CHILDREN'S PERCEPTIONS OF MARITAL DISCORD:

A SYSTEMIC ANALYSIS

By

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ABSTRACT

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Through the application of family systems theory, this study attempted to examine the effects of the marital discord/separation process on the development of problem behaviors, depressive symptomatology, and reported low self-esteem in children whose families currently report marital distress, or whose parents have separated within six months of participation in the project. In particular, this study examined the relationship between children's perceptions of the marital discord/separation process and the development of problematic behaviors. It also assessed the relative importance of children's perceptions of family structure, in comparison to mother's perceptions of family structure, and family type (separated or intact), as predictors of the development of the above mentioned outcome measures.

Forty-three caucasian, primarily middle to upper middle class mother/child pairs completed questionnaires regarding their perceptions of family structure using both Olson's Circumplex Model derived from family systems theory, and a more traditional behavioral observation measure assessing children's perceptions of specific mother/child positive and negative interaction sequences, as well as several mother-completed and child-completed measures of psychosocial

functioning. These mother/child pairs consisted of both intact and recently separated parental dyads.

Results indicated that negative mother/child interaction sequences as perceived by a child were strongly related to the presence of externalizing and internalizing behavior problems, as well as low self-esteem. Children's perceptions of family structure using the Circumplex model were not found to be significantly related to any outcome variables examined, nor did they function as better predictors of problem behaviors than mother's perceptions of family structure or marital status.

To Mom, Dad, Judy, Wendy, and Max

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TABLE OF CONTENTS

LIST OF TABLES

Introduction

The Effects of Divorce On Children

The potential negative effects of marital distress, marital disruption, marital separation, and/or divorce, as single or sequentially occurring events in a child's life have been well documented in the literature. The pioneering work on the subject was done by Wallerstein and Kelly at the University of California, in their California Children of Divorce Project (Wallerstein & Kelly, 1974, 1976a, 1976b, 1980a, 1980b; Kelly & Wallerstein, 1976), and Hetherington and her coworkers at the University of Virginia (Hetherington, 1966, 1972; Hetherington, Cox, & Cox, 1978). Both of these were exploratory analyses of children's behavior following the divorce of their parents. The results of both studies, as well as many others (e.g. Guidubaldi, 1983), clearly illustrated that problems do develop in a large subset of these children. The types of problems manifested by these children fall into many areas of psychosocial functioning including behavioral, academic, and social.

More specifically, Wallerstein and Kelly (1975, 1976a, 1976b, 1980) examined a sample of 131 children and adolescents from 60 primarily white, middle class families.

Data in the form of individual interviews with each child and parent were collected over a six week period. Five-year and 10-year follow-ups were also performed.

In briefly summarizing their results, at the five-year follow-up they found what they termed "serious disturbances" in one-third of their sample, while another third was categorized as experiencing "psychological difficulties". At their ten-year follow-up, many of the now teenagers and young adults continued to struggle emotionally with aspects of the divorce (Wallerstein, 1984; Wallerstein & Corbin, 1989).

In interpreting the results of their five-year follow-up, Wallerstein and Kelly stated that outcome seemed to be strongly related to the functioning of intrafamilial relationships.

Another very important finding in the Wallerstein and Kelly study was that the children who seemed to fare better during this period were members of families in which good relationships with both parents were maintained throughout the post-divorce period, and as is probably more obvious, families in which the parents were psychologically healthy.

Hetherington, Cox, and Cox (1978, 1979) used more objective and empirical instruments to examine their sample of 48 divorced families that had been identified through the court system, and that had a first or second child in nursery school. Most important in comparing these two

studies is the fact that Hetherington and her colleagues included a matched control group. A multi-method approach to data collection was used, including interviews with parent and child, structured diaries, independent observations of child/parent interactions both at home and in the laboratory, child behavior checklists completed by the parents and teachers, measures of cognitive and social development, and also measures of parents' psychosocial functioning.

Again to summarize, results indicated an increase in dependent, aggressive, and disobedient behavior. These behavior problems tended to last for 1-2 years following the divorce, and then the child's behavior would, in most cases, return to a pre-divorce baseline level. As time since the divorce increased, important gender differences appeared, in that at the two-year follow-up, boys and girls from both the intact and divorced group showed no differences on the majority of measures, whereas the boys from the divorced homes exhibited more difficulties in relationships with peers and with their parents. At two years post divorce, correlational analysis indicated a positive relationship between positive adjustment of the children and aspects of the parental relationship.

This study also documented changes in parents' ability to control their children's behavior, as evidenced by a decrease in their consistency in discipline style. There

was also an observed decrease in affectionate behavior directed from and to both parent and child.

In another longitudinal study with a two-year follow-up, Kurdek, Blisk, and Siesky (1981) collected a sample of 58 middle class white children aged 8-17 living in homes in which their parents had separated approximately 4 years earlier. Data collected included children's perceptions of the divorce, interpersonal reasoning, custodial parent ratings of the child's behavior, and locus of control.

Results indicated overall positive adjustment in the children at both four years and six years following the divorce. The authors did find a positive relationship between adjustment and the children's reported positive feelings about the divorce, and a negative relationship between good adjustment and feelings of the loss of a parent and the concomitant changes in intrafamilial relationships.

Guidubaldi and Perry, in conjunction with the National Association of School Psychologists (NASP) and Kent State University (Guidubaldi, 1983; Guidubaldi & Cleminshaw, 1985; Guidubaldi & Perry, 1984) collected a total sample of 699 children (living in divorced and intact homes) from 38 states and administered a wide variety of measures concerning the social, academic, and mental health functioning of the children. The study also included a two year follow-up. Results at both the initial assessment and the two year follow-up found that children from intact homes

performed better than children from divorced homes on a large number of these measures.

The work at the University of California, University of Virginia, and NASP projects, as well as Kurdek et al.'s work has been essential for empirically documenting the basic issue of whether divorce does have psychological ramifications for the children (and adults). This work has also provided basic information about some of the ways in which these effects are manifested by children. Since this work, there has been a proliferation of research examining specific categories of the socio-emotional functioning of a child that are most commonly affected by marital distress, separation, and/or divorce. For the purpose of this study, three specific areas of child psychosocial functioning will be used as measures of the relative effects of the current family situation on the child. First, an empirically derived measure of overall level of behavioral problems will be used, as a result of the reports of differing types of pathology in different samples. The other two outcome measures that are to be used are self-esteem and depression. The reason for the choice of these will now be more fully discussed.

Behavior Problems

In examining the relationship between marital discord and the development of behavior problems in children, Johnson & Lobitz (1974) examined the children of 17 couples

who were brought to a psychological clinic, while at the same time the couple reported discord in their marital relationship. The parents reported "acute behavior problems" in the children. Through the use of observational measures of family interaction, as well as the Locke-Wallace Marital Adjustment Test, the researchers found a strong negative correlation between marital discord (as measured on the Locke-Wallace) and child behavior problems.

There have also been a series of studies performed at SUNY Stonybrook by O'Leary, Emery, and their colleagues. In the first of these studies, Oltmanns, Broderick, and O'Leary (1977) examined 62 clinic referred families most commonly carrying the diagnoses of unsocialized, aggressive conduct disorder, overanxious disorder, and withdrawal reaction. In this study they correlated results of the Locke-Wallace measure with findings on the Behavior Problem Checklist (for more detailed information concerning construction, reliability, and validity issues of this measure, see Quay and Peterson, 1979). Here again, the researchers found fairly strong negative correlations between marital adjustment scores and factor scores on the Behavior Problem Checklist.

In a later study from this laboratory, Porter and O'Leary (1980) included a measure of the amount of verbal and behavioral hostility displayed by parents in the presence of their children. Here the researchers found no

relationship between behavior problems in girls and parent measures of marital satisfaction, as well as with overt interparent hostility in the presence of children, but did find a positive relationship between behavior problems in boys and parent measures.

In examining a nonclinic-referred sample of children, Emery (1982) found a positive relationship between mothers' ratings on the Locke-Wallace and their ratings of their children's behavior problems on the Quay-Peterson checklist. In their review of several other studies of nonclinical samples, O'Leary & Emery (1984) noted that in studies with small sample sizes (approximately 50 children), no relationship was found between marital discord and child behavior problems. With sample sizes of 100 or more, an association was found. Therefore, the evidence of this association has not been clearly demonstrated.

Self-Esteem

Amato (1986) examined the relationship between self-esteem of children and marital conflict in their parents in a large group of 15-16 year-old Australian school children. He was also interested in any sex and/or age differences in the groups in terms of the effects of marital conflict on the children. Amato used the Piers-Harris Children's Self-Concept Scale as a measure of self-esteem. He also used an open-ended parent interview, along with a few items from a child interview to develop a measure of marital conflict in

the family. Results indicated a strong negative correlation between marital conflict and self-esteem in primary school-aged girls, with no association in primary school-aged boys, or for either gender in secondary school-aged children.

Long, Forehand, Fauber, and Brody (1987) examined the effects of parental marital conflict and recent divorce (less than 12 months) on the cognitive and social self- and observer-rated self competence of 40 adolescents. They obtained various standardized measures of cognitive and social self-competence through self-report of the adolescent, as well as reports from the adolescent's mother, teacher, and independent observers.

The researchers used a 2 X 2 factorial design using divorced vs. intact and high conflict vs. low conflict as independent measures. The Perceived Competence Scale for Children (Harter, 1982) was used to measure children's self-perception of their own competence in two specific domains (cognitive and social), as well as a general measure of self-worth. Results of this study confirmed the association of parental marital status with adolescents' self-perceptions in both domains of functioning, and found no association between marital status and independently observed competence in the adolescents. However, a significant relationship between marital conflict and adolescents' self-perceptions was not found. Rather, independently observed competence was found to be associated

with level of parental conflict.

In contrast, Hoffman and Zippco (1986) compared 17 children aged 10-12 years from divorced homes with 60 same aged children from intact homes using the Coopersmith Self-Esteem Inventory. They found no significant differences between the groups, but did note various significant flaws in their experimental design, including no information on the length of time since the children's parents had been divorced.

As evidenced by the above discussion, research up to this point has not been able to empirically document a definite and clear relationship between self-esteem in children and the existence of marital discord and/or marital separation. The research also indicates the existence of potentially important confounding factors in this relationship, including the age and sex of the child. There is also evidence of a differences in self-esteem as related to the source of the report (e.g. self-report vs. parent or teacher report).

Depression

Wallerstein and Kelly (1980) cited depression as the "main psychopathological finding" in the 131 children who participated in their study, and this diagnosis was made in 25% of the sample (7 children were found to be severely depressed and 22 of the children to be moderately depressed).

In describing the depression, Wallerstein and Kelly (1980) included pervasive sadness, decrease in school performance, difficulty concentrating, preoccupation with the divorce, play inhibition, social withdrawal, self-blame, along with other symptoms typically seen in childhood depression.

Summary of the Discord/Divorce Literature

In looking at the projects presented above as most representative of this area of research, there appear some common themes and basic similarities. First, there is fairly strong evidence that a subset of children experience some major difficulties in various aspects of psychosocial functioning following marital separation. Second, these difficulties tend to be most severe immediately after parental separation, and for the most part, seem to significantly lessen at some point approximately two years following separation. Third, depending on the research sample, the nature of these difficulties differ over the broad range of child psychopathology, including depressive symptomatology, acting out behavior, peer difficulties, academic difficulties, and difficulties in the parent-child relationship.

However, what the research on the effects of divorce on children does not provide is information concerning the origins of this pathological behavior in the children, concerning both when and how this behavior began. In short,

it seems evident that this research is providing information concerning the results of a long process. To gain information about the origins of the behavior through analysis of the beginnings of this process, would provide insight not only for treatment issues, but possibly and equally important, for preventative purposes.

This paper represents an attempt to reinterpret and understand the process of marital discord, separation, and divorce from a family systems theory perspective, and to use this model in an attempt to begin empirical validation of the process, thereby gaining insight into the particular aspects of the process most important for a child's successful coping and positive adjustment to his/hers parents ordeal.

Family Systems Theory in Mental Health

Beginning in the late fifties, a revolution has occurred in the field of mental health. The literature of psychiatry, psychology, social work, and other allied mental health disciplines, has become inundated with writings from a new theoretical perspective termed family systems theory. According to the mathematical philosopher Von Bertalanffy (1968), a system is merely a "set of elements standing in interaction". To transform this notion into the field of psychology, any individual's behavior is determined by the context, or "system" of which (s)he is currently a part.

