ANXIETY AND NEGATIVE FEELING: CHILDREN'S PERCEPTIONS OF FAMILY MEMBERS

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ABSTRACT

ANXIETY AND NEGATIVE FEELING:

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By

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This study involved an assessment of negative feelings in the family as perceived by relatively normal children who showed unusually high and unusually low anxiety levels. The 298 fourth-grade, public school students were selected from Midwestern, small towns on the basis of geographical proximity, and the Children's Manifest Anxiety Scale was administered to them on a group basis. Of the 298 children, 56 Ss were identified who scored in the top and bottom 20% of the boys' and girls' distributions on the Children's Manifest Anxiety Scale; furthermore, the families of these 56 Ss were of approximately middle-class status and were living in intact units, i.e., father and mother and at least one sibling within five years of each subject's age. These 56 Ss constituted the following four sex-by-anxiety groups: high anxiety boys, low anxiety boys, high anxiety girls, and low anxiety girls; on an individual basis, each of these 56 Ss was given the Bene-Anthony Family Relations Test, a structured play situation in which the child assigned 86 statements of feeling to cardboard figures representing himself, his family members, and "nobody," i.e., a figure to whom the child might assign statements he regarded as inappropriate to anyone in his family.

In this study, data available on positive feeling statements were not used. Group mean scores of the amount of negative feeling assigned to

self, parents, siblings, and "nobody" (interpreted as denial) were computed for the four sex-by-anxiety groups. One major hypothesis dealt with two patterns of differences among the four groups; one of the patterns was compatible with the Freudian theory of unconscious defenses, and the other pattern was compatible with a behavioristic theory of conscious hostility. Other hypotheses were concerned with the effect of sex alone regardless of anxiety level and the effect of basic role in the family, i.e., being a parent or a sibling.

Several analysis of variance designs were utilized to test these hypotheses. The following were the major findings:

1. Anxiety level did affect the amount of negative feeling perceptions which were associated with the family, especially with parents; anxiety level might or might not affect negative feeling perceptions associated with siblings.
2. The differences between the perception of negative feeling by high and low anxiety children were compatible with a theory of conscious hostility rather than with a theory of unconscious defenses. In comparison with low anxiety children, high anxiety children showed less denial of negative feeling within the family and more conscious negative feeling associated with their parents as a united pair and with their fathers alone. This correspondence between anxiety and negative feeling was demonstrated without the necessity of invoking the notion of defense

mechanisms; high anxiety tended to accompany higher negative feeling, and low anxiety tended to accompany lower negative feeling.

3. In comparison with low anxiety girls, high anxiety girls showed more conscious negative feeling associated with their mothers alone; high anxiety boys did not show more negative feeling associated with their mothers alone than low anxiety boys. However, there was no evidence that the sex of the child *per se* affected the amount of negative feeling perceptions associated with family members.
4. Basic role of the object in the family, i.e., being a parent or a sibling, did affect the amount of negative feeling perceptions associated with family members. Children, regardless of sex or anxiety level, showed more negative feeling associated with siblings than with parents.

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CHAPTER I

INTRODUCTION

Background of the Problem

The present study examines certain aspects of the relationship of anxiety to negative feeling in children. Anxiety has been described by Freud as ". . . an affective state . . . of most obviously unpleasurable character" (1936, p. 69), and ". . . as a signal indicating the presence of a danger situation (1933, p. 119)." Although he differentiates between fear, or objective anxiety, and neurotic anxiety on the basis of whether the source of the danger was from the external world or from internal impulse, the description of anxiety as a subjective experience of apprehension or dread seems indistinguishable from fear.

Probably the most striking description of the hypothetical origin of anxiety as a frightening, aversive experience is given by Otto Fenichel.

> The biological helplessness of the human infant brings him necessarily into states of painful high tension. States in which the organism is flooded by amounts of excitation beyond its capacity to master are called traumatic states . . . . The sensations of this 'primary anxiety' can be looked upon partly as the way in which the tension makes itself felt and partly as the perception of involuntary vegetative emergency discharges. . . . Certainly this primary anxiety is in no way created actively by the ego; it is created by external and internal stimuli, still unmastered, and insofar as it is experienced as a conscious painful feeling, it is experienced passively, as something that occurs to the ego and has to be endured (1945, p. 42).

Harry Stack Sullivan, generally considered to be a neo-Freudian, also regards anxiety as an intensely unpleasant state, but he

emphasizes that anxiety is usually experienced in interpersonal relations (1953). The term "negative feeling" is not a technical term with a precise meaning, but usage indicates that the term means an emotion of angry dislike or hatred. In this study, anxiety will refer to fear in an interpersonal context, and negative feeling will refer to hostility coming from or directed to people.

Many theories of personality (Freud, 1936; Dollard and Miller, 1950; Rogers, 1959) have focused on the fundamental role of anxiety in maladaptive personality development and have assumed that a key step in the process links anxiety and negative feeling. In these developmental theories, the family is generally viewed as the social environment in which the individual has his first, crucial experiences with anxiety and negative feeling, and the parents are seen as the chief agents who produce anxiety and negative feeling in children. In the case of maladaptive personality development, abnormally high anxiety may lead to unusually large amounts of negative feeling, or unusually large amounts of negative feeling may lead to abnormally high anxiety.

Freudian theorists have generally seen the connections between anxiety and negative feeling as a consequence of the infant's helplessness to gratify his own basic needs and his assumed capacity for animistic thinking. The helpless infant must depend upon his parents to gratify his needs. Inevitably, even when the parents are most attentive to his needs, the infant, to some extent, experiences delay of gratification which results in frustration. Frustration due to delay of gratification generates feelings of hostility toward the

parents. In the infant, of course, feelings of need and feelings of hostility involve primitive, animistic thinking. Fenichel writes of the very young child who ". . . fantasies devouring his environment" and then ". . . fantasies that he might be eaten by the parents (1945, p. 44)." Melanie Klein, in particular, focuses on the connection in infantile thinking between this unrealistic anxiety about being eaten by the parents and sadistic fantasies of excluding and destroying his parental objects, i.e., the infant's primitive ideas or images of the parents. It cannot be assumed, she writes

> . . . that the child's fear of being devoured, cut up and killed by its parents is a reality fear. But if we suppose that this excessive anxiety can only be an effect of intra-psychic processes we shall not be so far from the theory put forward in these pages that early anxiety proceeds from the pressure of the super-ego . . . . In this stage of the development of the individual his methods of defense are proportionate to the pressure of anxiety in him and are violent in the extreme. We know that in the early anal-sadistic stage what he is ejecting is his [parental] object, which he perceives as something hostile to him . . . . In my view, what he is also already ejecting is his terrifying super-ego which he has introjected in the oral-sadistic stage of his development. Thus his act of ejection is a means of defense employed by his fear-ridden ego against his super-ego; it expels his internalized [parental] objects and projects them into the outer world (1954, pp. 198-200).

Parental objects are perceived by the child as hostile because they are associated with the frustration of his needs; the child then responds with feelings of hostility toward the parents. In his animistic world, the child does not distinguish between his feelings and thoughts on the one hand and actual events on the other hand. Consequently, from the child's viewpoint, his own feelings of hostility toward his parents involve actual destruction of the parents. The child

becomes anxious over his own destructiveness for two reasons; he fears the loss of his desperately needed parental objects, and at the same time he fears the retaliatory anger of his parents. In summary, the following connections are hypothesized between frustration and anxiety: the helpless condition of the very young child leads to frustration and concomitant hostility directed at parents who care for the child's needs. However, the child's hostile feelings lead to anxiety over the loss of the parents as well as fear of reciprocal hostility by the parents.

Some investigators, especially Sigmund Freud and Anna Freud, have elaborated a theory of unconscious defenses against anxiety in which awareness of the concomitant negative feeling is supposed to be selectively altered in terms of the objects toward which the negative feeling is directed. Part of the negative feeling may be directed away from parental objects and toward safer objects. The parents should be the objects of the anxious child's negative feeling. However, the child's negative feeling threatens the loss of the parental object which he needs; moreover, the child's negative feeling is likely to evoke the exercise of parental sanctions against the child. Consequently, the anxious child selectively overlooks the parents as objects of hostility and turns his negative feeling toward safer objects, such as other children. However, a residue of negative feeling is presumably directed toward the self, and the ensuing personality maladjustment is predicated on the unfortunate effects of low self-esteem and self-hatred. Possibly the most explicit theoretical statement of the notion

of seeking safer, substitute objects for negative feeling is contained in Anna Freud's The Ego and the Mechanisms of Defense (1946). In her view, the highly anxious child is particularly concerned with defending himself against the dangerous awareness of negative feeling associated with powerful parent figures, and the available defenses include turning negative feeling against the self, displacing negative feeling to others, e.g., siblings, and denial of negative feeling.

