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How to Raise the Standard for Normal Behavior

By Marilyn Murray

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It was 44 degrees Celsius in the trusty yard of the Arizona State Prison, a miserably hot day to be working with convicted sex offenders. Our small group met in an old trailer far off in a dusty corner of the yard. There the men struggled to discover why they had ended up as rapists or child molesters. As each man began sharing about his life as a child, one young man named Earl became fidgety. Suddenly he jumped up and said: "I don't belong here. I didn't have a horrible childhood like you guys. My parents weren't anything like any of yours. They loved me." And he left.

Nearly an hour later, the door flew open and Earl barreled in, banging the door so hard the entire trailer shook. With his dark face drenched in sweat, he stormed, "That was abuse!" He paced the room as his words tumbled out: "I've been walking around out there in this heat thinking about when I was little. And for the very first time, I realized there was nothing I could have done as a 2-year-old that was bad enough to deserve being disciplined with a baseball bat!"

A few men gasped audibly and some nodded their heads. Then Earl's voice dropped as he said, "The sad part is I thought it was normal because every other kid in our neighborhood was disciplined the same way."

Earl's baseline for "normal" was violence based upon a history that taught him this was the only option in life. For all human beings, our baseline for normal reflects what we experienced most in childhood, whether it be love, attention, neglect, deprivation or violence. This baseline then becomes what we consider to be normal and often accept without question as our lot in life.

In Russia, where the alcoholism rate is high, domestic violence is rampant. Unfortunately, the increasing proliferation of drug addiction will only add to that nightmare, especially for children born into addictive families. But in addition to violence, deprivation and neglect are also major issues.

During Soviet times, mothers were required to work, and their children were either given to older relatives to raise, left in government nurseries, or, if none of the prior were available, the children were left alone. These children's feelings of abandonment remain as a great influence on multitudes of people today and thus are unknowingly passed on to their children and grandchildren. For many, the lack of emotional and physical attachment became their baseline for normal.

This baseline, however, did not emerge only in regard to the child's primary caregiver. It also came from the fact that many children had illnesses that were treated by long-term hospitalizations that did not take the child's emotional well-being into account.

The most profound illustration of this injudicious reasoning was from a psychologist, Olga, who attended my basic class in which participants processed their childhood issues. She completed the assigned homework regarding writing and drawing about the painful experiences in her childhood by listing only a few minor events.

But several months later in the next advanced class, she happened to casually mention that she had been hospitalized at age 2. When I asked her to tell us about that event, we were stunned by her response. She was diagnosed with tuberculosis of the spine and put in a special hospital for children. There she was placed in a large ward and was strapped down so she could only move her forearms and hands.

The children were not allowed to cry or even to talk to each other because it would "disturb the nurses and doctors." She was turned occasionally but still developed painful bed sores. An aide shaved the heads of the children as it was easier to keep them clean and more convenient for the staff.

Olga remained strapped down for two years. Her parents were not allowed to visit and were told it would only upset their child more when they left. During this interminably long isolation, Olga said the only way she could entertain herself was to imagine stories about the dust balls on the floor. Her sole visitor was a kind lady who came about once a week and read to her.

After two years, she was allowed to get up from her bed and go outside in a wheelchair

and interact with other children. After learning how to read, she became engrossed in her new world of books.

Finally, at 6, Olga was released to her parents. They did not recognize each other. She was a thin little stranger with almost no hair, and her parents were a man and woman who had absolutely no frame of reference of what their courageous small daughter had experienced.

Olga stated she was very upset and crying because she had not been allowed to say goodbye to the kind lady who read to her. This woman had been her only positive, adult connection in four years — her solitary source of attachment. But when she reacted this way, her mother became angry and jealous that her daughter was crying for another woman.

Unfortunately, no one gave thought to the emotional health of these hospitalized children or of their parents. They only thought of what was convenient for the staff and what they needed or felt. In the coming years, every summer Olga was sent to a sanitarium and not allowed to go on vacation with her mother and father. She felt they had become accustomed to their lives without her during her four-year hospitalization. She said it was simply easier for them to send her away for the summer than have to spend the energy to connect with her either physically or emotionally.

The sobering aspect of this story was that Olga's 48-month hiatus in isolation without parental attachment and nurturing became her baseline for normal. This became obvious when she never thought to mention these traumas during our entire basic class of five days when everyone else was speaking of their traumatic childhood events.

As an adult, Olga married and has two children. She says she loves her family but admitted she was emotionally distant. She also was enmeshed with her mother and unable to set boundaries regarding her mother's incessant demands of her. Fortunately, Olga gradually became a healthy wife, mother and daughter.

Although Earl and Olga live on separate continents, they genuinely had a desire to change, and with help, over time developed a new "baseline for normal" based upon love, nurture and respect.

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