In this way, to understand an individual's behavior in a family, one must first understand the nature of that family system. This concept has been particularly utilized in the mental health field by family theorists such as Minuchin (1974), Haley (1976), and Madanes (1981). From this perspective, if the family is chosen as the system of analysis, any individual's behavior in that family is somehow grounded in the systemic functioning of all the family members. Further, all behavior, both functional and dysfunctional, can be viewed as a "byproduct" of dynamic family functioning. Minuchin (1974) describes this as follows:

> "The individual who lives within a family is a member of a social system to which he must adapt. His actions are governed by the characteristics of the system, and these characteristics include the effects of his own past actions. The individual responds to stresses in other parts of the system, to which he adapts; and he may contribute significantly to stressing other members of the system" (Minuchin, 1974, p. 9).

From this perspective, in order to fully understand any change that occurs in the family, it is necessary to examine all of the different dyadic, triadic, etc. relationships among the family members.

If a change occurs in the family, each of these subsystems will be affected. In short, when a change occurs, the family system rearranges itself to fit the change. A failure to rearrange around a problem, or a dysfunctional rearrangement around a problem can cause much difficulty for the family, and is, according to family systems theory, the root of pathology (Minuchin, 1974).

It must be remembered that in the course of the normal family life cycle, there occur many natural stressors, and the family must rearrange itself many times (McGoldrick & Carter, 1982). A few examples of these are birth of a child, changing jobs, adolescence, and children preparing for and ultimately leaving home. These changes are developmental stages through which a family moves during the life-cycle. However, recently, with the increase in divorce, the American family has been forced to change and readjust to the ramifications of severe marital discord beginning before separation, around the divorce itself, and often during the post-divorce visitation period.
This represents a very different type of change and readjustment by the family than the previously noted normal developmental stages of the family life cycle, since the end product is not necessarily the original family unit.

Stress is managed in a family in different ways. From the first day of courtship and continuing throughout a marriage, there is constant negotiation occurring between the two spouses. This continues in a more complex but basically similar manner when children come into the family. Each of these episodes can essentially cause a shift in the family system, changing, however minimally, each member's "place" in the family. However, in a family where this shift cannot occur (for any of a number of reasons discussed by family theoreticians), these "negotiations" can greatly intensify. As this spiralling intensity continues, the system becomes more and more "stuck" at one point, and the number of alternative solutions decreases. At a point where the intensity is so great that no simple solution within the family can be found, a member or a set of members of the family system is forced to act in a very strong and decisive manner (either healthy or pathological) as the only means by which to solve the problem.

The above is a simplified description of the process that typically occurs in families, sometimes resulting in one of the spouses moving out of the home. What is important to note from this discussion is that marital separation is not a single unique event that occurs on a given day. Rather, it must be thought of

as a gradual process occurring over time. If analysis is made at the systemic level, changes in the system are occurring throughout this process, beginning with marital distress and discord, continuing to marital separation, and even reaching beyond divorce in some circumstances (e.g. negotiations over child support and visitation schedules).

All aspects of this process can and often do have ramifications for all members of the family. Therefore, rather than examining divorce as a global concept affecting children, specific aspects of the divorce process must be examined uniquely as potentially having some effects on children. This concept has been illustrated in the literature in that the focus has moved from examination of family type (i.e. intact vs. divorced) to the examination of specific family processes hypothesized to be important for predicting children's adjustment (Emery, Hetherington, & DiLalla, 1984).

Hess and Camara (1979) have identified the nature of intrafamilial relationships as being more important than family type in predicting children's maladjustment. Their sample consisted of 16 divorced families with 9-11 year old children and a matched control group. The divorced families had been contacted through the courts, and the parents in these

families had been separated 1/2-2 years prior to participation in the project. Data collected included interviews with parents, child, the child's teacher, as well as behavior checklists completed by parents and teachers. Areas of interest for the study included comparisons of the children in the two groups on social relationships, levels of stress and aggressiveness, and the examination of several family interaction variables.

Results showed a difference between the two groups in that the children in the divorced homes exhibited more stress and less work effectiveness in school. These differences were related to the family process variables (i.e. quality of parent-child and parent-parent relationships) and not to the current family constellation (i.e. divorced or intact).

From the clinical literature, a good example of this type of change in intrafamilial relationships that is somewhat common in pre- and post-divorce family is what Minuchin (1974) terms "triangulation". Here, the child is brought by one parent into an alliance against the other parent. Minuchin views this type of family structure as extremely pathological for the involved child, as well as for the rest of the family.

Both Jacobson (1978) and Emery (1982) have identified the level of marital conflict and hostility

during the period prior to separation as an important variable for the child's success in coping following separation.

Children's Perceptions of the Family System

Individuals perceive family system changes in different ways. For instance, a child might perceive scolding by a parent as evidence of that parent not loving him/her, when from the parent's perspective (s)he is merely teaching the child what should or should not be done. At the same time, for a number of complex reasons likely to be undiscernible at the time, another child in that same family scolded in the same manner might perceive the scolding as punishment for his/her actions, rather than an indicator of the parent's lack of love.

At first glance this may seem to be a trivial distinction. However, if a researcher were asking the first child at that point in time about his/her perception of the scolding, that response might greatly differ from the second child's or parent's response. If the researcher in question is, for instance, examining the effects of scolding on a child, given the different perceptions of the scolding by the two children, the scolding may in fact have very different effects on the two children.

It is the contention of this paper that the above example represents a major point that has been missed in the research examining the effects of marital discord and marital separation on children. In order to understand how the events involved in marital distress and marital separation are affecting children, one must first assess how the child perceives these events. In other words, the relative effects of the marital discord and marital separation are in some part dependent on the manner in which the child perceives and incorporates the events into his/her own understanding.

To be more specific, children's perceptions of their parents' behaviors are hypothesized to be as important a predictor of adjustment as actual parental behavior (Schaeffer, 1964). In his work on devising an empirical instrument to measure this hypothesis, Schaeffer (1964) reviewed studies dating back to 1894 which attempted to create statistically sound instruments that measure this phenomenon. For example, studies were presented that indicated a relationship between children's reports of parental behavior and measures of child adjustment (Berdie & Layton, 1957), observers' reports of child behavior (Bronfenbrenner, 1961), and school achievement (Morrow & Wilson, 1961).

To return to the initial discussion of family systems theory, notions of structure and function within a family system have provided a new way in which to discuss families, and in particular to discuss more microscopically the events involved in the change and reorganization of family systems at points in time. Using this notion, it is now not only possible to obtain "objective and empirical" notions of family structure and changes in that structure, but it is also possible to obtain family members' observations and perceptions of family structure and function. This then provides an empirical way to access each family members' perceptions of family structure.

To now apply this to the specific situation of marital distress and marital separation, it becomes possible to assess changes in family structure as perceived by all family members. By the use of standard psychological instruments designed to measure behavior problems, self-esteem, and depression, it is also possible to relate these perceptions to a sample of outcome measures, thereby empirically measuring the importance of the way in which a child perceives family structure for that child's successful coping with this situation.

Rationale

The majority of research examining the effects of marital separation and/or divorce on children has provided mental health professionals with a view of the potential outcomes resulting from a long, complex, and variable process. However, information on the consequences of an event or series of events does not provide much insight into the potential causal components of the consequences. Knowledge of the circumstances leading up to these outcomes provides the crucial additional information necessary for taking preventative steps to ameliorate the problem, rather than treating its results.

The majority of the literature on child outcome following divorce has typically obtained data about the divorce from children after (often several years after) the divorce process has concluded. The major problem inherent in this methodology is that the data obtained in this manner are retrospective in nature, and are likely to be subject to distortion and response bias (Block, Block, & Gjerde, 1988). In order to ameliorate this problem, this study gathered information about the **process** of marital discord and marital separation from children whose families were at different stages of this process. In this way, it was possible to obtain

children's perceptions of the family structure while discord and/or separation are occurring, rather than acquiring outcome information after the divorce has occurred. By sampling families ranging from those currently reporting marital discord to those already divorced, it was possible to gain insight about the antecedents of the divorce process, and how these may or may not have affected the child in different ways.

Both theoretical and applied family systems theory have provided researchers with a new way in which to examine systemic change in smaller steps. Based on this theory, the process of marital distress leading to divorce involves many systemic changes in the family system, creating intermediate family structures. Because of the nature of the adversarial process of separation, these intermediate structures can often be pathological in nature. According to family systems theory, since the role in which this child has been functioning will be altered by these structural changes, this in turn may cause the child to exhibit pathological behavior as a result. It may be the case that how the child perceives these structures, rather than either family type (intact or divorced) or the way in which others perceive these structures, is most predictive of whether this pathology appears. Since, as previously stated, the family systems model carries

with it certain ways of conceptualizing families and individual's behaviors within families, the assessment of children's (or other's) perceptions of family functioning was obtained using an instrument derived from a family systems perspective.

Previously discussed research has emphasized the importance of children's perceptions of parental behavior as being as important for predicting adjustment as actual parental behavior. This knowledge can be applied here to the circumstance of marital discord and marital separation. It may be the case that children's perceptions of family functioning is as important a predictor of adjustment and coping with marital discord and separation as actual family type, or other's perceptions of family functioning.

The present study attempted to use the basic findings of previous research as a base, and present a new way in which to examine and interpret the ways in which children are affected by, and cope with parental discord and separation. This was accomplished in several ways.

The first step was to determine whether a relationship existed between children's perceptions of family functioning and their current level of psychosocial adjustment. According to family systems theory, problems affecting the family system are often

reflected in the development of low self-esteem and pathological behaviors in individual family members, often children (e.g. presence of moderate/severe depression). Therefore, it may be the case that children who view their family functioning as more disturbed will themselves be functioning more pathologically. Specifically, these children may exhibit higher levels of overall behavioral problems, exhibit a higher incidence of depressive feelings, and report lower self-esteem, than children who perceive their own family as functioning in a more healthy manner.

This concept was researched in part in a study by Cooper, Holman, and Braithwaite (1983), in which they examined the relationship between family cohesion and self-esteem. In the study, 467 children (ages 9-12 years) completed two self esteem questionnaires (Coopersmith Self Esteem Inventory and Piers-Harris Children's Self-Concept Scale), as well as a questionnaire designed to obtain information concerning the child's happiness with in his/her family, and another questionnaire assessing family cohesion. The authors also obtained any information that the child's teacher had concerning family structure and family relationships.

Results indicated that indeed, as hypothesized, children's perceptions of family relationships are related to self-esteem, and the authors found a significant negative relationship between perceived level of both interparental and child-parent conflict, and self-esteem in the child.

Once the relationship between children's perceptions of family functioning and their level of psychosocial adjustment was examined, the importance of these perceptions to adjustment, as compared to other's perceptions, or the more typical notion of actual family type (i.e. intact or divorced) was assessed. Since the literature suggests that children's perceptions of their parent's behavior is as good a predictor of adjustment as the actual parental behaviors (Schaeffer, 1964), it was hypothesized that children's perceptions of family functioning during marital discord and separation will be as good or better a predictor of the level of psychosocial adjustment than, for example, their mother's perceptions of family functioning, or family type. More specifically, children's perceptions of family functioning will be as good or a better predictor of overall behavior problems, occurrence of depressive feelings, and reports of low self-esteem, than their mother's perceptions of family functioning, or family

type. Overall adjustment was assessed using common examples of psychopathology in children (behavior problems, depression, and low self-esteem), to determine the contribution of perception of family functioning to each of these areas of categories of psychosocial functioning.

The questions posed above concerning the importance of children's perceptions of marital discord in predicting behavioral difficulties utilize the family systems model specifically to describe a child's perceptions of his/her family. As an additional test of the efficacy of this model, another questionnaire aimed at obtaining children's perceptions of family functioning was included. This measure is based on a more traditional behavioral observation model, providing a basis for comparison of the family systems model with a well accepted alternative model.

HYPOTHESES

Hypothesis 1: The more dysfunctional the child views the family structure, the higher will be the levels of general behavior problems.

Hypothesis 2: The more dysfunctional the child perceives the family structure, the higher will be the level of depressive feelings.

Hypothesis 3: The more dysfunctional the child perceives the family structure, the lower will be the child's self-esteem.

Hypothesis 4: The child's perception of family structure will be more predictive of the child's level general behavior problems than either the child's mother's perception of family structure, or the actual family type.

Hypothesis 5: The child's perception of family structure will be more predictive of the child's depressive feelings than either the child's mother's perception of family structure, or the actual family type.

Hypothesis 6: The child's perception of family structure will be more predictive of the child's self-esteem than either the child's mother's perception of family structure, or the actual family type.

Hypothesis 7: A child's perception of family structure obtained through a family systems oriented method will be more strongly related to the above mentioned measures of psychosocial functioning than that same child's perception of family structure obtained through a behavioral observation oriented method.

Methods

The data for this research have been obtained through the Family Studies Project at Michigan State University. Since it therefore is archival in nature, a large portion of the following methodology section will refer to the previously established procedures of the Family Studies Project.