The Freudian formulation of a theory of unconscious defenses appears to beg an important question. Does the anxious child really defend himself against the conscious awareness of negative feelings, or does he merely learn to desist from direct, aggressive expressions of those negative feelings of which he remains consciously aware? Bandura and Walters (1963) make a distinction between aggressive behavior which results from a change in the level of aggressive drive and aggressive behavior which results from habit or discrimination learning, independent of change in drive level. They seem to be distinguishing between aggression as a consequence of an internal variable, i.e., drive, and aggression as a consequence of external variables, i.e., stimuli.

Dollard and Miller make a distinction between partial and total inhibition of aggression. They suggest that aggressive expressions are less tolerated in children than in adults and that the anxious child generally learns to deal with the "anger-anxiety" conflict by resorting to "indirect modes of angry reaction."

> Living in the present and being unable to reassure themselves about the future, young children resort to anger at inevitable

> frustrations. Adults experience the hostile or destructive behavior of young children as a nuisance, do not understand its inevitability, and frequently punish aggressive responses. If anger must be abandoned as a response to a frustrating situation, other responses will be tried out. . . . . Devious forms of aggression are particularly likely to occur in this case (1950, p. 151).

If, as Dollard and Miller indicate, the typical anxious child has simply learned to channel his hostility indirectly in the form of covert, expressed aggression or fantasied aggression, then the child remains consciously aware of his negative feelings and does not shift his antagonisms to other objects.[1] Therefore, in attempting to explain typical cases, Dollard and Miller imply an uncomplicated theory of conscious association between anxiety and negative feeling without the assumption of unconscious defense mechanisms; such a theory may be regarded as a theory of conscious hostility.

Clinical evidence abounds that, as children, troubled people have frequently experienced chronic states of high anxiety associated with family relationships and that they have accumulated large amounts of negative feeling. Nevertheless, systematic investigations of the relationship between parent-child interaction and childhood adjustment have often produced contradictory or confusing results. After an exhaustive review of forty years of research, Frank concluded:

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[1] On p. 152 of Personality and Psychotherapy, Dollard and Miller hypothesize that inhibition of conscious hostility may occur in two different degrees. Partial inhibition affects only the direct mode of expression and is more common among children; complete inhibition is comparable to the Freudian defense mechanisms and is much rarer among children.

> . . . we have not been able to find any unique factors in the family of the schizophrenic which distinguishes it from the family of the neurotic or from the family of controls, who are ostensibly free from evidence of patterns of gross psychopathology. In short, we end by stating that the assumption that the family is the factor in the development of personality has not been validated (1965, p. 201).

One reason why research in this area has been inconclusive is that investigators have focused on different parent-child interaction variables, e.g., parental acceptance of the child (Monkman, 1958), self-acceptance by the child (Carlson, 1958).

Another reason for the inconclusive research picture has been the wide variety of measuring instruments utilized. Projective instruments, such as the Rorschach (Baxter, Becker, and Hooks, 1963) and the TAT (Cox, 1962), have been used and scored for conventional signs of disturbance or according to a variety of scoring systems. Specially devised variants of the TAT type of picture stimulus have been used with or without storytelling (Kagan, Hosken, and Watson, 1961; Monkman, 1958). Direct observation of parent-child interaction in a laboratory situation has also been employed as an assessment procedure (Hatfield, Ferguson, and Alpert, 1967; Zunich, 1966). Probably the most popular assessment technique has been the attitude questionnaire, which is often combined with the interview, administered to parents (Schaefer and Bell, 1958; Shoben, 1949), to children (Williams, 1958; Schaefer, 1965), or to both in parallel forms (Serot and Teevan, 1961).

Since such widely divergent instruments have been used, genuine comparability across research studies has seldom existed, and few conclusions have been consistently confirmed. However, in spite of the

confusion, a few conclusions seem at least more probable than others. In his review, Frank (1965) noted that the child's perception of the family members may be more important in determining his reactions than the "reality" of the family. Furthermore, studies by Ausubel (1954) and by Serot and Teevan (1961) have suggested that childhood adjustment is related to the child's perception of the familial environment rather than to parental attitudes.

It seems evident that the relationship between family interaction and childhood adjustment is actually a complex and still obscure chain of relationships, but a central position in the chain is occupied by the child's own perception. As it will be used in the current investigation, the child's perception of his familial environment refers to his conscious awareness of the feelings, particularly the negative feelings, he associates with family members. These feelings may be perceived by the child as feelings which emanate from himself and are directed toward a family member, or as feelings which emanate from a family member and are directed toward himself, or both. It is assumed that the perceptions are private, but accessible and that they may be revealed if the child is placed in a situation where such revelation occurs spontaneously.

Psychological theory and clinical practice suggest that the child who shows high anxiety is likely to have accumulated a high level of hostile feelings. In his need to idealize his parents and protect himself from unpleasant experience, does he avoid the perception of negative feelings associated with his parents and turn these feelings

against himself, his siblings, and into denial, i.e., the theory of defenses? Does he consciously perceive that negative feelings are associated with all family members, i.e., the theory of conscious hostility?

The Problem

If anxiety and negative feeling are related as has been assumed by Sigmund Freud, Dollard and Miller, and Rogers, then anxiety and negative feeling should be associated in meaningful patterns. If high anxiety increases the tendency to cope with negative feeling through defenses, as Anna Freud has assumed, then children with high and low anxiety levels should show differences in their perceptions of negative feeling which reflect the operation of defense mechanisms. Alternatively, if high anxiety is simply associated with conscious negative feeling, as Dollard and Miller imply, then children with high and low anxiety levels should show corresponding differences in their perceptions of negative feeling.

Although in this study, the major interest is in the relation of anxiety to negative feeling, in addition it is pertinent to hold constant differences in anxiety level and only consider sex differences, i.e., boys and girls may show differences in their perceptions of negative feeling (Linton, Berle, Grossi, and Jackson, 1961). Furthermore, the interaction between sex and anxiety may affect negative feeling perceptions, i.e., the four sex-by-anxiety combinations may show differences in perceptions of negative feeling.

It is also relevant to hold constant differences in anxiety level and sex and only consider differences among the family figures in terms of all children's attributions of negative feeling to various family members. There is evidence (Kagan, Hosken, and Watson, 1961), that most children perceive a mother figure as nurturant and a father figure as powerful. Such a finding suggests that children perceive a mother figure and father figure differently and that, regardless of sex or anxiety level, children may differ in the amount of negative feeling associated with each.

Statement of Hypotheses

This study involves an assessment of negative feelings in the family as perceived by relatively normal children who show unusually high or low anxiety levels. In view of what is implied or assumed about the effect of anxiety on children and the perception of negative feelings by children, one hypothesis will be tested.

Hypothesis I: Children with high and low anxiety levels will show differences in their negative feeling perceptions associated with significant figures.

A. In comparison with low anxiety children, high anxiety children will show fewer negative feeling perceptions associated with their fathers and mothers but more negative feeling perceptions associated with themselves, their siblings, and "nobody."

(Confirmation of hypothesis I-A would be evidence compatible with a theory of unconscious defenses.)

B. In comparison with low anxiety children, high anxiety children will show more negative feeling perceptions associated with all figures.[2]

(Confirmation of hypothesis I-B would be evidence compatible with a theory of conscious hostility.)

Furthermore, since there is evidence (Linton, Berle, Grossi, and Jackson, 1961) of sex differences in children's perceptions of negative feeling, a second hypothesis will be tested.

Hypothesis II: Regardless of anxiety level, boys and girls will show differences in their negative feeling perceptions associated with father, mother, self, sibling, and "nobody."

Moreover, since there is also evidence (Kagan, Hosken, and Watson, 1961) that children perceive family members differently, a third hypothesis will be tested.

Hypothesis III: Regardless of anxiety level or sex, children will show differences in their negative feeling perceptions associated with father, mother, self, sibling, and "nobody."

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[2]The "nobody" figure is an exception, i.e., to be consistent with a theory of conscious hostility, high anxiety children will acknowledge more negative feeling within the family so that they will show less denial and less negative feeling perceptions involving the "nobody" figure.

Previous Research

The opportunity for the generation of negative feeling and anxiety in children is particularly likely to occur when parents attempt to socialize children to certain standards. One of the most important standards is the learning of an appropriate sex role. Generally, sex-role learning has been explained simply as a matter of identification with the parent of the same sex. Two recent studies (Hetherington, 1965; Hetherington and Frankie, 1967) have shown that sex-typing, especially for boys, cannot be attributed only to the modeling of the overt behavior of the parent of the same sex. Parental dominance and warmth are important in facilitating the imitation and identification of children with their parents. However, for boys, paternal dominance is critical for appropriately masculine sex-typing; maternal dominance encourages mother-son imitation and mother-son similarity. For girls, the parental dominance pattern seems to have little effect on sex-role preference or on mother-daughter similarity; paternal dominance does increase the father-daughter similarity, which suggests that parental dominance does affect the girl's feminine role-playing. Maternal warmth has a greater effect on the appropriate identification for girls; the warmth variable seems to be less important for boys and their fathers.

