CONGRUENCE OF PARENTAL PERCEPTION, MARITAL SATISFACTION AND CHILD ADJUSTMENT

Dissertation for the Degree of Ph. D. MICHIGAN STATE UNIVERSITY DEBORAH RUDISILL ALLEN 1977



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presented by

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Ph.D. degree in Psychology

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#### ABSTRACT

# CONGRUENCE OF PARENTAL PERCEPTION, MARITAL SATISFACTION AND CHILD ADJUSTMENT

By

Deborah Rudisill Allen

This study investigated the interrelations among: congruence of marital partners' self-perceptions and perceptions by mate; marital adjustment and satisfaction; congruence of parents' perceptions of their child; and child adjustment. On the basis of previous theory and research, it was hypothesized that all of these variables would be found to be positively intercorrelated.

The Locke-Wallace scale, the Interpersonal Checklist, and the Children's Behavior Checklist, Form Q, were used to assess marital adjustment and satisfaction, self- and mate-perceptions, and parents' perceptions of their child, respectively. Three measures of child adjustment were also derived from parents' ratings of their child on the Children's Behavior Checklist. Both fathers and mothers of 110 children aged five to seven (63 boys, 47 girls) completed all three questionnaires. An independent assessment of the children's adjustment was obtained from their teachers' ratings of them on the Behavior Rating of Pupils scale and the Children's Behavior Checklist, Form Q.

A correlational analysis yielded somewhat different results for girls and boys. For the sample of boys, most of the hypothesized intercorrelations among congruence of parents' self-perceptions and perceptions by mate, congruence of parents' perceptions of their child, and child adjustment as rated by teachers and parents proved significant. In addition, wives' marital adjustment was significantly correlated with congruence of parents' self-perceptions and perceptions by mate, and with two measures of child adjustment as rated by the wives. Among the families of girls, parents' marital adjustment was significantly correlated with congruence between husbands' selfperceptions and their wives' perceptions of them. Congruence between wives' self-perceptions and their husbands' perceptions of them was significantly associated with congruence of parents' perceptions of their child and with two measures of child adjustment as rated by the teacher. In addition, congruence of parents' perceptions of their child was significantly correlated with parents' ratings of their child's adjustment.

Several explanations for these sex differences were proposed, including possibly greater validity of teacher ratings of adjustment for boys than for girls. Post hoc analyses revealed mostly significant interrelations between congruence of parents' self-perceptions and marital adjustment, child adjustment, and congruence of parents' perceptions of their child. Results of the study were interpreted as evidence for a general dimension of family harmony (vs. conflict) related to children's social adjustment.

## CONGRUENCE OF PARENTAL PERCEPTION,

# MARITAL SATISFACTION AND

## CHILD ADJUSTMENT

By

Deborah Rudisill Allen

## A DISSERTATION

Submitted to Michigan State University in partial fulfillment of the requirements for the degree of

DOCTOR OF PHILOSOPHY

Department of Psychology 1977

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#### ACKNOWLEDGMENTS

Now that I am finally finished, I would like to express my appreciation to all of those who helped make it possible. First and foremost, I would like to thank Dr. Lucy Ferguson, my chairperson, for her support throughout the past five years. Her invaluable guidance, thoughtful suggestions, sense of humor, and enthusiastic dedication to my research helped to keep me going through all of the ups and downs. I would like to thank Lucy especially for allowing me to work at my own pace, for her unflagging belief in my competence, for her overwhelming generosity with her time during these last hectic months and most of all, for her understanding of my feelings throughout my work on this project. Her support has truly been above and beyond the call of duty, which makes it feel very special.

I would also like to thank Dr. Ellen Strommen and Dr. Helen Benedict, two members of my committee, for the wealth of knowledge they brought to this project as well as for their thought provoking questions. To Dr. Larry Messe', the fourth member of my committee, I would like to say thanks for not showing up for my orals.

I would also like to acknowledge the contributions of Jerry Michaels, Linda Giacomo, and Richard Ince, who ran all over town helping me to collect data; of Gary Stollak and Larry Messe', who donated grant money to help me pay subjects; and of Don Grummon, who found me some NIMH money to help with statistical analyses.

ii

Special thanks go to all of the parents, teachers, and school principals who took part in this research; without their curiosity and support this project would not have been possible.

Finally, I would like to acknowledge my friends, who have kept me same throughout this past year: Bob Dave', who taught me how to play, made sure that I did, and who lived with all my ups and downs; Lori LaFerriere and Peg Geggie, who cheered me up when I needed to laugh, provided a shoulder when I needed to cry, and who, most of all, were always there; and Mom and Dad, who came through once again and paid for this. Many, many thanks to all: I couldn't have done it without you.

## TABLE OF CONTENTS

	Pa	ıge
LIST	DF TABLES	vi
LSIT (	OF FIGURES	iii
CHAPTI	ER	
т	INTRODUCTION	T
I		
	Child Maladjustment and Parental Conflict	2
	Maladjustment	5
	The Relationship Between School Adjustment and	7
	Teachers' Ratings Compared to Clinicians'	/
	Judgments	9
	Validity of Teacher Ratings for Individual	11
	Objectives of the Study	20
	Hypotheses	20
II	METHOD	23
	Subjects	23
	Instruments and Procedures	25
	Hypotheses	28
III	RESULTS	32
	Characteristics of the Sample	32
	Distribution Characteristics	34
	Relationships among Adjustment Measures	3/
	Hypothesis I	43 45
	Hypothesis 3	47
		49
	Hypothesis 5	52
	Hypothesis 6	54
	Hypothesis 7, 8, 9, 10, and 11	57
	Post Hoc Findings	<b>6</b> 0
I۷	DISCUSSION	63
	Validity of Ratings of Child Adjustment	63

Page

	Results Relating Congruence of Perceptions of the	
	Child to Child Adjustment	10
	Marital Adjustment and Unild Adjustment	/4
	Child Adjustment	77
	Interrelations Among other Variables	31
	Summary of Interrelations	32
	Implications of Findings for Future Research 8	38
REFERENC	ES	90
APPENDIC	ES	)4
Α	Letter to East Lansing Parents	<del>)</del> 4
В	Letter to Okemos Parents	96
C	Instructions to Parents	98
D	Background Information Sheet	<del>)</del> 9
Ε	Locke-Wallace Scale	)0
F	The Interpersonal Checklist	)2
G	Children's Behavior Checklist, Form Q 10	)6
Н	Behavior Rating of Pupils Scale	0
I	Distribution Information for Variables of this Study	6

# LIST OF TABLES

Table		Page
1	Means and standard deviations of sample and popula- tion distributions for each of the BRP items	36
2	Correlations and corresponding probabilities of total BRP scores with other teacher and parent adjustment measures	38
3	Correlations and corresponding probabilities among parent and teacher adjustment measures derived from the CBC-Q	40
4	Correlations and corresponding probabilities for relationships among parent adjustment measures derived from the CBC-Q	42
5	Correlations and corresponding probabilities for hypotheses relating congruence in parents' percep- tions of their child to the child's adjustment as rated by the teacher (Hypotheses la, lb, lc, and ld).	44
6	Correlations and corresponding probabilities for hypotheses relating congruence in parents' percep- tions of their child to parents' ratings of their child's adjustment (Hypotheses 2a, 2b, and 2c)	46
7	Correlations and corresponding probabilities for hypotheses relating parents' marital adjustment to their child's adjustment as rated by the teacher (Hypotheses 3a, 3b, 3c, and 3d)	48
8	Correlations and corresponding probabilities for hypotheses relating parents' marital adjustment to their ratings of their child's adjustment (Hypothe- ses 4a, 4b, and 4c)	50
9	Correlations and corresponding probabilities for hypotheses relating congruence of parents' self- perceptions and perceptions by mate to their child's adjustment as rated by the teacher (Hypotheses 5a, 5b, 5c, and 5d)	52
10	Correlations and corresponding probabilities for hypotheses relating congruence of parents' self- perceptions and perceptions by mate to their ratings	

Table		Page
	of their child's adjustment (Hypotheses 6a, 6b, and 6c)	55
. 11	Correlations and corresponding probabilities for Hypotheses 7, 8, 9, 10, and 11	58
12	Correlations of congruence of parents' self- perceptions with child adjustment as rated by teachers and parents	61
13	Correlations of parents' and teacher's CBC-Q ratings of the child with total BRP scores as rated by the teacher	62

# LIST OF FIGURES

Figure		Page
1	Distribution of total BRP scores for children of participating and non-participating parents (15 classes)	. 33
2	Distribution of Competence scores for children of participating and non-participating parents (total sample)	• 35

## CHAPTER I

#### INTRODUCTION

A great deal of clinical literature in the areas of child psychopathology and family dynamics has suggested that congruence in parental perceptions of basic aspects of family life is important for the favorable development of children. In an investigation of this hypothesis, Ferguson and Allen (in press) examined the interrelations among the following variables: congruence of marital partners' self-perceptions and perceptions by mate, marital adjustment and satisfaction, congruence of parents' perceptions of their child and child adjustment. As predicted, all of these variables were found to be positively intercorrelated, with most of the correlations reaching significance at the .05 level or better. The strongest set of associations found was between congruence of parents' perceptions of the child and child adjustment. Both similarity in partners' self-concepts and similarity between partners' descriptions of themselves and descriptions of them by their spouses were significantly associated with marital satisfaction, which in turn was related to child adjustment. However, the dynamics of the relationship between parental harmony and child adjustment appeared to operate differently for boys and girls. The girls seemed to be more vulnerable to disharmony in the parental relationship: when either parent was happy in the marriage, he or she tended to rate the daughter more favorably. For boys, adjustment

was more closely associated with congruence in parental perceptions, especially of the father; when there was congruence between the wife's perceptions of her husband and his perceptions of himself, both parents rated the son more favorably. An overview of the research antecedents of Ferguson and Allen's study puts these findings in perspective.

### Child Maladjustment and Parental Conflict

Both role theory and social learning theory argue that child adjustment problems result in part from inconsistencies and incompatabilities in the parents' demands and expectations of their child. When parents disagree about the kinds of behaviors which are rewarded, the child becomes frustrated and uncertain about what behavior is appropriate. Empirical attempts to relate interparent agreement about a particular child to that child's behavior have been inconclusive. Leton (1958), using Shoben's Parent Attitude Survey and a revision of the Minnesota Teacher Attitude Inventory for parents, found wider disagreement in attitudes between mothers and fathers of poorly adjusted children than between mothers and fathers of well adjusted children. His findings were not confirmed, however, by Medinnus (1963). Comparing mothers' and fathers' responses to the Parent Attitude Research Instrument (PARI), the Attitude Toward Education Scale, and a Q-sort procedure, Medinnus found no significant correlations with adjustment for first grade children. It seems likely that this lack of confirmation of Leton's results was due in part to Medinnus' use of a correlational analysis with a very restricted sample (33-38 pairs of parents). In addition, parent attitude inventories such as those used by Leton

and Medinnus tap parents' attitudes about children in general rather than their feelings about a particular child. A number of researchers have concluded that parental attitudes about their general philosophy of childrearing are less potent in affecting their child's behavior than their attitudes about that particular child (e.g. Becker and Krug, 1965).

Support for this notion is found in a study by Medinnus and Johnson (1970). Mothers and fathers rated their child on a 50-item semantic differential scale made up of inferential behavior items (e.g., "dominant-submissive" or "friendly-unfriendly"). Medinnus and Johnson found that parents of well-adjusted kindergarten children showed significantly greater agreement in ratings than parents of poorly adjusted kindergarten children. A similar study by Ferguson, Partyka, and Lester (1974) looked at interparent agreement about directly observable behaviors of a particular child. Parents' responses to the Children's Behavior Checklist revealed 66 items which proved to discriminate between clinic and nonclinic children. An overall factor analysis revealed three general dimensions which discriminated significantly between clinic and nonclinic children: Impulsivity and Moodiness (which were attributed to clinic children to a greater extent) and Competence (which was attributed to nonclinic children to a greater extent). It was hypothesized that parents of nonclinic children would describe them in more favorable and less pathological terms and would show closer agreement in their perceptions than would parents of the clinic children. However, significant results were obtained only for the younger males in the sample (5-7 years old). Ferguson and Allen (in press) attempted to look at a more representative

sample of families with children in the primary grades to see if these sex differences could be replicated.

The rationale for Ferguson and Allen's inclusion of additional measures of marital satisfaction and self- and spouse-perception has an empirical basis. Children who exhibit deviant social behavior have often been found to come from families characterized by marital strife and dissatisfaction as well as parent-child conflict (e.g., Winder and Rau, 1962; Becker, et al., 1959; Clark and van Sommers, 1961; Vogel and Bell, 1968). The notion that the disturbed child is the target or scapegoat for his parents' conflicts appears frequently in the clinical literature. It would thus seem likely that agreement in parents' perceptions of their child is associated with more favorable adjustment for the child and is also an expression of marital harmony.

In addition, couples who express satisfaction with their marriage have been found to be more similar (Dymond, 1953, 1954; Corsini, 1956) and more congruent in their mutual perceptions than dissatisfied couples (Dymond, 1953, 1954; Luckey, 1960a, b; Hobart and Klausner, 1959; Taylor, 1967; Tharp, 1963). This latter variable (psychological empathy) has been considered to be an index of good communication between marital partners. Mangus (1957), for example, suggested that the integrative quality of a marriage is reflected in the degree of congruence between partners' perceptions of themselves and their perceptions of each other. Thus it was hypothesized that parents who described their children as more favorably adjusted would show closer agreement in their perceptions of their children, would report greater marital satisfaction, and would show greater agreement between descriptions of themselves and descriptions of them by their spouses than

parents who described their children as less favorably adjusted. As previously mentioned, this hypothesis was supported by Ferguson and Allen (in press).

A shortcoming in the design used by Ferguson and Allen makes it difficult to interpret the major results. A brief review of the methodology of that study illustrates the problem. Both fathers and mothers of 97 children, aged five to seven, completed three questionnaires. The Locke-Wallace Scale, the Interpersonal Checklist, and the Children's Behavior Checklist were used to assess marital adjustment and satisfaction, self- and mate-perceptions, and parents' perceptions of their child, respectively. The Children's Behavior Checklist was also used to derive a measure of child adjustment. By using husbands and wives as the source of all data, including child adjustment, no information about the representativeness of the sample could be obtained. Without an independent measure of child adjustment, it could not be determined whether the children actually represented a continuum of adjustment or whether the ratings simply reflected the rating styles or biases of their parents. For example, parents who are unhappy in their marriage might tend to rate their child and their spouse negatively as a reflection of their negative feelings about the family in general. Thus a child could be rated poorly adjusted by his parents when an independent observer might see him or her as well adjusted.

## Teachers' Ratings of Child Adjustment and Maladjustment

The present study is designed to determine whether the relationships found among the variables in Ferguson and Allen (in press) can be replicated when an independent measure of child adjustment is also

obtained. Teacher judgments have been considered to be an economical and efficient means of identifying maladjusted children. As such, they seem well suited to the task of independently assessing child adjustment. A review of the literature offers support for this premise.

As Bower (1974) points out, there is a myth that "someone, somewhere, somehow can assess behavior and/or mental health as a characteristic or state of being independent of the social context and social institutions in which the individual is living and functioning" (p. 229). In actuality, competent or incompetent behavior can only be evaluated in relation to the primary institutions in which the behavior takes place. For the young child, the family and the school are the most important institutions. Thus, it makes sense to compare the child's adjustment in the school with his adjustment at home.

Teachers have regular and continuous contact with a child and sometimes his or her family over the course of a year. Most teachers are well educated about age-appropriate behavior and personality development of children and have observed a variety of children in a wide range of situations. When children are overly aggressive, apathetic, have learning problems, or stand out in any way, they attract the attention of their teachers. The teachers' day-to-day experience with a wide variety of normal behavior "gives them an unequaled perspective for appraising inappropriate or deviant behavior" in children (Bower, 1969, p. 14). Thus, when a child attracts their attention, they are able to use their backlog of experiences to assess whether a child needs additional support or assistance. As a result, the school is often the first social institution to observe the

inadequate intellectual or emotional development of the child (Bower, 1961).

For the present research, the crucial question is not whether the teachers are the first to observe inadequate development in children but whether their judgments of inadequate development are valid. Three aspects of teachers' ratings of child adjustment explored in the literature are relevant: 1) how teachers' ratings of the child's school adjustment relate to the child's overall adjustment; 2) how teachers and clinicians compare as to what constitutes maladjusted behavior in children; and 3) the validity of teachers' ratings of the adjustment of individual children. A brief review of the literature in each of these three areas provides evidence for the validity of teachers' judgments as an independent assessment of child adjustment.

## The Relationship Between School Adjustment and Overall Adjustment

There is some evidence to indicate that teachers' ratings of child adjustment in school are indicative of the more general adjustment of the child. Bower (1969) points out that failure in school restricts the occupational and social freedom of the individual and comes perilously close to constituting failure in life as well. Some support for this position is provided by Ginzberg (1959). In a monumental study of the ineffective soldier during World War II, Ginzberg found that although a higher level of educational achievement was no safeguard against emotional disturbance, lower educational achievement was associated with a higher incidence of emotional disturbance. Ginzberg and his associates concluded that "inadequate education and emotional instability may have been reinforcing each other for a long time.

A disturbed childhood is likely to be reflected in learning difficulties" (p. 118).

Similar results were found by Robins (1966) in a 30-year followup of 524 child guidance clinic patients and a group of 100 nonpatients matched for age, sex, race, IQ, and neighborhood. The control group consisted of children who had not been seen at a psychiatric clinic, had not repeated a grade, and had an IQ of 80 or more. Robins concluded that "a high proportion of those who as adults have psychiatric problems and social maladjustment must show very gross signs of difficulty while still in elementary school. While having repeated grades in elementary school certainly does not efficiently predict serious adult problems, having <u>not</u> had serious school difficulties may be a rather efficient predictor of <u>absence</u> of gross maladjustment as adults" (p. 70).

A similar study by Fitzsimons (1958) involved a follow-up of 158 persons who had been referred 15 to 18 years earlier by their teachers to a school agency because of poor adjustment. She found that the teachers were able to select accurately those children in need of psychological or psychiatric treatment. Fitzsimons concluded that "teachers are quite competent in identifying young children who are prone to serious maladjustment later" (p. 149).

Thus, the evidence strongly suggests that the child's adjustment in the classroom reflects his/her adjustment in the world outside the classroom as well. The present study is based on that assumption, in that teachers' ratings provide the independent index of the child's adjustment. It must be noted, however, that some children may behave very differently at home and at school. For example, a child may find

in the classroom the stability s/he lacks at home; as a result, the child might be a model pupil at school and a hellion at home. In the present study the teacher's adjustment rating of such a pupil could not be distinguished from that of a child who was well adjusted both at home and at school. However, as the research evidence suggests, these cases are probably few.

#### Teachers' Ratings Compared to Clinicians' Judgments

Another way in which the validity of teachers' judgments of their pupils' adjustment have been assessed is by comparing the teachers' judgments with those of clinicians. The assumption in such comparisons is that clinicians are the experts on adjusted and maladjusted behavior; the more the teachers' judgments agree with those of the clinicians, the more valid the teachers' judgments are presumed to be. Although the present study is ultimately concerned with the validity of teacher's judgments about individual children, a brief review of the literature with regard to how teachers make these judgments provides relevant background information.

