Helene Guldberg attempts to accomplish an admirable task in writing *Reclaiming Childhood: Freedom and Play in an Age of Fear*. The book addresses topics that are of great interest to parents, educators, and researchers. The take-home message of the book is that children in the United Kingdom and the United States today are worse off than were children from the last two generations because of societal shifts toward overprotection. Helicopter parenting, unreasonable safety requirements, and out-of-proportion fears regarding stranger danger, bullying, and Internet predators have led to a “cocooning” of children that deprives them of experiences that foster resiliency, curiosity, and self-efficacy.

It is peculiar that we, both parents and developmental psychologists, were more likely to agree with this statement before we read the book than after reading the book. We chose to review this book, in part, so that we could become aware of the science that undergirds this claim. Instead, *Reclaiming Childhood* is a heavy-handed attempt at persuasion, with
science being misrepresented and used only to support particular a priori arguments. The book is rife with poor logic (unsupported sweeping statements, straw-man arguments, biased research reviews, elevation of anecdote as evidence) and a superficial writing style. It reads more like a poorly argued and lengthy essay than like a systematic piece of scholarship.

The author makes her arguments in such a way that research that does not support her points is either dismissed or ignored (although it is possible that Guldberg was not aware of the research). For example, in making the point that children’s mental health today is not as bad as society believes it to be, she cites Christopher Lane (2007) and says that shyness has been turned into a disease; namely, that the Diagnostic and Statistical Manual of Mental Disorders (4th ed., text rev.; DSM–IV–TR; American Psychiatric Association, 2000) equates normal shyness with social phobia or avoidant personality disorder.

However, in addition to numerous criteria that are not congruous with the behavior of a normally shy child, the DSM–IV–TR specifically states that for the person with a social phobia, “the avoidance, anxious anticipation, or distress in the feared social or performance situation(s) interferes significantly with the person’s normal routine, occupational (academic) functioning, or social activities or relationships, or there is marked distress about having the phobia” (p. 456). With these criteria, normally shy children should not be diagnosed with social phobia. Guldberg states that “it seems that mental disorders can be created on a whim and attributed to all sorts of actually quite normal people” (p. 22). Although the DSM–IV–TR is admittedly far from perfect, it is based on scientific research, and, if used correctly, it excludes people without significant problems from the criteria for psychiatric disorders.

Perhaps more troubling than the nonscientifically based dismissal of the DSM–IV–TR are the missing studies that contradict many points made in the book. For example, Guldberg argues that we should not worry about junk food—that, according to Vincent Marks, there is no such thing as junk food because food either sustains life or has gone bad (meaning rotten). However, a diet made up entirely of sugar, fat, and salt (even throw in white bread and potatoes) would not sustain life. Her point is well taken that we should not attempt to make children’s diets devoid of fat and sugar. Nuts, cheese, fish, and breast milk are all full of healthy fats that should not be avoided; however, children (and adults) need a well-rounded diet to avoid the symptoms of nutritional deficiencies, such as rickets (vitamin D deficiency). Nutritional deficiencies in infancy and early childhood have been linked to problems in the development of the central nervous system and to internalizing and externalizing disorders in later childhood (Wachs, 2009).

In the argument made against worrying about our children’s television-viewing habits, Guldberg states that “hard evidence of the media’s ominous effects on young children is sorely lacking” (p. 118). However, that is not the case. For example, Vandewater and colleagues (2005) found that 35 percent of households with children in the United States have the TV on “‘always’ or ‘most of the time’” (p. 568) and that children from those households read less and are less likely to be able to read at age five or six than are children
from less heavy TV-viewing households. Other longitudinal research has suggested that viewing of noneducational TV before age three is related to later attention problems (Zimmerman & Christakis, 2007).

Her discussion of attachment parenting ignores much research indicating that availability, responsiveness, and compassion toward children by the primary caregiver lead to a secure attachment style and that this is related to more positive outcomes throughout childhood and young adulthood. Not the least of this ignored research is an ongoing longitudinal study that has followed participants from a 36-week prenatal checkup to 23 years of age (Sroufe, Egeland, Carlson, & Collins, 2005).

Later in the book, Guldberg argues that society should not be so concerned about monitoring children’s early development because the rate of childhood development varies greatly, and we do not know that early interventions are helpful. While it is true that normal development varies greatly from child to child and parents should not worry if their child has not said his or her first word or taken her or his first step even by 15 months, there is a normal range of development—and parents have access to information about these milestones on any of several high-quality Internet sites, such as the one maintained by the Centers for Disease Control and Prevention (http://www.cdc.gov/ncbddd/actearly/milestones/milestones-3yr.html). When development is outside of that normal range, a professional should be consulted. For example, it has been shown that early intervention improves outcomes for children with autism (Harris & Handleman, 2000).

The author likewise dismisses efforts regarding bullying and stranger danger as irrational, fear-based modes that stifle child development. But, again, there is little evidence provided for this contention. And the bold counterclaims implied here—that bullying is not a serious problem or that strangers mean children no harm—could be disastrous if taken too seriously. We were hoping for a more nuanced examination of the topics covered in the book. The nonsupportive elements are neatly swept under some rug. Rather than examine the many pieces and acknowledge the complexity, the author picks out elements that are aligned with her opinions. We’d like to see that rug lifted for a more balanced view of the unexamined material.

While it does, indeed, seem that children today are being partially paralyzed by fear-based parenting and overprotective policies, this book fails to convince us of that. The misuse of science and the clumsy attempt at persuasion leave us wondering whether and how children today are faring, given the changing sociohistorical realities they face.

References