The effects of parental discipline upon the socialization of children has long been the subject of investigation. Becker (1964) reviews a large number of recent studies concerned with discipline and its consequences, and he concludes that generally parents tend to use either love-oriented or power-assertive types of discipline.

Love-oriented techniques, e.g., praise, showing disappointment, seem to be associated with developing a child who is morally responsible, non-aggressive, and cooperative. Power-assertive techniques, e.g., physical punishment, verbal threats, appear to be correlated with producing a child who is aggressive, uncooperative, and lacking in the internalized controls of conscience. Nevertheless, the aggressive behavior of typical delinquents does not seem to be the result merely of the application of power-assertive techniques. Recent studies of delinquents (McCord, McCord and Zola, 1959; Glueck and Glueck, 1950; Andry, 1960) indicate that characteristically lax discipline is coupled with parental rejection or that extremely inconsistent and contradictory disciplinary practices are followed by the parents.

Many studies of non-delinquents show that one consequence of power-assertive discipline by the mother (Sears, Whiting, Nowlis, and Sears, 1953; Lefkowitz, Walder, and Eron, 1963) or by the father (Bandura, 1960) is aggression in the child. However, aggression is a complex phenomenon which cannot be subsumed under simple generalizations. In a follow-up of his previously cited 1953 study, which employed kindergarten children, Sears (1961) has found little relationship between parental punitiveness in the child's early years and aggression at age 12. In a series of experiments, Bandura and his collaborators (Bandura and Walters, 1959; Bandura and Walters, 1963; Bandura and Huston, 1961) have demonstrated the importance of modeling in the process of mediating aggression. Nevertheless, although children tend to imitate the aggressive behavior of adults, the effectiveness of the

modeling seems to depend, in part, on the sex of the model and the sex of the child (Bandura, Ross, and Ross, 1961; 1963); male subjects give more aggressive responses to male models. Unless the aggressive behavior is verbal rather than physical, most studies of the aggressive behavior of boys and girls indicate that boys are more aggressive than girls in both doll-play and real-life situations (Bandura and Walters, 1963).

The question of the relationship of fantasy aggression and overt aggression has not been satisfactorily resolved. Sears (1950, 1951) compared pre-school children on aggression in school activities and doll-play aggression. The children whose mothers were low or moderate in punitiveness showed about equal amounts of overt and fantasy aggression; children whose mothers were high in punitiveness demonstrated little overt aggression in school but much fantasy aggression in doll-play. However, Lesser (1957) compared boys on their overt aggression and their fantasy aggression measured by aggressive acts in stories stimulated by projective pictures; no relationship between fantasy aggression and overt aggression was found. A number of the subjects who were high on overt aggression and low on fantasy aggression had mothers who discouraged aggression. To explain this finding, Lesser suggested that these subjects showed little fantasy aggression to the pictures presented by the adult experimenter because they have learned that adults disapprove of aggression. These studies by Sears (1950, 1951) and by Lesser (1957), of course, differed in many ways, e.g., age and sex of subjects, measures of both fantasy and overt aggression;

furthermore, Lesser's mothers who discouraged aggression might or might not have been high in punitiveness.

Some previous research has been aimed specifically at the development of instruments to assess children's anxiety level and their negative and positive feelings about others, especially family members.

In order to investigate the perception of negative feeling in the family by children who differ in anxiety level, it is necessary to select instruments which assess children's anxiety and perceived feeling involving family members. Although many personality tests may yield some information about anxiety level, very few instruments have been specifically designed to estimate the amount of anxiety in children. Sarason and his associates (1958) have devised a questionnaire called the General Anxiety Test which they are using in a large scale study of the development and correlates of anxiety in children. Probably the best known questionnaire and the one to be used in this study is the Children's Manifest Anxiety Scale (CMAS), an adaptation by Castaneda, McCandless, and Palermo (1956) of the Taylor Manifest Anxiety Scale. In the thirteen years it has been available, the CMAS has been extensively used in the investigation of diverse variables ranging from school achievement (McCandless and Castaneda, 1956) to sex differences in daydreaming (L'abate, 1960).

Of consequence for the present investigation, two studies (Levitt, 1959; Hafner, Quast, Speer, and Grams, 1964) using the CMAS with children referred for psychiatric treatment have failed to find a significant degree of agreement between the parents' evaluations of

their children's anxiety and the children's evaluations of their own anxiety. This finding suggests that children do not perceive themselves in the same way that their parents do. Two other studies concern the relationship of anxiety to self-acceptance and self-concept. Bruce (1958) found that normal, sixth grade children with lower self-acceptance scores tended to have higher scores on the CMAS and a security scale. For fourth, fifth, and sixth grade children assessed by Lipsitt (1958), CMAS scores and self-concept were negatively correlated. These conclusions indicate that highly anxious children have unfavorable perceptions of themselves. Furthermore, perceptual rigidity appears to be associated with high anxiety, as measured by the CMAS, according to Smock (1958) who compared fifth graders with high and low anxiety scores on measures of cognitive-perceptual closure and rigidity.

Along with the CMAS, the current investigation will employ an instrument for estimating perceived feeling among family members. In addition to the projective tests and the more objective questionnaires, which have already been discussed, a relatively new and little used technique is available and will be employed in this study. The Family Relations Test (FRT) devised by Bene and Anthony (1957) is a structured play situation in which the child clearly indicates the positive and negative feelings he associates with different family members. Because the FRT is perceived as a game-like situation, the test appears to be less transparent and more enjoyable than questionnaires; nevertheless, the FRT is designed for unambiguous, quantitative scoring and

consequently is much simpler to interpret than projective tests.

The FRT was first reported in Britain in 1957 by its authors, Bene and Anthony (1957), who described the instrument and discussed test results from several small groups of clinical patients. Certain test syndromes or profiles associated with types of clinical disorders, e.g., paranoid, are explored. No data on normal children are presented. From the viewpoint of the present research, the most interesting results are those from a group of children described as phobic, insecure, inhibited, and rigid; these pathologically anxious children tend to deny negative feelings and idealize their parents according to the Bene-Anthony report. The only other study using the FRT is an investigation by Linton, Berle, Grossi, and Jackson (1961). They found that the perceptions of their group of predominantly Puerto Rican and American Negro slum children were related to certain social factors. In families where fathers were inadequate providers, the daughters perceived them negatively, but the sons directed their negative feelings at younger male siblings. In families where the marriage was inadequate, older girls tended to perceive their fathers negatively, but older boys did not, and younger children did not seem to be significantly affected. The Linton _et al_. study (1961) suggests the existence of important sex differences in the perception of parental behavior by children.

The FRT has been used with atypical children. In spite of the test's potential for quantitative assessment of family relations, amazingly, it seems not to have been used in a published study on that ubiquitous subject, namely the normal, American, white child of middle-class antecedents.

CHAPTER II

METHOD

The Subjects

The Ss were fourth grade students attending the public schools of Illinois. Public school students had been chosen because presumably they were reasonably normal children who were free from extreme psychiatric symptoms; it was assumed that these students were fairly representative of the population of children approximately nine years of age living in one area of Illinois. Fourth grade students were selected because they generally were articulate and knowledgeable about their own feelings and showed better verbal skills than younger elementary school students; these characteristics were relevant to the current study. However, generally, nine-year-olds have been regarded as children and have not yet reached physical puberty nor have they been confronted with many specifically adolescent problems and experiences which might affect their perceptions of family members. Moreover, in terms of psychosexual stages, nine-year-old children should certainly have made the transition to the latency stage. At this age, from a Freudian viewpoint, it could be assumed that repression and defense mechanisms were well established; such an assumption was necessary in order to test the operation of defense mechanisms. Consequently, this age group seemed to have distinct advantages for the present research.

Since absence of one or both parents or absence of any siblings would affect a child's perceptions of his family, fourth grade students

who did not live with both parents and at least one sibling within five years of their own age, i.e., between 4 and 14 years, were excluded from Phase II (administration of the FRT).

While no attempt was made to select a sample on the basis of exacting criteria of socio-economic class, a class indicator based on information provided by the children, i.e., father's occupation and father's educational level, was employed in order to indicate socio-economic class for all Ss included in Phase II. Previous research on child-rearing (Sears, Maccoby, and Levin, 1957) has suggested that the experience of anxiety is affected by the socio-economic class of the family. Furthermore, theories of anxiety in children appear to fit middle-class families better than lower-class families. Consequently, in this study, children who appeared to come from lower-class families were excluded from the sample before statistical analysis of the data from the Family Relations Test (FRT).

