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**Experimental**

**A PROGRAM FOR CHILDREN  
TO ENHANCE COMPASSION  
AND SELF-ESTEEM AND  
REDUCE VIOLENCE**

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**ABSTRACT**

Based on the concepts that intentioned touch can be used to enhance self-esteem and foster compassionate feelings for others, we taught kindergarten, first and second grade children in a public school in New Glarus, Wisconsin to intention a healing process between their hands which they place on opposite sides of a body pain. We called this process "Helping Hands." I also believe that compassion and violence are inversely related. Therefore, it is quite probable the touch enhanced compassion may reduce feelings of frustration, anger and violence as well as enhancing self-esteem. There were a total of 274 children who have participated in this program. Teachers' observations as well as standardized assessments support the above concepts. Touch can be used to enhance compassion and self-esteem.

**KEYWORDS:** Children, compassion, self-esteem, violence

## INTRODUCTION

**W**e are living in a time when increasing numbers of children are coming into the schools with guns. They are using these guns to kill other students and teachers. I believe that a major contributing factor to these radical violent behaviors is a lack of compassion and self-esteem. In our high tech society many of our children do not get the degree of one-on-one, in-person social interaction that was once part of a child's everyday life. The times that preceded this very rapid expansion and usage of high tech communications and entertainment devices and gadgets offered children a better chance to develop interpersonal skills, self-esteem and certainly nurtured the growth and development of inherent natural compassion for other living things (including human beings) more effectively.

It is my belief that compassion and violence are inversely related. When compassion for others is high, violent tendencies are reduced. Social interactions, in person, help to develop self-esteem and ease when in the presence of other persons, be they children or adults. It has been observed and I firmly support the observation, that newborns and infants seem to have a level of compassion that is present from day one. Newborns and infants are known to cry and express sympathy and/or compassion when a person in pain or distress enters the child's environment. The child seems to just "feel" the person's pain/distress. We need to nurture this compassionate instinct. In order to do this there must be a lot of caring touch between persons, and human in-person interactions. As we bolster and nurture compassion through caring touch I am sure that violent tendencies and actions will reduce. Compassion, after all, enables us at least in part to experience some degree of what the other person will feel if a violent act is committed against them.

In order to enhance compassion for others we have developed the "Compassionate Touch" program for children wherein preschool and grade school children can use "helping hands" to alleviate another person's problems. The child is taught to ask permission to help from the person with the problem (headache, skinned elbow, turned ankle, feeling sad, etc.). If permission is granted the child applies his/her "helping hands" appropriately, usually placing the pain between the "helping hands." The helping child then simply thinks

"happy thoughts" of his/her choice and runs these "happy thoughts" between the "helping hands." In the vast majority of cases the pain or distress is alleviated within a few minutes. When relief occurs the helpers feel good about themselves, and their compassionate instinct is nurtured. Further, the recipient is grateful and a deep friendship is often formed. Thus far we have reports of a kindergarten child relieving her mother's "migraine" headache in minutes, several children have alleviated the soreness of playground scrapes and bumps, and one first grade boy reported that he helped his dog after the dog had been hit by a car. The dog's yelping stopped minutes after "helping hands" were applied. We also have a report from a dental professor at Columbia University in New York City that she has been able to teach her 17-month-old child to effectively use "helping hands."

You have to feel good about yourself when you know that you can help others. If you feel good about yourself and you see situations wherein you can help another person in pain, you will feel compassion for that person. Your natural instincts towards helping will be gratified rather than frustrated. Less frustration means less anger which, in turn, means that there is a lesser chance of violent expression. Compassion increases and violence decreases.

**A**nother area wherein the bolstering of self-esteem by the Compassionate Touch Program may be helpful is suicide. Clearly, when a person feels good about themselves and is comfortable interacting face to face with other persons there will be less tendency to resort to suicide as a solution to life's stresses and problems.

As the new millennium was ushered in, suicide was the eighth leading cause of death in the United States. Even more alarming, it was the third highest cause of death for persons between the ages of 15 and 24. The suicide rate for adolescents between 10 and 14 years of age is lower but is increasing at an alarming rate. If children in the kindergarten and grade school years are taught that they can be helpful to others who are having problems their view of life and themselves, as well as their relationships with others, will improve. I am sure that self-worth and sociability are inversely related to suicidal tendencies and hopelessness. The Compassionate Touch Program stands a good chance of being anti suicidal. In any case, it can do no harm.