Overall Description of the Project

The Family Studies Project (FSP) was a project intended to examine the effects of marital distress and marital separation on various aspects of the family system. The major goal of the project was to recruit families that were either currently reporting marital distress, or families in which the marital partners had separated within the previous two years, and to interview both spouses and any children aged 6-17 years. The adult interviews consisted of a series of open-ended and closed-ended questions administered orally by a clinical psychology graduate student, along with a series of standardized questionnaires that were completed by the adult and returned through the mail. The child interviews consisted of a series of standardized questionnaires administered orally to all child and adolescent participants by trained undergraduate research assistants.

Subject Recruitment

Through the resources of the FSP, many techniques were used to recruit appropriate subject families. The fact that many of these families were currently experiencing high levels of stress due to the distress and/or separation was reflected in the difficulty in subject recruitment, and therefore a number of different ways of contacting perspective subjects. were utilized.

The first attempt to recruit subjects was to contact professionals in the community who would be likely to have had exposure to this population. Approximately 200 letters were sent to clergy, mental health professionals, and attorneys in the area describing the project, along with letters of introduction that could be given appropriate families (Appendix A). No subjects were recruited via this method.

The second attempt at subject recruitment consisted of a series of advertisements in the classified sections of various newspapers in the Metropolitan Lansing area. Letters were also sent home with elementary and high school students in three of the local school systems that described the project to parents, and requested volunteers. This effort was reinforced by sending home a follow-up letter with

those same school children. Also at this point, the Friend of the Court of the Lansing Court system was contacted in order to aid the project in subject recruitment by providing information to interested families who were currently involved with the agency.

Initial Procedure with Interested Families

During the first phone contact with a potential subject family, an initial screening interview was done assessing the eligibility of the family (Appendix B). This goal of this interview was to screen out families on the bases of any one of the following: 1) parents were not the biological parents of the children, 2) marital partners had been separated for more than two years, or 3) children were less than 6 years of age or greater than 17 years of age (in the cases where families fell into the categories subsumed under point #1 or point #3 above, the adults were interviewed for other aspects of the project, but the data was not used for this research).

The final sample consisted of 43 mother/child pairs who agreed to participate in the study due to recent marital separation or currently reported marital distress. These pairs were derived from 25 different families. In six of the families (10 mother/child pairs), both parents were currently residing at the family home, and in the balance of the families,

parents had been separated for an average of six months. Of the children who participated in the study, 24 were females (mean age=10.6 years), and 19 were males (mean age=8.3 years). The sample of mothers was 95% Caucasian, and reported an average education level of two years of college. T-test and Analysis of Variance procedures yielded no significant age or gender effects on any of the independent variables.

Interview

Once the determination was made that a family was appropriate for participation in the study (from this point it will be assumed that the family had children also appropriate for the project), an interview time was scheduled either at the home of the family or at the Michigan State University Psychological Clinic, whichever was more convenient for the family. If the marital partners were separated, every effort was made to contact and interview the (ex)spouse and any children that might be living with that person. Due to many mitigating circumstances, this was not always possible, and therefore the data from only one spouse was used for the research. Possible differences that might arise with information from only one spouse will be taken into account in the statistical analyses.

For the actual interview, one or two graduate students (depending on whether there were one or two

adults participating) and as many undergraduate research assistants as there were children participating interviewed each individual in a separate, private room. The adult interview lasted from 30 minutes to 1 hour, and the child interview lasted from 1-1 1/2 hours, depending on the age and verbal ability of the child.

Instruments

For the purposes of this proposal, only the instruments pertinent to this particular aspect of the FSP will be discussed.

Measures Completed by Parents

Family Adaptability and Cohesion Evaluation Scales-II (FACES II). The FACES II (Olson, Portner, & Bell, 1982) is a 30 item questionnaire derived from family systems theory that provides a measure of family structure as defined by the Circumplex Model of Olson and his colleagues (Olson, Russell, & Sprenkle, 1979, 1980, 1983), The FACES II yields scores on two dimensions of family structure; family adaptability and family cohesion. Basically, the model provides for four levels of adaptability and four levels of cohesion, yielding sixteen descriptive cells into which family structure can be categorized (Olson, McCubbin, Barnes, Larsen, Muxen, & Wilson, 1983).

According to the Circumplex Model, family cohesion refers to "the emotional bonding that family members have toward one another" (Olson, 1982). Family adaptability is defined as "the ability of a marital or family system to change its power structure, role relationships, and relationship rules in response to situational and developmental stress" (Olson, 1982). These two dimensions combined provide a gross measure of family structure that can be easily utilized for research.

For the purposes of this study, it was necessary to slightly alter the form of the FACES II in order to make it more relevant to the questions being researched. In particular, the fact that some families were "intact" at the time of the interview and in other families marital partners had already separated, different forms of the FACES II were developed within the sample of adults and within the sample of children.

For the adults, two forms of the questionnaire were devised. For intact families, the standard FACES II form was used (Appendix C). For families in which the marital partners had already separated, the adult was given a form in which rather than each item beginning with the phrase "when with my family", the form for separated adults contained the phrase "when with my children" substituted for "when with my

family". In this way, it was more possible to obtain a measure of family structure in the two family systems that develop after parental separation. Except for that phrase substitution, the items remained identical to the original FACES II measure.

Olson, McCubbin, Barnes, et al. (1982) reported an internal consistency reliability coefficient of .87 for the Cohesion scale, and .78 for the Adaptability scale.

Personality Inventory for Children (PIC). The PIC (Wirt, Lachar, Klinedinst, & Seat, 1984) in its original form is a 600 item behavioral checklist completed by parents. It yields T-scores on 3 validity scales, one Adjustment Scale, and 12 clinical scales. For the purpose of this research, the short form (131 items) factor analysis of the PIC was used (Lachar, Gdowski, & Snyder, 1982) (Appendix D). This provides T-scores on 4 factor scales measuring overall behavior. The 4 factor scales are as follows: Scale I: Undisciplined/Poor Self Control, Scale II: Social Incompetence, Scale III: Internalizing/Somatic Problems, and Scale IV: Cognitive Development. As previously mentioned, these four scale scores provided an overall measure of behavior, and were used as one general measure of the current level of psychosocial functioning of the child.

Lachar, Gdowski, & Snyder (1982) calculated alpha coefficients for the internal consistency of the four broad-banned factors of the PIC. The coefficients are as follows: Factor I=.92, Factor II=.89, Factor III=.82, and Factor IV=.81.

In terms of validity characteristics of the four broad-band factors, the above authors found the four factors to differentiate varying inpatient and outpatient samples "significantly and meaningfully in a manner that would be expected based upon group characteristics" (Lachar, et al., 1982).

Measures Completed by Child

As previously stated, the child measures were divided into two categories: measures of the child's individual psychosocial functioning and measures of family functioning. It should be noted that the latter category is broad in nature and within it the measures differed in nature, however these titles are applied here for pedantic reasons.

Measures of Children's Psychosocial Functioning

In order to assess current psychosocial functioning as it related to family functioning, standardized measures of psychopathology in children were included. Much of the initial literature in the field included case reports and subjective descriptions of behavioral problems and the use of diagnostic

categories derived merely through observations and parent report. This is evident in the work of Wallerstein and Kelly, in which much of their outcome results were reported in an anecdotal way acquired from observations of the child. As previously mentioned, an important step in the research process was the inclusion of empirically derived questionnaires to assess psychopathology in the children. Well-standardized measures of behavior problems in children provide a more empirically-sound manner of comparing these children to other populations.

The first measure of children's psychosocial functioning was the PIC (a parent checklist) which was discussed in the previous section.

Children's Depression Inventory (CDI). The CDI (Kovacs, 1981) is a 27 item rating scale developed to assess depression in school aged children (Appendix E). Each of the 27 items consists of 3 statements graded from 0 (absent) to 2 (severe). The time frame for the questionnaire is the past week before presentation. As is true with all of the child measures, the CDI was presented orally to the child. The score on the inventory can range from 0 to 54. A score of 19 or greater has been used as a cut-off for clinical depression (Kovacs, 1981).

In their review book of child assessment techniques, Goldman, L'Engle, & Guerry (1983) discussed the work of Friedman and Butter (1979), who studied the reliability of the CDI by administering the measure to 875 Canadian children aged 10-17 years. They found a coefficient alpha of .86 for this sample, with no age or sex effects emerging.

Validity characteristics of the CDI were obtained in a study by Carlson and Cantwell (1980), in which they administered the instrument to 102 children ranging in age from 7 to 17 years. These children were evaluated as outpatients, and of 93 that received DSM-III diagnoses, 28 received diagnoses of an affective disorder. These 28 children obtained significantly higher scores on the CDI than did the other 65 children who carried various other DSM-III diagnoses. Also since poor self-esteem is related to depression, Carlson and Cantwell (1980) did find a significant negative correlation between scores on the Piers-Harris and scores on the CDI. This finding permits another way to obtain convergent validity for assessing psychopathology in the sample for this study (Goldman, et. al., 1983).

Piers-Harris Children's Self-Concept Scale. The Piers-Harris is an 80 item self-report questionnaire designed to measure self-concept in children and

adolescents (Piers, 1984). Each item consists of a statement about how some people feel about themselves, and the child is asked to respond "yes" or "no" as to whether that item applies or does not apply to themselves (Appendix F). Forty of the items (50%) are scored so that the response "yes" is indicative of high self concept, and forty items are scored so that the response "no" indicates high self-concept. Each item of the inventory is therefore scored 1 (high self-concept) or 0 (low self-concept), yielding a total score ranging from 0 to 80; hypothetically no self-concept to extremely high self-concept, respectively.

In the revised manual for the Piers-Harris Inventory, Piers (1984) reported data on the statistical properties of the scale. Test-retest reliability coefficients for the measure ranged from .42 (interval= 8 months) to .96 (interval= 3-4 months), with a median coefficient of .73. In the manual, the author reported on an earlier standardization study of hers (Piers, 1973) in which she calculated internal consistency for the measure. Using the KR-20 test, she found reliability coefficients for the total score to range from .88 to .93.

In the manual, Piers (1984) presented a number of validity studies for the her instrument, in which the relationship between the Piers-Harris instrument and other commonly used self-concept measures was examined. She reported a number of moderate but statistically significant correlations, along with a number of non-significant correlations. The author explained these small correlations as being mostly due to the fact that the Piers-Harris is an instrument designed to span a large age range (8-18 years), while the majority of instruments used in the validity studies were specifically designed to target some particular small range of children's ages.

Children's Measures of Family Functioning

Family Adaptability and Cohesion Evaluation Scales-II. For a more in-depth discussion of the basic format of the FACES II, see previous discussion in this methodology section. Two forms were developed for this project to focus on the two populations of children in the sample. For children in families in which the parents were not separated, the standard form of the FACES II was administered (Appendix C). For children of families in which the parents were separated, two different forms of the FACES II were administered. Each item on these questionnaires was identical to the standard form, except for the fact

that on one form each item began with the phrase "when with my mother...", and on the other form each item began with the phrase "when with my father...". In this way, the "mother" form (Appendix G) and "father" form (Appendix H) of the FACES II obtained a separate measure of family structure for the "two" families in which the child might live following a separation.

Parent Perception Inventory (PPI). The PPI (Hazzard, Christensen, & Margolin, 1983) is an 18 item questionnaire developed to assess children's perceptions of 18 parental behavior classes, based on a traditional behavioral observation model (Appendix I). The 18 behavior classes are divided into 9 positive types of behavior (positive reinforcement, comfort, talk time, involvement in decision making, time together, positive evaluation, allowing independence, assistance, and nonverbal affection) and 9 negative types of behavior (privilege removal, criticism, command, physical punishment, yelling, threatening, time-out, nagging, and ignoring). Each item is presented as a short list of behaviors descriptive of that particular class of behaviors. The instrument is administered twice, once for the father and once for the mother. Each item is scored 0 ("never") to 4 ("a lot"). Four subscales are obtained: Mother Positive, Mother Negative, Father Positive, and Father Negative.

Each subscale score can range from 0 to 36.

The PPI has been used in other studies examining differences in children's perceptions of parental behaviors in distressed and nondistressed families (Hazzard, Christensen, & Margolin, 1983). The instrument was shown to have some sensitivity in documenting differences in parental behaviors in distressed families. Also, it was suggested and statistically illustrated that parental behaviors in distressed families would be viewed as being more discrepant than parental behaviors in control families

In examining the statistical properties of the PPI, Hazzard, Christensen, & Margolin (1983) first determined internal consistency by computing Cronbach's alphas on each of the four subscales (Mother Positive=.84, Mother Negative=.78, Father Positive=.88, Father Negative=.80). The standardization sample was also split into two groups of children by age (5-9 yrs. and 10-13 yrs.), in order to examine internal consistency for different ages. The Alphas in these analyses ranged from .74-.89.