Comparisons of teachers' and clinicians' views of what constitutes maladjustment behavior have been a subject of controversy for many years. A classic study by Wickman (1928) revealed that teachers and mental hygienists differed markedly when asked to rate the seriousness of 50 behavior traits of children (correlation of about zero). This study has been widely quoted as indicating that teachers are poor judges of the mental health of their pupils. In fact, the ratings were made on the basis of distinctly different instructions and thus are not directly comparable.

In spite of this procedural shortcoming, Schrupp and Gjerde (1953) replicated Wickman's study. They wanted to see if expanded and improved knowledge of factors influencing the growth and development of children, and the increased emphasis in teacher education programs on understanding the psychological makeup of the child, had resulted in a changed teacher identification of, and attitude toward behavior problems of children. Although the clinician and teacher groups agreed much more closely in 1953 than in 1928 (correlation of .56 as compared to about zero), definite disagreements were still evident. Again, it was difficult to determine the extent to which the disagreement was a result of the different instructions to teachers and clinicians.

A later study by Mitchell (1942) attempted to correct this problem in experimental design; Mitchell's study involved teachers from the same school systems used by Wickman. Mitchell used a modification of the original Wickman scale, and had teachers as well as 63 mental hygienists rate the traits, following the directions given to the teachers in Wickman's original study. Mitchell reported a correlation of .70 between teachers and mental hygienists. This suggests that there can be good agreement between the ratings of these two groups of professionals about what constitutes adjusted and maladjusted behavior.

As previously mentioned, what is more important for the purpose of this study is whether their judgments about adjustment agree for individual children. A review of the literature with regard to the validity of teachers' ratings of individual children is relevant and provides a clear justification for the use of teacher ratings in this investigation.

Validity of Teacher Ratings for Individual Children

Teacher rating scales range from the simple to the complex. One of the most simple is that developed by Gildea, Glidewell, and Kantor (1961). They asked teachers to rate children along a four-point scale: well adjusted; no significant problems; subclinically disturbed; clinically disturbed. Each of these categories was defined behaviorally. Ratings by psychiatric social workers who had followed the children in school or in treatment at the child guidance clinic were also obtained. On a sample of 91 third grade children, teachers and social workers agreed 86% of the time. On a later sample of 49 third grade children, they agreed 80% of the time. There were sex and social class effects in the teacher ratings, however. In general, the girls were seen by the teachers as better adjusted than the boys, and the middle-class children were seen as better adjusted than either the lower or upperclass children.

A number of rating systems involve simple checklists of items. For example, Eisenberg, et al. (1962) designed a symptom checklist and a health inventory for use with nursery school children. Teacher ratings of disturbed and normal children (those referred to a program for emotionally disturbed children vs co-op nursery students) were made on both scales. Results indicated that both scales discriminated significantly between the well adjusted and the poorly adjusted children. In addition, among the well adjusted children but not the poorly adjusted children, the boys showed significantly more symptoms on the symptom checklist than the girls; no sifnificant differences were found between the girls and boys on the health inventory for either the well adjusted or the poorly adjusted children. The authors of this study

note that the validity of this instrument is limited to differentiation between groups, since variation in scores within both the well adjusted and the poorly adjusted populations were such that there was considerable overlap.

A slightly more complex checklist is described by Rutter (1967). It consists of 26 statements concerning the child's behavior. Rather than simply checking if the behavior is present, however, teachers check whether the statement "certainly applies," "applies somewhat," or "doesn't apply" to the child in question. Rutter found test-retest reliability of .89 and inter-rater reliability of .72. The validity of the scale was tested by comparing the scores of children in the general population with scores of children attending psychiatric clinics for emotional or behavioral disorders. Results confirmed that the scale was reasonably efficient in differentiating children attending psychiatric clinics from those in the general population.

Four similar screening devices were compared in a study by Cowen, Dorr, and Orgel (1971). The Teachers' Behavior Rating Scale, the Teachers' Adjective Check Test, the Ottawa School Behavior Survey, and the AML Behavior Rating Scale all had been shown previously to be reliable and to have predictive validity for identifying school maladaptation in primary grade students. The Teachers' Behavior Rating Scale (TBRS) consists of a 25-item list of behaviors that could be considered maladaptive in class. The teacher rates each child on a 4-point scale for each characteristic: "does not apply," "shows mildly," "shows moderately," "shows very strongly." The teacher also rates the child on a subscale (TOR) which is a single 5-point scale of overall adjustment that ranges from well-adjusted (1) to poorly

adjusted (5). The TBRS requires approximately five to ten minutes per child to complete. Cowen, Zax, Izzo, and Trost (1966) found that both the TBRS and the TOR discriminate significantly between third grade children identified by clinicians as Red-Tag (manifesting moderate to severe maladjustment) and Non Red-Tag children (p < .001).

The second screening device for primary grade students examined by Cowen, Dorr, and Orgel (1971) is the Teacher Adjective Check List (TACL) (Cowen, et al., 1966; Zax and Cowen, 1969). This measure consists of 34 descriptive adjectives, 17 judged positive and 17 negative. The teacher rates each child on a three-point scale: "does not apply," "applies somewhat," and "describes very well." The TACL requires about five to ten minutes per child to complete. Like the TBRS, it has been shown to discriminate between adjusted and maladjusted children (Cowen, et al., 1969; Liem, et al., 1969).

The third screening device examined was the Ottawa School Behavior Survey (OSBS) which lists 20 behaviors known to occur with some frequency in primary grades. The teacher simply checks whether each item does or does not apply. This scale can be completed in about two minutes per child. Pimm and McClure (1967) found that this survey discriminated significantly between children diagnosed as emotionally disturbed and a control group matched on the basis of age, sex, and IQ score.

The fourth screening device examined was the AML Behavior Rating Scale (Brownbridge and Van Vleet, 1969) which consists of 11 items designed to screen rapidly for school adaptation problems. It includes five aggression items, five moodiness items, and one item that reflects learning difficulty. Children are rated on a five-point scale

from one ("seldom or never") to five ("all of the time"). This scale requires about one minute per child to complete. Brownbridge and Van Vleet (1969) have shown that children with high AML scores do significantly more poorly than peers on a variety of educational and personality measures.

As previously mentioned, Cowen, Dorr, and Orgel (1971) investigated the interrelations among these four screening devices. Data were obtained for a sample of 266 kindergarten children and 101 first graders. Correlations relating total scale scores to each other ranged from -.61 (OSBS vs. TACL, first grade) to .90 (AML vs. TBRS, first grade), with a median of .775. The negative correlation (-.61) reflects the different scoring systems of the two scales rather than an inverse association; high scores on the OSBS and low scores on the TACL indicate maladjustment. Thus, in spite of differences in content and item specificity, the four measures were found to be similar in tapping maladjustment.

One limitation all of these measures is that they do not take into account the problems of rater bias and halo effect. There are no data to indicate whether all children judged to be poorly adjusted by one teacher are similar, or whether those judged to be poorly adjusted by one teacher are similar to those judged to be poorly adjusted by another teacher. Nadine Lambert and Eli Bower, in their research for the California State Department of Education, developed a teacher rating procedure that seems to minimize rater bias and halo effect. The Behavior Rating of Pupils scale-3 (Lambert and Bower, 1961; Lambert, 1967) is a simplified Q-sort procedure in which a teacher places every child in his/her class on a grid arranged with squares in an

approximately normal distribution. One grid is used for each of eight items referring to children's behavior in school. Every child's name goes in one of the squares on the grid, depending on whether the behavioral item being rated is seen by the teacher as being more or less typical of that child. The sum of the teacher's ratings of each child on the eight items provides an overall rating of how the teacher views the child's coping ability and school functioning. Each of the items has been validated by comparing the distribution of ratings for a given item with clinical appraisal of school adjustment status as well as with other criteria of school effectiveness such as grades. achievement test results, and peer ratings of behavior. For second and fifth grade pupils, the individual item ratings as well as the total ratings have been shown to be correlated significantly with independent judgments of the presence and absence of school problems made by a clinical team (Lambert, 1967). This rating procedure appears to minimize the problems of halo effect and rater bias, since children judged to be poorly adjusted on a particular item by one teacher were similar to those judged to be poorly adjusted by another teacher (Lanbert, 1967).

Several earlier studies provide further evidence for the validity of the items in the Behavior Rating of Pupils scale. Bower (1960), using a successive category procedure, obtained teachers' ratings of 200 fourth, fifth, and sixth grade children. Teachers completed a rating form for every pupil in their classes. The initial validity of this procedure was determined by taking the teachers' ratings of children known to a child guidance clinic and comparing them to the ratings of the remainder of the pupils in the class. Of

those pupils known to a child guidance clinic as emotionally handicapped, 87% were rated by their teachers as among the most poorly adjusted in the class. Teacher judgments of emotional disturbance were very similar to those of clinicians. In addition, teachers selected about the same number of children who were overly aggressive or defiant most of the time as those who were overly withdrawn or timid most of the time.

A follow-up study by Lambert (described in Lambert, 1967) compared those children who had been identified by the school guidance office as having problems in school with a group of children rated by their teachers as having problems in school, but who had not been referred to the guidance office. The study revealed that the two groups had a comparable number of delinquents, dropouts, and school failures. This confirmed the predictive validity of teachers' perceptions of problems and absence of problems when entire classes were rated.

In a later study by Lambert and Bower (1961), teachers rated 650 primary grade pupils on the same eight statements of school behavior used in the Behavior Rating of Pupils scale-3. A successive category procedure was used (all of the time, some of the time, rarely, never) which assigned a numerical value to each rating. In order to control for differences between teachers in the degree to which they perceived the presence of any of the behaviors in their classrooms, the five pupils with the most negative ratings for each teacher's class were studied. Clinical psychologists subsequently evaluated each of these children. In 91% of the cases, the psychologist confirmed that the children who were rated by their teachers as

having the most trouble in school were the children with real psychological problems.

Lambert and Bower (1961) also attempted to develop and validate measures of peer ratings and self-ratings of behavior. A later study (Lambert, 1964) investigated the unique contribution of each of these sources of information for the criterion measure (clinicians' combined judgments of school adjustment). IQ scores and social status measures reflecting father's occupation, income, family housing, and neighborhood were found to increase predictive efficiency slightly. The teacher rating was found to have the highest correlation with the independent clinical measures, although peer and self-ratings did contribute positively to the assessment of pupil mental health status.

Several other studies have provided additional information about the Behavior Rating of Pupils scale. Maes (1966) studied 40 emotionally disturbed children in grades four, five, and six and their 548 normal classmates using the same variables as in Bower (1960). Using a multiple regression method, Maes found that the variables most predictive of emotional disturbance were teacher ratings (behavior), arithmetic achievement, group intelligence score, peer ratings, teacher rating (physical status), and reading achievement. However, he found that the prediction achieved with teacher ratings of behavior and group IQ scores alone was as effective as the use of six variables.

A slightly modified version of Bower's (1960) screening process was given by Stennett (1971) to children in grades four, five, and six. This included teacher, peer, and self-ratings as well as measures of each child's achievement. A year later, ratings of 46 children who had been screened out as either moderately or seriously emotionally

handicapped were compared with ratings made by their current teachers. Results indicated that 83% of the children were classified in the same way each year (p < .001). In addition, the screening system was found to be equally reliable in identifying emotionally handicapped children as nonemotionally handicapped children. Three years later, a number of the original sample who were screened while in grades four, five, and six were screened again. A simplified pupil behavior rating scale and a ten-item sociometric type test were used. Seventy-two percent of the children were classified in the same way after a three-year interval. Stennett concluded that the screening devices were adequate for identifying emotionally handicapped children and that a significant number of children identified as emotionally handicapped did not resolve their adjustment problems without help. An alternate explanation for these findings is possible, however. It is not clear from Stennett's study whether the teachers had knowledge of the classification given to the children (i.e., emotionally handicapped or nonemotionally handicapped). If that information was available to the teachers, it is possible that the labeling process and the teachers' responses to the children as a result of the labels accounted for the persistence of the children's problems.

A study by Harth and Glavin (1971) attempted further to validate teacher judgments about personality adjustment as a screening technique. Using an abbreviated Bower-type screening instrument (Bower, 1960), teachers completed a rating sheet noting the children whom they considered to be the five best adjusted and the five poorest adjusted students. No definitions of emotional disturbance were given to the teachers. The California Test of Personality (CTP) was also

administered. From the teacher ratings, three groups of 109 children each were selected: best adjusted (BA), poorest adjusted (PA), and average adjusted (AA). Results indicated that the BA group had a significantly higher CTP score than both the AA and PA groups. In addition, the AA mean score was significantly higher than the PA mean score. Thus, when the criterion is CTP scores, teacher ratings on a Bower-type scale seem to be a valid technique for screening emotionally disturbed children.

To summarize, the validity criteria for the Behavior Ratings of Pupils have been CTP scores, referral to a child guidance clinic, concurrent clinical team judgment of effectiveness of behavior, and follow-up information indicating the persistence of earlier school problems. The results of this work suggest that when using the Bower-Lambert Behavior Rating of Pupils scale, "teachers can provide a good index of the child's ability to cope in the classroom situation and . . . they are able to make valid judgments of those children who are more or less effective in managing the school setting" (Lambert, 1967, p. 439).

It is clear from the literature that a wide variety of valid techniques are available for determining teacher ratings of child adjustement. However, the Behavior Rating of Pupils developed by Bower and Lambert, which was designed to minimize rater bias and halo effect, seems to be the one best suited for the purposes of the present investigation.

### Objectives of the Study

It has been assumed that if "high risk" children can be identified early in their lives they can most easily be helped and their problems most effectively removed. Very few studies have focused on early identification of parents and prospective parents, whose childrearing values and attitudes, and actual behavior with children, might be highly predictive of their children's development of psychological problems. The overall purpose of this study is to discover the relationships between differences in marital partners' perceptions of each other; marital dissatisfaction; differences in marital partners' perceptions of their children; and child maladjustment in school. If these factors are found to be highly correlated, there will be implications for prevention and treatment of psychopathology. These may involve focusing interventions more on the family as a whole or just the marital partners rather than focusing mainly on the child.

Family-oriented therapy might include specific procedures to reduce discrepancies in marital partners' perceptions of each other as well as work on specific conflict areas. If high correlations among these factors are found in the expected directions there will also be implications for using the marital perceptions or dissatisfaction measures as a screening device to identify prospective parents whose children may have a high likelihood of becoming psychologically disturbed.

#### Hypotheses

In light of the theoretical and research evidence suggesting relationships among marital satisfaction, congruence of self-perception

and perception by mate, congruence of parents' perceptions of their child, and child adjustment, and the evidence presented for the validity of teacher ratings of child adjustment, the following hypotheses are proposed:

 There is a significant positive correlation between congruence in parents' perceptions of their child and their child's adjustment as rated by the teacher.

2) There is a significant positive correlation between congruence in parents' perceptions of their child and their ratings of their child's adjustment.

3) There is a significant positive correlation between parents' marital adjustment and their child's adjustment as rated by the teacher.

4) There is a significant positive correlation between parents' marital adjustment and their ratings of their child's adjustment.

5) There is a significant positive correlation between congruence of parents' self-perceptions and perceptions by mate and their child's adjustment as rated by the teacher.

6) There is a significant positive correlation between congruence of parents' self-perceptions and perceptions by mate and their ratings of their child's adjustment.

7) There is a significant positive correlation between congruence of parents' self-perceptions and perceptions by mate and congruence of their perceptions of their child.

8) There is a significant positive correlation between congruence of parents' self-perceptions and congruence of their perceptions of their child.

9) There is a significant positive correlation between parents'

Ξ.

marital adjustment and congruence of their perceptions of their child.

10) There is a significant positive correlation between parents' marital adjustment and congruence of their self-perceptions and perceptions by mate.

11) There is a significant positive correlation between congruence of parents' self-perceptions and their marital adjustment.

#### CHAPTER II

#### METHOD

## <u>Subjects</u>

The total sample consisted of 110 families, each of which included a father, a mother, and a child in the five to seven year age range--47 female children and 63 male children. Mean education level for the mothers was one to three years of college; mean education level for the fathers was a bachelor's degree plus some graduate school, short of a Master's degree. Subjects were recruited in the following manner: letters to parents requesting their cooperation in a research study were given to teachers of all of the kindergarten, first, and second grade children in the East Lansing, Michigan, Public School System, and to first and second grade teachers in eight classes in the Okemos, Michigan, Public School System. Copies of the letters are found in Appendices A and B, respectively. The teachers distributed the letters to the children in their classes, and the children were requested to take the letters home to their parents. Parents who were willing to participate were asked to fill out an enclosed, stamped, addressed postcard and return it to the experimenter. They were offered \$5 for their participation.

The returned postcards were sorted according to school classes. Teachers from those classes in which parents of five or more children agreed to participate were asked to participate themselves. Seventeen
teachers (16 female, 1 male) from the East Lansing School System and eight teachers (all female) from the Okemos School System agreed to participate.

Parents of the children in these classes who had agreed to participate (101 from East Lansing, 75 from Okemos) were then mailed a packet containing the following: a letter thanking them for their participation and containing instructions for completing the instruments; a background information sheet; two copies of the Locke-Wallace Marital Adjustment scale; two copies of the Interpersonal Checklist; two copies of the Children's Behavior Checklist, Form Q; and a preaddressed stamped envelope in which to return the completed instruments. Parents were asked to fill out the instruments independently of each other. Copies of the letter, background information sheet, and each of the instruments are found in Appendices C, D, E, F, and G, respectively.

Of these 176 families who had agreed to participate, 111 returned completed packets (63 from East Lansing, 48 from Okemos). Each family was paid \$5 for their participation. For each motherfather pair, the instruments were inspected to insure that the items were not checked identically. On the Interpersonal Checklists and Children's Behavior Checklists, if at least five disagreements were not found between a given couple, that couple was dropped from the sample on the suspicion that the parents may have discussed the items. On the Locke-Wallace scale, at least three disagreements between each husband-wife pair were required or the couple was dropped from the sample. Only one set of checklists was dropped for this reason.

#### Instruments and Procedures

<u>The Locke-Wallace Marital Adjustment scale</u> (L-W) was used as a measure of marital adjustment and satisfaction. This scale consists of fifteen items relating to different aspects of marital life. Locke and Wallace (1959), using 236 subjects, found that this scale had a split-half reliability of .90 (Spearman-Brown correction). In addition, using two groups of 48 subjects matched for age and sex, Locke and Wallace found that this scale clearly differentiated between persons who were well-adjusted and persons who were maladjusted in marriage. A score of 100 or above is considered to be an indicator of marital happiness, whereas a score below 100 reflects marital discord and disharmony (Locke and Wallace, 1959). A copy of the Locke-Wallace scale and its scoring key is found in Appendix E.

A Locke-Wallace scale was completed by each parent. Separate scores were determined for the husband and wife. A third marital adjustment score, a congruence score, was determined by calculating the correlation (product moment correlation coefficient) between each husband's and wife's responses to the Locke-Wallace scale.

The <u>Interpersonal Checklist</u> (ICL) (LaForge and Suczek, 1955) was the instrument used to assess parents' perceptions of self and spouse. This scale consists of 128 descriptive items selected to represent interpersonal variables. Instructions to subjects marking the ICL solicit direct, conscious, verbal responses which tap the subject's perception and his willingness to express this perception. The self- and spouse-concepts were operationally defined for the purpose of this study as all of the statements made by the individual on the ICL when describing him/herself and his/her spouse, respectively.