Fourth grade classes from the public schools of Illinois were used on the basis of geographical proximity. The 12 classes in Macomb, Adair, Bushnell, and Prairie City, totaling 298 students, were given the Children's Manifest Anxiety Scale (CMAS), i.e., Phase I of the study. On the basis of Smock's (1959) study, which used the CMAS to obtain the top 20% and bottom 20% of the scores as high and low anxiety Ss, it was estimated that fewer than one-fifth of the high and low scoring protocols would have to be discarded because of incomplete forms or lie scale violations. Actually, out of the 298 fourth graders, only 14 violated the lie scale and only four failed to complete all items of

the CMAS. The remaining 280 protocols were contributed by 138 boys and 142 girls. For both distributions of scores (boys' and girls'), 20% of the total was 28. Therefore, technically 56 high (28 from boys and 28 from girls) and 56 low (28 from boys and 28 from girls) anxiety scores would have been suitable for Phase II, i.e., the individually administered FRT. However, according to their teachers, 31 of the 56 high and 56 low anxiety Ss[3] came from homes in which one parent was missing, or there were no siblings within five years of the subject's age. Consequently, the following unequal subgroups took part in Phase II: 19 high anxiety boys, 20 high anxiety girls, 23 low anxiety boys, and 19 low anxiety girls. After administration of the FRT, the four sex-by-anxiety groups were reduced to 14 Ss each by eliminating the children who seemed to come from lower-class families and by randomly discarding.

The Instruments

The index of anxiety level for this study has been derived from scores on the CMAS. The reported test-retest reliability of the CMAS has ranged from .70 to .94 depending on the age and sex of the Ss; for fourth grade boys, a correlation of .88 has been given and for fourth grade girls, a correlation of .70. The CMAS is a questionnaire which contains 42 anxiety items; eleven additional items have been included as a lie scale in order to provide an index of the subject's tendency

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[3]Of these 31 children, 19 were high anxiety subjects, and 12 were low anxiety subjects.

to falsify his responses to the anxiety items (Castaneda, McCandless, and Palermo, 1956).

The FRT is a structured play situation in which the child is permitted to assign statements of feeling to the figures he regards as appropriate. The test materials consist of 86 cards bearing individual statements of feeling and 20 cardboard figures, "representing people of various ages, shapes, and sizes, sufficiently stereotyped to stand for members of any child's family, yet ambiguous enough to become under suggestion, a specific family (Anthony and Bene, 1957, p. 542)." Each figure is attached to a cardboard box into which can be inserted the cards which bear individual statements of feeling.

The following five types of statements have been included in the set of 86 cards: 34 statements of negative feeling, 34 statements of positive feeling, eight statements involving maternal overprotection, five statements involving maternal overindulgence, and five statements involving paternal overindulgence. Although all 86 cards have been used in testing the child, scores have been derived only from the 34 statements of negative feeling. Of these 34 statements of negative feeling, 18 have been phrased as though emanating from the child toward family figures, e.g., "This person in the family sometimes gets too angry," or, "Sometimes I feel like hitting this person in the family." The remaining 16 statements of negative feeling have been phrased as though emanating from family figures toward the child, e.g., "This person in the family likes to tease me," or, "This person in the family makes me feel afraid."

The indices of the perception of negative feeling associated with family members have been obtained from certain scores on the FRT. Split-half reliabilities for combinations of affect categories have been reported to vary from .68 to .90; the following correlations have been provided for categories to be used in the current investigation: .83 for negative feelings associated with father, .78 for negative feelings associated with mother, and .68 for negative feelings associated with sibling (Anthony and Bene, 1957).

Phase I: Administration of the CMAS

Instructions

The CMAS was administered to the fourth grade classes on a group basis by E or E's assistants. The only instructions given were those which appeared on the test itself and which were read to the class. These instructions were: "Read each question carefully. Put a circle around the word YES if you think it is true about you. Put a circle around the word NO if you think it is not true about you (Castaneda, McCandless, and Palermo, 1956, p. 319)." The Ss were also asked to identify themselves by name, grade, sex, and school in space provided on the test.

Scoring

For each S, the index of the level of anxiety was obtained by summing the number answered "yes" out of the 42 anxiety items. Ss who lived with both parents and at least one sibling of suitable age and who

also scored in the top or bottom 20% of the male or female distributions of scores on the CMAS were considered to be appropriate Ss for Phase II unless their CMAS lie scale (L scale) scores were extremely high. Of the 11 items on the L scale, two of them (Items #10 and #49 on the CMAS), if answered "No," contributed to the L scale score as did the rest of the nine items if answered "Yes." The index of the subject's tendency to falsify his responses to the anxiety items, therefore, was the sum of these L scale items answered in the prescribed manner. Using the L scale means and standard deviations reported by Castaneda, McCandless, and Palermo (1956), girls' L scale scores of 6.56 or higher and boys' L scale scores of 6.36 or higher were considered extremely high. Protocols with such extreme L scale scores, which were more than two standard deviations above their respective means, were discarded. After discarding the protocols which were incomplete or showed L scale violations, the split-half reliability for this administration of the CMAS was .86.

Phase II: Administration of the FRT

Instructions

The FRT was administered on an individual basis by E or E's assistants to Ss from appropriate families who were identified as high anxiety and low anxiety Ss by their scores on the CMAS. Each subject was asked to choose from the 20 cardboard figures a figure to represent each member of his family including himself. Another figure, "nobody,"

was introduced by E to receive those statements of feeling which the child did not assign to any member of the family.

The manual of the FRT has provided the following instructions for E to tell each subject: "We are going to play a game of pretense.[4] Do you see all those figures standing there? We are going to pretend that some of them are the people in your family (Bene and Anthony, 1957, pp. 11-12)[5]."

E pointed at the four female figures and asked, "Which one of these do you think would make the best mother?" E encouraged the child to make his choice and then asked him to put the chosen figure on the table where the testing would take place. E then pointed to the group of male figures and asked the child, "Now which one do you think would be the best one for father?" E again had the selected figure placed on the table and then pointed to the boy or girl figures, depending on the sex of the subject, and asked, "Now which one would you like to be yourself?" E continued in this manner until the child had a figure at the testing table for father, mother, all siblings, and himself. If the child wanted to make any changes, he was permitted to do so.

When the family circle had been completed, E said, "Now we have all the members of the family together, but we are also going to have someone else in the game." E brought over "nobody" and put him next to

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[4] In this study, the simpler term, make-believe, was substituted for the word, pretense.

[5] Succeeding quotations were taken from the same pages.

the family members, and said, "The name of this person is Nobody. He will also be in the game. I shall tell you in a minute what he will be doing."

The child was seated at the table with his figures in easy reach. E placed the 86 cards[6] in front of the child and said,

> Here are a lot of little cards with messages written on them. I shall read you what they say and you put each card into the person whom you think it fits best. If the message on a card doesn't fit anybody, you put it into Nobody. See what I mean? Sometimes you may find that a message fits several people. If it does, then tell me about it and give the card to me. Now remember! If what a card says fits one person best, you put the card into that person. If it doesn't fit anybody, you put it into Nobody. If it fits several people, you give the card to me.

If a child chose to assign a statement of feeling to more than one person, that statement was counted into the total for each person to whom it was assigned. For example, if a child assigned three of the 34 statements of negative feeling to two persons, and he ascribed the remaining 29 negative feeling statements to only one person, then his total negative feeling score was 37.[7]

Bene and Anthony indicated that the order in which the items were read needed some control by E. They suggested the following four items

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[6]A set of 40 different cards has been used with children under eight years. The set of 86 cards was intended for children between eight and fifteen years.

[7]Exactly half of the sample, 28 Ss, assigned a few of the negative feeling statements to more than one person; the median number of such split assignments was three, i.e., the child assigned 3 statements out of the 34 to more than one person. Interestingly, 17 of the 28 Ss who assigned a few negative feelings to more than one person were girls, and 10 of the 28 were high anxiety girls.

as the initial statements in the series of 86:

00 This person in the family is very nice.

40 This person in the family is kind to me.

20 This person in the family is sometimes a bit too fussy.

10 I like to cuddle this person in the family.

The authors also recommended that the last two statements be any items of a positive nature; therefore, the last two items were the following ones:

45 This person in the family likes to play with me.

47 This person in the family listens to what I have to say.

In order to carry out the authors' intention and standardize the test further, the remaining 80 cards were presented to each subject in the same predetermined random order.[8]

Scoring

Scoring of the FRT for each subject meant summing the number of negative feeling items[9] that were assigned to each of nine figures; these totals showed how many negative feelings the child associated with mother (M), father (F), parents (P), self (S), "nobody" (N),

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[8]This procedure was followed instead of having E simply shuffle the cards before administration to each subject, as the manual instructions suggested. In the Appendix all items of the FRT have been listed in the random order which was used.

[9]In the present study, statistical analysis was applied to negative scores only.

important sibling (IS),[10] important sibling brother (ISB),[11] other siblings (OS), and total siblings (TS).

