

## Editorial

There has been a consensus that children “in care” show a much increased frequency of behavioural difficulties but the reasons why this should be so are much less well understood. The study by Roy et al. sheds important new light on this issue. They found that children admitted into residential group homes as babies are much more likely than children admitted into foster care at the same age to show hyperactivity and inattention. Although the study sample was small, the groups were closely comparable in coming from a very high-risk family background. The evidence from both questionnaire and observational measures was consistent in indicating that the difference in the pattern of rearing made a substantial difference to the child’s behaviour. The findings are sobering in their implication that the pattern of care provided to protect children at high risk seemed to have acted in a detrimental manner. The study clearly provides food for thought in terms of the need to improve provision for this vulnerable group of children. The findings are also provocative in their implication that hyperactivity/inattention, although strongly influenced by the child’s biology, can also be affected by the pattern of rearing. The message is that clinicians should not assume that the causes of this hyperactive behaviour necessarily reside entirely within the child but there is also the need to clarify whether the form of hyperactivity/inattention arising from these experiences is in some way atypical.

The paper by Reynolds and colleagues is an attempt to evaluate the efficacy of emotional disclosure to offset distress in children experiencing negative life events. There is a developing literature on such interventions in adults but, as these authors suggest, little work has yet been done to test the value of such disclosure in children. Using a randomised controlled trial Reynolds et al. were unable to show a specific benefit from the opportunity provided to write about negative events. Rather, there was a general reduction in symptoms from all groups. Although the results suggest that the efficacy of writing about negative events is less marked in 8–13-year-olds than in adults, they also indicate that it is both feasible and potentially valuable to give children opportunities to engage in discussion about sources of stress and their reaction to them.

It is clearly essential to adopt a developmental perspective when considering children’s response to stressful events. This topic is central to the paper by Jenkins and Buccioni. The aim of this paper was to examine children’s understanding of the nature of conflicts between parents. Most children are exposed to conflicts between their parents at some time in their lives. The way that a 5-year-old child understands conflicted events differs markedly from how these events will be seen by children even 2 years older. Younger children were found to be less likely than older children to explain marital conflict in terms of the diverse goals of each parent, to understand conflict resolution as dependent on one person changing their beliefs or goals, and to understand that parents were simultaneously spouses and parents. Developmental influences on understanding may affect children’s

threshold for perceiving conflict and its termination as well as children’s attributions about responsibility. The awareness of how children of different ages think about conflict will help parents and health professionals to adopt developmentally appropriate concepts when talking to children about this family event.

There is a small set of papers concerned with peer relationships and its impact on behavioural development. The study by Hughes and colleagues was an attempt to use direct observation of dyadic interactions with friends for preschool-aged children who have been described by their parents as disruptive or hard to manage. The results suggest that there is indeed a higher rate of antisocial behaviour and display of negative emotion in these hard-to-manage children compared to controls. They also showed a lower frequency of prosocial behaviour. Intriguingly, the results of this paper suggest that the interpersonal problems of these young disruptive children are more closely related to a failure of behavioural regulation than to problems of social understanding per se. The paper by Realmuto and colleagues examines the potential of peer-based behavioural assessment in predicting later teacher-rated behavioural adjustment and academic achievement over a 4-year period. It was found that the peer behavioural assessment was able to predict externalising behavioural problems as rated later by teachers. However, there was a complex pattern of results in terms of the course of the development of children showing early disruptive behaviour. It is suggested that peers may be sensitive to some of the nuances in behaviour that can be used to identify children more or less vulnerable to long-term difficulties. The paper by Woodward and Fergusson takes this issue further by looking at the association between peer relationship problems and later school achievement and unemployment at age 18 years. They too identify a complex set of processes that can account for the elevated risk of later difficulties in children with early peer relationship problems.

Another facet of academic under-achievement is that which arises from difficulties in literacy development. The established role of genetic factors in the development of reading difficulties provided Gallagher, Frith, and Snowling with the opportunity to identify children at risk of reading difficulties on the basis of a family history. They found that more than half of the children with a first-degree affected relative showed delayed literary development at 6 years of age. Since a considerable body of evidence suggests that children who are slow to take their first steps into literacy go on to have significant reading problems, the results of their study provide a rationale for early intervention for children with a genetic susceptibility to reading disability. Given what is known about the cognitive characteristics of reading disability in childhood, the most effective interventions will probably take the form of training in phonological awareness in the context of highly structured reading instruction.

The variety of papers present in this issue is wide and it is not feasible to comment on each one. I would, however, like to draw the reader’s attention to the final paper by

Vuorenkoski and colleagues from Finland. They were investigating the mental health problems in migrant children. The evidence from their work suggests that over a 6-year period the mental wellbeing and school achievement of migrant children was related to certain aspects of language use and culture experiences. It suggests that optimal care should consist of one person consistently using one language (native or foreign). However, the use

of both the native and the second language plus their associated culture experiences will enhance the child's mental wellbeing. These results have quite clear implications for the management of what is likely to be an increasing group of children whose families migrate for economic, political, or social reasons.

*Jim Stevenson*