Each parent was asked to go through the checklist twice, the first time checking any of the 128 items which applied to self, and the second time checking those that applied to spouse. Thus, for each family unit, there were four sets of ICL scores: The husbands' perceptions of himself (H); the husband's perceptions of his wife (H-W); the wife's perceptions of herself (W); and the wife's perceptions of her husband (W-H). Items that were checked were given a score of one; items not checked were scored zero. Inter-item phi coefficients expressed the agreement between those ICL items the husband checked for himself (H) and those his wife used to describe him (W-H); between the wife's description of herself (W) and her husband's description of her (H-W); and between the husband's description of himself (H) and his wife's description of herself (W).

The <u>Children's Behavior Checklist, Form Q</u> (CBC-Q was the instrument used to assess parents' perceptions of thier children. It consists of 64 readily observable, interpersonal and symptomatic items referring to the behavior of children. Form Q of the CBC is a short form of the 154-item Children's Behavior Checklist compiled by Ferguson, MacKenzie, and Does at Michigan State University. It includes 50 items of the 66 which were found by Ferguson, Partyka, and Lester (1974) to disciminate significantly between clinic-referred and non-clinic children, twenty-five which were found to be significantly more characteristic of clinic-referred children and twenty-five which were found to be significantly more characteristic of non-clinic children. The fifty items were chosen in the following manner: of the 66 differentiating items, 53 were chosen which could be easily observed in a playroom situation (28 non-clinic items and 25 clinic items). Two hundred undergraduate students at Michigan State University were then asked to rate these

53 items as to whether they thought they were positive or negative behaviors for children to possess. An analysis of their ratings revealed that three of the non-clinic items were considered to be negative traits for children. These items were then excluded from the group of non-clinic items, but were left in the checklist as filler items; eleven additional filler items were selected from the original checklist. Appendix G includes a copy of the checklist with each item labeled as a clinic item (C), non-clinic item (NC), or filler item (F).

The checklist consists of two columns: one asks about the child, "Does this apply at all?" and the other asks, "Is it characteristic?" Each parent is asked to go through the checklist twice, the first time checking those items which sometimes apply to the child, and the second time checking those items which are characteristic of the child's behavior (which describe the child most of the time).

Agreement between father's and mother's ratings of their child on the CBC-Q was determined for each family as follows: each parent's response to each of the 64 items was coded zero (not checked), one (first column checked), or two (second column checked). Inter-item correlations (product moment correlation coefficients) were then calculated between the mother's coded ratings of her child on the CBC-Q and those of the father.

The CBC-Q was also used as a measure of child adjustment. Each parent's score on the 25 clinic items (Clinic score) and on the 25 non-clinic items (Nonclinic score) was calculated. An overall adjustment score was also obtained by subtracting the Clinic score from the Nonclinic score.

The Behavior Rating of Pupils 3 (BRP) (Bower, 1969) was used to determine teachers' judgments of their pupils' adjustment. The Bower scale consists of eight statements about children's behavior; a ninth statement, relating to the child's competence, was added to the scale. For each statement, the teacher placed every child in the class on a numbered grid with squares arranged so as to approximate a normal distribution. For each statement, the teacher placed the girls on one grid and the boys on a separate grid. Specific instructions to teachers and copies of the rating scales are found in Appendix I. A total maladjustment score was determined for each child by obtaining the sum of his/her scores on each of the eight behavior ratings. Teachers rated all of the children in their classes on the BRP. In addition, teachers completed a CBC-Q for each child whose parents had agreed to participate in the study. Teacher's ratings of the child's adjustment on the CBC-Q (Clinic score, Nonclinic score, overall adjustment score) were determined in the same way as the parents' ratings on that instrument. Teachers with ten or fewer pupils included in the study were paid \$15 for completing the rating forms; teachers with more than ten children included were paid \$20.

#### Hypotheses

Based on the operational definitions given for each of the variables, the hypotheses are restated as follows:

- 1a. There is a significant negative correlation between inter-item correlations of husbands' and wives' ratings of their child on the CBC-Q and the sum of the teacher's ratings of the child on the BRP.
- 1b. There is a significant negative correlation between inter-item correlations of husbands' and wives' ratings of the child on the CBC-Q and the sum of the teacher's ratings of the child on the Clinic items of the CBC-Q.

- 1c. There is a significant positive correlation between inter-item correlations of husbands' and wives' ratings of their child on the CBC-Q and the sum of the teacher's ratings of the child on the Nonclinic items of the CBC-Q.
- 1d. There is a significant positive correlation between inter-item correlations of husbands' and wives' ratings of their child on the CBC-Q and the teacher's ratings of the child's overall adjustment on the CBC-Q.
- 2a. There is a significant negative correlation between inter-item correlations of husbands' and wives' ratings of their child on the CBC-Q and the sum of the parents' ratings of the child on the Clinic items of the CBC-Q.
- 2b. There is a significant positive correlation between inter-item correlations of husbands' and wives' ratings of their child on the CBC-Q and the sum of the parents' ratings of the child on the Nonclinic items of the CBC-Q.
- 2c There is a significant positive correlation between inter-item correlations of husbands' and wives' ratings of their child on the CBC-Q and the parents' ratings of their child's overall adjustment on the CBC-Q.
- 3a. There is a significant negative correlation between parents' Locke-Wallace scores and the sum of the teacher's ratings of the child on the BRP.
- 3b. There is a significant negative correlation between parents' Locke-Wallace scores and the sum of the teachers' ratings of the child on the Clinic items of the CBC-Q.
- 3c. There is a significant positive correlation between parents' Locke-Wallace scores and the sum of the teacher's ratings of the child on the Nonclinic items of the CBC-Q.
- 3d. There is a significant positive correlation between parents' Locke-Wallace scores and the teacher's ratings of the child's overall adjustment on the CBC-Q.
- 4a. There is a significant negative correlation between parents' Locke-Wallace scores and the sum of their ratings of their child on the Clinic items of the CBC-Q.
- 4b. There is a significant positive correlation between parents' Locke-Wallace scores and the sum of their ratings of their child on the Nonclinic items of the CBC-Q.
- 4c. There is a significant positive correlation between parents' Locke-Wallace scores and their ratings of their child's overall adjustment on the CBC-Q.

- 5a. There is a significant negative correlation between inter-item correlations of parents' self-perceptions and perceptions by mate on the ICL and the sum of the teacher's ratings of the child on the BRP.
- 5b. There is a significant negative correlation between inter-item correlations of parents' self-perceptions and perceptions by mate on the ICL and the sum of the teacher's ratings of the child on the Clinic items of the CBC-Q.
- 5c. There is a significant positive correlation between inter-item correlations of parents' self-perceptions and perceptions by mate on the ICL and the sum of the teacher's ratings of the child on the Nonclinic items of the CBC-Q.
- 5d. There is a significant positive correlation between inter-item correlations of parents' self-perceptions and perceptions by mate on the ICL and the teacher's ratings of the child's overall adjustment on the CBC-Q.
- 6a. There is a significant negative correlation between inter-item correlations of parents' self-perceptions and perceptions by mate on the ICL and the sum of the parents' ratings of their child on the Clinic items of the CBC-Q.
- 6b. There is a significant positive correlation between inter-item correlations of parents' self-perceptions and perceptions by mate on the ICL and the sum of the parents' ratings of their child on the Nonclinic items of the CBC-Q.
- 6c. There is a significant positive correlation between inter-item correlations of parents' self-perceptions and perceptions by mate on the ICL and the parents' ratings of their child's overall adjustment on the CBC-Q.
- 7. There is a significant positive correlation between inter-item correlations of parents' self-perceptions and perceptions by mate on the ICL and inter-item correlations of their ratings of their child on the CBC-Q.
- 8. There is a significant positive correlation between parents' Locke-Wallace scores and inter-item correlations of their ratings of their child on the CBC-Q.
- 9. There is a significant positive correlation between parents' Locke-Wallace scores and inter-item correlations of their self-perceptions and perceptions by mate on the ICL.
- 10. There is a significant positive correlation between inter-item correlations of parents' self-perceptions on the ICL and inter-item correlations of their ratings of their child on the CBC-Q.

11. There is a significant positive correlation between inter-item correlations of parents' self-perceptions on the ICL and their Locke-Wallace scores.

The level of probability required for rejection of the null

hypothesis in this study was equal to or less than .05.

## CHAPTER III

## RESULTS

#### Characteristics of the Sample

Since sensitive and concerned parents are more likely to volunteer to participate in child development research, it was important to determine whether the current sample included children from the entire range of the adjustment continuum. Although the BRP was designed so that total adjustment scores could be obtained for all children in the participating classes, only 15 of the 25 teachers filled out the BRP's in such a way that this information could be obtained. Figure 1 illustrates the distribution of total BRP adjustment scores for all the children in those 15 classes, and for the children from those classes whose parents participated in the study. On the BRP, high scores indicate poor adjustment whereas low scores indicate good adjustment. From Figure 1, it appears that the current sample drawn from these 15 classes did include children from all along the adjustment continuum.

A measure of the representativeness of the entire sample can be obtained by looking at the distributions of scores on the Competence item (Item 9) of the BRP. The Competence item was added to the BRP as part of another research study being conducted at the same time as the present study. Scores on the Competence item are not included in the total BRP adjustment scores. Figure 2 illustrates the



Figure 1. Distribution of total BRP scores for children of participating and non-participating parents (15 classes).

distributions of Competence scores for children of participating and non-participating parents. It is clear from Figure 2 that in terms of teachers' ratings of their pupils' Competence, the present sample is representative of the larger population from which it was drawn.

Looking at the distribution of scores on the Competence item appears to be a valid method of estimating what the distribution of total BRP scores would have looked like if all of those scores had been available. For the children who participated in this study, there was a strong relationship between Competence scores and total BRP scores. Correlations between the two variables were -.8376 for the distribution of boys, -.6961 for the distribution of girls, and -.7762 for the overall distribution; all of these correlations were significant (p < .0005).

A third way of looking at the representativeness of the present sample is to compare the distribution of children of participating parents with the population distribution from which they were drawn for each of the BRP items. Table 1 lists the means and standard deviations for each item. Item numbers correspoond to the order of the BRP items in Appendix I. As Table 1 illustrates, the means and standard deviations of the sample distribution are very similar to those of the population distribution. However, there appears to be slightly more variation between the two distributions for the sample of boys than for the sample of girls.

#### Distribution Characteristics

For the distribution of girls, the distribution of boys and the total distribution, means, standard deviations, skewness, and kurtosis



Figure 2. Distribution of Competence scores for children of participating and non-participating parents (total sample).

		Mean of total dis- tribution	Mean of partici- pating sample	Standard deviation of total distrib.	Standard deviation of participa- ting sample
Item 1	Boys:	4.0	3.89	1.83	1.93
	Girls:	3.87	3.79	1.86	1.76
Item 2	Boys:	4.0	4.4	1.73	1.68
	Girls:	4.12	4.19	1.76	1.83
Item 3	Boys:	3.67	3.57	1.78	1.7
	Girls:	3.77	3.75	1.79	1.7
Item 4	Boys:	3.8	3.13	1.79	1.57
	Girls:	3.78	3.64	1.8	1.89
Item 5	Boys:	3.84	3.35	1.84	1.95
	Girls:	3.78	3.79	1.82	1.82
Item 6	Boys:	3.82	3.52	1.79	1.8
	Girls:	3.81	3.96	1.79	1.72
Item 7	Boys:	3.78	3.52	1.74	1.85
	Girls:	3.86	3.81	1.73	1.78
Item 8	Boys:	3.78	3.48	1.80	1.84
	Girls:	3.6	3.51	1.69	1.72
Item 9	Boys:	4.09	4.48	1.80	1.69
	Girls:	4.19	4.28	1.80	1.83

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Table 1. Means and standard deviations of sample and population distributions for each of the BRP items.

for each variable are given in Appendix I. For the following variables, the distributions (for both boys and girls) were found to be slightly negatively skewed: husbands' and wives' Locke-Wallace scores; H and W correlations on the ICL; H and W-H correlations on the ICL; correlations of parents' ratings of their child on the CBC-Q; Competence scores and Item 2 scores on the BRP; husbands', wives', and teachers' ratings of the children on the Nonclinic items of the CBC-0; husbands', wives', and teachers' overall adjustment scores, derived from the CBC-O; and correlations of teachers' and wives' ratings of the child on the CBC-Q. Both distributions were found to be slightly positively skewed for the following variables: scores on BRP items 1, 3, 4, 5, 6, 7, and 8 and husbands', wives', and teachers' ratings of the children on the Clinic items of the CBC-Q. The distributions of total BRP scores; W and H-W correlations on the ICL; and correlations of husbands' and teachers' ratings of the child on the CBC-Q were found to be slightly positively skewed for the distribution of boys, and slightly negatively skewed for the distribution of girls and the overall distribution.

It should be noted that there was a great deal of missing data on Item 1 of the Locke-Wallace scale. Sixteen husbands and seventeen wives failed to complete Item 1; for these <u>Ss</u>, Item 1 was scored 15, which is the score given when the midpoint of the scale for Item 1 is marked.

# Relationships among Adjustment Measures

Table 2 illustrates the relationships between total BRP scores and each of the adjustment measures derived from the CBC-Q.

		Total BRP Scores	
	Boys	Girls	Total
Clinic score by	.3083 <sup>*</sup>	.2907 <sup>*</sup>	.2682 <sup>*</sup>
husbands	( <u>p</u> < .007)	( <u>p</u> < .024)	( <u>p</u> < .002)
Clinic score by	.3425 <sup>*</sup>	.2741 <sup>*</sup>	.2989 <sup>*</sup>
wives	( <u>p</u> < .003)	( <u>p</u> < .031)	( <u>p</u> < .001)
Clinic score by	.6652 <sup>*</sup>	.4162 <sup>*</sup>	.5565 <sup>*</sup>
teachers	( <u>p</u> < .0005)	( <u>p</u> < .002)	( <u>p</u> < .0005)
Nonclinic score	1769	0803	1147
by husbands	( <u>p</u> < .083)	( <u>p</u> < .296)	( <u>p</u> < .116)
Nonclinic score	2759 <sup>*</sup>	.0082	1464
by wives	( <u>p</u> < .014)	( <u>p</u> < .478)	( <u>p</u> < .063)
Nonclinic score	5394 <sup>*</sup>	2464 <sup>*</sup>	4302 <sup>*</sup>
by teachers	( <u>p</u> < .0005)	( <u>p</u> < .047)	( <u>p</u> < .0005)
Overall adjustment	2958 <sup>*</sup>	2209	2284 <sup>*</sup>
by husbands	( <u>p</u> < .009)	( <u>p</u> < .068)	( <u>p</u> < .008)
Overall adjustment	3866 <sup>*</sup>	1452	2725 <sup>*</sup>
by wives	( <u>p</u> < .001)	( <u>p</u> < .165)	( <u>p</u> < .002)
Overall adjustment	6834 <sup>*</sup>	4066 <sup>*</sup>	5792 <sup>*</sup>
by teachers	( <u>p</u> < .0005)	( <u>p</u> < .002)	( <u>p</u> < .0005)

Table 2. Correlations and corresponding probabilities of total BRP scores with other teacher and parent adjustment measures.

\* indicates significant correlation (p < .05)

Correlations between total BRP scores and teachers' Clinic scores, Nonclinic scores, and overall adjustment scores were all significant. However, the correlations for the distribution of girls were all smaller than the correlations for the distribution of boys; these differences were all significant ( $\underline{p} < .05$ ). Although the intercorrelations among the teacher measures were all significant, it should be noted that they represented only 29% to 46% of the common variance between measures for the distribution of boys and only 7% to 18% of the common variance between measures for the distribution of girls.

Correlations between total BRP scores and husbands' and wives' Clinic scores were all significant; again, the correlations for the distribution of girls were smaller than the correlations for the distribution of boys. Parents' Nonclinic scores were found to be only weakly associated with total BRP scores. Only the correlation of wives' Nonclinic scores with total BRP scores for the distribution of boys reached significance. For the distribution of boys and the overall distribution, parents' overall adjustment scores were significantly correlated with total BRP scores; however, the correlations for the distribution of girls did not reach significance.

Table 3 illustrates the relationship among the various parent and teacher adjustment measures derived from the CBC-Q. All of the correlations among teacher scores were found to be significant. Parents' Clinic scores were found to be correlated significantly with teachers' Clinic scores and teachers' overall adjustment scores for all three distributions, and with teachers' Nonclinic scores for the distribution of boys and overall distribution. Parents' Nonclinic scores were found to be correlated significantly with teachers'

	Clinic score by teachers	Nonclinic score by teachers	Overall adjustment by teachers
Boys:	. 3423***	2769**	3515***
Girls:	. 2807*	2344	3196**
Total:	. 3437*****	2321***	3372*****
Boys:	. 3879****	2253*	3462***
Girls:	. 3972***	0726	2797*
Total:	. 4036****	1556*	3248*****
Boys:		5469*****	8744*****
Girls:		2796*	7688*****
Total:		4384*****	8396*****
Boys:	1061	.3420***	.2470*
Girls:	0888	.0015	.0527
Total:	1284	.1760*	.1803*
Boys:	1547	.2480*	.2300*
Girls:	0489	.0676	.0736
Total:	1305	.1638*	.1741*
Boys:	5469*****		. 8844*****
Girls:	2796*		. 8290*****
Total:	4384****		. 8588****
Boys:	2674*	.3772****	.3672***
Girls:	2223	.1277	.2145
Total:	2796***	.2514***	.3125*****
Boys:	3304***	.2995**	. 3578***
Girls:	2535*	.0892	. 2070
Total:	3196****	.2026*	. 3056****
	Boys: Girls: Total: Boys: Girls: Total: Boys: Girls: Total: Boys: Girls: Total: Boys: Girls: Total: Boys: Girls: Total: Boys: Girls: Total: Boys: Girls: Total: Boys: Girls: Total: Boys: Girls: Total:	Clinic score by teachers Boys: .3423*** Girls: .2807* Total: .3437***** Boys: .3879**** Girls: .3972*** Total: .4036***** Boys: .1061 Girls: .4036***** Boys: .1061 Girls: .0888 Total: .1284 Boys: .1547 Girls: .0489 Total: .1305 Boys: .5469***** Girls: .2796* Total: .4384***** Boys: .2674* Girls: .2796* Total: .2223 Total: .2796*** Boys: .3304*** Girls: .2796***	Clinic score by teachers  Nonclinic score by teachers    Boys:  .3423*** 2769**    Girls:  .2807* 2344    Total:  .3437**** 2253*    Boys:  .3879*** 2253*    Girls:  .3972*** 0726    Total:  .4036**** 1556*    Boys: 5469***** 2769*    Total:  .4036**** 1556*    Boys: 1061  .3420***    Girls: 0726 4384*****    Boys: 1061  .3420***    Girls: 0888  .0015    Total: 1284  .1760*    Boys: 1547  .2480*    Girls: 0489  .0676    Total: 1305  .1638*    Boys: 2796*  .153*    Total: 2796*  .277    Total: 2796*  .277    Total: 2796**  .2674*    Boys: 2674*  .3772****    Girls: 2223  .1277    Total:

Table 3. Correlations and corresponding probabilities among parent and teacher adjustment measures derived from the CBC-Q.

