent introduction to basic communication skills, especially as applied to children. It is rich in clinical insight and experience. Many of the discussions centering around specific intervention strategies (e.g., confrontation, using reinforcers) provide the reader with the type of details necessary for program implementation. Savicki and Brown avoid the common tendency of describing how many strategies *should* work and instead tell how they *do* work. The reader is given innumerable preventative as well as remedial considerations for implementing clinical procedures in the "real world." The authors include material often not covered in similar books: using time-out from stress as opposed to time-out for inappropriate behavior; dealing with grief and other transitional states; being sensitive to the child's basic physical needs; and using physical restraints.

A weakness in this clinical approach is its coverage of the behavioral area. Procedures are emphasized at the expense of a fuller elaboration of theoretical underpinnings. This chosen direction may make strategy implementation and, more importantly, trouble-shooting efforts somewhat difficult for therapists unfamiliar with learning theory. The authors' reason for this omission is that they wanted to make behavior modification more palatable for those who may have strong negative reactions to it, and thus encourage its use. Whether this approach will yield successful clinical experiences with behavioral procedures for such individuals is questionable. Respondent-based treatment paradigms such as systematic desensitization are also ignored. The second major weakness is the book's format, which leaves to the reader (or professor) the responsibility to integrate. For example, behavioral observation and treatment are discussed independently and are literally

separated by 140 pages of communication skills issues. The logic that traditionally ties these strategies together (i.e., functional analysis) is missing.

Overall, the book represents a good attempt to combine somewhat divergent (and occasionally contradictory) practices. Such an effort will, one hopes, encourage future work toward developing an integrated, "holistic" approach for the helping professions. Because of its clinical richness, the present book should prove interesting to more experienced clinicians, although probably it is most suited as an introductory text for students entering the helping professions.

References

- W. I. Gardner Learning and behavior characteristics of exceptional children and youth: A humanistic behavioral approach. Boston: Allyn & Bacon, 1977.
- A. A. Lazarus Multimodal behavior therapy. New York: Springer Publishing, 1976.