Treatment of the Data

For each subject, nine scores of negative feeling were available. Group mean scores of the amount of negative feeling associated with each of the nine figures were computed for the four sex-by-anxiety combinations. In order to test hypotheses I and II, a separate, double-classification, fixed-effect analysis of variance design was employed for each of the nine figures; one of the nine has been shown in Table I.

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[10]According to Linton, Berle, Grossi, and Jackson (1961), most children assigned sibling items almost entirely to one important sibling. Therefore, in this study, "important sibling" referred only to the one important sibling to whom the subject assigned the most items out of the set of 86.

[11]After inspection of the raw data but before statistical analysis, it seemed possible that the presence of a male as the important sibling might be consistently associated with higher negative feeling scores; consequently the ISB category was added. However, the statistical test for the ISB category was not significant.

TABLE 1

DIAGRAM OF 2 X 2 ANALYSIS OF VARIANCE DESIGN

(B) Sex Dimension	(A) Anxiety Dimension	
	High (A_1) Anxiety	Low (A_2) Anxiety
Boys (B_1)		
Girls (B_2)		

Group mean scores of the amount of negative feeling associated with each of the nine figures were also computed for all children regardless of sex or anxiety level. In order to test hypothesis III, one single-classification, fixed-effect analysis of variance design for six figures (see Table 2) and another similar design for two figures (see Table 3) were used.

TABLE 2

DIAGRAM OF 1 X 6 ANALYSIS OF VARIANCE DESIGN

	(C) Figures Associated with Negative Feeling					
	M (C_1)	F (C_2)	N (C_3)	S (C_4)	IS (C_5)	OS (C_6)
All Ss						

TABLE 3

DIAGRAM OF 1 X 2 ANALYSIS OF VARIANCE DESIGN

	(C) Combined Figures Associated with Negative Feeling	
	P (C_7)	TS (C_8)
All Ss		

CHAPTER III

THE RESULTS

Hypothesis I predicted that children with high and low anxiety levels would show differences in their negative feeling perceptions associated with important figures. Two meaningful patterns of differences were stipulated. Hypothesis I-A predicted that in comparison with low anxiety children, high anxiety children would show fewer negative feeling perceptions associated with their fathers and mothers but more negative feeling perceptions associated with themselves, their siblings, and "nobody;" confirmation of this pattern would be evidence compatible with a theory of unconscious defenses. Hypothesis I-B predicted that in comparison with low anxiety children, high anxiety children would show more negative feeling perceptions associated with all family members and less negative feeling perceptions associated with "nobody;" confirmation of this pattern would be evidence compatible with a theory of conscious hostility.

A separate, double-classification, fixed-effect analysis of variance design was used for each of the following nine figures: parents (P), father (F), mother (M), self (S), "nobody" (N), important sibling (IS), important sibling brother (ISB), other siblings (OS), and total siblings (TS). These nine analyses of variance simultaneously tested both hypothesis I, which was concerned with possible differences between anxiety levels, and hypothesis II, which was concerned with possible sex differences.

The results of statistical analysis did not show any confirmation of hypothesis II, i.e., boys and girls did not differ significantly in their negative feeling perceptions. The results did not provide total confirmation of either hypothesis I-A or I-B, but of the four F tests that were significant, three were evidence for I-B, and one was partial, suggestive evidence for I-B.

The three significant F tests which confirmed hypothesis I-B involved negative feeling perceptions associated with parents, father, and "nobody;" compared with low anxiety children, high anxiety children demonstrated significantly more negative feeling perceptions associated with parents and father and significantly less negative feeling perceptions associated with "nobody."

Table 4 shows that high and low anxiety levels do make a significant difference in the negative feeling perceptions associated with parents.

TABLE 4

ANALYSIS OF VARIANCE OF NEGATIVE FEELING PERCEPTIONS ASSOCIATED WITH PARENTS

Source of Variation	S.S.	d.f.	M.S.	F
Anxiety Group	141.45	1	141.45	6.09*
Sex	70.88	1	70.88	3.05
Interaction	66.45	1	66.45	2.86
Error	1208.35	52	23.24	
Total	1487.12	55		

* Significant at the 5% level
** Significant at the 1% level

Table 5 indicates that high anxiety children show more negative feeling perceptions associated with their parents than low anxiety children.

TABLE 5

GROUP MEAN SCORES OF NEGATIVE FEELING PERCEPTIONS ASSOCIATED WITH PARENTS

Sex	Anxiety Level		
	High	Low	Total
Boys	5.00	4.00	9.00
Girls	9.42	4.07	13.49
Total	14.42	8.07	22.49

Table 6 shows that high and low anxiety levels do make a significant difference in the negative feeling perceptions associated with father.

TABLE 6

ANALYSIS OF VARIANCE OF NEGATIVE FEELING PERCEPTIONS ASSOCIATED WITH FATHER

Source of Variation	S.S.	d.f.	M.S.	F
Anxiety Group	42.88	1	42.88	4.35*
Sex	15.02	1	15.02	1.52
Interaction	2.16	1	2.16	.22
Error	512.49	52	9.86	
Total	572.55	55		

* Significant at the 5% level
** Significant at the 1% level

Table 7 demonstrates that high anxiety children show more negative feeling perceptions associated with their fathers than low anxiety children.

TABLE 7

GROUP MEAN SCORES OF NEGATIVE FEELING PERCEPTIONS ASSOCIATED WITH FATHER

Sex	Anxiety Level		
	High	Low	Total
Boys	3.50	2.14	5.64
Girls	4.92	2.78	7.70
Total	8.42	4.92	13.34

Table 8 shows that high and low anxiety levels do make a highly significant difference in the negative feeling perceptions associated with "nobody."

TABLE 8

ANALYSIS OF VARIANCE OF NEGATIVE FEELING PERCEPTIONS ASSOCIATED WITH THE "NOBODY" FIGURE

Source of Variation	S.S.	d.f.	M.S.	F
Anxiety Group	451.45	1	451.45	7.65**
Sex	85.02	1	85.02	1.44
Interaction	147.88	1	147.88	2.50
Error	3070.64	52	59.05	
Total	3754.98	55		

* Significant at the 5% level
** Significant at the 1% level

Table 9 indicates that high anxiety children show less negative feeling perceptions associated with the "nobody" figure, i.e., show less denial of negative feeling within the family, than low anxiety children.

TABLE 9

GROUP MEAN SCORES OF NEGATIVE FEELING PERCEPTIONS ASSOCIATED WITH THE "NOBODY" FIGURE

Sex	Anxiety Level		
	High	Low	Total
Boys	9.57	12.00	21.57
Girls	8.78	17.71	26.49
Total	18.35	29.71	48.06

One significant F test provides partial, suggestive evidence for hypothesis I-B.

Table 10 indicates that high and low anxiety levels do make a significant difference in the negative feeling perceptions associated with mother; however, the significant interaction between sex and anxiety seems more important.

TABLE 10

ANALYSIS OF VARIANCE OF NEGATIVE FEELING PERCEPTIONS ASSOCIATED WITH MOTHER

Source of Variation	S.S.	d.f.	M.S.	F
Anxiety Group	28.57	1	28.57	4.35*
Sex	20.64	1	20.64	3.14
Interaction	44.64	1	44.64	6.79*
Error	341.57	52	6.57	
Total	435.43	55		

* Significant at the 5% level
** Significant at the 1% level

Table 11 demonstrates that high anxiety children show more negative feeling perceptions associated with their mothers than low anxiety children; nevertheless, the effect of either anxiety level on the negative feeling perceptions associated with mother depends on the sex of the children.

TABLE 11

GROUP MEAN SCORES OF NEGATIVE FEELING PERCEPTIONS ASSOCIATED WITH MOTHER

Sex	Anxiety Level		
	High	Low	Total
Boys	1.50	1.85	3.35
Girls	4.50	1.28	5.78
Total	6.00	3.13	9.13

For girls only, high anxiety is associated with significantly more negative feeling perceptions associated with mother. High anxiety boys do not differ significantly from low anxiety boys in their negative feeling perceptions associated with mother.

Two separate, single-classification analysis of variance designs were employed in order to test hypothesis III which was concerned with possible differences among important figures as these figures were negatively perceived by all children regardless of sex or anxiety level. The results of statistical analysis did not show any confirmation of hypothesis III when each of the six important figures was compared with the others. However, Table 12 indicates that familial position as either parents or siblings does make a highly significant difference in the negative feeling perceptions assigned by children regardless of sex or anxiety level. More negative feelings were assigned to siblings than to parents.

TABLE 12

ANALYSIS OF VARIANCE OF NEGATIVE FEELING PERCEPTIONS ASSOCIATED WITH PARENTS OR ALL SIBLINGS

Source of Variation	S.S.	d.f.	M.S.	F
Groups	4092.22	1	4092.22	31.60**
Error	14246.65	110	129.51	
Total	18338.87	111		

* Significant at the 5% level
** Significant at the 1% level

Discussion

It is evident that the significant findings from tests of hypothesis I provide support for a theory of conscious hositlity rather than for a theory of unconscious defenses. Table 13 shows a diagram of the amount, in ordinal form, of negative feeling associated with each of nine figures by the four sex-by-anxiety groups.