\* = <u>p</u> < .05 \*\* = <u>p</u> < .01 \*\*\* = <u>p</u> < .005 \*\*\*\* = <u>p</u> < .001 \*\*\*\*\* = <u>p</u> < .001

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Nonclinic scores and teachers' overall adjustment scores for the distribution of boys and the overall distribution only; correlations for the distribution of girls did not reach significance. There were no significant correlations between parents' Nonclinic scores and teachers' Clinic scores for any of the distributions.

For the distribution of boys and the overall distribution only, correlations of parents' overall adjustment scores with teachers' Clinic scores, teachers' Nonclinic scores, and teachers'overall adjustment scores were all found to be significant. For the distribution of girls, the only significant correlation between parents' overall adjustment scores and the teacher adjustment measures was the correlation between wives' overall adjustment scores and teachers' Clinic scores.

Table 4 illustrates the interrelationships among the various parent adjustment measures. For the distribution of boys and the overall distribution, all of the parent adjustment measures were found to be significantly intercorrelated. For the distribution of girls, however, husbands' Clinic scores were not correlated significantly with either husbands' or wives' Nonclinic scores, and wives' Clinic scores were not correlated significantly with wives' Nonclinic scores. Husbands' Clinic scores were also not correlated significantly with wives' overall adjustment scores. All of the other correlations among parent adjustment measures were significant for the distribution of girls.

To summarize the results of Tables 2, 3, and 4, there were significant intercorrelations among almost all of the parent and teacher adjustment measures for the distribution of boys. For the distribution

r relationships among parent	
Correlations and corresponding probabilities 1	adjustment measures derived from the CBC-Q.
Table 4.	

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		Wives' Clinic Scores	Husbands' Nonclinic Scores	Wives' Nonclinic Scores	Husbands' Overall Adjustment Scores	Wives' Overall Adjustment Scores
Husbands' Clinic Scores	Boys: Girls: Total:	. 564**** . 281***** . 492*****	281* 086 265***	382**** .024 261***	761***** 608***** 737*****	587***** 136 462*****
Wives Clinic Scores	Boys: Girls: Total:		356*** 318* 366****	253* 160 233**	563***** 405*** 528*****	752***** 667**** 729*****
Husbands' Nonclinic Scores	Boys: Girls: Total:			.466***** .4]]*** .495****	.846**** .843***** .847*****	.524***** .483***** .530*****
Wives' Nonclinic Scores	Boys: Girls: Total:				.553***** .315* .466*****	.828***** .842***** .836*****
Husbands' Overall Adjustment Scores	Boys: Girls: Total:					.689**** .458**** .626****
* = P < .05		*** = <u>p</u> < .005	**	*** = P < .000!		
** = p < .0]	~	**** = <u>p</u> < .001				

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of girls, parents' Clinic and Nonclinic scores were not significantly intercorrelated. In addition, Nonclinic scores for parents and teachers were independent, i.e. parents' Nonclinic scores were not significantly correlated with any of the teacher adjustment measures and teachers' Nonclinic scores were not significantly correlated with any of the parent adjustment measures. Most of the other intercorrelations among parent and teacher adjustment measures were significant for the distribution of girls.

#### Hypothesis 1

Hypothesis 1 concerned the relations between congruence of parents' perceptions of their child and four measures of child adjustment as rated by the teacher. The correlations found for Hypotheses 1a, 1b, 1c, and 1d are given in Table 5, with their corresponding probabilities. Separate results are given for the distribution of boys, the distribution of girls, and the overall distribution. Significant correlations are marked with an asterisk (\*).

It was predicted in Hypothesis la that there would be a significant negative correlation between correlations of parents' ratings of their child on the CBC-Q and the child's total BRP score as rated by the teacher. Results for this hypothesis are found in row one of Table 5. This hypothesis was strongly supported only for the distribution of boys and the overall distribution. Although the results for the distribution of girls were in the predicted direction, they did not reach significance.

It was predicted in Hypothesis lb that there would be a significant negative correlation between correlations of parents' ratings

Table 5. Correlations and corresponding probabilities for hypotheses relating congruence in parents' perceptions of their child to the child's adjustment as rated by the teacher (Hypotheses la, lb, lc, and ld).

	Inter-parent correlations of ratings of child on the CBC-Q					
	Boys	Girls	Total			
	(N = 63)	(N = 47)	(N = 110)			
Total BRP scores	2868*	0426	1701*			
(teacher)	( <u>p</u> < .01)	( <u>p</u> < .39)	( <u>p</u> < .04)			
Clinic score by	2579*	1592	2471*			
teacher (CBC-Q)	( <u>p</u> < .02)	( <u>p</u> < .14)	( <u>p</u> < .005)			
Nonclinic score by	.3767*	0404	.2009*			
teacher (CBC-Q)	( <u>p</u> < .001)	( <u>p</u> < .39)	( <u>p</u> < .02)			
Overall adjustment score by teacher (CBC-Q)	.3621* ( <u>p</u> < .002)	.0658 ( <u>p</u> < .33)	.2632* ( <u>p</u> < .003)			

of their child on the CBC-Q and teacher's ratings of the child on the Clinic items of the CBC-Q. Results for this hypothesis are found in row two of Table 5. The hypothesis was strongly supported only for the distribution of boys and the overall distribution. Although the results for the distribution of girls were in the predicted direction, they did not reach significance.

It was predicted in Hypothesis lc that there would be a significant positive correlation between correlations of parents' ratings of their child on the CBC-Q and the teacher's ratings of the child on the Nonclinic items of the CBC-Q. Results for this hypothesis are found in row three of Table 5. This hypothesis was strongly supported only for the distribution of boys and the overall distribution. The results for the distribution of girls were in the opposite direction from that predicted, but the correlation was very small.

It was predicted in Hypothesis 1d that there would be a significant positive correlation between correlations of parents' ratings of their child on the CBC-Q and the teacher's ratings of the child's overall adjustment derived from the CBC-Q. Results for this hypothesis are found in row four of Table 5. The hypotheses was strongly supported only for the distribution of boys and the overall distribution. Although the results for the distribution of girls were in the predicted direction, they did not reach significance.

To summarize, Hypothesis 1 was supported strongly for the distribution of boys and the overall distribution, but was not supported for the distribution of girls.

### Hypothesis 2

Hypothesis 2 concerned the relationship between congruence of parents' perceptions of their child and three measures of their child's adjustment derived from their CBC-Q ratings. The correlations for Hypothesis 2a, 2b, and 2c are found in Table 6, with their corresponding probabilities. Separate results are given for the distribution of boys, the distribution of girls, and the overall distribution. Significant correlations are marked with an asterisk (\*).

It was predicted in Hypothesis 2a that there would be a significant negative correlation between correlations of parents' ratings of their child on the CBC-Q and their ratings of their child on the Clinic items of the CBC-Q. Results for this hypothesis are found in rows one and two of Table 6. This hypothesis was strongly supported for the

Table 6. Correlations and corresponding probabilities for hypotheses relating congruence in parents' perceptions of their child to parents' ratings of their child's adjustment (Hypotheses 2a, 2b, and 2c).

	Correlations of parents' ratings of their child on the CBC-Q					
	Boys	Girls	Total			
	(N = 63)	(N = 47)	(N = 110)			
Clinic score by	5448*	3079*	5003*			
husbands (CBC-Q)	( <u>p</u> < .0005)	( <u>p</u> < .02)	( <u>p</u> < .0005)			
Clinic score by	3523*	5676*	4483*			
wives (CBC-Q)	( <u>p</u> < .002)	( <u>p</u> < .0005)	( <u>p</u> < .0005)			
Nonclinic score by	.6154*	.5185*	.6034*			
husbands (CBC-Q)	( <u>p</u> < .0005)	( <u>p</u> < .0005)	( <u>p</u> < .0005)			
Nonclinic score by	.4231*	.5856*	.4991*			
wives (CBC-Q)	( <u>p</u> < .0005)	( <u>p</u> < .0005)	( <u>p</u> < .0005)			
Overall adjustment score by husbands (CBC-Q)	.7272* ( <u>p</u> < .0005)	.5792* ( <u>p</u> < .0005)	.6989* ( <u>p</u> < .0005)			
Overall adjustment score by wives (CBC-Q)	.4925* ( <u>p</u> < .0005)	.7528* ( <u>p</u> < .0005)	.6046* ( <u>p</u> < .0005)			

distribution of boys, the distribution of girls, and the overall distribution.

It was predicted in Hypothesis 2b that there would be a significant positive correlation between correlations of parents' ratings of their child on the CBC-Q and their ratings of their child on the Nonclinic items of the CBC-Q. Results for this hypothesis are found in rows three and four of Table 6. This hypothesis was strongly supported for boys, girls, and the overall distribution.

It was predicted in Hypthesis 2c that there would be a significant positive correlation between correlations of parents' ratings of their child on the CBC-Q and their ratings of their child's overall adjustment derived from the CBC-Q. Results for this hypothesis are found in rows five and six of Table 3. The hypothesis was strongly supported for the distribution of boys, the distribution of girls, and the overall distribution.

#### Hypothesis 3

Hypothesis 3 concerned the relationship between parents' marital adjustment and four measures of their child's adjustment as rated by the teacher. The correlations for Hypotheses 3a, 3b, 3c, and 3d are found in Table 7, with their corresponding probabilities. Separate results are given for the distribution of boys, the distribution of girls, and the overall distribution. Significant correlations are marked with an asterisk (\*).

It was predicted in Hypothesis 3a that there would be a significant negative correlation between parents' Locke-Wallace scores and their child's total BRP score as rated by the teacher. Results for

		Husbands' Locke-Wallace Scores	Wives' Locke-Wallace Scores
Total BRP scores (teacher)	Boys: Girls: Total:	0815 (p < .26) .2844 (p < .03)* .0533 (p < .29)	0405 ( <u>p</u> < .38) .0770 ( <u>p</u> < .30) .0020 ( <u>p</u> < .49)
Clinic score by teacher (CBC-Q)	Boys: Girls: Total:	0803 ( <u>p</u> < .27) .0317 ( <u>p</u> < .42) .0511 ( <u>p</u> < .30)	0728 ( <u>p</u> < .29) 1759 ( <u>p</u> < .12) 1041 ( <u>p</u> < .14)
Nonclinic score by teacher (CBC-Q)	Boys: Girls: Total:	.0618 ( <u>p</u> < .32) 0997 ( <u>p</u> < .25) .0021 ( <u>p</u> < .49)	0164 ( <u>p</u> < .45) 0005 ( <u>p</u> < .50) 0091 ( <u>p</u> < .46)
Overall adjustment score by teacher (CBC-Q)	Boys: Girls: Total:	.0806 ( <u>p</u> < .27) 0849 ( <u>p</u> < .29) .0304 ( <u>p</u> < .76)	.0311 ( <u>p</u> < .40) .1021 ( <u>p</u> < .25) .0538 ( <u>p</u> < .29)

Table 7. Correlations and corresponding probabilities for hypotheses relating parents' marital adjustment to their child's adjustment as rated by the teacher (Hypotheses 3a, 3b, 3c, and 3d).

this hypothesis are found in row one of Table 7. The hypothesis was not supported. Only the correlations for boys were in the predicted direction, and they did not reach significance. The one significant correlation found, between BRP scores for girls and husbands' Locke-Wallace scores, was in the opposite direction from that predicted.

It was predicted in Hypothesis 3b that there would be a significant negative correlation between parents' Locke-Wallace scores and the teacher's ratings of the child on the Clinic items of the CBC-Q. Results for Hypothesis 3b are found in row two of Table 7. The hypothesis was not supported, although five of the six correlations were in the predicted direction.

It was predicted in Hypothesis 3c that there would be a

significant positive correlation between parents' Locke-Wallace scores and the teacher's ratings of their child on the Nonclinic items of the CBC-Q. Results for Hypothesis 3c are found in row three of Table 7. The hypothesis was not supported. Although four of the six correlations were in the opposite direction from that predicted, they were very low, which suggests that there was little relationship between the variables.

It was predicted in Hypothesis 3d that there would be a significant positive correlation between parents' Locke-Wallace scores and their child's overall adjustment score as derived from the teacher's CBC-Q ratings. Results of Hypothesis 3d are found in row four of Table 7. The hypothesis was not supported, although five of the six correlations were in the predicted direction.

To summarize, Hypothesis 3 was not supported for the distribution of boys, the distribution of girls, or the overall distribution.

#### Hypothesis 4

Hypothesis 4 concerned the relationship between parents' marital adjustment and three measures of their child's adjustment derived from their CBC-Q ratings. The correlations for Hypotheses 4a, 4b, and 4c are found in Table 8, with their corresponding probabilities. Separate results are given for the distribution of boys, the distribution of girls, and the overall distribution. Significant correlations are marked with an asterisk (\*).

It was predicted in Hypothesis 4a that there would be a significant negative correlation between parents' Locke-Wallace scores and their ratings of their child on the Clinic items of the CBC-Q. Results

	Husbands' Locke-Wallace Scores	Wives' Locke-Wallace Scores
Boys:	.1150 ( <u>p</u> < .19)	0230 (p < .43)
Girls:	0264 ( <u>p</u> < .43)	0519 (p < .37)
Total:	.0547 ( <u>p</u> < .29)	0257 (p < .40)
Boys:	0738 ( <u>p</u> < .28)	2051 ( <u>p</u> < .05)*
Girls:	.1894 ( <u>p</u> < .10)	0169 ( <u>p</u> < .46)
Total:	.0048 ( <u>p</u> < .48)	1338 ( <u>p</u> < .08)
Boys:	.3180 ( <u>p</u> < .006)*	.1906 ( <u>p</u> < .07)
Girls:	2259 ( <u>p</u> < .063)	0885 ( <u>p</u> < .28)
Total:	.1352 ( <u>p</u> < .08)	.0790 ( <u>p</u> < .21)
Boys:	.0150 ( <u>p</u> < .45)	.1269 ( <u>p</u> < .16)
Girls:	.0711 ( <u>p</u> < .32)	.1177 ( <u>p</u> < .22)
Total:	.0427 ( <u>p</u> < .33)	.1190 ( <u>p</u> < .11)
Boys:	.1491 ( <u>p</u> < .12)	.1419 ( <u>p</u> < .13)
Girls:	1657 ( <u>p</u> < .13)	0425 ( <u>p</u> < .39)
Total:	.0645 ( <u>p</u> < .25)	.0695 ( <u>p</u> < .24)
Boys:	.0530 (p < .34)	.2054 ( <u>p</u> < .05)*
Girls:	0532 (p < .36)	.0944 ( <u>p</u> < .26)
Total:	.0262 (p < .39)	.1581 ( <u>p</u> < .05)*
	Boys: Girls: Total: Boys: Girls: Total: Boys: Girls: Total: Boys: Girls: Total: Boys: Girls: Total: Boys: Girls: Total: Boys: Girls: Total:	Husbands' Locke-Wallace ScoresBoys:.1150 ( $p < .19$ ) Girls:Girls:0264 ( $p < .43$ ) Total:Total:.0547 ( $p < .29$ )Boys:0738 ( $p < .28$ ) Girls:Girls:.1894 ( $p < .10$ ) Total:Total:.0048 ( $p < .48$ )Boys:.3180 ( $p < .006$ )* Girls:Girls:.2259 ( $p < .063$ ) Total:Total:.0150 ( $p < .45$ ) Girls:Boys:.0150 ( $p < .32$ ) Total:Boys:.0427 ( $p < .33$ )Boys:.1491 ( $p < .12$ ) Girls:Girls:0532 ( $p < .36$ ) Total:Boys:.0530 ( $p < .34$ ) Girls:Girls:.0262 ( $p < .39$ )

Table 8. Correlations and corresponding probabilities for hypotheses relating parents' marital adjustment to their ratings of their child's adjustment (Hypotheses 4a, 4b, and 4c).

for this hypothesis are found in rows one and two of Table 8. The hypothesis was supported only for the correlation of wives' Locke-Wallace scores with Clinic scores by wife, for the distribution of boys. However, seven of the remaining eleven correlations were in the predicted direction.

It was predicted in Hypothesis 4b that there would be a significant positive correlation between parents' Locke-Wallace scores and their ratings of their child on the Nonclinic items of the CBC-Q. Results for this hypothesis are found in rows three and four of Table 8. The hypothesis was supported only for the distribution of boys, and only for the correlation of husbands' Locke-Wallace scores with their ratings of their child on the Nonclinic items of the CBC-Q. However, ten of the twelve correlations were in the predicted direction. Only the correlations for the distribution of girls, of parents' Locke-Wallace scores with husbands' ratings of their children on the Nonclinic items of the CBC-Q, were in the opposite direction from that predicted.

It was predicted in Hypothesis 4c that there would be a significant positive correlation between parents' Locke-Wallace scores and their ratings of their child's overall adjustment, derived from the CBC-Q. Results for this hypothesis are found in rows five and six of Table 8. The hypothesis was supported for the distribution of boys and the overall distribution, for the correlation of wives' Locke-Wallace scores with their ratings of their child's overall adjustment. For the distribution of girls, three of the four correlations were in the opposite direction from that predicted.

### Hypothesis 5

Hypothesis 5 concerned the relationship between congruence of parents' self-perceptions and perceptions by mate and four measures of their child's adjustment as rated by the teacher. The correlations for Hypotheses 5a, 5b, 5c, and 5d are found in Table 9, with their corresponding probabilities. Separate results are given for the distribution of boys, the distribution of girls, and the overall distribution.

Table 9. Correlations and corresponding probabilities for hypotheses relating congruence of parents' self-perceptions and perceptions by mate to their child's adjustment as rated by the teacher (Hypotheses 5a, 5b, 5c, and 5d).

		H and W-H Correlations on ICL	W and H-W Correlations on ICL
Total BRP scores (teacher)	Boys: Girls: Total:	1242 ( <u>p</u> < .17) .0841 ( <u>p</u> < .29) 0317 ( <u>p</u> < .37)	2572 ( <u>p</u> < .02)* .0074 ( <u>p</u> < .48) 1316 ( <u>p</u> < .09)
Clinic score by teacher (CBC-Q)	Boys: Girls: Total:	1139 ( <u>p</u> < .19) 0502 ( <u>p</u> < .37) 1016 ( <u>p</u> < .15)	1035 ( <u>p</u> < .21) 2590 ( <u>p</u> < .04)* 1821 ( <u>p</u> < .03)*
Nonclinic score by teacher (CBC-Q)	Boys: Girls: Total:	.1373 ( <u>p</u> < .14) .0093 ( <u>p</u> < .48) .0791 ( <u>p</u> < .21)	.2062 (p < .05)* .1360 (p < .18)* .1584 (p < .05)*
Overall adjustment score by teacher	Boys: Girls: Total:	.1431 ( <u>p</u> < .13) .0355 ( <u>p</u> < .41) .1061 ( <u>p</u> < .15)	.1772 ( <u>p</u> < .08) .2414 ( <u>p</u> < .05)* .2002 ( <u>p</u> < .02)*

It was predicted in Hypothesis 5a that there would be a significant negative correlation between correlations of parents' selfperceptions and perceptions by mate on the ICL and their child's total BRP score as rated by the teacher. Results for this hypothesis are found in row one of Table 9. Although all of the correlations for the distribution of boys and the overall distribution were in the predicted direction, only one reached significance. Correlations for the distribution of girls were in the opposite direction from that predicted.

It was predicted in Hypothesis 5b that there would be a significant negative correlation between correlations of parents' selfperceptions and perceptions by mate on the ICL and the teacher's ratings of their child on the Clinic items of the CBC-Q. Results for this hypothesis are found in row two of Table 9. Although all of the correlations were in the predicted direction, only two reached significance. The hypothesis was supported only for W and H-W correlations on the ICL with Clinic scores as rated by teachers, and only for the distribution of girls and the overall dirstribution.

