

Adjustment to physical handicap and illness: a survey of the social psychology of physique and disability.

Roger G. Barker, *et al.* New York: Social Science Research Council, 1946. Pp. xi + 372. (Illustrated.) \$2.00.

The purpose of this investigation is well stated in the following paragraph from the introductory chapter: "There is a widespread assumption among laymen and social scientists that physique in its social-psychological aspects is of great importance in the motivation of the individual. Among clinical psychologists and psychiatrists there is a great superstructure of theory based upon case studies and clinical experience which assumes that important sources of personal maladjustment lie in the somatopsychological situation of the individual. It is the purpose of this publication to bring together the widely scattered knowledge bearing upon this problem. We propose to raise this question: What is known of the social and psychological significance of physique and in terms of what concepts can the known facts be described and explained?"

The authors do not concern themselves with all the relations between physique and behavior but confine their survey to what is designated as the "somatopsychological problem," *i.e.* the problem of the purely psychological and social significance of physique, or how physique determines behavior. Only those variations in physique considered relevant to the somatopsychological problem are discussed. The criteria of relevancy formulated by the authors are three: (1) The physique must instigate behavior which in turn requires behavioral adjustments not directly induced by the particular physical characteristic in question; (2) the physique must be perceived by the person or others as being of significance for his life career; or (3) the physique must be perceived by the person or others as having social significance in the particular culture.

From a long list of physical variations believed to have somatopsychological significance the authors have excluded age, race, sex, speech defects, and leprosy. This leaves cosmetic defect, muscular strength, motor ability, visual impairments, auditory impairments, tuberculosis, heart disease, diabetes, rheumatism, cancer, orthopedic disability, and acute illness. The authors then undertake to review and interpret the available literature on those topics which represent the more important practical problems as well as the main types of variation in physique, namely, normal variations in physique, orthopedic impairments, tuberculosis, impaired hearing, and acute illness.

Each of the principal chapters attempts to draw out from general analysis those hypotheses and conclusions that appear to be warranted by the available research. Each chapter concludes with one or more "research summaries" of the most important studies bearing upon certain topics considered in the general discussion. One special chapter discusses the employment of the disabled. This is primarily a review of the more general literature on the problem and supplements the discussions of employment presented in the more specialized studies considered in the preceding chapters.

It is a little surprising that only incidental attention is given to visual deficiencies. Seriously limited vision would seem to meet one or more of the authors' criteria of relevancy and to be among the "more important practical problems."

Following the main body of the report are 52 pages of bibliography, divided into two sections. The first includes

studies considered in developing the analyses and interpretations of the special topics included in the book itself; the second, bibliographies on physical variations not specifically treated, *e.g.* visual disability, cardiac disability, diabetes, cosmetic defect, rheumatism, and cancer.

It is obviously impossible to state a brief general conclusion to which this volume leads. It is reasonably clear, however, that the authors have demonstrated the truth of a statement made in the preface, namely, that "the state of our knowledge of these matters (*i.e.* the somatopsychological significance of variations in physique) is little above the level of folklore in many respects . . .," and that a very large superstructure of practical action in such areas as occupational therapy, industrial employment policies, hospital organization and administration, industrial accident legislation, and vocational rehabilitation has been based upon this limited knowledge. The authors also show that promising and valid techniques are available for the study of problems of great practical and theoretical importance in this field. Both for its bringing together in one place a considerable mass of material and for its suggestive and thought-provoking analysis and interpretation the volume will be extremely useful to any individual or group proposing either to undertake additional studies of the significance of physical variations or to formulate policies and plans for the practical affairs of daily life.

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A psychology of growth. Bert I. Beverly. New York: McGraw-Hill, 1946. Pp. 200. \$2.50.

When a physician writes a book on psychology, he is likely to get into difficulties similar to those which would probably be encountered by a psychologist attempting to write a book on medicine. There are many evidences of this in *A psychology of growth*.

The portion of the book dealing with the practical aspects of behavior problems is accurate and valuable, although in this reviewer's opinion far too much emphasis is placed on the pathological conditions. It is, of course, understandable why that emphasis would appear in a book by a physician written for nurses. But the psychology of the author is neither accurate nor up to date and in many cases is inconsistent. At times he writes like a Watsonian behaviorist, at times as a Freudian, and throughout his discussion displays an unusually strong prejudice toward the influences of heredity.

While in general he gives helpful suggestions for dealing with behavior problems, at times he fails to do so. For example, we are told: "In addition to acquiring food, sucking provides an emotional satisfaction. That is the reason why all babies suck their thumbs and they should be allowed to do so." Almost no suggestions are given, however, concerning means of providing such emotional satisfactions that the infant will not suck his thumb, and the question of diet as one cause of the action and the malformation of teeth as one result are apparently not considered important. Again, the reader is warned that there should be skillful supervisors on the playground because "homosexual practices which cause great distress in later life can start with childhood play." However, in the following sentence is the statement: "The supervisor who finds children engaging in sex experiments should not become perturbed because such a reaction can create dis-