

(3-3) Cautionary Tales: Looff Synopsis

Instructions: Read the following synopsis of David Looff's Appalachia's Children: The Challenge of Mental Health.

David H. Looff. (1971) *Appalachia's Children: The Challenge of Mental Health*. Lexington, KY: University Press of Kentucky.

This book is based upon the author's experience providing clinical psychological services to 287 families in a four-county areas of Eastern Kentucky (Clay, Jackson, Lee and Owsley Counties) from 1964-1970. In addition to his clinical data on "psychologically disturbed" children, Loof collected data from 12 Appalachian families with children who showed no signs of psychopathology. Interviews and observations were conducted in the communities, at the homes of children, and at school. Finally, he collected mental health data from a non-Appalachian urban sample as a "control" group. Loof also relied extensively on Thomas Ford's survey of Southern Appalachia and Jack Weller's *Yesterday's People* for general information about regional context. This evidence provided the basis for several conclusions about how childrearing practices and regional culture result in specific patterns of psychopathology. Specifically, he concluded that regional familism and childrearing practices explained the prevalence of certain types of psychological disorders (such as separation anxiety, phobia of school) and the absence of others (such as autism). He also provided several suggestions about improving mental health services in the region.

Excerpts from Looff:

On the topic of the book and generalization:

"This is a book about the children of Eastern Kentucky. By extrapolation, it is also a book about the children of the Southern Appalachian region, of which Eastern Kentucky is an integral part, and it may in the end reflect on the lives of children all across that wider region we call the rural South. *What I attempt to do here is to organize and draw conclusions from the impressions I have gained as a clinical child psychiatrist engaged in fieldwork in Eastern Kentucky over a six-year period, impressions both of child development in the area and of the results of that development—the mental health or mental disorder of the children themselves. Thus I present my perceptions of the ways in which present-day Eastern Kentucky families raise their children and my clinical conclusions concerning the kinds of adjustments to life that these children make...*" (our emphasis; p. xiii)

"Overall, in this book I try to demonstrate the profound need for increased concern about what is happening to the rising generation—the children of Eastern Kentucky, the children of the Southern Appalachian region, and the children of the rural South. What kinds of persons are developing here, capable of realizing what future opportunities in their local or national setting? It is on this question, above all, that our clinical observations focus our attention." (p. xvi)

On bias and generalization:

"As our work in the project's psychiatric field clinics proceeded, we found that we were gathering a great deal of data about what seemed at first to be quite different, or discrete, syndromes or clusters of mental disorders in the children, but we later came to view them as

similar beads on a single developmental thread; to understand each cluster as being more kin to than separate from the others, and the entire group of entities as being outgrowths of the unique developmental themes of the region in which the children were growing up. At this point, it seems crucial to indicate that our clinical studies did not represent epidemiological data on all mental disorders of all the children in the area served by the project during the six-year period. I should also say that there are other biases—those arising from our individual background interests and kinds of training as psychiatrists and social workers—which affected how we as clinicians selected certain data as we met with many children and their families over the years. Therefore, the generalizations that I draw from our large clinical sample to what other families and children are like are to some extent biased.” (p. xv)

On the importance of context:

“The Children described in this book are in a real sense not ‘all children.’ Since no child grows up in a vacuum, the children of Eastern Kentucky cannot be understood apart from the historical, geographic, and socioeconomic characteristics of the area in which they grow. Knowledge of the children requires some knowledge of the lives of parents, teachers, and the many others upon whom they are dependent. Moreover, the behavior of any person over his life-span is more complex than any of us can imagine. Given this as fact, the best I feel I can do is to muster confidence that developmental order is to be found here; that from the facts we gather we can discern relevant forces and factors that enable us to compare the early and later life relationships of these children. Here our own clinical work in child development and mental health in Eastern Kentucky complements what has been observed in the past about the structure and functioning of Southern Appalachian family life and about forces in the development of the region itself. *Our work and this book represent, therefore, an attempt to extend what is already known about this particular people and their region into the area of their children’s mental health.*” (our emphasis; pp. xiii-xiv)

On mental health:

“...I, along with many others, view mental disorders as social phenomena much more than as objective, constitutionally given conditions of individual persons. Mental disorder—or mental health—is firmly embedded in the social matrix.” (p.xiv)

On Appalachian culture:

“Much of the writing on the life-style of the Southern Appalachian highlander...consisted largely of a careful cataloging of his methods of adapting to his circumstances. These writers generally see the mountaineer’s attitudes as having developed primarily during the last century, but being maintained largely unchanged to the present day. Many of these writers have contributed much of value in describing the attitudes, values, mores, and adjustive or coping methods people characteristically used in the southern mountains. Much of this writing has been focused on the lifestyle of the very poor or of the region’s working class. However, most of the writers assert that a substantial legacy of values, standards, attitudes and adaptive methods has come to Appalachian people of all three socioeconomic classes from their common mountaineer background. . . . As an outsider, he [Jack Weller] has gained objective insights into many aspects of the minds and lives of southern highlanders . . .” (pp. 157-158).

“Weller and the other writers cited focus initially on the fierce independence of early settlers in the southern mountains. . . His independence became individualism, a more self-centered trait. . . A second significant trait of the mountaineer is traditionalism. He is bound to the past, its

traditions, ideas, and values. . . . a third trait, fatalism, was gradually developed as a way of coping with the chronic sense of failure experienced by highlanders as their land limited and defeated him. . . . A fourth characteristic of the mountaineer was his action-orientation. . . He disliked steady, time-oriented jobs, regular schooling. . . and other activities calling for a methodical application of time and personal effort. Another characteristic of the mountaineer was his stoicism. . . the mountaineer turned inward, covering his intense anxieties with denial and silence. . . . A final characteristic of the mountaineer . . . was his person-orientation. The highlander personalized his thoughts, words, actions and relationships. He was not oriented toward objects—outside goals, principles, things, jobs—but to people. . . . He was much more oriented to keeping his friendly relationships with people than with doing business or keeping to a schedule.” (pp. 157-60).