Convergent validity was assessed by computing correlations between the PPI and the Piers Harris Children's Self-Concept Scale and the externalizing scale of the Child Behavior Checklist (a parental measure of child behavior problems). For these

analyses, the PPI was completed by both children and parents. Results yielded a positive correlation between Mother's and Father's positive PPI scores and children's self-concept. The logical reverse also was illustrated, in that Mother's and Father's negative PPI scores were negatively correlated with children's self-concept. In terms of the CBC externalizing scale, Positive PPI scores for both parents were unrelated to conduct problems, whereas negative PPI scores for both parents positively correlated to conduct problems in the children.

Discriminant validity was assessed by correlating the four PPI scales with the Wide Range Achievement Test (WRAT) and the Becker Intellectual Inadequacy Scale, both of which are expected to not be highly correlated to PPI subscales. Six correlations were found to be insignificant. However, the authors did report one seemingly counterintuitive finding, in that Mother's Positive PPI scores were negatively correlated to WRAT scores. Also, Mother's negative PPI scores showed a weak relationship to mother-completed scores on the Becker (Hazzard, et. al., 1983).

Results

Measurement of Perceptions of Family Structure

First, an overall family dysfunction score from the mother and child versions of the Faces II was calculated. Based on standardization means published by Olson, Portner, and Bell (1982), the dysfunction score represents the distance that a subject's score (both on the "mother" and "child" form) on the Adaptability and Cohesion factors lies from the published means of the two factors. Since each pair of Adaptability and Cohesion scores forms a point on the Circumplex Model grid (Appendix J), using basic geometric theory, the distance between any two points on a graph (e.g., a subject's point and the published mean) is calculated as the square root of the sum of the squared differences between the pairs of Cohesion and Adaptability coordinates (the distance between X_1,Y_1 and X_2,Y_2=Square Root$((X_2-X_1)^2 + (Y_2-Y_1)^2)$. This simple arithmetic manipulation provides one number that illustrates how discrepant any pair of Adaptability/ Cohesion scores falls from the published means, or how, as predicted on the circumplex model, the structure of a given family is deviant from the norm.

The other measure of the perception of family functioning was the PPI. The published method for

analyzing scores on the PPI consists of summing the positive and negative scores for each parent, providing one overall composite score for child-perceived, parent-child functioning for each parent. A higher score (composite scores will range from 0 to 72) represents a more positive perception of the parent by the child. It should be noted that due to the lack of sustained contact that many of these children experienced with their fathers during the marital separation/divorce process, the ability to accurately compare PPI results for the mother and father is lessened. Since a large percentage of the children (70%) live with their mothers for the majority of the time, for the purposes of this project only the mother forms of the PPI were included in the analyses. Table 1 contains the scale score means and standard deviations of independent and dependent variables for the entire sample.

Table 1.
Means and Standard Deviations for
All Dependent and Independent
Variables

VARIABLE	MEAN	STANDARD DEVIATION
PIC FACTOR I	58.44	16.10
PIC FACTOR II	52.18	12.79
PIC FACTOR III	55.15	14.58
PIC FACTOR IV	49.40	7.12
PIERS-HARRIS	62.09	11.01
CDI	7.33	4.53
CADAPT	56.12	7.12
CCOHES	57.64	7.86
PPI +	26.79	6.68
PPI -	11.21	6.13
MADAPT	56.54	6.25
MCOHES	57.49	9.56

PIC FACTOR I=Undsiciplined-Poor Self-Control
PIC FACTOR II=Social Incompetence
PIC FACTOR III=Internalization/Somatic Symptoms
PIC FACTOR IV=Cognitive Development
CADAPT=Child Adaptability-FACES II
CCOHES=Child Cohesion-FACES II
PPI +=PPI Positive Score
PPI -=PPI Negative Score
MADAPT=Mother Adaptability-FACES II
MCOHES=Mother Cohesion-FACES II

A theoretical and statistical point concerning the use of the PPI and its devised scoring system arises when using the method presented above. The scoring system assumes that a higher positive score is somehow indicative of "better" parenting. In fact, a parent whose behavior contains some aspects viewed as positive by the child, and some aspects viewed as negative by the child, might be objectively rated as a more functional and effective parent than one whose interactions with the child were mostly rated as positive by that child.

Examining this problem from a statistical perspective, the above arguments suggest a potential curvilinear relationship between PPI scores and the outcome measures used in this study. Parents falling at **either** end of the spectrum on the PPI (with large positive or negative scores) might exhibit low, or even negative correlations with positive outcome measures, and the parents whose scores fall in the middle range might correlate positively with positive outcome. If this were found to be the case, a traditional linear correlation coefficient would not be the appropriate statistic to measure these relationships.

To test this premise statistically, the PPI scores were first correlated with the square of the outcome variables, to assess the strength of the quadratic

component of the relationship. Any significant correlations were then examined graphically to rule out the possibility that these relationships were nonlinear in nature. The combination of these two procedures yielded no patterns suggesting any nonlinear relationships.

Results of Tests of Hypotheses

Hypotheses #1-#3 predicted that a child's perceptions of family structure and functioning (as measured by the FACES II and PPI) would be related to his/her current level of psychological functioning. Each of these hypotheses was structured in the same manner, with the only difference being the outcome variable being analyzed. Before proceeding with the results of the first three hypotheses, it is important to note that within this sample, there were a number of families with more than one child participating. When analyzing separately those families with siblings, the correlations between dependent and independent variables were significantly larger than those found when examining the entire group.

Hypothesis #1 tested the relationship between children's FACES II and mother PPI scores, and an overall measure of child behavior problems, as measured by the PIC. This hypothesis predicted that children's perceptions of the family as more deviant would

correlate with more pathological scores (higher factor scores on the PIC subscales). Pearson Product Moment Correlation Coefficients were first computed between FACES II Adaptability and Cohesion scores separately, and then difference scores obtained using the previously described arithmetic transformation, and the four broad-band PIC factor scores. Negative but nonsignificant correlations were found between Adaptability scores and all four PIC factor scores. For Cohesion scores, three of the four correlations were also in the negative direction, but again none of these reached statistical significance. FACES II difference scores yielded three negative and one small positive correlation; none reaching statistical significance.

To test the second part of Hypothesis #1, Pearson Product Moment Correlation Coefficients were calculated between the child-completed "mother" forms of the PPI and the four PIC factor scales. Correlations were calculated examining PPI positive and negative scores separately, as well as the computed PPI difference scores. The positive PPI scores yielded four small, statistically nonsignificant correlations in the negative direction. The negative PPI scores were significantly correlated with the first two PIC factors (Undisciplined/Poor Self Control and Social

Incompetence), while small but nonsignificant positive correlations were found with the remaining two factors of the PIC. Correlations between the PPI composite scores (positive score minus negative score) and the four PIC factor scale scores revealed four negative coefficients. Again, as with the PPI negative scores above, the correlations with the Undisciplined/Poor Self Control and Social Incompetence factors were statistically significant. See Table 2 for a summary of the results of Hypothesis #1.

Table 2.
Pearson Product Moment Correlation
Coefficients Between Children's FACES II
and PPI Scores and PIC
Broad Band Factors

	FACTOR I[a]	FACTOR II[b]	FACTOR III[c]	FACTOR IV[d]
FACES II ADAPTAB.	-.27	-.29	-.01	-.14
FACES II COHESION	-.23	-.21	.07	-.25
FACES II COMPOSITE	-.19	-.31	0.00	-.18
PPI POSITIVE	-.17	-.14	-.22	-.18
PPI NEGATIVE	.42*	.50**	.08	.24
PPI COMPOSITE	-.38*	-.42*	-.20	-.28

*$p<.01$, **$p<.001$
[a]=Undisciplined-Poor Self-Control, [b]=Social Incompetence,
[c]=Internalization/Somatic Symptoms, [d]=Cognitive Development

In order to test Hypothesis #2, the same independent variables used in Hypothesis #1 were correlated with scores on the CDI. Small but nonsignificant negative correlations were found between all FACES II scores and the CDI. Correlations with the PPI also yielded statistically nonsignificant results. Results of Hypothesis #2 are presented in Table 3.

Hypothesis #3 substituted Piers-Harris scores as the dependent variable. The Piers-Harris correlated positively, but nonsignificantly with all FACES II scores. The negative PPI subscale and the PPI composite score revealed statistically significant correlations with Piers-Harris scores. Results of Hypotheses #3 are also presented in Table 3.

Table 3.
Pearson Product Moment Correlation Coefficients Between Children's FACES II and PPI Scores and CDI and Piers-Harris Total Scores

	CDI	Piers-Harris
FACES II ADAPTAB.	-.03	.17
FACES II COHESION	-.13	.34
FACES II COMPOSITE	-.07	.15
PPI POSITIVE	-.05	.15
PPI NEGATIVE	.28	-.56**
PPI COMPOSITE	-.21	.49**

*$p<.01$, **$p<.001$

Hypotheses #4,#5, and #6 all sought to assess the relative statistical strength or importance of one correlation coefficient compared to a second coefficient. Each of these hypotheses utilized the same independent variables and different dependent variables. The independent variables were children's perceptions of family structure (as measured by the child form of the FACES II), mother's perception of family structure (as measured by the mother form of the FACES II, and family type (intact or separated). Zero-order correlations between the mother form of the FACES II and family type and the dependent variables are presented in Tables 4 and 5.

Table 4.
Pearson Product Moment Correlation Coefficients Between Mother's FACES II Scores and Family Type and PIC Broad Band Factors

	FACTOR I[a]	FACTOR II[b]	FACTOR III[c]	FACTOR IV[d]
FACES II ADAPTAB.	-.30	-.03	-.28	.09
FACES II COHESION	-.47*	-.08	-.09	.06
FAMILY TYPE	-.05	.09	-.04	.20

*$p<.01$
[a]=Undisciplined-Poor Self-Control, [b]=Social Incompetence,
[c]=Internalization/Somatic Symptoms, [d]=Cognitive Development

Table 5.
Pearson Product Moment Correlation Coefficients Between Mother's FACES II Scores and Family Type and CDI and Piers-Harris Total Scores

	CDI	PIERS-HARRIS
FACES II ADAPTAB.	.21	.03
FACES II COHESION	.14	.07
FAMILY TYPE	.31	-.03

*$p<.01$

Since each of the final three hypotheses postulated the comparison of two Pearson Product Moment Coefficients, the statistical significance of the absolute difference between two correlation coefficients was assessed by using the zero-order correlations previously computed for the first three hypotheses, as well as including additional variables included specifically for these final hypotheses (the signs of the correlations were dropped since the hypotheses focused on absolute differences, rather than on directional differences). Each correlation coefficient was then transformed into a z-score using the Fisher equation, and the absolute differences in each pair were compared for significance (McCall, 1975). These hypotheses predicted that the child's

perceptions of family structure and functioning would yield a stronger relationship with outcome variables than either his/her mother's perceptions of the family, or family type (whether the child's parents were separated or currently living together in the home). For the purposes of these analyses, the factor scores FACES II (adaptability and cohesion scores), rather than the composite scores were used, since upon examination of Tables 2 and 3, factor scores almost always showed stronger relationships with the dependent variables than did the composite scores.

Hypothesis #4 utilized the overall level of behavioral problems in the child (as measured by scores on the four broad-band factors of the PIC) to determine any significant difference between the child's perceptions of the family and the other independent variables. Mothers' cohesion scores on the FACES II were related more strongly to PIC factor I (Undisciplined/poor self control) scores than was family type (whether having separated parents related to a higher PIC factor I score). All other comparisons among independent variables and PIC factor I scores were statistically nonsignificant. Children's scores on the PPI negative scale were also more strongly related to the PIC social competence scale than was family type. There were no statistically significant

differences found among any other dependent variables. Results of Hypothesis #4 can be found in Table 6.

Table 6.
Z-Score Transformations of Difference Scores
for PIC Broad Band Factors

	FACTOR I: UNDISCIPL./ POOR SELF-CONTROL	FACTOR II: SOCIAL INCOMPET.	FACTOR III: INTERNAL./ SOMATIC SYMPTOMS	FACTOR IV: COGNITIVE DEVELOP.
CADAPT-MADAPT	.12	1.12	1.16	.29
CADAPT-MCOHES	1.00	.91	-.33	.46
CCOHES-MADAPT	.29	.79	-.91	.98
CCOHES-MCOHES	1.16	.58	-.08	1.15
CADAPT-PPI+	.46	.67	-.88	-.17
CADAPT-PPI-	-.67	1.05	-.30	-.42
CCOHES-PPI+	.30	.34	-.63	.33
CCOHES-PPI-	-.84	1.39	-.04	.08
MADAPT-PPI+	.59	-.46	.29	-.37
MADAPT-PPI-	-.54	-2.17*	.89	-.62
MCOHES-PPI+	1.46	-.25	-.54	-.49
MCOHES-PPI-	.33	-1.97*	.04	-.74
CADAPT-FAM STAT	.97	.84	-.13	-.25
CCOHES-FAM STAT	.80	.51	.13	.25
MADAPT-FAM STAT	1.09	-.29	1.05	-.45
MCOHES-FAM STAT	1.97*	.08	.21	-.58
PPI+-FAM STAT	.53	.18	.80	-.08
PPI- -FAM STAT	1.72	1.99*	.18	.17

*-$p<.05$
CADAPT=CHILD ADAPTABILITY-FACES CCOHES=CHILD COHESION-FACES
MADAPT=MOTHER ADAPTABILITY-FACES MCOHES=MOTHER COHESION-FACES
PPI+=PPI POSITIVE SCALE PPI-=PPI NEGATIVE SCALE
FAM STAT=FAMILY STATUS (INTACT OR SEPARATED)

Hypothesis #5 was similar to Hypothesis #4 in that it too compared the differences among independent variables, except that the outcome variable here was child depressive symptomatology, as measured by scores on the CDI. No significant differences in relationships between any of the independent variables and self-reported level of depressive symptomatology were found.