## THE BEGINNINGS OF THE COMPASSIONATE TOUCH PROGRAM ARE DEVELOPED AND IMPLEMENTED BY THE UPLEDGER FOUNDATION

**I**n spring of 1997, The Upledger Foundation initiated a simple and straightforward investigation into the use and instruction of Compassionate Touch with preschool children. This pilot project was designed to evaluate the effects of touch, particularly in the demonstration of increased pro-social behaviors and the reduction of aggressive behaviors and behavioral problems in children. The results of the 1997 project were impressive and served as impetus for further study in this area. The preliminary studies suggested that violence and aggression are inversely related to compassion.

### PUBLIC SCHOOL STUDIES BEGIN

**Background.** The "Helping Hands" approach to "Compassionate Touch" was developed for kindergarten and lower elementary grade school children. This program will be modified as we move the program into higher grades so that the teaching of Compassionate Touch will be appropriate for these children. The approach was used in the New Glarus, Wisconsin elementary school and the results are given below.

### COMPASSIONATE TOUCH SUMMARY RESULTS OF THE NEW GLARUS STUDY

The premise of the program is that children who are taught and encouraged to use an appropriate and helpful use of touch may experience a greater sense of belonging and connection with others. The program teaches students to:

- Identify a child in need of assistance
- Ask permission to use his or her helping hands
- If permission is granted, place the helping hands on either side of the area that is hurt
- Send happy thoughts through the hurt from one hand to the other

Teachers evaluated their students for social skills, positive and negative behaviors, and academic skills prior to the introduction of the "Helping Hands" program and again at the end of the school year using standardized evaluation questionnaires. The purpose of these evaluations was to provide an independent measure of social skills and behaviors over time.

This program was introduced to kindergarten and first grade students in 1999 (Year 1) and to kindergarten, first grade and second grade students in 2000 (Year 2).

Our therapist taught the children to use "Helping Hands" in two, 90-minute sessions per class on consecutive days. On the first day the process was demonstrated by our therapist. Then it was demonstrated on the teacher and next on two or three volunteer children. When comfort with the process was observed the children worked on each other. The session closed with a discussion and questions and answers. The children were encouraged to try out this new skill called "Helping Hands" at home. On the second day the session was begun with the children describing their experiences with "Helping Hands" since the first meeting. After this discussion, more demonstrations followed with repetition of the instructions. Next there was practice on each other. The teacher joins in this practice session. The meeting is closed with further discussion and questions and answers.

**S**tudents Participating in Year 1. In October, 1999 the "Helping Hands" program was introduced to kindergarten and first grade students at New Glarus Elementary School. There were a total of 101 students in the first year of the study. An analysis of the evaluations showed a very clear and statistically significant increase in positive social behaviors ( $p < .01$ ) and a statistically significant decrease in negative behaviors ( $p < .01$ ). These differences were consistent for both boys and girls. Essentially these findings mean that these changes were most likely due to the introduction of the helping hands program. With the number of students participating and the behavior changes shown by those students, there is a less than 1% chance that the results were random. Because there was no control group of same-aged students who were not taught "helping hands," we do not know what the increase in positive behaviors would be due simply to the natural increases year by year as the child grows older and thus more emotionally mature. However, all teachers involved

were impressed that the changes they witnessed were extraordinary based on their experiences in watching children grow. The teachers stated that there was more improvement than expected.

**Students Participating in Year 2.** In October, 2000 the "Helping Hands" program was reintroduced to first and second grade students and introduced to kindergarten students. Once again, children exposed to the program showed significant and unexpected increases in self esteem and positive social behaviors according to their teachers.

There were 173 students who participated in the program this year. Of these, 85 were girls and 88 were boys. Less than three percent of the students were non-white. Teachers identified 7.5% of students as having a disability or handicap. Of the 173 students, 38.7% were in kindergarten ( $n = 67$ ), 30.1% were in first grade ( $n = 52$ ), and 31.2% were in second grade ( $n = 54$ ).

Students were evaluated by their teachers before the introduction of the "Helping Hands" program (pre-test) and again at the end of the school year (post-test) to determine if there were differences in their social skills including cooperation, assertion and self-control and in problem behaviors including externalizing (such as aggressive behavior and poor temper control), internalizing (such as sadness and anxiety) and hyperactivity (such as fidgeting and impulsive acts). The following tables show the average values for these different measures for the pre-test and the post-test evaluations and whether the change was statistically significant. A  $p$ -value of 0.05 or less was considered statistically significant.