It was predicted in Hypothesis 5c that there would be a significant positive correlation between correlation of parents' selfperceptions and perceptions by mate on the ICL and the teacher's ratings of their child on the Nonclinic items of the CBC-Q. Results for this hypothesis are found in row three of Table 9. Although all of the correlations were in the predicted direction, only two reached significance. The hypothesis was supported only for W and H-W correlations on the ICL with Nonclinic scores as rated by teachers, and only for the distribution of boys and the overall distribution.

It was predicted in Hypothesis 5d that there would be a significant positive correlation between correlations of parents' selfperceptions and perceptions by mate on the ICL and the teacher's

ratings of the child's overall adjustment as derived from the CBC-Q. Results for this hypothesis are found in row four of Table 9. Although all of the correlations are in the predicted direction, only two reached significance. The hypothesis was supported for the correlations between W and H-W correlations on the ICL and overall adjustment scores on the CBC-Q as rated by teachers, for the distribution of girls and the overall distribution only.

To summarize, Hypothesis 5 was not supported for the correlations between H and W-H correlations on the ICL and the four measures of child adjustment as rated by the teacher. However, there was moderate support for Hypothesis 5 for the correlations between W and H-W correlations on the ICL and the four measures of child adjustment as rated by the teacher.

#### Hypothesis 6

Hypothesis 6 concerned the relationship between congruence of parents' self-perceptions and perceptions by mate and three measures of their child's adjustment derived from their CBC-Q ratings. The correlations for Hypotheses 6a, 6b, and 6c are found in Table 10, with their corresponding probabilities. Separate results are given for the distribution of boys, the distribution of girls, and the overall distribution. Significant correlations are marked with an asterisk (\*).

It was predicted in Hypothesis 6a that there would be a significant negative correlation between correlations of parents' selfperceptions and perceptions by mate on the ICL and their ratings of their child on the Clinic items of the CBC-Q. Results for this hypothesis are found in rows one and two fo Table 10. For the distribution of boys and the overall distribution, all correlations were in the

Table 10. Correlations and corresponding probabilities for hypotheses relating congruence of parents' self-perceptions and perceptions by mate to their ratings of their child's adjustment (Hypotheses 6a, 6b, and 6c).

		H and W-H Correlations on ICL	W and H-W Correlations on ICL
Clinic score by husbands (CBC-Q)	Boys: Girls: Total:	2842 ( <u>p</u> < .01)* 1002 ( <u>p</u> < .25) 2348 ( <u>p</u> < .007)*	1474 ( <u>p</u> < .12) 0436 ( <u>p</u> < .39) 1614 ( <u>p</u> < .05)*
Clinic score by wives (CBC-Q)	Boys: Girls: Total:	3245 ( <u>p</u> < .005)* .2285 ( <u>p</u> < .06) 1271 ( <u>p</u> < .09)	4403 ( <u>p</u> < .0005)* .0693 ( <u>p</u> < .32) 2765 ( <u>p</u> < .002)*
Nonclinic score by husbands (CBC-Q)	Boys: Girls: Total:	.1230 ( <u>p</u> < .17) .2497 ( <u>p</u> < .05)* .1916 ( <u>p</u> < .02)*	.2316 ( <u>p</u> < .03)* .1483 ( <u>p</u> < .16) .2413 ( <u>p</u> < .006)*
Nonclinic score by wives (CBC-Q)	Boys: Girls: Total:	0342 ( <u>p</u> < .40) 0581 ( <u>p</u> < .35) 0304 ( <u>p</u> < .38)	.1728 ( <u>p</u> < .09) .2901 ( <u>p</u> < .02)* .2427 ( <u>p</u> < .005)*
Overall adjustment score by husbands (CBC-Q)	Boys: Girls: Total:	.2456 ( <u>p</u> < .03)* .2530 ( <u>p</u> < .04)* .2638 ( <u>p</u> < .003)*	.2407 ( <u>p</u> < .03)* .1417 ( <u>p</u> < .17) .2581 ( <u>p</u> < .003)*
Overall adjustment score by wives (CBC-Q)	Boys: Girls: Total:	.1650 ( <u>p</u> < .10) 1707 ( <u>p</u> < .13) .0498 ( <u>p</u> < .30)	.3732 ( <u>p</u> < .001)* .1796 ( <u>p</u> < .11) .3265 ( <u>p</u> < .0005)*

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predicted direction, with three of the four reaching significance for each distribution. None of the correlations for the distribution of girls reached significance. In addition, both correlations of H and W-H correlations and W and H-W correlations on the ICL with Clinic scores by wives were in the opposite direction from that predicted, for the distribution of girls.

It was predicted in Hypothesis 6b that there would be a significant positive correlation between correlations of parents' selfperceptions and perceptions by mate and their ratings of their child on the Nonclinic items of the CBC-Q. Results for this hypothesis are found in rows three and four of Table 10. All of the correlations of H and W-H correlations and W and H-W correlations on the ICL with Nonclinic scores by husbands were in the predicted direction, with four of the six reaching significance. For H and W-H correlations with Nonclinic scores by wives, the correlations for all three distributions were in the opposite direction from that predicted. For W and H-W correlations with Nonclinic scores by wives, the correlations for all three distributions were in the predicted direction, with two of the three reaching significance.

It was predicted in Hypothesis 6c that there would be a significant positive correlation between correlations of parents' selfperceptions and perceptions by mate on the ICL and their ratings of their child's overall adjustment as derived from the CBC-Q. Results for this hypothesis are found in rows five and six of Table 10. All but one of the correlations were in the predicted direction. The hypothesis was strongly supported for correlations of H and W-H correlations and W and H-W correlations on the ICL with overall adjustment

score by husbands, and for correlations of W and H-W correlations on the ICL with overall adjustment score by wives. The hypothesis was not supported for correlations of H and W-H correlations on the ICL with overall adjustment score by wives.

To summarize, Hypothesis 6 was moderately supported for the distribution of boys and the overall distribution. Eight of the twelve correlations for the distribution of boys and nine of the twelve correlations for the overall distribution reached significance. There was only slight support for Hypothesis 6 for the distribution of girls; only three of the twelve correlations reached significance. The hypothesis tended to be supported most strongly for correlations between H and W-H correlations on the ICL and husbands' ratings of child adjustment, and for correlations between W and H-W correlations on the ICL and wives' ratings of child adjustment.

## Hypotheses 7, 8, 9, 10, and 11

Hypothesis 7 concerned the relationship between congruence of parents' self-perceptions and perceptions by mate and congruence of parents' perceptions of their child. Specifically, it was predicted that there would be a significant positive correlation between correlations of parents' self-perceptions and perceptions by mate on the ICL and correlations of their ratings of their child on the CBC-Q. Results for this hypothesis are found in Table 11, column one, rows two and three. All of the correlations were in the predicted direction, and five of the six were significant. The hypothesis was strongly supported for the distribution of boys and the overall distribution, and moderately supported for the distribution of girls.

		Parents' CBC-Q Correlations	Husbands' Locke-Wallace Scores	Wives' Locke-Wallace Scores
H and W Correlations on IC	Boys:	.4492* ( <u>p</u> < .0005)	.2124* ( <u>p</u> < .05)	.5238* ( <u>p</u> < .0005)
	Girls:	.1116 ( <u>p</u> < .23)	.3056* (р < .02)	.3088* ( <u>p</u> < .017)
	Total:	.3368* ( <u>p</u> < .0005)	.2511* ( <u>p</u> < .004)	.4268* ( <u>p</u> < .0005)
H and W-H Correlations on ICI	Boys:	.2273* ( <u>p</u> < .04)	.1563 ( <u>p</u> < .11)	.3620* ( <u>p</u> < .002)
	Girls:	.1376 ( <u>p</u> < .18)	.3157* ( <u>p</u> < .02)	.2175 ( <u>p</u> < .07)
	Total:	.2091* ( <u>p</u> < .01)	.2175* ( <u>p</u> < .01)	.3025* ( <u>p</u> < .001)
W and H-W Correlations on ICI	Boys:	.3542* ( <u>p</u> < .002)	.1574 ( <u>p</u> < .11)	.3612* ( <u>p</u> < .002)
	Girls:	.2775* ( <u>p</u> < .03)	.2319 ( <u>p</u> < .06)	.1682 ( <u>p</u> < .13)
	Total:	.3594* ( <u>p</u> < .0005)	.1907* ( <u>p</u> < .02)	.2778* ( <u>p</u> < .002)
Parents' CBC-Q Correlations	Boys:		.1012 ( <u>p</u> < .22)	.1554 ( <u>p</u> < .11)
	Girls:		.0941 ( <u>p</u> < .27)	.1382 ( <u>p</u> < .18)
	Total:		.1090 ( <u>p</u> < .13)	.1403 ( <u>p</u> < .07)

Table 11. Correlations and corresponding probabilities for Hypotheses 7, 8, 9, 10, and 11.

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Hypothesis 8 concerned the relationship between congruence of parents' self-perceptions and congruence of their perceptions of their child. Specifically, it was predicted that there would be a significant positive correlation between correlations of parents' selfperceptions on the ICL and correlations of their ratings of their child on the CBC-Q. Results for this hypothesis are found in Table 11, row one, column one. The hypothesis was strongly supported for the distribution of boys and the overall distribution, but was not supported for the distribution of girls.

Hypothesis 9 concerned the relationship between parents' marital adjustment and congruence of their perceptions of their child. Specifically, it was predicted that there would be a significant positive correlation between parents' Locke-Wallace scores and correlations of their ratings of their child on the CBC-Q. Results for this hypothesis are found in Table 11, row four. Although all of the correlations were in the predicted direction, none of them reached significance.

Hypothesis 10 concerned the relationship between congruence of parents' self-perceptions and perceptions by mate and their marital adjustment. Specifically, it was predicted that there would be a significant positive correlation between correlations of parents' selfperceptions and perceptions by mate on the ICL and their Locke-Wallace scores. Results for this hypothesis are found in Table 11, rows two and three, columns two and three. For correlations of H and W-H correlations on the ICL with husbands' Locke-Wallace scores, the hypothesis was supported only for the distribution of girls and the overall distribution. For correlations of H and W-H correlations on the ICL with wives' Locke-Wallace scores, the hypothesis was strongly supported
for the distribution of boys and the overall distribution; the results for the distribution of girls were close to significance. For correlations of W and H-W correlations on the ICL with husbands' Locke-Wallace scores, the hypothesis was supported only for the overall distribution; however, the correlation for the distribution of girls just missed significance. For correlations of W and H-W correlations on the ICL with wives' Locke-Wallace scores, the hypothesis was strongly supported for the distribution of boys and the overall distribution, but was not supported for the distribution of girls. To summarize, there was moderate support for Hypothesis 10.

Hypothesis 11 concerned the relationship between congruence of parents' self-perceptions and their marital adjustment. Specifically, it was predicted that there would be a significant positive relationship between correlations of parents' self-perceptions on the ICL and their Locke-Wallace scores. Results for this hypothesis are found in Table 11, row one, columns two and three. The hypothesis was strongly supported for all three distributions.

## Post Hoc Findings

Several post hoc findings are of interest. The relationship between correlations of parents' self-perceptions on the ICL and child adjustment as rated by teachers and parents is illustrated in Table 12. Separate results are given for the distribution of boys, the distribution of girls, and the overall distribution. Significant correlations are marked with an asterisk (\*).

As shown in Table 12, there is a strong positive relationship between congruence of parents' self-perceptions and their child's

	H and W Correlations on ICL		
	Boys	Girls	Total
Total BRP Scores	2122*	.0455	0889
	( <u>p</u> < .05)	( <u>p</u> < .38)	( <u>p</u> < .18)
Clinic scores by	1375	4145*	2581*
teacher	( <u>p</u> < .14)	( <u>p</u> < .002)	( <u>p</u> < .003)
Nonclinic scores	.2592*	.3173*	.2657*
by teacher	( <u>p</u> < .02)	( <u>p</u> < .02)	( <u>p</u> < .003)
Overall adjustment	.2268*	.4528*	.3089*
scores by teacher	( <u>p</u> < .04)	( <u>p</u> < .001)	( <u>p</u> < .001)
Clinic scores by	1278	1515	1696*
husbands	( <u>p</u> < .16)	( <u>p</u> < .16)	( <u>p</u> < .04)
Clinic scores by	3052*	.0010	2029*
wives	( <u>p</u> < .008)	( <u>p</u> < .50)	( <u>p</u> < .02)
Nonclinic scores	.369*	.0272	.2544*
by husbands	( <u>p</u> < .001)	( <u>p</u> < .43)	( <u>p</u> < .004)
Nonclinic scores	.2068*	.1136	.1839*
by wives	( <u>p</u> < .05)	( <u>p</u> < .22)	( <u>p</u> < .03)
Overall adjustment	.3224*	.1034	.2718*
scores by husbands	( <u>p</u> < .005)	( <u>p</u> < .24)	( <u>p</u> < .002)
Overall adjustment	.3179*	.0846	.2438*
scores by wives	( <u>p</u> < .006)	( <u>p</u> < .29)	( <u>p</u> < .005)

Table 12. Correlations of congruence of parents' self-perceptions with child adjustment as rated by teachers and parents.

adjustment as rated by the teacher, for all three distributions. For the distribution of boys and the overall distribution, there is a strong positive relationship between congruence of parents' selfperceptions and their ratings of their child's adjustment; no such relationship was found for the distribution of girls.

Another post hoc finding of interest is the relationship between correlations of parents' and teacher's ratings of the child on the CBC-Q and child adjustemnt as rated by the teacher. Table 13 illustrates the correlations among these variables. For all three distributions, it is clear that parent and teacher agreement about the child on the CBC-Q is positively correlated with child adjustment.

Table 13. Correlations of parents' and teacher's CBC-Q ratings of the child with total BRP scores as rated by the teacher.

	Total BRP Scores		
	Boys	Girls	Total
Correlations of father's and teacher's ratings on CBC-Q	4531* ( <u>p</u> < .0005)	4343* ( <u>p</u> < .001)	4228* ( <u>p</u> < .0005)
Correlations of mother's and teacher's ratings on CBC-Q	5385* ( <u>p</u> < .0005)	3810* ( <u>p</u> < .004)	4576* ( <u>p</u> < .0005)
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#### CHAPTER IV

## DISCUSSION

#### Validity of Ratings of Child Adjustment

The results relating the four different teacher measures of child adjustment show overwhelmingly that the teachers were consistent in their ratings of each child from measure to measure. The high correlations among teachers' Clinic scores, Nonclinic scores, and overall adjustment scores are to be expected, since all of these scores were derived from the teacher's ratings of the child on the CBC-Q. However, each of these measures was also correlated significantly with total BRP scores, in spite of broad differences in item content. Thus, for the present sample, the greater the child's maladjustment as assessed by the BRP, the greater the number of behaviors s/he will show that are characteristic of clinic-referred children. and the fewer behaviors s/he will show that are characteristic of children who are not clinic referred, as assessed by the teachers. It follows that child maladjustment as assessed by the BRP was significantly negatively associated with overall adjustment on the CBC-Q, which is a summary score subtracting Clinic score from Nonclinic score. Thus, despite radical differences in item content, the teachers' ratings of child adjustment are significantly intercorrelated.

The significant intercorrelations among the adjustment measures are consistent with the literature on teacher ratings of child

adjustment discussed in the introduction to this paper. A wide variety of adjustment rating systems, ranging from a simple four point scale of adjustment to complex checklists, have been shown to have high validity when completed by teachers. The common denominator in all of these is the teacher as rater. The fact that teachers are able to provide predictive assessments of child adjustment with such a broad range of instruments points to the validity of teachers' perceptions of children as well as to the validity of the individual instruments. The previously mentioned study by Cowen et al. (1971) provides support for this point: teachers' ratings of children's adjustment on four different scales with widely different item content were found to be highly intercorrelated. This is consistent with the results of the present study.

It should be noted, however, that the correlations of teachers' CBC-Q adjustment measures with total BRP scores are significantly higher for boys than for girls. Relatedly, the highest correlation between teacher adjustment measures, that between overall adjustment on the CBC-Q with total BRP scores for boys, only accounted for about 46% of the common variance, and the highest correlation for girls only accounted for about 18% of the common variance. This suggests that the aspects of adjustment assessed by the CBC-Q adjustment measures and the BRP are more different for girls than they are for boys.

Part of the reason for this may lie in the procedure used to obtain BRP ratings. For each item on the BRP, teachers were asked to rate girls and boys on separate grids. This procedure was chosen in an attempt to minimize the tendency for girls to be seen as better adjusted than boys. The original BRP scale used only one grid per

item, on which both boys and girls were rated.<sup>1</sup> By using separate grids for boys and girls, the real differences between them on some of the items may not have been reflected in their total adjustment scores. This procedure may have artificially inflated girls' BRP scores; the same BRP score for a boy and a girl, then, probably does not reflect a comparable degree of maladjustment. Support for this notion is found in some of the teachers' comments about the BRP. A number of teachers noted that the girls in their classes simply did not fit into the negative extremes of the behavior items; however, because of the nature of the BRP instructions, the teachers were forced to place the girls in a normal distribution even if they did not feel the girls in their classes were distributed in that way. Thus the teachers' total BRP scores for the girls may not have accurately reflected their perceptions of the girls' adjustment on the BRP items, and the BRP as used in this study may have been less valid for girls than boys. This may have contributed to the lack of correlation between parent adjustment scores for girls and total BRP scores. This point will be discussed in greater detail later.

It also appears that the BRP may be more accurate in identifying poorly adjusted children than well adjusted children. For both boys and girls, correlations of teachers' Clinic scores with BRP scores were higher than correlations of teachers' Nonclinic scores with BRP scores. The difference between the correlations was greater for girls than for boys. These results suggest two explanations. One is that the Nonclinic score is a less valid adjustment measure than the Clinic score. The other is that the BRP is more likely to identify children who are similar to clinic-referred children than children who are

similar to non-clinic-referred children. Although the two explanations are not mutually exclusive, it should be noted that the BRP was designed for the early identification of <u>maladjusted</u> children, and as discussed in the introduction to this paper, the BRP has only been validated for the identification of poorly adjusted children. Thus it seems likely that the BRP may be less discriminating for children who fall in the middle or upper ranges of the adjustment continuum. The use of separate grids for boys and girls, as previously discussed, may have distorted the BRP scores for the girls more than for the boys.

It is also of interest to compare parents' ratings of their child's adjustment with those of the teacher. For both boys and girls, there was a significant positive correlation between parents' Clinic scores and total BRP scores, teachers' Clinic scores, and teachers' overall adjustment scores. This suggests that for both sexes, parents' Clinic scores are a reasonably valid measure of child maladjustment. It also suggests that with regard to the Clinic items, both boys and girls behave quite similarly at home and at school. Further support for this hypothesis is seen in the finding that there was close correspondence between parents' and teachers' mean Clinic scores for boys and between their mean Clinic scores for girls (see Appendix I).

Parents' Nonclinic scores were correlated significantly with three of the teacher adjustment measures for boys, but not with any of the teacher adjustment measures for girls. This lack of correlation suggests that the validity of the parents' Nonclinic scores as an adjustment measure for girls is questionable. An alternative explanation is that girls may behave quite differently at home and at school

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with regard to these items. Support for this explanation is found by looking at parents' and teachers' mean Nonclinic scores for girls (see Appendix I). These scores indicate that on the average, girls seem to exhibit fewer of the behaviors characteristic of Nonclinic children at school than at home.