Hypothesis #6 again sought to compare the differences among the same independent variables, with the outcome here being children's self-esteem, as measured by scores on the Piers-Harris Self-Esteem Inventory. Children's perceptions of family functioning as measured by PPI negative scale scores yielded a significantly stronger relationship with self-esteem than did family type. Results of Hypotheses #5 and #6 can be found in Table 7.

Table 7.
Z-Score Transformations of
Difference Scores for CDI
and Piers-Harris Total Scores

	CDI	PIERS-HARRIS
CADAPT-MADAPT	-.78	.61
CADAPT-MCOHES	-.48	.43
CCOHES-MADAPT	-.35	1.39
CCOHES-MCOHES	-.04	1.21
CADAPT-PPI+	-.09	-.09
CADAPT-PPI-	-1.15	-2.08*
CCOHES-PPI+	.35	.71
CCOHES-PPI-	-.71	-1.28
MADAPT-PPI+	.69	-.69
MADAPT-PPI-	-.35	-2.64*
MCOHES-PPI+	.39	-.52
MCOHES-PPI-	-.65	-2.47*
CADAPT-FAM STAT	-1.29	.06
CCOHES-FAM STAT	-.85	1.42
MADAPT-FAM STAT	-.48	0.00
MCOHES-FAM STAT	-.78	.18
PPI+-FAM STAT	-1.20	.71
PPI- -FAM STAT	-.13	2.71*

*-$p<.05$

CADAPT=CHILD ADAPTABILITY-FACES CCOHES=CHILD COHESION-FACES
MADAPT=MOTHER ADAPTABILITY-FACES MCOHES=MOTHER COHESION-FACES
PPI+=PPI POSITIVE SCALE PPI-=PPI NEGATIVE SCALE
FAM STAT=FAMILY STATUS (INTACT OR SEPARATED)

Hypothesis #7 differs in nature from the previous six hypotheses in that it examines the effectiveness of utilizing the family systems model as a way to obtain children's perceptions of family functioning in contrast to a more traditional behaviorally oriented way to obtain those same perceptions. Since perceptions of the family were obtained (both for a child and a mother) in different ways (i.e. FACES II vs. PPI), the relative effectiveness of one vs. another in predicting child problems cannot be made. Here it is two theoretical models being compared, rather than the actual difference in the strength of two different predictor variables.

In examining the comparisons between the two models (as represented by PPI vs. FACES II factor scores) presented in Tables 6 and 7, the behavioral observation model utilized by the PPI provided a more effective manner than the family systems derived FACES II to obtain the types of perceptions of family functioning for children that do relate the particular outcome variables in question. All five significant differences found in direct comparisons of the FACES II and the PPI favored the PPI as a more effective predictor. In particular, the results pointed to the negative scale of the PPI as being the most effective source of information in relating children's perceptions of family functioning to self-esteem, depression, and behavior problems.

Discussion

The goal of this research was to utilize marital discord/separation as an example of a potentially stressful situation for a child, and to identify some of the family, process-oriented factors that are involved in a child's successful or unsuccessful coping with the situation. In particular, this research targeted whether the way in which a child perceives the family situation (i.e., his/her own reality) represents a significant mediating variable in the process of coping.

Before proceeding with a discussion of the meaning and possible implications of these results, an important point must be made concerning the nature of the research design employed, and the inherent limitations when implementing such a design. The nature of the research design employed in this study limits the ability to rule out the possibility that the causal direction of a significant correlation may, in fact, go in the opposite direction implied by the original hypotheses. This point must be considered throughout discussion of all of the results. Given that the data were collected at only one point in time, no definitive statements concerning the causal direction of the significant correlations can be made. The conclusions made concerning significant results can only be viewed as being consistent or inconsistent with the original hypotheses.

The utility of children's perceptions of family functioning (when defined in terms of Olson's concepts of Adaptability and Cohesion) as a predictor of the overall level of behavior problems was not verified by statistical analysis. However, obtaining children's perceptions of family functioning utilizing a model focused on specific, observable types of negative parenting behaviors proved to be much more successful in relating these perceptions to the presence of behavioral problems concerning self-control and discipline issues, as well as social incompetence.

Currently, it is typically the case that children remain with their mother during the initial stages of marital separation. The mother-child relationship during this period of time is therefore a crucial element in a child's successful coping with the family situation. The specific categories of behavior problems that were found to be associated with a child's perceptions of negative behaviors by his/her mother were acting-out/externalizing in nature. Often in a clinical setting, these types of behavior problems will appear at a period of time when a parent is unable to maintain a consistent disciplinary style. Given the context of this study, this was not a surprising finding, since for the majority of these families, discipline that had previously been enforced by two individuals must now be enforced by a single individual. The added caretaking responsibilities of the custodial

parent also permits little, if any, time for that person to attempt to cope herself with the significant life change that has occurred, and may therefore cause difficulties in that parent's ability to function effectively as a parent.

Although inconsistent with the initial hypotheses of this study, the statistical possibility exists that the causal relationship suggested by the above correlation goes in the opposite direction, in that a child might accurately perceive more "negative" parenting interactions between herself and her mother, because she is exhibiting more acting out behaviors. Given the initial review of the literature concerning the types of negative behaviors observed in children whose parents are newly separated, this causal link would also be consistent with a child's situation following the separation of his/her parents.

The second and third hypotheses used the same independent variables as the first, with the difference being the outcome measure. With the FACES II scores as the independent variable, Hypothesis #2, using depressive symptomatology (as measured by scores on the CDI) as the outcome measure, was not confirmed by statistical analyses. This lack of significance was also found when self-esteem was replaced as the outcome measure, thereby disconfirming the first part of hypothesis #3.

The PPI negative scale did yield a statistically significant negative correlation with self-esteem,

indicating that an increase in maternal behaviors that are perceived as negative by a child is significantly related to reports of lower self-esteem in the child. The PPI composite score was also significantly related in a positive direction to children's self-esteem, which logically follows, since a larger composite score indicates a significantly greater number of perceived positive parental behaviors than perceived negative parental behaviors.

Hypotheses #4, #5, and #6 proposed the importance of the child's perceptions of family structure and functioning as more strongly related to a child's successful coping with the marital discord/separation situation than his/her mother's perceptions of the family, or whether the child's parents were living together or separately. In this study children's perceptions of family functioning were assessed using both the PPI and the FACES II, while mother's perception of family functioning were assessed using only the FACES II family system model. Although different patterns of correlations between dependent and independent variables were obtained using these two measures (FACES II and PPI), the only way in which to statistically compare mother's vs. child's perceptions in terms of their relative strength as predictors is through the use of common measures. Therefore, only the FACES II results were used in these comparisons.

In comparing mother's vs. children's perceptions of family functioning (using FACES II), neither demonstrated a significant relationship with any of the outcome variables in question, and therefore no significant differences were found between the two in relating to these outcome measures. In examining the third independent variable of family type (separated vs. intact), the perceptions of negative parenting by the child as reported in the PPI was more strongly related to social incompetence and low self-esteem than was family type.

Inherent in the fact that the PPI and FACES II were derived from different theoretical models, the two measures differ greatly in the level of analysis that a person is required to use in assessing his/her perceptions of the family. Deriving from a traditional behavioral observation model, the PPI uses actual behaviors performed by an individual as the level of analysis. This is exemplified by items such as "How often does your mom thank you for doing things, tell you when she likes what you did, give you something or let you do something special when you're good". The item asks the child to focus on specific, linear behaviors that his/her mother actually performed, and to report on the frequency at which these behavioral interactions occur.

In contrast, FACES II items such as "When with my mother, our family tries new ways to deal with problems",

use the systemic unit of the family as the level of analysis. This difference in these two measures is very important in interpreting the results. The significant correlation found between the negative scale of the PPI and the first two factors of the PIC (undisciplined/poor self-control and social incompetence, respectively) suggests that more overt negative interactions between mother and child relate to the development of various types of behavior problems in children, and that these can be either externalizing or internalizing in nature, or a combination of both. Since a high composite score on the PPI indicates a greater amount of positive behaviors than negative behaviors as perceived by the child, the significant negative correlations between PPI composite scores and PIC factors I and II are expected. No relationship was found using FACES II scores and any of the PIC factor scales.

Whether the underlying causal relationship that exists between the development of internalizing and externalizing problem behaviors and perceived negative parenting interactions between mother and child relates to a mother's difficulty in becoming a consistent one-person discipline team, or to the level of behavior problems increasing in the child, thereby demanding more discipline by the mother, a number of underlying dynamics may be involved in this process.

There are two outcomes that are reported quite often in the clinical literature concerning children's responses to marital discord/separation. First, children often report feelings that the fighting between their parents, and in some cases the subsequent separation, is somehow their own fault. Many of these children believe that something that they personally did is responsible for the fighting and for their father or mother leaving the home. These feelings of self-blame may be responsible for some of the more internalizing types of negative behaviors that develop. The parenting interactions between mother and child that are perceived as negative by the child may be reinforcing these feelings of responsibility which already exist in the child's belief system.

Another common outcome seen in the clinical literature concerning children of families involved in marital separation is that a pattern often develops for the child when differentiating between the custodial and noncustodial parent. Children will tend to perceive the custodial parent (usually the mother) in a more negative light than the noncustodial parent. The mother becomes the parent that must discipline and set limits more often than the father. This often leads to the child dividing the perceived blame for the separation in an inequitable way, placing the majority on the mother. Relating this back to the significant correlation between the development of negative

acting-out behaviors and perceived negative interactions between mother and child, what might be occurring is the child displacing his/her anger and blame for the separation onto the mother.

A similar pattern appears when attempting to predict children's self-esteem using the FACES II and the PPI. No significant relationship was found using a measure of perceived family structure at the systemic level, but once again, when examining specific positive and negative parental behaviors, the amount of negative parental behaviors perceived by the child was a major factor in predicting self-esteem.

Overt negative interactions between mother and child, as reported by the child, are more strongly related to the manifestation of behavior problems in the children than children's perceptions of family adaptability and cohesion. In fact, the systemic level of measurement employed by the FACES II exhibited little predictive power in this study. This finding might be due not only to the nature of the outcome behavioral variables being measured, but also to a more basic principle alluded to earlier in this paper, concerning the way in which child psychopathology/behavior problems are typically conceived. This will now be elaborated upon, specifically related to the results of the statistical analyses.

Categories of psychopathology such as depressive symptomatology, low self-esteem, and self-control are themselves rooted in a perception of the individual as a single, distinct unit of analysis. As presented early in this paper, family systems theory does not characterize a system as merely consisting of a group of individuals. Rather, a system denotes a qualitative shift in the unit of analysis. New conceptions of how systemic psychopathology (as assessed by measures such as the FACES II) is manifested in a given individual in the system must be developed that could correlate more closely with a systemic measure like the FACES II. In order to achieve this goal, an assessment must include evaluation of not only the individual, but also the system in which (s)he is functioning. Related to this point, it may be more difficult for both children and adults to conceptualize family behavior from a systemic standpoint, than from focussing on individual behaviors. This may in part be due to shortcomings of the FACES II measure itself (since this study, Olson and his colleagues have revised the FACES II and created the FACES III (Olson, Portner, & Lavee, 1985)). This may also be due to the fact that it is difficult for individuals to accurately report observations at the level of abstraction demanded by the FACES II. On the other hand, evaluation and diagnosis at the systemic level may necessitate the use of an outside, objective observer in order to obtain a more 3-dimensional view of

systemic functioning. For future studies similar to this one, an observational component might be helpful as a way to obtain another systemic level analysis of family functioning from a more objective perspective.

The above discussion refers to the final hypothesis, in that for this study the behavioral observation model utilized in the PPI was more effective than the family systems model underlying the FACES II in relating children's perception of marital discord to the development of problematic behaviors in those children. However, the fact that the comparison of these two models is so strongly related to the particular instruments being used, coupled with the lack of significant findings with the FACES II throughout the study suggests that these differences may be more strongly grounded in the shortcomings of the particular measures than in the theoretical models themselves.

