BARKER, ROGER (1903–1990)

Roger G. Barker was a professor of psychology at the University of Kansas and a recipient of the Distinguished Scientific Contribution Award (1963) from the American Psychological Association (APA), the Kurt Lewin Award (1963) from the Society for the Psychological Study of Social Issues, and the G. Stanley Hall Award (1969), APA, Division 7 (1969). Barker was born in Macksburg, Iowa. After receiving a Ph.D. from Stanford University, Barker spent 2 years as a postdoctoral fellow with Kurt Lewin at the University of Iowa and then devoted the initial decades of his career to studying child development and physical disability/rehabilitation. His career took a distinctive turn in the 1940s when he came to the disquieting realization that, after more than a half century of empirical research, psychologists knew little more than laypersons about the behavioral patterns of individuals as they go about their daily lives. In response to this short-coming, Barker followed the path of naturalist researchers in the biological sciences by establishing a field research station that was intended to provide “easy access to phenomena of the science, unaltered by the selection and preparation that occur in laboratories.” This ground-breaking effort was accompanied by the development of empirical methods for observing and recording the activities of individuals in everyday settings.

Through these methods, Barker learned that the order he observed in individuals’ actions could not be adequately accounted for solely by considering the environment at the level of the individual. Instead, it was necessary to operate at the extraintividual (ecobehavioral) level of behavior settings, which are naturally occurring, dynamic, ecological structures generated from collective actions of individuals in a physical milieu. Behavior settings arise from such collective actions, while reciprocally constraining individuals’ actions within their boundaries.

One property of behavior settings explored in detail by Barker and Gump in their landmark book *Big School, Small School* is level of staffing (or manning). Typically, behavior settings have an optimal number of individuals needed for adequate functioning; as a result, departures from that optimum have predictable effects. Individuals in an understaffed setting tend to feel somewhat marginalized and less involved because their separate contributions may not be vital for its operation. Notably, these findings from studies of high schools were replicated in other kinds of settings.

A second program of research employed behavior setting surveys of a community to provide an account of the activity possibilities in that place, and in doing so, detail its ecological resources considered from a psychological viewpoint. Using this methodology, different communities can be compared, as Barker and Phil Schoggen did in *Qualities of Community Life*, and the same community can be examined at different points in its history to assess qualities of stability and change.

The legacy of Barker’s research program, overall, is the demonstration that psychology must maintain an ecobehavioral focus if it is to account for psychological phenomena in everyday settings.

—Harry Heft

**Further Readings and References**


**BATTERED CHILD SYNDROME**

Battered Child Syndrome (BCS) has been defined as “the collection of injuries sustained by a child as a result of repeated mistreatment or beating.” If the injuries sustained by the child suggest that physical trauma was inflicted intentionally or if the injuries appear on examination to be more severe than one might expect to have reasonably been produced by accident, BCS may be indicated. These injuries typically have been inflicted by an adult caregiver. BCS also has been referred to as shaken baby syndrome, child abuse, and nonaccidental trauma, but none of these terms accurately captures the repeated nature of the physical trauma to which BCS specifically refers.

Although the hallmark symptoms of BCS are physical trauma such as internal injuries, lacerations,
burns, bruises, and broken or fractured bones, emotional and psychological problems also tend to characterize children for whom BCS is an accurate clinical descriptor. Emotional and psychological problems, in turn, can manifest as serious behavioral problems and disorders later in the child’s life, including alcohol abuse, narcotic abuse, and the physical and psychological abuse of others.

The incidence and prevalence of BCS are unclear but may characterize a majority of the nearly 14% of children in the United States who are physically abused each year. More specifically, in comparison to all other causes of child deaths, traumatic injury is the leading cause of child death. Nearly 2,000 of those children who are abused die as a result of this abuse, and for these children BCS is particularly likely to be an accurate clinical label.

There are many theoretical frameworks that propose explanations for BCS. However, only one theoretical framework—evolutionary psychology—hypothesized and led to the knowledge that a particular parent–child relationship, namely, the stepparent–stepchild relationship, poses the greatest risk that a child will be abused and perhaps eventually display BCS. Research hypotheses derived from socioecological theoretical models purport that BCS can be explained in terms of the integration of individual factors and social contexts, referred to as sociosituational models. But residence with a stepparent was not identified among those individual factors or social contexts. Research hypotheses derived from family systems theory propose that family relationships function as a set of systems and subsystems. According to family systems theory, the formation of a stepfamily creates a disruption of the expected system and hence leads to negative outcomes, including child abuse and BCS. Because stepparental behavioral and legal responsibilities to stepchildren are fewer than the behavioral and legal responsibilities of genetic parents to their children, stepparents are at increased risk for abusing their stepchildren. This logic does not provide a complete explanation for why the risk of BCS is higher in stepfamilies, however.

Although previous research has found that stepparents report feeling unprepared for the new parental duties, stepchildren have been documented to feel adamant about a stepparent not “filling the shoes” of their genetic parent. Daly and Wilson argue that it is not that stepparents do not know what their role is as a stepparent, but instead that they do not want to do what is expected of them—invest in children unrelated to them, without receiving the benefits associated with investing in children of their own. Regardless of one’s theoretical perspective, it is agreed that BCS is an important social problem that demands the attention of thoughtful scholars and the research efforts of behavioral and social scientists.

—Viviana A. Weekes-Shackelford and Todd K. Shackelford

See also Battered Woman Syndrome, Child Abuse

Further Readings and References


BATTERED WOMAN SYNDROME

Battered woman syndrome (BWS) is a psychiatric and legal term that refers to the constellation of psychological effects experienced by abused women and is intended to explain, for example, why women stay with their abusive partners and why abused women sometimes kill their abusive partners. The term emerged in the late 1970s and has been a source of legal and academic controversy ever since. BWS is considered as a subcategory of posttraumatic stress disorder (PTSD) but is not listed by name in the Diagnostic and Statistical Manual of Mental