For the distribution of boys, results indicate that parents' overall adjustment scores were significantly correlated with all of the teacher adjustment measures. No such relationship was found for the girls. However, the lack of correlation between parents' Nonclinic scores and teacher adjustment measures for girls would tend also to lower the correlations of parents' overall adjustment scores for girls with the teacher adjustment measures, since overall adjustment is obtained by subtracting Clinic from Nonclinic score.

The stronger relationships between parent and teacher adjustment measures for boys than for girls suggest that boys' adjustment is more consistent from home to school than that of girls. Since the adjustment measures are derived from ratings of behavior, it would follow that girls' <u>behavior</u> would also be different at home and at school. An alternative explanation is that teacher ratings are more valid for the boys than for the girls; this explanation has already been discussed with regard to BRP scores.

Both of these explanations are in keeping with the different stereotypes for girls' and boys' behavior in our culture. Stereotypes for girls' behavior tend to be less well defined than those for boys' behavior. Thus girls are allowed more flexibility in the range of acceptable behavior than boys. Since girls are allowed a wider range of behaviors, it would follow that girls' behavior might

vary more from home to school than boys' behavior. Relatedly, since acceptable behavior for boys seems to fall within narrower limits than for girls, departures from these limits are apt to be noticed more quickly than they are for girls. If boys' maladjusted behavior is more noticeable, parents' and teachers' adjustment scores may be more valid for boys than for girls. More consistency in behavior from home to school and more validity of adjustment ratings, together or singly, would explain the high correlations between parent and teacher adjustment measures for boys.

Interpretation of the validity of the adjustment scores for girls is further complicated by the finding that husbands' Clinic and Nonclinic scores are significantly negatively correlated for the distribution of boys but not for the distribution of girls. Teachers' Clinic and Nonclinic scores are significantly negatively correlated for both distributions, although the correlation for girls is much lower than the correlation for boys. It would be expected that the more behaviors children exhibit that are significantly more characteristic of clinic-referred children, the fewer behaviors they would exhibit that are significantly more characteristic of Nonclinic child-In the present study, such a relationship was not found for ren. parents' ratings of girls. It appears that for parents of girls in this study, the presence of Clinic traits in the child is not strongly associated with the presence of fewer Nonclinic traits. This suggests that the assessment of adjustment for girls may be more complicated than the assessment of adjustment for boys. In the present study, girls who are maladjusted are seen as having a greater number of positive (Nonclinic) behaviors than maladjusted boys. Again, this

fits with differing stereotypes for boys and girls. Girls, whether adjusted or maladjusted, tend to be seen more positively by parents than boys. This is confirmed by looking at mean values for parents' Clinic, Nonclinic, and overall adjustment scores for boys and girls (see Appendix I). Both parents rated girls as having, on the average, fewer Clinic traits and more Nonclinic traits than boys, with the result that parents' overall adjustment scores were, on the average, higher for girls than for boys. On the CBC-Q, teachers saw girls, on the average, as having fewer Clinic and Nonclinic traits than boys; thus, teachers' average ratings of overall adjustment for boys and girls were quite similar. This suggests that the tendency for girls to be allowed greater flexibility of behavior is less pronounced in the classroom. Boys' and girls' behavior in the classroom may be much more similar than their behavior outside the classroom.

An alternative explanation for these results is that the behaviors that distinguish clinic-referred from non-clinic-referred boys are different from the behaviors that distinguish clinic-referred from non-clinic-referred girls. In other words, clinic-referred boys and clinic-referred girls, and well adjusted boys and well adjusted girls, may differ greatly in behavior. Stereotypes again would suggest that boys tend to show more aggressiveness or defiance when they are maladjusted, whereas girls tend to be more timid and withdrawn. No information is available about whether the CBC-Q items which distinguish between clinic-referred and non-clinic-referred children are the same for boys and girls. However, in the study by Ferguson, Partyka, and Lester (1974) in which these items were identified, only

29 of the 112 clinic-referred children were girls. Thus the items found to be significantly more characteristic of clinic and non-clinic referred children may not distinguish as well between clinic and nonclinic referred girls as between clinic and non-clinic referred boys. In addition, no information is available about the validity of the BRP scale when boys and girls are rated separately. However, the results of the present study suggest that definitions of what constitutes maladjusted behavior may be different for boys and girls. The adjustment measures used in the present study appear to have more validity for boys than for girls.

### Results Relating Congruence of Perceptions of the Child to Child Adjustment

The results relevant to the first main hypothesis show that parents' agreement in the perceptions of their child's behavior is significantly associated with the teacher's ratings of their child's adjustment for the distribution of boys but not for the distribution of girls. These results are similar to those found by Ferguson, Partyka, and Lester (1974).

The results relevant to the second main hypothesis of this study show overwhelmingly that parents' agreement in the perception of their child's behavior is significantly associated with their own ratings of their child's adjustment. Parents who agree closely in their perceptions of their child are more likely to see their child as well adjusted than parents who show more disagreement in their perceptions. These results replicate those of Ferguson and Allen (in press).

A post hoc analysis revealed that there is a strong negative

association between congruence of parents' and teacher's perceptions of the child's behavior and the child's maladjustment as rated by the teacher. No sex differences were found for these relationships.

These results indicate clearly that congruence of perceptions of a child's behavior by significant others (mother, father, teacher) is strongly related to child adjustment. These results are consistent with clinical and research literature, as discussed in the introduction to this paper. When parents differ in the way they perceive their child, ambiguity may be created in the child's perception of him/herself. In addition, such differences in parents' perceptions may lead to contradictory demands on the child. The disabling effects of parents' contradictory demands have been widely discussed in the literature. Contradictory demands placed by parents on their child have been associated with maladjusted behavior at school which involves attitude, achievement, conduct, sports ability, and attendance (e.g., Clark and van Sommers, 1961). It seems a short step from differences in parents' perceptions of their child to differences in their demands and expectations of him/her.

Once the child starts school, the teacher's perceptions of him/ her also assume great importance. The teacher, along with the parents, becomes a major force in shaping the child's behavior. Thus it makes sense that congruence of parents' and teacher's perceptions of the child would be associated with better adjustment of the child in school. Congruence among all of these significant others' perceptions is likely to aid the child in developing a stable self-concept as well as a clear understanding of what is expected of him/her.

The results of the present study seem to leave little doubt that

congruence of parents' and teacher's perceptions of a child are related to his/her adjustment both at home and at school. The exception to this conclusion is the lack of significant correlations between congruence of parents' perceptions of their daughters and their daughters' adjustment in school, as rated by the teacher. There are several possible explanations for these results. One explanation is that girls' behavior and adjustment is different at home and at school. This would explain why congruence of parents' perceptions of their daughters is strongly associated with parents' ratings of their adjustment, and why congruence of parents' and teacher's perceptions of girls is strongly associated with teacher's ratings of the child's adjustment. Teachers' adjustment ratings are derived from observations of the child's behavior at school, whereas parents' adjustment ratings are derived from observations of the child outside the school setting. If girls' behavior is very different in and out of the classroom, as the results suggest, it would make sense that congruence of parents' perceptions of their child would not be related to child adjustment in the classroom.

Another possible explanation for the strong support for Hypothesis 2 for girls in light of the lack of support for Hypothesis 1 has to do with the nature of the two measures used to test Hypothesis 2. Both the ratings of parents' perceptions of their child's behavior and the parent adjustment ratings were derived from the same measure, the CBC-Q. Thus it is not clear whether the strong correlations for Hypothesis 2 reflect a real relationship between the variables or whether they are an artifact of the use of some of the same items for both measures. This makes the results of Hypothesis 2 difficult

to interpret.

A third possible explanation for the lack of support for Hypothesis 1 for girls is that there is a difference between boys and airls in the importance of congruence of parents' perceptions for school adjustment. Such an explanation would again fit with the different stereotypes for boys' and girls' behavior. Since stereotypes for boys are more well defined than those for girls, parents' agreement about boys' behavior may be more crucial for the boys' adjustment than parents' agreement about girls' behavior is for girls' adjustment. Parents' disagreements about what is good and bad behavior in a son may lead to contradictory demands on him, and consequently to poorer adjustment. Since a boy's behavior must fall within narrower limits than a girl's to be acceptable, agreement between parents may be more crucial to ensure that his behavior does fall within these limits. When his behavior deviates from these limits, it will probably be noticed quickly by both parents and teachers, thus making adjustment ratings for boys more valid than those for girls.

For girls, stereotypes of behavior are less well defined. As with boys, disagreements in parents' perceptions of girls probably lead to more ambiguity about what is good and bad behavior, and to a wider range of behavior in girls. But since girls seem to be allowed a greater range of behavior than boys, they may be less likely to be seen as maladjusted because of it. There is also the possibility that the type of maladjusted behavior displayed by girls when parents disagree widely in their perceptions of them is less noticeable than the type of maladjusted behavior displayed by boys when their parents disagree. For example, girls may be more likely to withdraw, or to

put all of their energies into school subjects, whereas boys may be more likely to display aggressive or defiant behavior. Thus adjustment scores for boys may be more reflective of their actual adjustment than adjustment scores for girls.

To summarize, congruence of parents' perceptions is strongly related to parents' ratings of their child's adjustment for boys and girls, and to teacher's ratings of their child's adjustment for boys. Congruence of parent and teacher perceptions is strongly related to child adjustment in school for both boys and girls. The lack of a strong relationship between congruence of parents' perceptions of girls and girls' adjustment in school is difficult to interpret. It is not clear whether the lack of significant results for girls is due to lack of validity of the adjustment measures for girls, differences in girls' behavior at home and at school, or to a real difference between boys and girls in the importance of congruence of parents' perceptions for school adjustment.

#### Marital Adjustment and Child Adjustment

Hypotheses 3 and 4 predicted a positive association between parents' marital adjustment and parents' and teacher's ratings of their child's adjustment. Results indicated that there was almost no support for Hypothesis 3, and only slight support for Hypothesis 4. For Hypothesis 4, husbands' Locke-Wallace scores were significantly correlated with their ratings of their sons' adjustment on the Nonclinic items of the CBC-Q. Wives' Locke-Wallace scores were significantly correlated with their ratings of their sons on the Clinic itmes of the CBC-Q, and with their overall adjustment scores for their

sons. These results are different from those of Ferguson and Allen (in press), who found moderate correlations between husbands' marital adjustment and husbands' ratings of child adjustment and between wives' marital adjustment and wives' ratings of child adjustment only for the distribution of girls. However, the results for the present study are similar to Ferguson and Allen's results in that the correlations which are significant are between ratings made by the same parent. These results suggest that when either parent is happy with the marital relationship, s/he is also likely to see the son as favorably adjusted; when either parent is unhappy with the marital relationship, s/he is likely to see the son as more poorly adjusted. This suggests that parents may project more of their dissatisfaction with the marital relationship on their sons than they do on their daughters.

The lack of strongly significant results for Hypotheses 3 and 4 is in opposition to a great deal of clinical literature which suggests that marital adjustment and child adjustment are closely related. Most investigators agree that conflict between parents affects the child in a number of ways. Parents may reject the child because it symbolizes their difficulty in dissolving the unhappy marriage, because the child resembles the disliked spouse, because the child is made into the scapegoat for uncommunicated areas of marital tension, or because the parents are so involved in their own conflicts that they have little time for the child. Conflict between the parents may place the child in the position of being positively identified with two people who are negatively identified with each other. It may also lead to contradictory demands on the child.

Thus the lack of support for Hypotheses 3 and 4 does not make conceptual sense. It is possible that the lack of stronger relationships among the relevant variables is due in part to the large amount of missing data on Item 1 of the Locke-Wallace, which is a rating of the person's overall happiness with the marriage. Since Item 1 contributes most to the total adjustment score on the Locke-Wallace, the use of the item's midpoint score for 17 wives and 16 husbands may have considerably affected the discrimination of the Locke-Wallace scores in this study. In addition, the high mean education level of the current sample may have affected the validity of their Locke-Wallace scores. It may be that this well-educated sample of parents, drawn from two university communities, was somewhat psychologically sophisticated and therefore aware of and concerned about the social desirability of their responses. Some support for this hypothesis may be seen in the finding that, in spite of the wide range of child adjustment scores, parents' mean marital adjustment scores were well within the range indicative of good adjustment as defined by Locke and Wallace (1959). It is also possible that over the past 18 years since the scale was validated, concepts of what constitutes happiness and adjustment in marriage have changed enough to impair the scale's validity. For example, couples who engage in all outside interests together receive a higher score for this item than couples who have some different outside interests. Yet in today's popular literature about marriage, having some outside interests separate from one's spouse is considered psychologically healthy, and tends to be associated with greater happiness in the relationship. Thus the lack of a stronger relationship in this study between marital adjustment and

child adjustment may reflect problems in validity of the Locke-Wallace.

#### Congruence of Parent Perception Measures and Child Adjustment

The results for Hypothesis 5 indicate that there is a moderately strong relationship between correlations of wives' self-perceptions and perceptions by mate and teachers' ratings of child adjustment. No such relationship was found between correlations of husbands' self-perceptions and perceptions by mate and teachers' ratings of child adjustment.

Post hoc findings indicate that there is also a strong positive relationship between correlations of parents' self-perceptions and teachers' ratings of child adjustment.

These findings are consistent with clinical and research literature (e.g., Tharp, 1953; Dymond, 1953, 1954) and make good theoretical sense. When parents self-perceptions are similar, they are likely to adjust to one another more easily than when their selfperceptions are quite different. This is the theory of mate attraction known as homogamy. When parents' self-perceptions are similar, there is likely to be less conflict between them and communication is likely to be easier, since there are fewer differences to be understood and compromised on. Thus marital partners who are more similar are likely to be more satisfied with their marital relationship. This notion is supported by the results of Hypothesis 11 in the present study. Similarity of parents' self-perceptions was found to be significantly correlated with parents' marital adjustment scores. This is consistent with the results of studies such as those by Dymond (1953, 1954) and Corsini (1956), as discussed in the introduction to this paper.

Similarity between self-perceptions and perceptions by mate has also been considered to be an index of marital adjustment and satisfaction. For example, Mangus (1957) has said that the integrative quality of a marriage is reflected in the degree of congruence between the way a partner perceives him/herself and the way s/he is seen by his/her spouse. It would be expected that when there is a large discrepancy between a person's self-perceptions and his/her spouse's perceptions of him/her, conflict would result. In marriages where congruence of perception is high, one would expect that there would be more appropriate responses to the partner, expectations of the partner would be more appropriately met, each partner would be better able to anticipate and respond to the other's feelings, communication would be freer, and in general, the marital relationship would be more satisfactory. Support for this theory is found in the present study in the results of Hypothesis 10. Congruence of parents' self-perceptions and perceptions by mate were found to be correlated significantly with parents' marital adjustment scores. These results are consistent with the literature in this area (e.g., Dymond, 1953, 1954; Luckey, 1960a, b; Taylor, 1967), as discussed in the introduction to this paper.

When there is congruence between parents' self-perception and between their self-perceptions and perceptions by mate, both parents seem to be happier with the marital relationship. These findings, when considered in reference to Hypothesis 5, suggest that wives' satisfaction in the marriage, specifically the degree to which their self-concepts are understood by their husbands, is more closely

related to child adjustment than is the husbands' satisfaction in the marriage. This is not surprising, since mothers are generally the children's primary caregivers and thus spend more time with their children than do the fathers. If the mothers are unhappy in the marriage, or are not well understood by their husbands, it is likely to have a more negative impact on the children than if the fathers are unhappy or not well understood by their wives.

The results for Hypothesis 6 indicate that there is a moderately strong relationship between congruence of wives' self-perceptions and perceptions by mate and parents' ratings of child adjustment for boys, but only a slight relationship for girls; as expected, the strongest correlations are with wives' ratings of child adjustment. For both girls and boys, there was a moderately strong relationship between congruence of husbands' self-perceptions and perceptions by mate and husbands' ratings of child adjustment. These relationships for the husbands were not found in the results for Hypothesis 5; thus the results for Hypotheses 5 and 6 together suggest that congruence of husbands' self-perceptions and perceptions by mate is related to husbands' perceived adjustment of the child but not to the child's actual adjustment, whereas congruence for the wives is related to both perceived and actual adjustment of the child. The greater importance of congruence of perceptions of the wife for the child's actual adjustment again may be explained by the tendency for wives to spend more time with the children than husbands; the children are thus more exposed to the wives' unhappiness and to their negative perceptions of them. when they occur, than they are to the husbands', and these variables are more likely then to affect the child's actual adjustment.

The stronger relationship for boys for Hypothesis 6 than for girls replicates the results of Ferguson and Allen (in press). A post hoc analysis of congruence of parents' self-perceptions as related to parents' ratings of their child's adjustment also revealed a strong relationship only for the distribution of boys.

Thus, for girls, there was very little relationship between congruence of parents' perceptions and parents' ratings of child adjustment. Relatedly, there were no significant relationships between congruence of parents' perceptions and total BRP scores for girls. In light of the moderate support for Hypothesis 5 for girls, this again suggests that the parent adjustment measures and the teachers' BRP scores may be less valid measures of girls' than boys' adjustment. It is also possible, however, that the marital dissatisfaction reflected by a lack of congruence of parents' perceptions is more likely to be projected onto boys than it is onto girls. This is supported by the results of Hypothesis 4, which also found strong relationships only for boys. For Hypotheses 4, 5, and 6, the strongest associations were between measures of wives' marital adjustment and satisfaction and boys' adjustment. This suggests that wives are more likely to project their dissatisfaction with the marriage and their unhappiness onto their sons than they are onto their daughters. Since the wives' marital dissatisfaction reflects conflict with the husbands, it may be easier and more natural for them to project the unhappiness stemming from the marital relationship onto a child of the same sex as the person who is making them unhappy. Thus unhappy wives would be likely to perceive their sons as maladjusted, and the sons may in fact be more maladjusted.

## Interrelations Among Other Variables

The results for Hypothesis 7 indicate that there is a significant positive relationship between congruence of marital partner's self-perceptions with perceptions by mate and congruence of their perceptions of their child. Correlations for the distribution of girls were lower than those for the distribution of boys. Relatedly, the results for Hypothesis 8 indicate that there is a significant positive relationship between congruence of marital partners' self-perceptions and congruence in their perceptions of their child, but only for the distribution of boys. Thus for families of boys, it appears that congruence of perception about one aspect of family life (the child) is strongly associated with congruence of perception about two aspects of the parents' relationship (congruence of self-perceptions, and congruence of self-perceptions and perceptions by mate). This suggests that effective interpersonal perception by the parents extends to a number of aspects of family life. When there is effective interpersonal perception in the parents' relationship, there is also likely to be close agreement in their perceptions of their child. One reason for this may be that communication is better in families where there is effective interpersonal perception. Taylor (1967), for instance, has pointed out that inaccurate perception may be considered an index of lack of communication. Shared perceptions, values, beliefs, definitions of situations, etc, are developed through communication acts. For spouses to show close agreement between their self-perceptions and perceptions by mate, and between their perceptions of their child, it seems likely that there must be good communication between them. Conversely, lack of congruence of parents' self-perceptions and perceptions

by mate and in their perceptions of their child suggests faulty or inadequate communication between the partners.