The significant relationship found between children's perceptions of the family and both self-esteem and social competence are suggestive of an ongoing, long-term reaction to the marital discord that has presumably occurred in the past, and is likely to be occurring currently in the family. This finding is supported by the fact children's perceptions of negative parenting by their mothers is more strongly related to lower self-esteem and higher social incompetence than is family status. This suggests that it is particular aspects of family functioning, rather than simply the family

status, that relates to the development of more problematic behaviors in the child.

Conclusions

There are a number of weaknesses inherent in the methodological design. It is essential that these are mentioned, since some of these issues can and do significantly effect the generalizability of the results. These points are presented not to diminish the importance of the study, but to provide information necessary for other researchers working in this field.

First, a most important point to be taken into consideration is the size of sample being analyzed. From a statistical perspective, the small sample size in this study significantly decreases the statistical power of the results, and thereby decreases the ability to detect significant correlations that exist in the population under study. Problems concerning sample collection will now be discussed in more detail.

Previous discussion has pointed out several difficulties that arose during the collection of this sample. In examining the relative success or failure of the number of techniques utilized by the research team to solicit participants for the study, a pragmatic point should be emphasized. When one is attempting to research any issue in which the subjects are, by definition, involved in a very stressful life situation, the likelihood that individuals or families will participate is significantly decreased.

Attitudes of clinicians toward research that solicit subjects who might already be seeking aid in a clinical setting is often tainted by misconceptions about research techniques, and the way in which individuals are treated in research projects. These clinicians are often reluctant to refer their own clients to research projects. For future projects, one way that might significantly increase the number of families participating in a project like this one would be to provide some type of professional counselling or other mental health intervention, to help these individuals who, by definition, are presently experiencing emotional distress.

In examining this issue from another perspective, it is likely that many families would be very hesitant (for whatever reason) to convey their own family issues and conflicts to a research project. This hesitation forces the researcher to be wary that some type of pre-selection process is occurring regarding the final sample, which in turn might have an effect on the generalizability of the results. It is possible that a family that chose to participate in this study might be a family that would also be likely to seek out help earlier, which in turn could be an indicator of healthier premorbid family functioning.

Another major concern in the present design is the lack of a control group. This study was initially designed as a descriptive study of a sample of children living in families

in which the parents were either currently reporting marital discord, or have separated during the six months prior to participation in the study. Without a matched comparison group, it is impossible to make any statements concerning any relative differences between this sample of children and other samples of children whose families would not fall in the categories under discussion. More specifically, the lack of a control group greatly limits the ability to compare these results to the "normal" family functioning, in order to determine whether these processes do significantly differ between intact, "normal" families and families currently experiencing marital strife.

It is important to note however, that the lack of a control group does not entirely negate the results of this descriptive analysis. The current design was established to examine the processes that occur within a family currently experiencing marital discord or marital separation. In this sense, the results do provide a description of these processes. The importance of ascertaining and understanding how a child might understand this complicated process of marital discord and separation that is occurring in his/her family is often times overlooked in clinical work. This study has made an initial attempt to illustrate that there is a relationship between these perceptions and the development of problem behaviors in that child. In particular, the level of disciplinary behavioral

interactions between mother and child that are perceived as negative by the child significantly relate to the development of certain behavioral patterns in the child. This finding has implications for clinicians in the way that they might assess the impact of the family situation on a given child.

As alluded to in the introduction of this paper, this study attempted to bridge what is often a very large gap between clinical work and empirical research, through attempting to empirically define and apply concepts originally developed in the clinical literature to a more scientifically rigid analysis. It is this type of research that is essential for understanding clinical phenomena, developing clinical interventions, and evaluating the efficacy of these interventions, three tasks essential for sound clinical work.

For example, when clinically evaluating children whose parents currently report a high level of marital discord, or recent separation, understanding the way in which the child perceives events in the family is essential. This is true for most clinical work with children, but is especially relevant in this situation. The assumption that is often made in the clinical setting, that the parental separation is the single most important factor in the development of problem behaviors in the child, is not confirmed by this data, and as mentioned above, it is the child's perceptions

of mother's behaviors both pre-separation and post-separation that is a more salient factor to examine in the evaluation.

When setting up treatment protocols for these children, both individual parenting sessions with the mother and collateral sessions with both mother and child, specifically focused on positive interactions, should prove beneficial for the child. It is clear from the data that children's perceptions of negative disciplinary interactions with the mother are most strongly related to the development of various psychosocial problems in the child.

Appendices

Appendix A

Letter of Explanation

MICHIGAN STATE UNIVERSITY

DEPARTMENT OF PSYCHOLOGY
PSYCHOLOGY RESEARCH BUILDING

EAST LANSING · MICHIGAN · 48824-1117

October 11, 1984

ARE YOU HAVING SERIOUS MARITAL PROBLEMS?

ARE YOU RECENTLY SEPARATED?

In the United States today, there are over three million men, women and children who go through the difficult process of an ended marriage each year. There is a growing body of evidence that marital conflict and disruption can cause both psychological and physical stress in all family members.

The FAMILY STUDIES PROJECT at Michigan State University, wants to learn more about this significant stress in family life and how to combat it. To do this we need to talk to you. Your individual experiences are important. They can help us learn valuable facts about marital problems. We want to hear your story, we want to know what is happening and how you feel about it. We need to know what your personal options are and where you want to go from here. We're interested in how others are reacting to you now -- what kind of feedback you're getting from friends and family. In short, we want to know how and what you're doing.

While you will be helping us a great deal, past experience has shown that some people find that telling their story and answering our questions has helped them get a clearer view of what is happening or has happened. If problems are identified during the interview, and if you request, we can refer you to places where you may find help.

WOULD YOU BE WILLING to spend an hour or so in a personal interview, sharing with us your experiences and your reactions to them? Appointments can be arranged for day or evening. All information is completely confidential. No obligation of any kind is involved, you may change your mind about participating at any time, and there is no cost involved. At the end of this interview we would like to leave some brief questionnaires for you to complete. If you wish you can choose to participate further by allowing us to call you once a month.

If you are currently having marital problems or have separated from your spouse within the past six months fil out and mail the enclosed card to us. We will call you and describe our program. At the end of the phone call you can decide to participate or not. We can work together, helping each other.

FAMILY STUDIES PROJECT at Michigan State University
353-8877, 355-9561

Appendix B

Telephone Screening Interview

Telephone Screening Interview

"Hello, I'm _____. I am an assistant in the Family Studies Project at Michigan State University. Thank you for completing and returning the postcard to us. I would like to ask you some questions to determine your eligibility in our program. After you answer our questions, I'll do my best to answer any questions you have. At the end of the conversation I'll ask you if you would be willing to participate further."

Name: Today's Date:
Telephone Number: Interviewer's Number:

1. "Are you currently married?" YES_____ NO_____
   If NO state:

   "Thank you very much for your willingness to participate. However, our present program is focusing on currently married persons living together and in conflict or currently married persons recently separated. Thank you again."

   If YES:

2. "Is this your first marriage?" YES_____ NO_____
   If NO state:

   "Thank you very much for your willingness to participate. However, our current program is focusing only on persons in their first marriage. Thank you."

3. "Are you currently separated from your spouse? That is, do you and your spouse live apart, under different roofs? YES_____ NO_____
   If YES: If NO go to question 5

4. "What was the date that you (your spouse) moved out?"
   DATE_____

5. "Since our interest also includes how marital conflict affect all members of a family, we'd like to know a little about your spouse and your own children if there are any. Because our interest is in the study of the family if you don't object we would like to interview, if appropriate, your children and your spouse. Do you object to our talking to or writing to your spouse and children? YES_____ NO_____
   If YES go to paragraph 10

6. "Do you and your spouse have children? YES_____ NO_____
   If YES:

7. "What are the age and sex of each child?" AGE SEX
   Child 1:
   Child 2:
   Child 3:
   Child 4:

8. "If not separated from spouse: "May we talk to or write to your spouse and ask him/her to participate?"
YES_____ NO_____

9. "If sparated from spouse: What is the address of your spouse so that we may write to him/her to ask him/her to participate?"

_____

_____

_____

_____

10. "That's all the questions I have now. Based on your answers to the previous questions you are eligible to participate in our Program. As stated in the letter you read we would like to have a member of our staff meet with you to discuss your situation with you. That meeting would be scheduled at your convenience and, if you wish, could even be in your home. Do you have any questions?" If possible answer them. If you cannot answer a question ask person to call: Dr. Stollak 351-4791/ Dr. Caldwell 353-4548. "May I be permitted to have a staff member call you? Yes? Good. When would be the best times to call you?_____ Thank you for your willingness to help."

Appendix C

Standard FACES II Form

DO NOT WRITE IN THIS AREA

INSTRUCTIONS: Please describe what your family is like now on each of the 30 items using the following scale:

1 = Almost never
2 = Once in a while
3 = Sometimes
4 = Frequently
5 = Almost always

1. Family members are supportive of each other during difficult times.....
2. It is easy for everyone in the family to express his/her opinion.....
3. It is easier to discuss problems with people outside the family than with other family members.....
4. Each family member has input in major family decisions...
5. Our family gathers together in the same room.....
6. Children have a say in their discipline.....
7. Our family does things together.....
8. Family members discuss problems and feel good about the solutions.....
9. Everyone goes his/her own way.....
10. We shift household responsibilities from person to person.....
11. Family members know each other's close friends.....
12. It is hard to know what the rules are.....
13. Family members consult each other on decisions.....
14. Family members say what they want.....
15. Our family has difficulty thinking of things to do.....
16. In solving problems, the children's suggestions are followed.....
17. Family members feel very close to each other.....
18. Discipline in our family is fair.....
19. Family members feel closer to people outside the family than to other family members.....
20. Our family tries new ways to deal with problems.....
21. Family members go along with what the family decides to do.....
22. In our family, everyone shares responsibilities.....

DO NOT WRITE IN THIS [redacted] AREA

.....23. Family members like to spend their free time with each other.

.....24. It is difficult to get a rule changed.

.....25. Family members avoid each other at home.

.....26. If problems arise, we compromise.

.....27. We approve of each other's friends.

.....28. Family members are afraid to say what's on their mind.

.....29. Family members pair up rather than do things as a total family.

.....30. Family members share interests and hobbies.

Appendix D

Personality Inventory for Children (short form)

DO NOT MAKE ANY MARKS ON THIS BOOKLET

PART I

1. My child often plays with a group of children.
2. My child hardly ever smiles.
3. Other children often get mad at my child.
4. My child worries about things that usually only adults worry about.
5. My child has many friends.
6. My child seems average or above average in intelligence.
7. My child's manners sometimes embarrass me.
8. My child has a good sense of humor.
9. My child sometimes sees things that aren't there.
10. My child is worried about sin.
11. Other children don't seem to listen to or notice my child much.
12. My child sometimes undresses outside.
13. My child has little self-confidence.
14. I often wish my child would be more friendly.
15. My child can comb his (her) own hair.
16. My child is usually rejected by other children.
17. My child seems to enjoy destroying things.
18. Now and then my child writes letters to friends.
19. Thunder and lightning bother my child.
20. The school says my child needs help in getting along with other children.
21. My child often asks if I love him (her).
22. Other children look up to my child as a leader.
23. My child could ride a tricycle by age five years.
24. My child sometimes gets angry.
25. My child frequently complains of being hot even on cold days.
26. My child's behavior often makes others angry.
27. Recently my child has complained of eye trouble.
28. Others think my child is talented.
29. My child frequently has gas on the stomach (sour stomach).
30. My child is good at lying his (her) way out of trouble.
31. My child often cheats other children in deals.
32. My child is good at leading games and things.
33. At one time my child had speech difficulties.
34. Pestering others is a problem with my child.
35. My child can cut things with scissors as well as can others of his (her) age.
36. My child doesn't seem to care to be with others.
37. My child has difficulty doing things with his (her) hands.
38. Others think my child is mean.
39. My child seems to know everyone in the neighborhood.
40. My child would never take advantage of others.
41. My child can be left home alone without danger.
42. My child jumps from one thing to another.
43. My child has been in trouble for attacking others.
44. My child seems too serious minded.
45. My child has more friends than most children.
46. When my child gets mad, watch out.
47. My child really has no real friend.
48. My child is as happy as ever.
49. My child often complains that others don't understand him (her).