TABLE 13

DIAGRAM OF THE AMOUNT IN ORDINAL FORM OF NEGATIVE FEELING ASSOCIATED WITH EACH OF NINE FIGURES BY THE FOUR SEX-BY-ANXIETY GROUPS

	(C) Figures Associated with Negative Feeling								
	M* (C1)	F* (C2)	N** (C3)	S (C4)	IS (C5)	OS (C6)	P* (C7)	TS (C8)	ISB (C9)
Higher Negative Feeling	HAG LAB	HAG HAB	LAG LAB	HAG LAB	HAB HAG	HAG LAB	HAG HAB	HAB HAG	HAB HAG
Lower Negative Feeling	HAB LAG	LAG LAB	HAB HAG	HAB LAG	LAB LAG	HAB LAG	LAG LAB	LAB LAG	LAG LAB

HAB = High Anxiety Boys
LAB = Low Anxiety Boys
HAG = High Anxiety Girls
LAG = Low Anxiety Girls

* Significant at the 5% level
** Significant at the 1% level

For the group of children included in this study, highly anxious girls seemed to have more negative feelings about their parents as well as their fathers and mothers as separate individuals; highly anxious boys, with the perhaps notable exception of their mothers, also appeared to hold more negative feelings about their parents and their fathers alone. The high anxiety children in this group were also more accepting, i.e., showed less denial, than low anxiety children of the notion that negative feelings existed in their families. In other words, these highly anxious children were more likely to perceive the presence within their families of feelings related to rejection, disappointment, and

resentment. From the viewpoint of the high anxiety children, these unpleasant feelings were a distinctive part of their subjective world.

Actually, these high anxiety children give evidence of living in a threatening, subjective world in which negative feelings were quantitatively greater and attached to all family members including siblings. In terms of negative feelings involving all siblings, high anxiety children and low anxiety children did not differ significantly. However, inspection of the group means indicated that fairly intense sibling rivalry was common; at least, the children in both anxiety groups seemed to perceive their siblings quite negatively. For instance, averaged over the four sex-by-anxiety combinations, about half of the 34 negative statements were assigned to siblings. Moreover, two or three times as many negative statements were assigned to the most important sibling as to either parent.

In contrast to the high anxiety children, the low anxiety children were more likely to deny or to minimize the existence of negative feelings within their families. Low anxiety children appeared to be living in a less threatening, subjective world in which unpleasant negative feelings were excluded or focused mainly on siblings. Since low anxiety should obviate the need for defenses, it seems reasonable to accept the perceptions of the low anxiety children as relatively free from distortion.

In summary, the high anxiety children generally did not appear to defend themselves by repressing negative feelings; on the contrary, when compared with low anxiety children, they showed a greater

awareness of negative feelings involving their interpersonal relationships with family members.

Taken as a whole, evidence from tests of hypothesis I concerning the theory of conscious hostility versus the theory of unconscious defenses tended to favor the former. With the exception of boys in relation to their mothers, these high anxiety children seemed to consciously perceive the family environment as more generally hostile; conversely, these low anxiety children seemed to consciously perceive the family environment as less hostile and to focus the smaller amount of negative feeling mainly on siblings. With the exception noted, these findings suggested an uncomplicated relationship between anxiety and conscious negative feeling in these relatively normal children; at least, high anxiety accompanied high negative feeling, and low anxiety accompanied low negative feeling.

The pattern of anxiety and negative feeling subsumed by a theory of conscious hostility seems compatible with observations of normal and abnormal children. While children are usually not articulate in discussing their feelings, they are often more transparent and less defensive than adults. Certainly, the law of parsimony would suggest that a theory of unconscious defenses should not be invoked unless simpler explanations have failed to account for a particular pattern of phenomena.

Hypothesis II concerning the effect of sex alone was not confirmed. Sex had a significant effect upon negative feeling perceptions only in interaction with anxiety.

Hypothesis III concerning the effect of position in the family was confirmed only for significant differences between parents and siblings. All children, regardless of sex or anxiety level, held more hostile feelings involving siblings than parents. As indicated in the discussion of the effects of anxiety levels upon the perception of siblings, all these children tended to perceive their siblings much more negatively than their parents. Parents may be viewed as the dispensers of rewards as well as punishments; siblings may be seen as competitors in the attainment of those rewards and the avoidance of those punishments. Since the gratification of children's needs depends primarily on their parents, it is therefore plausible that most of these children should view their sibling competitors more negatively than their parental gratifiers.

CHAPTER IV

CONCLUSIONS AND SUGGESTIONS FOR FURTHER INVESTIGATION

The fourth grade Ss used in this study were selected on the basis of geographical proximity, and technically they do not constitute a random sample. They are, however, probably representative of normal, white[12] children of comparable age who reside in Midwestern small towns and come from families of approximately middle-class status. To the extent that the children studied are representative of such a population, the following conclusions are applicable:

1. Anxiety level does affect the amount of negative feeling perceptions which are associated with the family, especially with parents; anxiety level may or may not affect negative feeling perceptions associated with siblings.

2. The differences between the perception of negative feeling by high and low anxiety children are compatible with a theory of conscious hostility. In comparison with low anxiety children, high anxiety children show less denial of negative feeling within the family and more conscious negative feeling associated with their parents as a united pair and with their fathers alone. This correspondence between anxiety and negative feeling can be demonstrated without invoking the notion of defense mechanisms; high anxiety tends to accompany higher negative feeling, and low anxiety tends to accompany lower negative feeling.

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[12]The only exception is one Chinese-American child.

3. In comparison with low anxiety girls, high anxiety girls show more conscious negative feeling associated with their mothers alone; high anxiety boys do not show more negative feeling associated with their mothers alone than low anxiety boys. However, there is no evidence that the sex of the child *per se* affects the amount of negative feeling perceptions associated with family members.

4. Basic role of the object in the family, i.e., being a parent or a sibling, does affect the amount of negative feeling perceptions associated with family members. Children, regardless of sex or anxiety level, show more negative feeling associated with siblings than with parents.

The Children's Manifest Anxiety Scale (CMAS) can be employed to identify two disparate anxiety groups which differ significantly in negative feelings associated with certain family members. Nevertheless, as assessed by the CMAS, neither anxiety group is necessarily homogeneous in their expressions of anxiety. For example, a few children identified by high CMAS scores as high anxiety children have given no sign of anxiety during the individually administered Family Relations Test (FRT) and have given every sign of openness and curiosity. Conversely, a somewhat larger number of children identified by low CMAS scores as low anxiety children have responded to the FRT with many physical manifestations of anxiety and with fearful, suspicious questions. It would be interesting to replicate the present study with the addition of physiological measures of anxiety obtained during the

administration of the FRT by means of portable polygraph equipment. Of course, it would be essential to habituate each subject to the apparatus before testing began. Another variation would involve replicating the present study with the addition of independent measures of defenses; possible differences between defense groups could be assessed. Furthermore, since the CMAS may not be the most adequate measure of anxiety in a Freudian sense, the Rorschach could also be employed and scored for conventional signs of anxiety.

As a research instrument for assessing negative feeling, the potentialities of the FRT would seem to merit further investigation. For instance, children with high and low negative feeling involving their parents could be identified by FRT scores; subsequently, their parents could be assessed by interview or questionnaire; assessment of the parents might be focused primarily on parental facilitation or impedance of appropriate identification. Moreover, children with high and low negative feeling on the FRT might be expected to differ in peer and teacher acceptance; this hypothesis could be investigated with sociometric techniques.

Furthermore, the negative feeling statements of the FRT constitute less than half of the total set of 86 statements. Each of the subsets of statements named by Bene and Anthony, e.g., positive feelings, maternal overprotection, etc., could be combined with additional independent measures in a variety of studies.

APPENDIX A

Description of Study for School Personnel

Letter to Parents

Instruments: Children's Manifest Anxiety Scale (CMAS)

Bene-Anthony Family Relations Test (FRT)

PUBLIC SCHOOL PROJECT WITH CHILDREN

This project will involve about 300 fourth grade students. Public school children have been selected as a normal group so that their attitudes can be used as a standard of normal attitudes. The aim of the project is to compare more anxious and less anxious, normal children in terms of attitudes toward themselves (self-concept), their brothers and sisters, and their parents. Two tests will be given: 1. Children's Manifest Anxiety Scale (CMAS) to be given to about 10 fourth grade classes (300 children); 2. Bene-Anthony Test to be given later on an individual basis to about 35 children who score relatively high on the anxiety scale and to about 35 children who score relatively low on the anxiety scale. Comparisons of the attitudes of these two groups of children will be made.