The lack of strong results for these hypotheses for girls is puzzling. It appears that there is less congruence of perceptions in families of girls than in families of boys. However, the fact that the results for girls are in the predicted direction, and that one of the correlations does reach significance, suggests that there are some relationships among these variables for girls as well as boys, which may have been attenuated by a smaller sample of girls. The possibility of less stereotyping of appropriate or adjustive behavior for girls has also been discussed earlier as a possible explanation.

The prediction that congruence of parents' perceptions of their child would be associated with marital satisfaction as measured by the Locke-Wallace (Hypothesis 9) was not supported, although it had received support in an earlier study (Ferguson and Allen, in press). The possibly limited validity of the Locke-Wallace as a measure of marital adjustment for this highly educated sample of parents has already been discussed. Another difference in method is that the original 154-item form of the CBC was used in the earlier study, thus permitting assessment of parental agreement over a wider range of child behaviors.

### Summary of Interrelations

The interrelations among the variables of this study are represented schematically as follows:



Solid lines represent strong associations and broken lines represent moderate associations.

For families of girls, parents' marital adjustment was significantly associated with congruence of parents' self-perceptions and perceptions by mate. Congruence of wives' self-perceptions and perceptions by mate was significantly associated with congruence of parents' perceptions of their child and with two measures of child adjustment as rated by the teacher. In addition, congruence of parents' perceptions of their child was significantly associated with parents' ratings of child adjustment, and congruence of parents' self-perceptions was significantly associated with teachers' ratings of child adjustment.

For boys, most of the intercorrelations among congruence of parents' self-perceptions and perceptions by mate, congruence of parents' self-perceptions, congruence of parents' perceptions of their child, and child adjustment as rated by parents and teachers were significant. In addition, there were significant correlations between congruence of parents' self-perceptions and their marital adjustment, and congruence of parents' self-perceptions and perceptions by mate with wives' marital adjustment. Wives' marital adjustment was also significantly correlated with two measures of child adjustment as rated by the wives.

Looking at the combined distribution, we found that when parents see their child as possessing the characteristics of welladjusted children, the parents tend to agree closely in their perceptions of the child, to be similar in their self-perceptions, and to see their spouses the way their spouses see themselves. When teachers see the child as well-adjusted, the teacher's perceptions of the child's behavior tend to agree with the parents perceptions of the child's behavior, and the child's parents tend to agree closely in their self-perceptions, their perceptions of their child, and in the way they see their spouses as compared to the way their spouses see themselves.

Since a correlational analysis was used in this study, significant results mean only that there is a relationship among the variables that is greater than chance; they say nothing about cause and

effect. The results of the present study indicate that agreement between parents about several aspects of family life is associated with child adjustment. Thus we seem to be tapping a general dimension of family harmony vs. conflict that relates to a child's social adjustment. It cannot be determined from the present study whether agreement about these aspects of family life promotes child adjustment or whether a well-adjusted child tends to promote family harmony. However, most theories of child psychopathology suggest that family harmony promotes child adjustment whereas family conflict promotes child deviance. Clinical and research literature relevant to these relationships have been discussed earlier in this paper. However, a brief summary may clarify the possible directions of the relationships among the variables of this study.

A number of studies (e.g., Dymond, 1953, 1954) have reported that happily married couples show greater congruence between selfperceptions and perceptions by mate than unhappily married couples. It seems likely that as partners in a dating relationship get to know one another, insight into the partners' self-perceptions develops. As this happens, each partner is able to understand some important things about the other. However, this would not seem to be sufficient for a successful marriage. For example, a person may understand that his/her partner is cold-hearted and ruthless, but if s/he strongly dislikes these qualities and sees them as alien to him/herself, there is likely to be conflict in the relationship. However, if each partner has a good understanding of how the other sees him/herself, and sees him/herself as also having many of the same qualities, their marriage is more likely to be happy. Since studies of interpersonal attraction

show that similar persons are more likely to be attracted to each other (homogamy), this suggests that the similarities between the marital partners and their understanding of each other's self-concepts are likely to lead to marital satisfaction, rather than vice versa.

It seems, then, that as congruence of both types of perception grows between two people, their relationship will become a more satisfactory one. When congruence of these factors does not develop, or when the perceived congruence of the "love is blind" phase of a relationship turns out to be less than real, or when the congruence deteriorates, conflict is likely to result. Large discrepancies in parents' self-concepts and between their self-perceptions and perceptions by mate may place a great deal of strain on the relationship. As the partners become aware of this lack of congruence, their satisfaction with the relationship is likely to decrease. Conversely, congruence of perception may decrease as partners become alienated for other reasons.

The birth of a child into a relationship where there is this kind of lack of congruence and dissatisfaction with the marriage is not likely to improve the parents' relationship. In fact, the literature on childbirth suggests that the birth of a child tends to have a crisis impact on the marital relationship. If the relationship is conflictual, it is likely to become more so after the birth of a child. And even if the relationship is a relatively strong one, the birth of a child raises new problems with regard to its care and discipline. The training and disciplining of children are well known areas of friction between marital partners.

Parents whose self-perceptions differ and who lack insight

into each others' self-perceptions may also begin to differ in their perceptions of their child at the time of his/her birth. The lack of communication suggested by such a lack of congruence of perceptions may quickly give rise to differences in the way the parents see the child. Relatedly, the conflict between the parents suggested by the lack of congruence of their perceptions is very likely to affect the child. Ways in which this may occur have been discussed earlier in this paper. Once discrepancies exist in parents' perceptions of their child, they may lead to additional marital conflict, as the parents argue about how they see the child and therefore about how to deal with him/her. Such conflict may then lead to additional discrepancies in their perceptions of their child, with a vicious circle being formed. These differences in perceptions, and the differences in parents' responses to the child which result, in combination with the marital conflict, are likely to lead to child madadjustment.

Thus the overall results of this study suggest that difficulties in communication, indexed by perceptual differences between parents, occur initially and eventually lead to maladjustment in the child. These findings provide support for family therapists' emphasis on the importance of communication within the family as a process likely to enhance congruence of perception and accomodation of differences. These findings may also, with further research, have implications for prevention of child maladjustment. Although further investigation is necessary, results of the present study suggest that it may be possible with the use of relatively convenient and nonthreatening paper-and-pencil instruments such as those employed in

the present study to identify those families where mutually conflicting and unfavorable perceptions suggest that the children may be at risk for the development of social maladjustment. It would then be possible to offer such families supportive services.

#### Implications of Findings for Future Research

The different results for girls and boys in the present study suggest the need for future research in several areas. One is the area of child adjustment. Specifically, there is a need for future research to investigate systematically whether clinic-referred boys and girls differ significantly in behavior, and whether well adjusted boys and girls differ significantly in behavior. The results of the present study suggest not only that definitions of adjustment may differ for boys and girls, but that the ways in which boys and girls behave when they are maladjusted may be quite different. Further research is also needed into the importance of congruence of parents' perceptions for their daughters' adjustment. It is not clear from the present study whether congruence of parents' perceptions is actually less important for girls than for boys, whether boys and girls who become maladjusted assume somewhat different roles in a conflicted family system, or whether the results were an artifact of the poorer validity of the adjustment measures for girls. It would also make sense to investigate the interrelations of the variables of the present study with samples of older and younger children.

The results of this study also suggest several other ways to look at the data. It would be interesting to determine whether multiple correlations among some of the variables are more predictive of marital and child adjustment than any of the variables are singly. For example, multiple correlations including both congruence of parents' self-perceptions and congruence of their self-perceptions with perceptions by mate might be more predictive of their marital adjustment than either of the variables is singly. It would also be interesting to see if correlations of husband's, wife's, and teacher's perceptions of the child together are more predictive of the child's adjustment than correlations of any two of the ratings. Another way of looking at the marital adjustment data would be to determine whether parents' reports of their overall marital satisfaction (Item 1 of the Locke-Wallace) are strongly related to congruence of their self-perceptions and congruence of their self-perceptions and perceptions by mate, and whether parents in this sample who omitted this item differ in any systematic way from other families. It would also be interesting to determine whether congruence of parents' perceptions of their child on the Clinic items of the CBC-Q or the Nonclinic items of the CBC-Q are more closely related to child adjustment.

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Another implication of the present study for future research is the investigation of the relationships among the variables of this study with different identified populations. Several such populations might be parents seeking marital counseling, families entering family therapy, and parents of clinic-referred children. Investigations of these populations might provide some additional insight into the directions of the relationships among the variables of the present study. It would also be interesting to determine whether congruence of family perception increases as a result of successful child, marital, or family therapy.

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APPENDICES

# APPENDIX A

Letter to East Lansing Parents

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Department of Psychology

East Lansing, Michigan 48824

Olds Hall

April 20, 1976

Dear Parent(s):

We are psychologists at Michigan State University who have been interested in studying children and families. There has been growing interest in studying parent and family life in the hope of understanding how children grow. John F. Kennedy once said that: "Children are our single most important resource." They are our hope for tomorrow. This is something that we believe in, and we are working toward learning how all children can grow up to become the most capable, effective and satisfied adults they can be. In pursuing this goal of understanding child development, we are writing and asking for your family's participation in two research studies.

Many families of elementary school aged children in the East Lansing Public Schools are being sent this letter. Please note that your name and address were provided by the Administration of the East Lansing Public Schools as a courtesy to us. We do not presently have a list of names and have no way of knowing your name and address unless you return the enclosed postcard. We feel that this procedure protects your right to privacy as parents, which we as parents of children in the public schools, ourselves, prize and respect; yet, it allows interested parents and children to participate if they wish. The cooperation of the Administration does not constitute a formal endorsement of this research project, but they have been most helpful to us, and we wish to acknowledge publicly their aid.

In one study, being conducted by Dr. Ferguson and Ms. Allen, we are interested in looking at the different ways mothers, fathers and teachers see children, in order eventually, to help children have the most satisfying experiences possible in school. We also are interested in what you, as parents of average children, can tell us about several aspects of family life since we believe that the child's experience in the family relates to his/her experience in the classroom. To accomplish this, we are asking your help by (a) giving us permission to have your child's teacher describe some of his/her classroom behavior to us, and (b) filling out some questionnaires for us that will take about 20 minutes of your time to complete. If you decide to help us, we will pay you \$5 for your efforts.

#### Page 2

If you think that you might be interested in participating in this study (and/or the second study described just below), <u>please</u> <u>fill</u> <u>out and mail to us the enclosed</u>, <u>stamped</u>, <u>addressed postcard</u>. In this way we can begin by contacting your child's teacher for his/ her description and sending you the questionnaries. Participation in the study is totally voluntary, and you are free to decline to complete the questionnaires once you have looked them over. Sending us the postcard only indicates that you might be interested in participating and that we have your permission to contact the teacher.

Participation in a <u>separate</u> study--which is being conducted under the direction of Drs. Messe' and Stollak--is also totally voluntary. This study also uses descriptions of children's classroom behavior, but, primarily, it involves a 3-4 hour time commitment for both parents and children: approximately 1 1/2 hours completing some questionnaires; approximately 1 1/2 hours of observation of you and your child playing together; and about 1/2 hour of your observing and then responding to a film about an adult and child playing together. These activities will take place in Olds Hall on the MSU campus. We will pay families \$50.00, each, for participating in this study. In the past, families have found performing such tasks to be pleasant and educational experiences.

If you are interested, or you would like further information about this study (and/or the first study described above), please complete and return the enclosed card, which indicates your interest in, but not a commitment to, participating. As many interested families (for either or both studies) as financially possible will be contacted--via a telephone call for Messe' and Stollak's study--and offered an opportunity to participate. Euring this telephone call, a member of our staff will give you further information and answer all questions. At the end of the phone conversation, you can decide to participate or not, as you wish. Of course any information that we receive in either study will be treated in the strictest confidence.

If you have any questions, please call us at 353-8877. We hope that you will return the card so that we can have the opportunity to contact you further about your participation in the first study described above (for which participants will be paid \$5) and/or the second study (for which participants will be paid \$50).

Sincerely yours,

Enclosure

Deborah R. Allen, M.A.	Lawrence A. Messe', Ph.D. Professor of Psychology
Lucy R. Ferguson, Ph.D. Professor of Psychology	Cary E. Stollak, Ph.D. Associate Professor of Psychology
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APPENDIX B

Letter to Okemos Parents

Department of Psychology

East Lansing, Michigan 48824

Olds Hall

March 10, 1977

Dear Parents:

We need your help! The Okemos schools are cooperating with the MSU Department of Psychology in a research study which will involve first and second grade pupils. We are interested in looking at the different ways mothers, fathers, and teachers see children, in order eventually to help children have the most satisfying experience possible in school. We are also interested in what you, as parents of average children, can tell us about several aspects of family life, since we believe that the child's experience in the family relates to his/her experience in the classroom. A similar study with a small group of families looked at the extent to which parents' agreement in their views of their child related to their descriptions of their child's happiness, competence, and ability to communicate feelings in an appropriate way. In the present study, we want to look at these factors with a larger number of families, as well as to compare parents' and teachers' views of children.

Your child's teacher will be participating in this study by providing some information about the behaviors of all of the pupils in the class. We would also like to ask you to participate.

What do we want from you? We would like you and your spouse each to fill out three short questionnaires. These questionnaires are very simple; all you have to do is check yes or no to the questions. The total amount of time required to fill out the questionnaires will, in most cases, be less than twenty minutes. We know that parents' free time is limited, and we have tried to make this as simple as possible to ensure your cooperation.

The fact that your child has been selected to participate does not mean that he has any special problems, nor that he has no special problems. We are interested in studying all of the children in your child's class. If you are willing to participate, please fill out the attached postcard and drop it in a mailbox. We will then mail you the questionnaires and a pre-addressed stamped envelope in which to return them. If you decide to participate, you will receive a check for \$5 as a token of our appreciation. However, we need the cooperation of both parents; for the purposes of this study we cannot use single parent families. The information you provide is for research purposes only, not for the school. All information will be kept strictly confidential. If you page 2

so desire, a brief report of the overall findings will be sent to you when the study is completed.

If you have any questions, please feel free to contact Deborah Allen at 394-2922 (evenings) for more information. Your cooperation is vital for the success of our project.

Sincerely,

Lucy R. Ferguson, Ph.D. Professor of Psychology Deborah R. Allen, M.A. Psychology Intern

# APPENDIX C

Instructions to Parents

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Counseling Center

East Lansing, Michigan 48824

June 10, 1976

Dear Parents:

Thank you for agreeing to cooperate in our study. Enclosed you will find one <u>Background Information Sheet</u>, two copies of the <u>Locke-Wallace Scale</u>, two copies of the <u>Interpersonal Checklist</u>, and two <u>Children's Behavior Checklists</u>. The Background Information Sheet may be filled out by one or both of you. Instructions for the Locke-Wallace, the Interpersonal Checklist, and the Children's Behavior Checklist are included with the guestionnaires themselves.

We realize that mothers and fathers have had different opportunities to observe their children and each other, so we are requesting you to fill out the checklists independently and without consultation. If possible, we would prefer that each of you fill out all of the questionnaires at one sitting. This should take, in most cases, less than one half hour. However, if this proves to be a problem because of time, try to make sure that each questionnaire is filled out at one sitting; i.e. try not to work on the same questionnarie at two different times.

After each of you has filled out one Locke-Wallace Scale, the Interpersonal Checklist packet, and the Children's Behavior Checklist, and after one or both of you have completed the Background Information Sheet, place all of the questionnaires and the information sheet in the enclosed pre-addressed stamped envelope and mail it at your earliest convenience. Again, let us emphasize that all information will be held in the strictest confidence.

When we receive your completed questionnaires, we will mail you a check for \$5.00. Again, let us thank you for your cooperation. Without your help, this study would not have been possible. If you so desire we will mail you a brief summary of our general findings when the study is completed. If you have any questions, please do not hesitate to call Deborah Allen at 394-2922.

Sincerely,

Lucy R. Ferguson, Ph.D.

Deborah R. Allen, M.A.

enclosure

LRF:DRA:cd

### APPENDIX D

Background Information Sheet

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# Background Information Sheet

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Name:	
Child's name:	
Sex of child:	
Birthdate of child:	
Other children in family:	age
	age
	age
	age
Last grade completed - mother:	
Last grade completed - father:	
Nother's occupation:	
Lather's occupation:	

Family Code # \_\_\_\_\_

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APPENDIX E

Locke-Wallace Scale

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## Locke-Wallace Scale

Nam	e:			Child's Na	ame:		
1.	Encircle the dot on th of happiness, everythi middle point, "Happy," people get from marria to those few who are v those few who experien	e scale ng cons repres ge, and ery unl ce ext	e below sidered sents th d the so happy in reme jog	which bes , of your he degree cale gradu n marriago y of felio	st descril present r of happin ally range, and on city in ma	bes the marriag ness wh ges on o the otl arriage	degree e. The ich most one side her, to
	0 2 7		15	20	2	5	35
	Very happy	I	Нарру			Per ha	fectly appy
	State the approximate on the following items	extent . Plea	of agr ase enc	eement be ircle the	tween you appropria	and yo ate dot	ur mate
		Always Agree	Almost Always Agree	Occa- sionally Disagree	Fre- quently Disagree	Almost Always Dis- agree	Always Dis- agree
2.	Handling family finances:	5	4	3	2	1	0
3.	Matters of recreation	5	4	3	2	1	0
4.	Demonstrations of affection:	8	6	4	2	]	0
5.	Friends:	5	4	3	2	]	0
6.	Sex Relations:	15	12	9	4	1	0
7.	Conventionality: (right, good or proper conduct):	5	4	3	2	1	0
8.	Philosophy of life:	5	4	3	2	1	0
9.	Ways of dealing with in-laws:	5	4	3	2	1	0
10.	When disagreements ari in <u>0</u> , wife giving i	se, the n <u>2</u> ,	ey usua agreem	lly result ent by mut	t in: hu tual give	sband's and ta	giving ke <u>0</u> .
11	Do you and your mate a		in auto	da dabarr		hh a 11 2	All

11. Do you and your mate engage in outside interests together? All of them <u>10</u>, some of them <u>8</u>, very few of them <u>3</u>, none of them <u>0</u>.

- 12. In leisure time do you generally prefer to be "on the go" \_\_\_\_,
  to stay at home \_\_\_? Both "stay at home" = 10
- 13. Does your mate generally prefer to be: "on the go" \_\_\_\_, to stay at home \_\_\_? Both "on the go" = 3 Differ = 2
- 14. Do you ever wish you had not married? Frequently <u>0</u>, occasionally <u>3</u>, rarely <u>8</u>, never <u>15</u>.
- 15. If you had your life to live over, do you think you would: marry the same person <u>15</u>, marry a different person <u>0</u>, not marry at all <u>0</u>.
- 16. Do you confide in your mate: almost never 0, rarely 2, in most things 10, in everything 10.

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APPENDIX F

The Interpersonal Checklist

#### The Interpersonal Checklist

Name \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_

Name of Child \_\_\_\_\_ Family code #\_\_\_\_\_

INSTRUCTIONS: This booklet contains a list of descriptive words and phrases which you will use in describing yourself and your spouse. The first column is for yourself, and the second is for your spouse. You are to go through the checklist twice, the first time for yourself and the second time for your spouse.

Read the items quickly and check the space next to each item you consider to be generally descriptive of you at the present time. Leave the answer space blank when an item does not describe you. In the example below, the subject has indicated that Item A is true while Item B is false as applied to him.

