

Editorial

Many children and adolescents do not have the peaceful and carefree youth they are entitled to, because they have been exposed to adverse environmental influences that disturb a normal development. These influences may be caused directly by adults whose task it is to protect these children, but sometimes traumatic experiences, including those caused by natural disasters or war conditions, are beyond the control of parents or other adults. The first three articles of this issue pertain to traumatic events that have a great impact on the child's development. The Practitioner Review in this issue by Perrin, Smith, and Yule provides the most up-to-date summary of the literature on the assessment of Post-traumatic Stress Disorder (PTSD) in young people. Considerable controversy has surrounded PTSD since its inception into the diagnostic nomenclature. The authors make the case that whatever the limits of the diagnostic criteria, children do indeed suffer from post-traumatic stress reactions. The authors draw on their extensive experience working with children exposed to war, natural and man-made disasters, and domestic violence, to give the reader an expert-eye view of the assessment and treatment of childhood PTSD. They make a strong case based on the available literature that cognitive and behavioural approaches hold the most promise as a treatment for childhood PTSD. The reader will find this article useful from both a conceptual and a clinical-practical point of view.

Litcher et al. studied the cognitive and neuropsychological functioning of children who were in utero to age 15 months at the time of the Chernobyl nuclear plant disaster and who were evacuated to Kyiv from the 30-kilometre zone surrounding the plant. In contrast to previous studies, Litcher et al. did not find more cognitive deficits in children from contaminated areas compared to nonexposed comparison children. The authors discuss their findings in the light of methodological differences between their study and previous ones. The third study in this issue concerning the impact of environmental stressors on later functioning is the study by Ho et al., who studied the effects of exposure to completed suicide or attempted suicide in a community sample of adolescents. The view that subjects exposed to others' suicidal behaviours are at risk of suicidal behaviours themselves carries us back to 1774 when Goethe's novel *Die Leiden des jungen Werthers* was banned by some local authorities. The leading character in this novel, a gifted young man, took his own life by shooting himself through the head. Although there was no empirical evidence of a real imitation effect, it was thought that a number of readers took the dramatic act of the leading character as an example. The possible existence of this so-called "Werther effect" has been tested in adolescents by a number of researchers with contradictory results. Ho et al. found that friends of suicidal youngsters were at increased risk of suicidal behaviours. This risk was higher among the peers of suicide attempters than among the peers of suicide completers, and was higher among close friends than among mere acquaintances. These findings indicate the need for professional support for the peers of

suicide attempters or completers. A related issue, although it does not pertain to an acute event but to the effects of chronic adversities, is the effect of having a chronic illness on children's social functioning. Meijer et al. studied the behavioural, cognitive, and affective aspects of social functioning in children with a chronic illness and found that such children display more parent-reported submissive behaviour and less self-reported prosocial behaviour. Therefore, they may be vulnerable for developing problems in peer relations. These results have implications for clinical practice. Early detection of insufficient social skills can be beneficial if intervention programmes for chronically ill children were to focus on the prevention of peer relation problems. It would be useful to develop such social skills training programmes.

The high aim of many professionals in our field is to identify correctly young children at risk for later problems, followed by interventions that prove to be effective. The paper by Barkley and colleagues indicates that the identification of children with high levels of disruptive behaviour during the preschool years as being at-risk for later negative outcomes in development can be successful up to a point. But such screening programmes appear to identify a high number of false positives and so should be done in a multi-stage process incorporating additional variables besides disruptive behaviour if the problem of false positives is to be reduced. Nonetheless, many children with preschool disruptive behaviour do proceed to experience significant educational and social problems over the next 3 years of their life, as demonstrated in this study. This paper also shows that early intervention programmes carried out within the school setting can be highly effective at changing behavioural and social problems within that setting, and perhaps even improving some aspects of adaptive functioning in the home setting. Academic achievement skills were not appreciably improved, however, beyond those improvements that occur through normal educational programmes. Yet, parents whose children are identified through a school screening process and who are selected for early intervention, may not be ready to invest in the change required of them in standard parent training programmes, despite the perception that they and their children may be in need of such assistance.

Three more articles in this issue pertain to disruptive behaviour disorders. Toupin and colleagues tried to disentangle, in a 1-year longitudinal study, the links between both conduct disorder and ADHD and executive function deficits. They found that cognitive deficits distinguish children with conduct disorder from a group of comparison children even if ADHD symptoms are controlled for. These findings are interesting because they do not converge with earlier studies which showed that the link between executive function impairment and conduct disorder was only present in children who, in addition, showed ADHD. In another article, Hay studied self-concept in adolescents whose problem behaviour led to suspension from school. Using multidimensional self-concept profiles, the students' low self-concept scores in

the academic, school, and parent relationship domains affirm that the quality of the parent–child relationship and the level of school–student connectedness are important predictors of adolescent outcomes. This implies that improving these connections through interventions including mentoring, counselling, parenting programmes, and modified school programmes, may result in a discontinuation of antisocial behaviours. The last article concerning children with disruptive behaviours is the one by Cohen and colleagues, who focused on the association between ADHD and language impairment. The authors found that working memory measures, used to tap the core cognitive deficit of ADHD in executive functions, were more closely associated with language impairment than with ADHD. It was concluded that caution must be exercised in attributing to children with ADHD what might be a reflection of problems with behavioural and affect regulation in children with language impairment generally. As most therapies are verbally based, children’s language competence should be assessed before embarking on treatment and suitable

modifications should be made when a language impairment is identified.

The article by Grossman and colleagues deals with the ever-intriguing question of what mechanisms are responsible for the poor processing of social and emotional stimuli by individuals with pervasive developmental disorders. In this study the authors showed that children with Asperger syndrome differed from comparison children qualitatively in the ways they processed facial expressions. This study showed that simply being able to recognise whether a face is expressing a given emotion is only a small part of what is required for social adjustment in daily functioning, where facial expressions are seen only fleetingly, shift constantly, and occur in the context of other, competing stimuli.

Finally, this issue contains a number of other interesting papers on diverse topics such as the stability and change of attachment, attentional processes in depressed children, and the understanding by deaf children of display rules.

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