Before testing begins, a letter will be sent to the parents of all 300 children, explaining in general terms the nature of this project. After testing is completed, information obtained from testing will be shared with principals, guidance counselors, school psychologists, and teachers; for example, high anxiety, as measured by this anxiety scale, can be used to predict certain kinds of academic problems.

THE CHILDREN'S MANIFEST ANXIETY SCALE

The Children's Manifest Anxiety Scale is a paper-and-pencil test intended for group administration to whole classes. There are 53 statements related to children's anxiety, e.g., "It is hard to go to sleep at night," "I worry about how well I am doing in school."

The child is told to answer "yes" if an item is true about him or to answer "no" if the item is not true about him. I shall give the test, which takes 30-40 minutes, at the convenience of the teachers.

THE BENE-ANTHONY TEST

The Bene-Anthony Test is a game-like situation in which the child selects cardboard figures to represent himself, his brothers and sisters, and his parents. Each cardboard figure is attached to a cardboard box with a slot in the top so that cards can be placed in the box.

The child is given a set of 86 cards, each bearing a statement of attitude. Half of the cards have positive statements of attitude,

e.g., "This person likes to play with me," "This person is kind to me." The other half of the cards have negative statements of attitude, e.g., "This person likes to tease me," "This person sometimes gets too angry."

The child is asked to put each card into the cardboard figure which best fits the message on the card. A "Nobody" cardboard figure is also provided for cards which don't seem to fit anybody. The test is individually administered and takes about 20 minutes. Class time will not be interrupted.

Suzanne Barnett
Assistant Professor of Psychology
Western Illinois University
899-3332

December 7, 1967

Dear Parents:

Fourth grade students in Bushnell and Macomb Public Schools have been selected to take part in a project concerned with children's attitudes toward their environment. Public school children have been chosen as a normal group so that their attitudes can be used as a standard of normal attitudes. A similar project has already been done with disturbed children living in urban slum areas. The object of the present project is to compare the attitudes of normal children (Bushnell and Macomb groups) with the attitudes of disturbed children (urban group).

The project will be divided into two parts which will be given in the schools. The first part will be administered with pencil and paper, and the second part will involve playing games.

If you have any questions about this project, please call me.

Cordially,

Suzanne Barnett
Assistant Professor of Psychology
Western Illinois University
899-3332

THE CHILDREN'S MANIFEST ANXIETY SCALE (CMAS)

NAME _____ GRADE _____

SEX _____ SCHOOL _____

Instructions

Read each question carefully. Put a circle around the word YES if you think it is true about you. Put a circle around the word NO if you think it is not true about you.

YES NO 1. It is hard for me to keep my mind on anything.

YES NO 2. I get nervous when someone watches me work.

YES NO 3. I feel I have to be best in everything.

YES NO 4. I blush easily.

YES NO 5. I like everyone I know.

YES NO 6. I notice my heart beats very fast sometimes.

YES NO 7. At times I feel like shouting.

YES NO 8. I wish I could be very far from here.

YES NO 9. Others seem to do things easier than I can.

YES NO 10. I would rather win than lose in a game.

YES NO 11. I am secretly afraid of a lot of things.

YES NO 12. I feel that others do not like the way I do things.

YES NO 13. I feel alone even when there are people around me.

YES NO 14. I have trouble making up my mind.

YES NO 15. I get nervous when things do not go the right way for me.

YES NO 16. I worry most of the time.

YES NO 17. I am always kind.

YES NO 18. I worry about what my parents will say to me.

YES NO 19. Often I have trouble getting my breath.

YES NO 20. I get angry easily.

YES NO 21. I always have good manners.

YES NO 22. My hands feel sweaty.

YES NO 23. I have to go to the toilet more than most people.

YES NO 24. Other children are happier than I.

YES NO 25. I worry about what other people think about me.

YES NO 26. I have trouble swallowing.

YES NO 27. I have worried about things that did not really make any difference later.

YES NO 28. My feelings get hurt easily.

YES NO 29. I worry about doing the right things.

YES NO 30. I am always good.

YES NO 31. I worry about what is going to happen.

YES NO 32. It is hard for me to go to sleep at night.

YES NO 33. I worry about how well I am doing in school.

YES NO 34. I am always nice to everyone.

YES NO 35. My feelings get hurt easily when I am scolded.

YES NO 36. I tell the truth every single time.

YES NO 37. I often get lonesome when I am with people.

YES NO 38. I feel someone will tell me I do things the wrong way.

YES NO 39. I am afraid of the dark.

YES NO 40. It is hard for me to keep my mind on my school work.

YES NO 41. I never get angry.

YES NO 42. Often I feel sick in my stomach.

YES NO 43. I worry when I go to bed at night.

YES NO 44. I often do things I wish I had never done.

YES NO 45. I get headaches.

YES NO 46. I often worry about what could happen to my parents.

YES NO 47. I never say things I shouldn't.

YES NO 48. I get tired easily.

YES NO 49. It is good to get high grades in school.

YES NO 50. I have bad dreams.

YES NO 51. I am nervous.

YES NO 52. I never lie.

YES NO 53. I often worry about something bad happening to me.

BENE - ANTHONY
FAMILY RELATIONS TEST (FRT)[13]

Item No.	Item
00	This person in the family is very nice.
40	This person in the family is kind to me.
20	This person in the family is sometimes a bit too fussy.
10	I like to cuddle this person in the family.
43	This person in the family pays attention to me.
73	This person in the family makes me feel afraid.
86	Mother is afraid to let this person in the family play with rough children.
36	Sometimes I want to do things just to annoy this person in the family.
96	This is the person in the family mother pays too much attention to.
61	This person in the family likes to tease me.
46	This person in the family really understands me.
98	This is the person in the family mother spends too much time with.
63	This person in the family won't play with me when I like it.
71	This person in the family punishes me too often.
62	This person in the family sometimes tells me off.
33	Sometimes I feel like hitting this person in the family.
26	This person in the family is sometimes annoyed without good reason.

[13]The items of the FRT were presented to each child in this order.

Item No.	Item
16	I like this person in the family to tickle me.
80	Mother worries that this person in the family might catch cold.
97	This is the person in the family mother spoils too much.
74	This person in the family is mean to me.
24	This person in the family is sometimes bad-tempered.
67	This person in the family is too busy to have time for me.
42	This person in the family likes me very much.
81	Mother worries that this person in the family might get ill.
14	I wish this person in the family would care for me more than anybody else.
57	This person in the family cares more for me than for anybody else.
53	This person in the family likes to help me with my bath.
32	Sometimes I hate this person in the family.
37	This person in the family can make me feel very angry.
22	This person in the family sometimes spoils other people's fun.
27	This person in the family sometimes grumbles too much.
07	This person in the family is a good sport.
51	This person in the family likes to hug me.
76	This person in the family is always complaining about me.
66	This person in the family sometimes gets angry with me.
56	This person in the family always wants to be with me.

Item No.	Item
50	This person in the family likes to kiss me.
90	This is the person in the family father makes too big a fuss about.
13	I wish I could keep this person near me always.
55	This person in the family likes to be in bed with me.
12	I sometimes wish I could sleep in the same bed with this person in the family.
85	Mother is afraid to let this person in the family run about too much.
99	This is the person in the family mother likes best.
31	Sometimes I wish this person in the family would go away.
05	This person in the family is lots of fun.
03	This person in the family has the nicest ways.
72	This person in the family makes me feel silly.
93	This is the person in the family father spends too much time with.
15	When I get married I want to marry somebody who is just like this person in the family.
21	This person in the family nags sometimes.
35	Sometimes I am fed-up with this person in the family.
64	This person in the family won't always help me when I am in trouble.
54	This person in the family likes to tickle me.
82	Mother worries that this person in the family might get run over.
06	This person in the family deserves a nice present.
44	This person in the family likes to help me.

Item No.	Item
77	This person in the family does not love me enough.
94	This is the person in the family father likes best.
17	I like to hug this person in the family.
23	This person in the family is sometimes quick-tempered.
87	Mother worries that this person in the family doesn't eat enough.
84	Mother worries that something might happen to this person in the family.
04	This person in the family never lets you down.
47	This person in the family listens to what I have to say.
25	This person in the family sometimes complains too much.
01	This person in the family is very jolly.
95	This is the person in the family mother makes too big a fuss about.
75	This person in the family makes me feel unhappy.
34	Sometimes I think I would be happier if this person was not in our family.
29	This person in the family sometimes gets too angry.
52	This person in the family likes to cuddle me.
60	This person in the family sometimes frowns at me.
09	This person in the family is very kind-hearted.
11	I like to be kissed by this person in the family.
92	This is the person in the family father spoils too much.
83	Mother worries that this person in the family might get hurt.
45	This person in the family likes to play with me.

Item No.	Item
65	This person in the family sometimes nags at me.
91	This is the person in the family father pays too much attention to.
70	This person in the family hits me a lot.
28	This person in the family is sometimes not very patient.
30	Sometimes I would like to kill this person in the family.
08	This person in the family is very nice to play with.
02	This person in the family always helps the others.
41	This person in the family is very nice to me.