GO ON TO THE NEXT PAGE

50. My child has very few friends.

51. My child likes to play active games and sports.

52. Sometimes I worry about my child's lack of concern for others' feelings.

53. Often my child is afraid of little things.

54. My child tends to see how much he (she) can get away with.

55. My child almost never argues.

56. My child often disobeys me.

57. My child likes to show off.

58. Others have said my child has a lot of "personality."

59. My child goes to bed on time without complaining.

60. My child likes to "boss" others around.

61. Reading has been a problem for my child.

62. A scolding is enough to make my child behave.

63. My child sometimes disobeys his (her) parents.

64. My child is in a special class in school (for slow learners).

65. My child usually plays alone.

66. My child sometimes eats too many sweets.

67. My child often brings friends home.

68. My child learned to count things by age six years.

69. My child could print his (her) first name by age six years.

70. My child doesn't seem to learn from mistakes.

71. My child can't seem to wait for things like other children do.

72. My child always does his (her) homework on time.

73. My child is usually a leader in groups.

74. Sometimes my child lies to avoid embarrassment or punishment.

75. Other children make fun of my child's different ideas.

76. Sometimes my child's muscles twitch.

77. My child worries about talking to others.

78. My child first talked before he (she) was two years old.

79. School teachers complain that my child can't sit still.

80. My child has some bad habits.

81. Several times my child has spoken of a lump in his (her) throat.

82. My child frequently has nightmares.

83. My child almost never acts selfishly.

84. My child is usually in good spirits.

85. My child seems fearful of blood.

86. My child seems more clumsy than other children his (her) age.

87. My child will do anything on a dare.

88. My child sometimes becomes envious of the possessions or good fortune of others.

89. Shyness is my child's biggest trouble.

90. Usually my child gets along well with others.

91. My child gets lost easily.

92. My child often has headaches.

93. My child seems to get along with everyone.

94. My child is easily embarrassed.

95. My child is very popular with other children.

96. My child gets confused easily.

97. My child is almost always smiling.

98. My child loses most friends because of his (or her) temper.

99. My child is shy with children his (her) own age.

100. My child was difficult to toilet train.

101. My child wants a lot of attention when sick.

GO ON TO THE NEXT PAGE

102. My child can count change when buying something.

103. My child can tell the time fairly well.

104. Many times my child has become violent.

105. My child can take a bath by him (her) self.

106. Recently my child has complained of chest pains.

107. There is seldom a need to correct or criticize my child.

108. My child has as much pep and energy as most children.

109. Recently the school has sent home notes about my child's bad behavior.

110. Sometimes my child will put off doing a chore.

111. My child often talks about death.

112. My child has been difficult to manage.

113. Sometimes my child's room is messy.

114. My child is usually afraid to meet new people.

115. My child almost never needs punishing or scolding.

116. My child could eat with a fork before age four years.

117. Often my child complains of blurring (blurred vision).

118. My child needs protection from everyday dangers.

119. My child respects the property of others.

120. Frequently my child will put his (her) hands over his (her) ears.

121. Everything has to be perfect or my child isn't satisfied.

122. Spanking doesn't seem to affect my child.

123. My child talks a lot about his (her) size or weight.

124. My child often will cry for no apparent reason.

125. My child will worry a lot before starting something new.

126. My child usually looks at the bright side of things.

127. My child often has crying spells.

128. Sometimes my child gets hot all over without reason.

129. My child seems tired most of the time.

130. Others have remarked how smart my child is.

131. My child takes illness harder than most children.

GO ON TO THE NEXT PAGE
(unless instructed to stop at the end of Part I)

Appendix E

Children's Depression Inventory

CD INVENTORY

NAME: _____

DATE: _____

CASE NO.: ☐☐☐

INTERVIEW NO.: ☐☐

FORM NO.: ☐

KIDS SOMETIMES HAVE DIFFERENT FEELINGS AND IDEAS.

THIS FORM LISTS THE FEELINGS AND IDEAS IN GROUPS. FROM EACH GROUP, PICK ONE SENTENCE THAT DESCRIBES YOU BEST FOR THE PAST TWO WEEKS. AFTER YOU PICK A SENTENCE FROM THE FIRST GROUP, GO ON TO THE NEXT GROUP.

THERE IS NO RIGHT ANSWER OR WRONG ANSWER. JUST PICK THE SENTENCE THAT BEST DESCRIBES THE WAY YOU HAVE BEEN RECENTLY. PUT A MARK LIKE THIS X NEXT TO YOUR ANSWER. PUT THE MARK IN THE BOX NEXT TO THE SENTENCE THAT YOU PICK.

HERE IS AN EXAMPLE OF HOW THIS FORM WORKS. TRY IT. PUT A MARK NEXT TO THE SENTENCE THAT DESCRIBES YOU BEST.___

EXAMPLE:

☐ I READ BOOKS ALL THE TIME

☐ I READ BOOKS ONCE IN A WHILE

☐ I NEVER READ BOOKS

REMEMBER, PICK OUT THE SENTENCES THAT DESCRIBE YOUR FEELINGS AND IDEAS IN THE PAST TWO WEEKS.

1. ☐ I AM SAD ONCE IN A WHILE
   ☐ I AM SAD MANY TIMES
   ☐ I AM SAD ALL THE TIME

2. ☐ NOTHING WILL EVER WORK OUT FOR ME
   ☐ I AM NOT SURE IF THINGS WILL WORK OUT FOR ME
   ☐ THINGS WILL WORK OUT FOR ME O.K.

3. ☐ I DO MOST THINGS O.K.
   ☐ I DO MANY THINGS WRONG
   ☐ I DO EVERYTHING WRONG

4. ☐ I HAVE FUN IN MANY THINGS
   ☐ I HAVE FUN IN SOME THINGS
   ☐ NOTHING IS FUN AT ALL

5. ☐ I AM BAD ALL THE TIME
   ☐ I AM BAD MANY TIMES
   ☐ I AM BAD ONCE IN A WHILE

6. ☐ I THINK ABOUT BAD THINGS HAPPENING TO ME ONCE IN A WHILE
   ☐ I WORRY THAT BAD THINGS WILL HAPPEN TO ME
   ☐ I AM SURE THAT TERRIBLE THINGS WILL HAPPEN TO ME

7. ☐ I HATE MYSELF
   ☐ I DO NOT LIKE MYSELF
   ☐ I LIKE MYSLEF

8. ☐ ALL BAD THINGS ARE MY FAULT
☐ MANY BAD THINGS ARE MY FAULT
☐ BAD THINGS ARE NOT USUALLY MY FAULT

9. ☐ I DO NOT THINK ABOUT KILLING MYSELF
☐ I THINK ABOUT KILLING MYSELF BUT I WOULD NOT DO IT
☐ I WANT TO KILL MYSELF

10. ☐ I FEEL LIKE CRYING EVERYDAY
☐ I FEEL LIKE CRYING MANY DAYS
☐ I FEEL LIKE CRYING ONCE IN A WHILE

11. ☐ THINGS BOTHER ME ALL THE TIME
☐ THINGS BOTHER ME MANY TIMES
☐ THINGS BOTHER ME ONCE IN A WHILE

12. ☐ I LIKE BEING WITH PEOPLE
☐ I DO NOT LIKE BEING WITH PEOPLE MANY TIMES
☐ I DO NOT WANT TO BE WITH PEOPLE AT ALL

13. ☐ I CANNOT MAKE UP MY MIND ABOUT THINGS
☐ IT IS HARD TO MAKE UP MY MIND ABOUT THINGS
☐ I MAKE UP MY MIND ABOUT THINGS EASILY

14. ☐ I LOOK O.K.
☐ THERE ARE SOME BAD THINGS ABOUT MY LOOKS
☐ I LOOK UGLY

15. ___ I HAVE TO PUSH MYSELF ALL THE TIME TO DO MY SCHOOLWORK
___ I HAVE TO PUSH MYSELF MANY TIMES TO DO MY SCHOOLWORK
___ DOING SCHOOLWORK IS NOT A BIG PROBLEM.

16. ___ I HAVE TROUBLE SLEEPING EVERY NIGHT
___ I HAVE TROUBLE SLEEPING MANY NIGHTS
___ I SLEEP PRETTY WELL

17. ___ I AM TIRED ONCE IN A WHILE
___ I AM TIRED MANY DAYS
___ I AM TIRED ALL THE TIME

18. ___ MOST DAYS I DO NOT FEEL LIKE EATING
___ MANY DAYS I DO NOT FEEL LIKE EATING
___ I EAT PRETTY WELL

19. ___ I DO NOT WORRY ABOUT ACHES AND PAINS
___ I WORRY ABOUT ACHES AND PAINS MANY TIMES
___ I WORRY ABOUT ACHES AND PAINS ALL THE TIME

20. ___ I DO NOT FEEL ALONE
___ I FEEL ALONE MANY TIMES
___ I FEEL ALONE ALL THE TIME

21. ___ I NEVER HAVE FUN AT SCHOOL
___ I HAVE FUN AT SCHOOL ONLY ONCE IN A WHILE
___ I HAVE FUN AT SCHOOL MANY TIMES

22. ☐ I HAVE PLENTY OF FRIENDS

☐ I HAVE SOME FRIENDS BUT I WISH I HAD MORE

☐ I DO NOT HAVE ANY FRIENDS

23. ☐ MY SCHOOLWORK IS ALRIGHT

☐ MY SCHOOLWORK IS NOT AS GOOD AS BEFORE

☐ I DO VERY BADLY IN SUBJECTS I USED TO BE GOOD IN

24. ☐ I CAN NEVER BE AS GOOD AS OTHER KIDS

☐ I CAN BE AS GOOD AS OTHER KIDS IF I WANT TO

☐ I AM JUST AS GOOD AS OTHER KIDS

25. ☐ NOBODY REALLY LOVES ME

☐ I AM NOT SURE IF ANYBODY LOVES ME

☐ I AM SURE THAT SOMEBODY LOVES ME

26. ☐ I USUALLY DO WHAT I AM TOLD

☐ I DO NOT DO WHAT I AM TOLD MOST TIMES

☐ I NEVER DO WHAT I AM TOLD

27. ☐ I GET ALONG WITH PEOPLE

☐ I GET INTO FIGHTS MANY TIMES

☐ I GET INTO FIGHTS ALL THE TIME

THE END

THANK YOU FOR FILLING OUT THIS FORM

SUM:_____

ADMINISTRATION: 0. INDIVIDUAL
I. GROUP

Appendix F

Piers-Harris Children's Self-Concept Scale

DO NOT WRITE IN THIS AREA

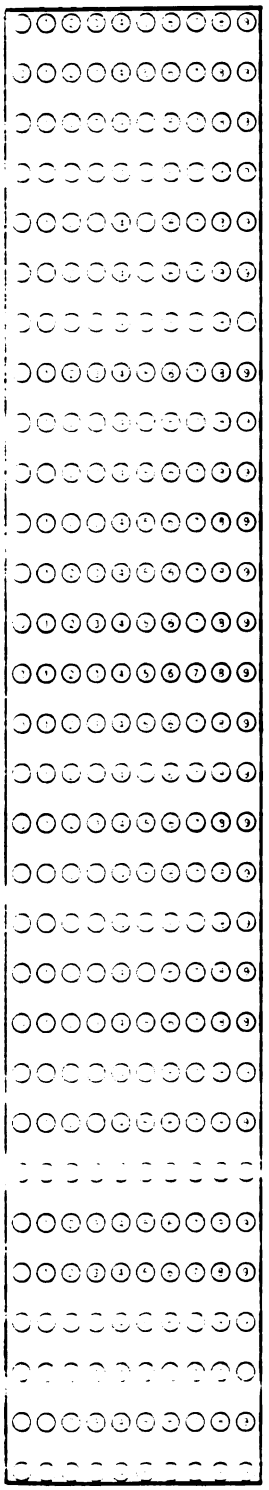
THE PIERS-HARRIS

Here are a set of statements. Some of them are true of you and so you will answer yes. Some are not true of you and so you will answer no. Answer every question even if some are hard to decide, but do not answer both yes and no. Remember fill in the yes if the statement is generally like you, or fill in the no if the statement is generally not like you. There are no right or wrong answers. Only you can tell us how you feel about yourself, so we hope you will mark the way you really feel inside.

YES = 0 NO = 1

1. My classmates make fun of me.....
2. I am a happy person.....
3. It is hard for me to make friends.....
4. I am often sad.....
5. I am smart.....
6. I am shy.....
7. I get nervous when the teacher calls on me.....
8. My looks bother me.....
9. When I grow up, I will be an important person.....
10. I get worried when we have tests in school.....
11. I am unpopular.....
12. I am well behaved in school.....
13. It is usually my fault when something goes wrong.....
14. I cause trouble to my family.....
15. I am strong.....
16. I have good ideas.....
17. I am an important member of my family.....
18. I usually want my own way.....
19. I am good at making things with my hands.....
20. I give up easily.....

DO NOT WRITE IN THIS [redacted] AREA



21. I am good in my school work.
22. I do many bad things.
23. I can draw well.
24. I am good in music.
25. I behave badly at home.
26. I am slow in finishing my school work.
27. I am an important member of my class.
28. I am nervous.
29. I have pretty eyes.
30. I can give a good report in front of the class.
31. In school I am a dreamer.
32. I pick on my brother(s) and sister(s).
33. My friends like my ideas.
34. I often get into trouble,
35. I am obedient at home.
36. I am lucky.
37. I worry a lot.
38. My parents expect too much of me.
39. I like being the way I am.
40. I feel left out of things.