#### COMPARISON OF STUDENT ASSESSMENTS FALL 2000 TO SPRING 2001

There were statistically significant positive changes in specific social skills. The strongest positive changes were in the areas of assertion and self-control. The average increase in the assessments of the students skills in the following areas were all statistically significant [see Table I].

**Table I  
Comparison of Student Assessments Fall 2000 to Spring  
2001**

	Pre-Test Mean	Post-Test Mean	t-test Value	Significance
<b>Social Skills</b>				
Cooperation	13.8988	15.4107	5.792	<0.001*
Assertion	11.1657	13.6568	9.960	<0.001*
Self-Control	13.5858	15.2840	6.675	<0.001*
<b>Problem Behaviors</b>				
Externalizing	1.7427	1.3333	3.353	0.001*
Internalizing	2.7861	2.7861-	-	-
Hyperactivity	4.4503	3.6491	4.287	<0.001*

\*Statistically significant

**Cooperation:**

- Finishes class assignments within time limits
- Uses time appropriately while waiting for help
- Produces correct schoolwork
- Follows directions
- Puts work materials or school property away
- Ignores peer distractions when doing class work
- Keeps desk clean and neat without being reminded
- Attends to your instructions
- Easily makes transition from one classroom activity to another

**Assertion:**

- Introduces self to new people without being told
- Appropriately questions rules that may be unfair
- Says nice things about self when appropriate
- Invites others to join in activities
- Makes friends easily
- Initiates conversations with peers

- Appropriately tells you when he or she thinks you have treated him or her unfairly
- Gives compliments to peers
- Volunteers to help peers with classroom tasks
- Joins ongoing activity or group without being told to do so

Self-Control:

- Controls temper in conflict situations with peers
- Compromises in conflict situations by changing own ideas to reach agreement
- Responds appropriately to peer pressure
- Responds appropriately to teasing by peers
- Receives criticism well
- Accepts peers ideas for group activities
- Cooperates with peers without prompting
- Responds appropriately when pushed or hit by other children
- Gets along with people who are different

The only social skills that did not show a significant positive change were "acceptable use of free time" and "controls temper in conflict situations with adults."

There were statistically significant reductions in problem behaviors as well. While as a group the internalizing behaviors showed no difference, the externalizing and hyperactivity behaviors were significantly reduced after the program.

Externalizing:

- Fights with others
- Gets angry easily

Hyperactivity

- Is easily distracted
- Interrupts conversations of others
- Disturbs ongoing activities
- Doesn't listen to what others say
- Fidgets or moves excessively



**Table II**  
**Comparison of Student Assessments Fall 1999 to Spring 2001**

	Pre-Test Mean	Post-Test Mean	t-test Value	Significance
<b>Social Skills</b>				
Cooperation	13.3214	15.6905	4.903	<0.001*
Assertion	11.0361	14.3855	7.367	<0.001*
Self-Control	13.2500	16.0357	7.104	<0.001*
<b>Problem Behaviors</b>				
Externalizing	1.6429	1.2857	1.439	0.154
Internalizing	2.7500	2.1667	-1.532	0.129
Hyperactivity	4.4167	3.1786	-3.506	0.001*

\*Statistically significant

### STUDENTS PARTICIPATING FOR TWO YEARS

There were 84 students who participated in the program for both years. They were reintroduced to the program in the Fall of 2000. Table II shows that while improved social skills continued to be highly statistically significant, there were slight, but not statistically significant, decreases in two of the three problem behavior areas over the two year period, while hyperactivity decreased significantly.

### CONCLUSIONS

The significant increases in the social skills assessments of the students demonstrates the positive effect of the "Helping Hands" program on the students' abilities to cooperate, assert themselves appropriately and control their behavior. It also shows specific improvement in factors that contribute to increased tolerance and acceptance of others.

There was significant decrease in problem behaviors, specifically those related to anger management, disruptive and distracted behaviors. The notable

decreases in fighting and anger demonstrate positive social learning and the development of self-control and compassion for their peers.

The learning of these skills at an early age will benefit these children as they grow up and move into more social interaction as adolescents and young adults.

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