APPENDIX B

Raw Data From Children's Manifest Anxiety Scale (CMAS)

Raw Data From Bene-Anthony Family Relations Test (FRT)

Non-Significant Analysis of Variance Tables

RAW DATA FROM

CHILDREN'S MANIFEST ANXIETY SCALE (CMAS)

Subject's Number	Sex	Anxiety Group	Anxiety Score
1	B	H	24
2	B	H	27
3	B	H	26
4	B	H	25
5	B	H	26
6	B	H	25
7	B	H	24
8	B	H	26
9	B	H	25
10	B	H	28
11	B	H	24
12	B	H	24
13	B	H	26
14	B	H	27

RAW DATA FROM

CHILDREN'S MANIFEST ANXIETY SCALE (CMAS)

Subject's Number	Sex	Anxiety Group	Anxiety Score
15	B	L	6
16	B	L	8
17	B	L	7
18	B	L	10
19	B	L	9
20	B	L	8
21	B	L	8
22	B	L	7
23	B	L	8
24	B	L	4
25	B	L	7
26	B	L	7
27	B	L	8
28	B	L	6

RAW DATA FROM

CHILDREN'S MANIFEST ANXIETY SCALE (CMAS)

Subject's Number	Sex	Anxiety Group	Anxiety Score
29	G	H	30
30	G	H	33
31	G	H	27
32	G	H	31
33	G	H	28
34	G	H	28
35	G	H	26
36	G	H	31
37	G	H	26
38	G	H	27
39	G	H	35
40	G	H	30
41	G	H	26
42	G	H	26

RAW DATA FROM

CHILDREN'S MANIFEST ANXIETY SCALE (CMAS)

Subject's Number	Sex	Anxiety Group	Anxiety Score
43	G	L	2
44	G	L	5
45	G	L	8
46	G	L	1
47	G	L	9
48	G	L	5
49	G	L	1
50	G	L	8
51	G	L	7
52	G	L	6
53	G	L	9
54	G	L	8
55	G	L	1
56	G	L	8

RAW DATA FROM BENE-ANTHONY

FAMILY RELATIONS TEST (FRT)

Subject's Number	Sex	Anxiety Group	P	M	F	N	S	IS	ISB	OS	TS
1	B	H	6	1	5	3	0	16	16	9	25
2	B	H	0	0	0	19	3	12	0	0	12
3	B	H	8	4	4	3	0	22	0	1	23
4	B	H	8	5	3	15	3	6	6	8	14
5	B	H	5	0	5	11	0	15	15	3	18
6	B	H	1	0	1	21	1	1	1	10	11
7	B	H	6	0	6	3	4	19	19	2	21
8	B	H	2	0	2	0	0	21	21	11	32
9	B	H	9	3	6	2	0	24	24	0	24
10	B	H	5	1	4	9	0	1	1	21	22
11	B	H	6	5	1	15	0	13	0	0	13
12	B	H	3	1	2	17	1	10	10	4	14
13	B	H	8	1	7	12	1	12	0	9	21
14	B	H	3	0	3	4	1	13	13	13	26

RAW DATA FROM BENE-ANTHONY

FAMILY RELATIONS TEST (FRT)

Subject's Number	Sex	Anxiety Group	P	M	F	N	S	IS	ISB	OS	TS
15	B	L	1	1	0	30	1	0	0	4	4
16	B	L	3	2	1	10	0	14	0	8	22
17	B	L	3	2	1	15	0	3	3	14	17
18	B	L	8	3	5	8	0	10	10	8	18
19	B	L	8	0	8	13	0	13	0	0	13
20	B	L	1	0	1	8	3	3	3	19	22
21	B	L	1	1	0	21	1	11	11	0	11
22	B	L	10	3	7	2	1	8	8	13	21
23	B	L	0	0	0	8	0	26	0	0	26
24	B	L	0	0	0	21	0	2	2	12	14
25	B	L	7	3	4	12	9	6	0	0	6
26	B	L	0	0	0	8	0	21	21	8	29
27	B	L	1	0	1	10	0	18	0	5	23
28	B	L	13	11	2	2	0	22	0	12	34

RAW DATA FROM BENE-ANTHONY

FAMILY RELATIONS TEST (FRT)

Subject's Number	Sex	Anxiety Group	P	M	F	N	S	IS	ISB	OS	TS
29	G	H	0	0	0	30	1	1	1	2	3
30	G	H	24	11	13	11	5	9	9	0	9
31	G	H	12	5	7	4	1	3	0	25	28
32	G	H	10	7	3	10	0	14	14	0	14
33	G	H	14	9	5	9	1	8	8	7	15
34	G	H	5	3	2	0	0	21	21	8	29
35	G	H	6	3	3	4	1	22	22	5	27
36	G	H	5	3	2	2	6	7	7	15	22
37	G	H	25	9	16	9	2	14	14	0	14
38	G	H	1	1	0	18	1	10	10	10	20
39	G	H	10	2	8	5	2	4	4	14	18
40	G	H	8	5	3	1	2	23	0	11	34
41	G	H	3	0	3	16	0	15	0	0	15
42	G	H	9	5	4	4	0	11	11	12	23

RAW DATA FROM BENE-ANTHONY

FAMILY RELATIONS TEST (FRT)

Subject's Number	Sex	Anxiety Group	P	M	F	N	S	IS	ISB	OS	TS
43	G	L	6	3	3	18	2	14	14	0	14
44	G	L	4	3	1	17	0	8	8	5	13
45	G	L	2	0	2	23	2	7	7	0	7
46	G	L	1	0	1	24	0	9	9	0	9
47	G	L	7	3	4	4	0	25	0	2	27
48	G	L	10	2	8	21	0	3	0	0	3
49	G	L	2	1	1	26	1	1	0	6	7
50	G	L	5	0	5	14	0	15	15	0	15
51	G	L	0	0	0	20	0	13	13	2	15
52	G	L	8	2	6	6	0	22	0	0	22
53	G	L	2	0	2	4	1	2	2	25	27
54	G	L	0	0	0	22	1	10	10	1	11
55	G	L	6	4	2	24	0	4	0	5	9
56	G	L	4	0	4	25	0	6	6	0	6

TABLE 14

ANALYSIS OF VARIANCE OF NEGATIVE FEELING PERCEPTIONS ASSOCIATED WITH SELF

Source of Variation	S.S.	d.f.	M.S.	F
Sex	.00	1	.00	.00
Anxiety Group	3.50	1	3.50	1.20
Interaction	4.57	1	4.57	1.57
Error	151.86	52	2.92	
Total	159.92	55		

TABLE 15

ANALYSIS OF VARIANCE OF NEGATIVE FEELING PERCEPTIONS ASSOCIATED WITH IMPORTANT SIBLING

Source of Variation	S.S.	d.f.	M.S.	F
Sex	30.02	1	30.02	.55
Anxiety Group	46.45	1	46.45	.85
Interaction	.45	1	.45	.008
Error	2851.06	52	54.83	
Total	2927.98	55		

TABLE 16

ANALYSIS OF VARIANCE OF NEGATIVE FEELING PERCEPTIONS ASSOCIATED WITH IMPORTANT SIBLING BROTHER

Source of Variation	S.S.	d.f.	M.S.	F
Sex	7.88	1	7.88	.15
Anxiety Group	196.88	1	196.88	3.84
Interaction	17.16	1	17.16	.34
Error	2662.93	52	51.21	
Total	2884.84	55		

TABLE 17

ANALYSIS OF VARIANCE OF NEGATIVE FEELING PERCEPTIONS ASSOCIATED WITH OTHER SIBLINGS

Source of Variation	S.S.	d.f.	M.S.	F
Sex	27.16	1	27.16	.63
Anxiety Group	46.45	1	46.45	1.07
Interaction	100.45	1	100.45	2.31
Error	2257.92	52	43.42	
Total	2431.98	55		

TABLE 18

ANALYSIS OF VARIANCE OF NEGATIVE FEELING PERCEPTIONS
ASSOCIATED WITH TOTAL SIBLINGS

Source of Variation	S.S.	d.f.	M.S.	F
Sex	114.29	1	114.29	1.91
Anxiety Group	185.79	1	185.79	3.11
Interaction	87.50	1	87.50	1.46
Error	3109.85	52	59.80	
Total	3497.43	55		

TABLE 19

ANALYSIS OF VARIANCE OF NEGATIVE FEELING PERCEPTIONS
ASSOCIATED WITH MOTHER OR FATHER OR "NOBODY"
OR SELF OR IMPORTANT SIBLING
OR OTHER SIBLINGS

Source of Variation	S.S.	d.f.	M.S.	F
Groups	6261.70	5	1252.34	1.06
Error	389993.65	330	1181.80	
Total	396255.35	335		

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