DO NOT WRITE IN THIS AREA

41. I have nice hair.....
42. I often volunteer in school.....
43. I wish I were different.....
44. I sleep well at night.....
45. I hate school.....
46. I am among the last to be chosen for games.....
47. I am sick a lot.....
48. I am often mean to other people.....
49. My classmates in school think I have good ideas.....
50. I am unhappy.....
51. I have many friends.....
52. I am cheerful.....
53. I am dumb about most things.....
54. I am good looking.....
55. I have lots of pep.....
56. I get into a lot of fights.....
57. I am popular with boys.....
58. People pick on me.....
59. My family is disappointed in me.....
60. I have a pleasant face.....

DO NOT WRITE IN THIS AREA

61. When I try to make something, everything seems to go wrong.
62. I am picked on at home.
63. I am a leader in games and sports.
64. I am clumsy.
65. In games and sports, I watch instead of play.
66. I forget what I learn.
67. I am easy to get along with.
68. I lose my temper easily.
69. I am popular with girls.
70. I am a good reader.
71. I would rather work alone than with a group.
72. I like my brother (sister).
73. I have a good figure.
74. I am often afraid.
75. I am always dropping or breaking things.
76. I can be trusted.
77. I am different from other people.
78. I think bad thoughts.
79. I cry easily.
80. I am a good person.

SCORE:_____

Appendix G

FACES II Mother Form

DO NOT WRITE IN THIS AREA

FACES-M

INSTRUCTIONS: Please describe what your family is like now on each of the 30 items using the following scale:

1 = Almost never
2 = Once in a while
3 = Sometimes
4 = Frequently
5 = Almost always

1. When with my mother, family members are supportive of each other during difficult times.....
2. When with my mother, it is easy for everyone in the family to express his/her opinion.....
3. When with my mother, it is easier to discuss problems with people outside the family than with other family members.....
4. When with my mother, each family member has input in major family decisions.....
5. When with my mother, our family gathers together in the same room.....
6. When with my mother, children have a say in their discipline.....
7. When with my mother, our family does things together.....
8. When with my mother, family members discuss problems and feel good about the solutions.....
9. When with my mother, everyone goes his/her own way.....
10. When with my mother, we shift household responsibilities from person to person.....
11. When with my mother, family members know each other's close friends.....
12. When with my mother, it is hard to know what the rules are...
13. When with my mother, family members consult with each other on decisions.....
14. When with my mother, family members say what they want.....
15. When with my mother, our family has difficulty thinking of things to do.....
16. In solving problems, when with my mother, the children's suggestions are followed.....
17. When with my mother, family members feel very close to each other.....
18. When with my mother, discipline is fair in our family.....
19. When with my mother, family members feel closer to people outside the family than to other family members.....
20. When with my mother, our family tries new ways to deal with problems.....
21. When with my mother, family members go along with what the family decides to do.....
22. In our family, when with my mother, everyone shares responsibilities.....

DO NOT WRITE IN THIS AREA

.....23. When with my mother, family members like to spend their free time with each other.

.....24. When with my mother, it is difficult to get a rule changed.

.....25. When with my mother, family members avoid each other at home.

.....26. When with my mother, if problems arise, we compromise.

.....27. When with my mother, we approve of each other's friends.

.....28. When with my mother, family members are afraid to say what's on their minds.

.....29. When with my mother, family members pair up rather than do things as a total family.

.....30. When with my mother, family members share interests and hobbies.

Appendix H

FACES II Father Form

DO NOT WRITE IN THIS AREA

FACES-F

INSTRUCTIONS: Please describe what your family is like now on each of the 30 items using the following scale:

1 = Almost never
2 = Once in a while
3 = Sometimes
4 = Frequently
5 = Almost always

1. When with my father, family members are supportive of each other during difficult times.....
2. When with my father, it is easy for everyone in the family to express his/her opinion.....
3. When with my father, it is easier to discuss problems with people outside the family than with other family members.....
4. When with my father, each family member has input in major family decisions.....
5. When with my father, our family gathers together in the same room.....
6. When with my father, children have a say in their discipline.....
7. When with my father, our family does things together.....
8. When with my father, family members discuss problems and feel good about the solutions.....
9. When with my father, everyone goes his/her own way.....
10. When with my father, we shift household responsibilities from person to person.....
11. When with my father, family members know each other's close friends.....
12. When with my father, it is hard to know what the rules are...
13. When with my father, family members consult each other on decisions.....
14. When with my father, family members say what they want.....
15. When with my father, our family has difficulty thinking of things to do.....
16. In solving problems when with my father, the children's suggestions are followed.....
17. When with my father, family members feel very close to each other.....
18. When with my father, discipline in our family is fair.....
19. When with my father, family members feel closer to people outside the family than to other family members.....
20. When with my father, our family tries new ways to deal with problems.....
21. When with my father, family members go along with what the family decides to do.....
22. In our family when with my father, everyone shares responsibilities.....

DO NOT WRITE IN THIS AREA

.....23. When with my father, family members like to spend their free time with each other.

.....24. When with my father, it is difficult to get a rule changed.

.....25. When with my father, family members avoid each other at home.

.....26. When with my father, if problems arise, we compromise.

.....27. When with my father, we approve of each other's friends.

.....28. When with my father, family members are afraid to say what's on their mind.

.....29. When with my father, family members pair up rather than do things as a total family.

.....30. When with my father, family members share interests and hobbies.

Appendix I

Parent Perception Inventory

[illegible] THIS AREA

0	1	2	3	4
Never	A Little	Sometimes	Pretty Much	A Lot

PARENT PERCEPTION INVENTORY
(MY PARENTS AT HOME)

Ann Hazzard and Andrew Christensen

Read the child the following directions:

WE WOULD LIKE TO KNOW HOW MUCH YOU THINK YOUR MOM AND DAD DO CERTAIN THINGS AT HOME. WE WILL NOT TALK TO YOUR PARENTS ABOUT WHAT YOU TELL US, SO PLEASE TELL US WHAT YOU REALLY THINK.

LET'S TRY A PRACTICE QUESTION:

How often does your mom clean the house?
Does she clean it never, a little, sometimes, pretty much, or a lot?

Using the answer key above, fill in the circle which tells how often your mom cleans the house.

(AFTER THE CHILD HAS GIVEN HIS/HER ANSWER, CHECK TO MAKE SURE THAT HE/SHE UNDERSTANDS THE TASK.)

SO YOUR MOM CLEANS THE HOUSE (Child's answer)??

NOW WE'LL START.

(For each concept:
a) State the item number.
b) Ask "HOW OFTEN DOES YOUR MOM...."
c) Give examples until the child understands the concept.
For starred items, repeat the response choices (e.g., Does she _____ NEVER, A LITTLE, SOMETIMES, PRETTY MUCH, OR A LOT?) as you point to each response.)

* 1. (POSITIVE REINFORCEMENT)
Thank you for doing things. Tell you when she likes what you did. Give you something or let you do something special when you're good.....

* 2. (PRIVILEGE REMOVAL)
Take away things when you misbehave (like not letting you watch TV or ride your bike or stay up late or eat dessert).....

3. (COMFORT)
Talk to you when you feel bad and help you to feel better, help you with your problems, comfort you.....

4. (CRITICISM)
Tell you you're no good, tell you that you messed up or didn't do so something right, criticize you.....

* 5. (TALK TIME)
Talk to you, listen to you, have a good conversation with you.....

.....6. (COMMAND)
Order you around, tell you what to do, give commands.

.....7. (INVOLVEMENT IN DECISION-MAKING)
Let you help decide what do to, let you help figure out how to solve problems.

.....8. (PHYSICAL PUNISHMENT)
Spank you, slap you, hit you.

.....9. (TIME TOGETHER)
Play with you, spend time with you, do things with you. which you like.

....*10. (YELLING)
Get mad at you, yell at you, holler at you, scream at you, shout at you.

.....11. (POSITIVE EVALUATION)
Say nice things to you, tell you that you're a good boy/girl, compliment you.

.....12. (THREATENING)
Threaten you, tell you that you'll get into trouble if you do something wrong, warn you.

.....13. (ALLOWING INDEPENDENCE)
Let you do what other kids your age do, let you do things on your own.

.....14. (TIME-OUT)
Send you to a room or corner when you do something wrong.

....*15. (ASSISTANCE)
Help you when you need it (with a hard job, with homework, when you can't do something by yourself).

.....16. (NAGGING)
Nag you, tell you what to do over and over again, keep after you to do things.

.....17. (NON-VERBAL AFFECTION)
Hub you, kiss you, tickle you, smile at you.

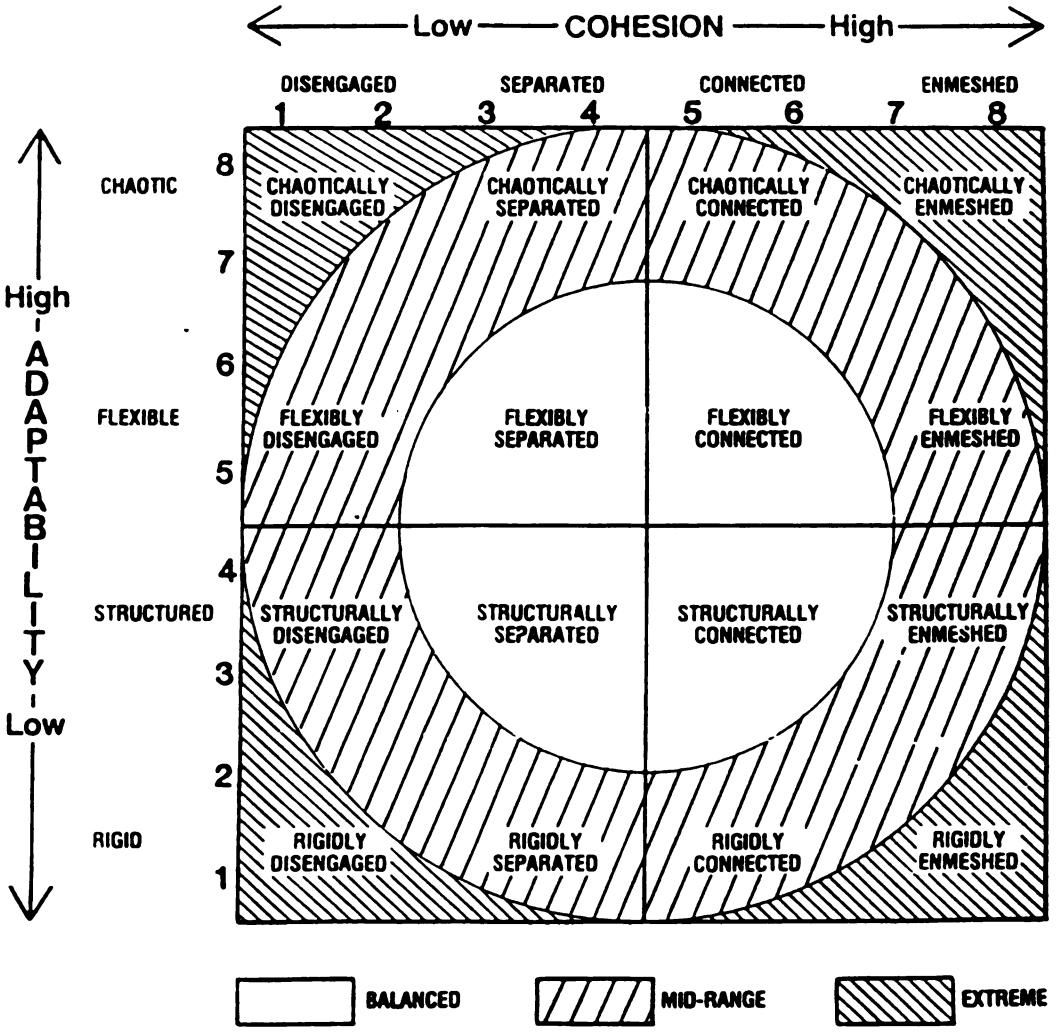
.....18. (IGNORING)
Ignore you, not pay any attention to you, not talk to you or look at you.

(After completing items with reference to MOM, say, "Now I'm going to ask you how often your DAD does these things. Go through items in the same order making appropriate gender revisions.)

Appendix J

The Circumplex Model

FIGURE 1. CIRCUMPLEX MODEL: SIXTEEN TYPES OF MARITAL AND FAMILY SYSTEMS



RATER: _____

FAMILY: _____

(Name or Number)

DATE _____

EVALUATION _____

(Pre Post FU)

TOTAL COHESION: _____

TOTAL ADAPTABILITY: _____

FAMILY TYPE: _____

TOTAL COMMUNICATION: _____