A well-behaved \_/

B suspicious

After you have gone through the list marking those items which apply to you in the first column (marked self), go through the list again and mark those items which apply to your spouse in the second column (marked spouse). Be sure to complete your description of yourself before starting your description of your spouse.

Your first impression is generally the best so work quickly and don't be concerned about duplications, contradictions, or being exact. If you feel much doubt about whether an item applies, leave it blank.

		SELF	SPOUSE			SELF	SPOUSE
1.	well thought of	<u></u>		10.	firm but just		
2.	makes a good im- pression			11.	can be frank and honest		
3.	able to give orders			12.	critical of others		
4.	forceful			10			
5.	self-respecting			13.	can complain if necessary		
6.	independent		<del></del>	14.	often gloomy		
7.	able to take care of self			15.	able to doubt others		
8.	can be indifferent to others			16.	frequently disappointed		
9.	can be strict if necessary		·	17.	able to crit- icize self		

102

		SELF	SPOUSE			SELF	SPOUSE
18.	apologetic			41.	hard-boiled when necessary		
19.	can be obedient			42.	stern but fair		
20.	usually gives in			13	innitable		
21.	grateful			-J.		<u></u>	
22.	admires and imi- tates others			44.	and direct		
23.	appreciative			45.	resents being bossed		
24.	very anxious to be approved of			46.	skeptical		
25.	cooperative			47.	hard to impress	<u></u>	
26.	eager to get along			48.	touchy and easily hurt		
07				49.	easily embarrassed		
27.	affectionate and			50.	lacks self-con- fidence		
	understanding			51.	easily led		
29.	considerate			52	modest		
30.	encourages others			52.			
31.	helpful			53.	otten helped by others		
32.	big-hearted and unselfish			54.	very respectful to authority		
33.	often admired			55.	accepts advice readilv		
34.	respected by others			56.	trusting and		
35.	good leader			c 7			<u></u>
36.	likes responsi- bility			57.	and agreeable		
37.	self-confident			58.	wants everyone to like him		
38.	self-reliant and assertive			59.	sociable and neighborly		. <u> </u>
40.	likes to compete with others			<b>60.</b>	warm		

		SELF	SPOUSE			SELF	SPOUSE
61.	kind and reassuring			82.	shy		
62.	tender and soft-hearted			83.	passive and unaggressive		
63.	enjoys taking			84.	meek		
~ •	care of others	. <u></u>		85.	aependent		
64.	gives freely of self			86.	wants to be led		
65.	always giving advice			87.	lets others make decisions		
66.	acts important			88.	easily fooled		
67.	bossy			89.	too easily influ- enced by firends		
68.	dominating			90.	will confide		
69.	boastful			91	fond of everyone		
70.	proud and self- satisfied	-		92.	likes everybody		
71.	thinks only of himself			93.	forgives anything		
72	shrewd and			94.	oversympathetic		
/2.	calculating			95.	generous to a fault		
73.	impatient with others' mistake	e <u>s</u>		96.	overprotective		
74.	self-seeking			07	turing to be the		
75.	outspoken	·		97.	successful		
76.	often unfriend	l <u>y</u>		98.	expects everyone		
77.	bitter			00			
78.	complaining	<del></del>		99.	manages others	<del></del>	
79.	jealous			100.	dictatorial		
80.	slow to forgive	9		101.	somewhat snobbish		
01	a wrong			102.	egotistical and conceited		
01.	ser i - puir siring			103.	selfish		

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		SELF	SPOUSE			SELF	SPOUSE
104.	cold and un- feeling			124.	loves everyone		
105.	sarcastic			125.	too lenient with others		
106.	cruel and un- kind			126.	tries to comfort everyone		
107.	frequently angry			127.	too willing to give to others		
108.	hard-hearted			128.	spoils people		
109.	resentful				with kindless		
110.	rebels against everything						
ııı.	stubborn						
112.	distrusts everybody						
113.	timid						
114.	always ashamed of self						
115.	obeys too willingly						
116.	spineless						
117.	hardly ever talks back						
118.	clinging vine						
119.	likes to be taken care of						
120.	will believe anyone						
121.	wants everyone's love						
122.	agrees with everyone			·			
123.	friendly all the time						

105

# APPENDIX G

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Children's Behavior Checklist, Form Q

Children's Behavior Checklist, Form Q

 Name of Child:
 \_\_\_\_\_\_ Age:
 \_\_\_\_\_ Date:

 Name of person filling out checklist:
 \_\_\_\_\_\_

Relationship to child who participated in study (mother, father): \_\_\_\_\_

This is a list of items describing many aspects of children's behavior--things that children do or ways they have been described by others. Not all of the items will apply to the particular child you are describing, but quite a few of them will. First, go through the list and <u>put a checkmark ( $\checkmark$ ) in the first column by each item which</u> <u>applies to this child</u>. If you feel that the item <u>does not apply to</u> <u>the child, put a zero (0) in the first column</u>.

After you have gone through the list, please go back through those items you have checked and put another checkmark ( $\checkmark$ ) in the <u>second column</u> opposite those that are now most characteristic of this child, that describe how he (she) is most of the time.

			Does this apply at all?	Is it char- acteristic?
F	1.	Is happy when he/she does a "good job."		
F	2.	Gets carried away by his/her feeling	JS	
NC	3.	Is tidy and neat, perhaps even a little bit fussy about it.		
С	4.	Can't wait - wants to have things immediately.		
NC	5.	Is concerned about the feelings of adults.		
C	6.	Gets irritated or angry easily.		
NC	7.	Feelings are apparent in his/her facial expression.		
С	8.	Plays with toys in a rough way.		
NC	9.	Handles small objects skillfully.		
С	10.	Doesn't pay attention to what others say.		

			Does this apply at all?	Is it char- acteristic?
NC	11.	Activity is focused on a particular purpose, seems to accomplish what he/she sets out to do.		
С	12.	Looks awkward when he/she moves around.		
NC	13.	Accepts new ideas without getting upset.		
С	14.	Acts in ways that makes adults not like him/her.		
NC	15.	Shows pride in accomplishment.		
С	16.	Appears stiff in walking or moving about.		
NC	17.	Seems comfortable in new situations		
C	18.	Has trouble finding the right words to say what he/she means.		
F	19.	Wants very much to be approved of.		
С	20.	Seems to do things just to get adults angry at him/her.		
NC	21.	Moves gracefully - well coordinated	i	
С	22.	Has a characteristic mannerism or nervous habit.		
F	23.	Plays to win.		
С	24.	Quickly loses interest in an activity.		
NC	25.	Does what persons ask him/her to do	)	
F	26.	Never gets excited about anything, even when you expected him/her to b pleased with something.	) )e	
NC	27.	Makes friends quickly and easily.		
С	28.	Seems sad and unhappy.		<u></u>
NC	29.	Self-confident.		

		ä	Does this apply at all?	Is it char- acteristic?
C	30.	Tends to go too far unless reminded of rules.		
F	31.	Talks all the time.		
C	32.	Often has to be reminded of what he/she can and can't do.		
F	33.	Affectionate - enjoys being phys- ically close to adults.		
C	34.	Threatens to hit or hurt others.		
NC	35.	Is able to stand up for himself/ herself.		
C	36.	Seems out of touch with what is going on around him/her - off in his/her own world.		
NC	37.	Is polite and cooperative.		
C	38.	Has uncontrollable outbursts of temper.		
F	39.	Is easily embarrassed.		
С	40	Often breaks the rules in games.		
NC	41.	Is careful in explanation - precise		
C	42.	When told to do something he/she doesn't want to do, he/she becomes angry.		
NC	43.	Is curious about things.		
C	44.	Plays aimlessly, doesn't seem to make or accomplish anything.		
NC	45.	Prefers competitive games.		
C	46.	Seems selfish, always wants his/her own way.		
NC	47.	Showed appreciation when others help or did things for him/her.	ped	
F	48.	Seldom laughs or smiles.		

			Does this apply at all?	Is it char- acteristic?
NC	49.	Energetic.		
С	50.	Doesn't seem to care about how he/she looks - often looks sloppy.		
NC	51.	Asks sensible questions.		
C	52.	Blows up very easily when bothered.		
NC	53.	Shows pleasure and involvement in most things he/she does.		
С	54.	Fidgety and restless.		
NC	55.	Is competitive.		
С	56.	Acts as if adults are against him/her.		
NC	57.	Pitches in when things have to be done.		
F	58.	Often seems angry for no particular reason, expresses it in many different ways.		
іяС	59.	Ouick and clever.		
F	60.	Aggressive and overpowering.		
NC	61.	Learns quickly.		
F	62	Bossy		
-				
F	63.	Likes to do things well.		
F	64.	Tires easily in activities.		

APPENDIX H

Behavior Rating of Pupils Scale

#### BEHAVIOR RATING OF PUPILS SCALE

Teacher	name:	 		 
School:		 	<del></del>	 
Grade: _		 		 
Date: _		 		 

#### NOTE TO THE TEACHER

This study is based on the notion that the child's experience in the classroom is affected by his/her experience in the family. We are interested in looking at the different ways mothers, fathers, and teachers see children, in order eventually to help children have the most satisfying experience possible in school. A similar study two years ago with a small group of families found that parents' agreement in their views of their child and their views about family life related to their descriptions of their child's happiness, competence, and ability to communicate feelings in an appropriate way. In the present study we want to look at these factors with a larger number of families, as well as to compare parents' and teachers' perceptions of children. Teachers see children over a period of time in a variety of situations, including work and play. The teacher's observation and judgment have been sharpened by his or her professional training and day-to-day experience with the normal behavior of children. Because of this, the teacher's ratings can provide a useful index of a pupil's growth and development without disrupting the child's life in any way. It is for these reasons that we are asking for your cooperation in this study.

Few professional persons, no matter how well trained, can make

110

ratings with absolute certainty and complete comfort. Don't spend too much time worrying about whether your rating for a particular child is "right" or "wrong." Make your best judgment of each student and go on to the next.

The instructions on the inside of this packet will explain how to proceed. If you have any questions or would like further information, please feel free to contact Debroah Allen at 394-2922 (evenings).

Thank you for your help!

#### INSTRUCTIONS

- 1. Copy the names of all your pupils in the appropriate spaces on the next page. List the girls in one column and the boys in the other. The number next to each child's name will be his/her identifying number for the purposes of your ratings.
- 2. There are nine additional pages, each with 2 pyramid grids and a one-sentence description of behavior. Your rating job on each of these pages is to locate every pupil in your class on a scale that runs from "most like" the pupil described to "least like" him. On each page, the girls will be rated on the top grid and the boys will be rated on the bottom grid.

Let us use the first page as an example. The statement below the pyramids reads: "This pupil gets into fights or quarrels with other pupils more often than others." Look at your list of girls and identify the one who you think is most like the pupil referred to in the statement. You will note that there is only one box at the extreme right of the pyramid (Column 7) on the page. Choose the pupil who is most like the pupil in the statement and write her number in the box in Column 7 of the pyramid; there should be only one number in each box.

Now, look at your list of girls and identify the one who is <u>least like</u> the pupil referred to in the statement below the pyramids. Choose the girl who is <u>least like</u> the pupil in the statement and write her number in the box in Column 1 of the pyramid.

3. Now, return to your list of girls and again identify from the remaining students those who are <u>most like</u> the pupil mentioned in the statement. These will be girls who show this behavior to a great degree but not to the extreme found in the pupil listed in Column 7. Write their numbers in the boxes of Column 6 of the pyramid.

- 4. Again, return to your list of girls and identify other pupils who are <u>least like</u> the pupil mentioned in the statement on the bottom of the page. These will be girls who show this behavior to a very slight degree but somewhat more than the one in Column 1. Place their numbers in the boxes of Column 2 of the pyramid. Continue in this manner until all names have been used.
- 5. When you have completed the ratings, you should have on the right girls most like the pupil in the statement, and on the left girls who are <u>least like</u> the pupil in the statement. For example, for the first statement, girls who seldom, if ever, fight or quarrel will be in columns on the left side of the paper and girls who fight or quarrel quite a lot (or at least enough to be noticed by you) will be on the right side. The pupils who are average or "not extreme in either direction" with respect to the described behavior will fall into the larger middle categories.
- 6. Use the boxes shown with dotted lines only if you have a large class and find you do not have enough spaces for all your girls. Be sure that each girl's number is placed in only one box. Some teachers check off names on the class list with light pencil marks to keep track of names used.
- 7. Try your best to complete the boxes in Columns 1 and 7 first, Columns 2 and 6 second, and in Columns 3 and 5 last. If you cannot completely fill these columns, use dashes to indicate that the boxes have not been overlooked or omitted. Some teachers who have small classes may find it necessary to omit numbers in several of the boxes. If you feel uncertain about placing a child near either extreme of the rating scale, place her number in the middle column, Column 4. When you have completed the ratings, the numbers of every girl in your class should be found in one of the boxes in one of the seven columns of the top pyramid. Unused boxes should have dashes in them.
- 8. When you finish with your rating of the girls on the first statement of behavior, follow the same procedure for the boys, using the bottom pyramid. When you have finished with ratings of all of the children in your class on the first statement of behavior, go on to the other statements, repeating the procedure just described. When you are done you should have rated all of the pupils in your class on nine statements of behavior.
- 9. When you have completed all the ratings, we will provide you with a list of those children whose parents have given permission for them to be rated. You are then to blacken out on this form the names of these children who are not on the list. In this way we will still have the information we need about how all the children in your class are distributed with respect to these behaviors, but we will not have the names of any children whose parents object to their inclusion in this part of the study.

CLASS LIST

<u>Girls</u>	Boys
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
6.	6.
7.	7.
8.	8.
9.	9.
10.	10.
11.	11.
12.	12.
13.	13.
14.	14.
15.	15.
16.	16.
17.	17.

#### List of Items

- 1. This pupil gets into fights or quarrels with other pupils more often than others.
- 2. This pupil works extremely hard in learning school subjects to the exclusion of any other interests or activities. This pupil pours all his/her energies into school work.
- 3. This pupil has to be coaxed or forced to work or play with other pupils. He or she will actively avoid having any contact with classmates.
- 4. This pupil has difficulty in learning school subjects.
- 5. This pupil makes unusual or inappropriate responses during normal school activities. His/her behavior is unpredictable.
- 6. This pupil becomes upset or sick often, especially when faced with a difficult school problem or situation.
- 7. This pupil is unhappy or depressed. He or she may cry easily, be inattentive, or daydream.
- 8. This pupil behaves in ways which are dangerous to self or others. This pupil will get into situations in which he or she may be hurt or frightened.
- 9. This pupil is competent and mature at work, play and interpersonal relations and is emotionally and psychologically healthy.



Sample of grid used for each behavior item

115

APPENDIX I

Distribution Information for Variables of this Study

## Distribution Information for Variables of this Study

		Mean	Standard Deviation	Skewness	<u>Kurtosis</u>
Age (in months)	Boys: Girls: Total:	86.67 84.98 85.95	9.41 10.47 9.87	116 01 088	935 -1.03 962
Total BRP Scores	Boys: Girls: Total:	29.06 30.28 29.58	7.85 7.41 7.65	.293 499 024	380 085 377
Correlations of parents L-W scores	Boys: Girls: Total:	. 791 . 808 . 798	.206 .211 .207	-1.274 -1.586 -1.406	1.205 2.014 1.532
Husbands' L-W scores	Boys: Girls: Total:	106.91 109.11 107.85	21.43 17 19.6	895 798 917	.376 1.87 .957
Wives' L-W scores	Boys: Girls: Total:	113.08 112.23 112.72	21.93 18.86 20.6	944 -1.06 979	.916 1.811 1.249
H and W Correlations on ICL	Boys: Girls: Total:	. 387 . 435 . 408	.46 .154 .151	279 032 137	553 .573 .055
H and W-H Correlations on ICL	Boys: Girls: Total:	.519 .552 .533	.168 .164 .166	869 074 546	.393 342 .255
W and H-W Correlations on ICL	Boys: Girls: Total:	. 492 . 562 . 522	.151 .143 .151	.045 133 054	.237 230 017
Parents CBC-Q Cor- relations	Boys: Girls: Total:	.628 .707 .662	.172 .148 .167	888 522 807	1.674 169 1.366
Clinic score by husbands	Boys: Girls: Total:	11.08 7.32 9.47	7.67 5.7 7.12	1.006 .645 1.05	1.032 385 1.36
Clinic score by wives	Boys: Girls: Total:	10 7.79 9.06	7.26 6.17 6.88	.475 1.117 .729	677 1.335 127
Clinic score by teacher	Boys: Girls: Total:	10.02 7.53 8.96	10.1 8.15 9.36	1.332 1.54 1.45	1.083 2.33 1.68

# (Continued)

		Mean	Standard Deviation	Skewness	<u>Kurtosi</u> s
Nonclinic score by husbands	Boys: Girls: Total:	35.24 39.72 37.16	9.06 8.41 9.03	291 -1.203 62	-1.08 2.245 24
Nonclinic score by wives	Boys: Girls: Total:	36.76 39.11 37.76	8.52 8.48 8.55	249 602 389	566 .794 086
Nonclinic scores by teachers	Boys: Girls: Total:	37.32 35.79 36.66	10.5 9.32 10	528 874 617	481 .515 115
Overall adjustment by husbands	Boys: Girls: Total:	24.16 32.40 27.68	13.41 10.56 12.89	284 813 554	782 .665 401
Overall adjustment by wives	Boys: Girls: Total:	26.76 31.3 28.7	12.52 11.27 12.16	025 -1.77 66	837 4.65 .426
Overall ådjustment by teachers	Boys: Girls: Total:	27.3 28.26 27.71	18.12 14.0 16.42	867 958 93	.271 .97 .65
BRP Item l	Boys: Girls: Total:	3.89 3.79 3.85	1.93 1.76 1.85	.05 .037 .053	-1.279 -1.111 -1.204
BRP Item 2	Boys: Girls: Total:	4.4 4.19 4.31	1.68 1.83 1.74	272 048 -1.77	879 792 837
BRP Item 3	Boys: Girls: Total:	3.57 3.75 3.65	1.70 1.70 1.70	.174 .03 .112	962 -1.227 -1.084
BRP Item 4	Boys: Girsl: Total:	3.13 3.64 3.35	1.57 1.89 1.73	.518 .085 .349	307 -1.059 733
BRP Item 5	Boys: Girls: Total:	3.35 3.79 3.54	1.95 1.82 1.9	.602 .1 .383	-1.08 962 -1.131
BRP Item 6	Boys: Girls: Total:	3.52 3.96 3.71	1.8 1.72 1.77	.45 .118 .297	776 -1.12 965

		Mean	Standard Deviation	Skewness	<u>Kurtosis</u>
BRP	Boys:	3.52	1.85	. 441	879
Item 7	Girls:	3.81	1.78	.034	-1.045
	Total:	3.65	1.82	.268	995
BRP	Boys:	3.48	1.84	. 375	906
Item 8	Girls:	3.51	1.72	.476	684
	Total:	3.49	1.78	.412	815
BRP Item 9	Boys:	4.48	1.69	512	73
(Compe-	Girls:	4.19	1.92	331	934
tence)	Total:	4.36	1.79	446	803
CBC-O Correla-	Boys:	. 451	.222	.096	72
tions: Husbands	Girls:	.53	.246	722	.422
and Teachers	Total:	. 485	.235	253	374
CBC-O Correla-	Boys:	.471	.238	222	658
tions: Wives	Girls:	.545	.21	785	.741
and Teachers	Total:	.503	. 229	455	293

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