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ABSTRACT

The perceptions of middle class expectant parents, unmarried college students, and high school students about parenthood are compared in this study. A survey administered to these groups in Austin, Texas, indicated three major results. (1) Parents-to-be are more realistic than students about the pace of development of infants. College students are more accurate than high school students on a few items, and females are more realistic than males on a few items. (2) Parents-to-be are more confident in their ability to care for an infant, even though their levels of previous child care experience do not differ from those of the students. High school students are more confident in some of their abilities than college students, and females are more confident than males overall. (3) All three groups expect some changes in their lives after the birth of a child--they expect to spend less time with friends, eat out less, have more financial worries, but be happier overall. Parents-to-be expect less change than college students overall, and college students expect somewhat less change than high school students. Thus, parents-to-be were found to have the most information on child development, the most confidence in their ability to care for a child, and the most positive attitude toward children and parenthood. It is suggested that these findings may indicate that parenthood education courses should be offered in the high schools and colleges to increase students' knowledge in these areas and help them make more informed decisions about whether and when to become parents. (The questionnaire used is appended.) (Author/BH)

PERCEPTIONS OF PARENTHOOD AND INFANT DEVELOPMENT: A COMPARISON OF THE VIEWS OF HIGH SCHOOL STUDENTS, COLLEGE STUDENTS, AND EXPECTANT PARENTS

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A Comparison of the Views of High School Students,
College Students, and Expectant Parents

Abstract

The perceptions of expectant parents, college students, and high school students about parenthood are compared in this study. Based on the results of a survey administered in Austin, Texas, it was found that:

1) Parents-to-be are more realistic than students about the pace of development of infants. College students are more accurate than high school students on a few items, and females are more realistic than males on a few items.

2) Parents-to-be are more confident in their ability to care for an infant, even though their levels of previous child care experience do not differ from those of the students. High school students are more confident in some of their abilities than college students, and females are more confident than males overall.

3) All three groups expect some changes in their lives after the birth of a child--they expect to spend less time with friends, eat out less, have more financial worries, but be happier overall. Parents expect less change than college students overall, and college students expect somewhat less change than high school students.

Thus, parents-to-be were found to have the most information on child development, the most confidence in their ability to care for a child, and the most positive attitude toward children and parenthood. This is a positive finding, in the sense that the expectant parents have the most immediate need for the information. However, the findings also suggest that perhaps parenthood education courses should be offered in the high schools and colleges, to increase students' knowledge of these areas, and help them make more informed decisions about whether and when to become parents.

In this paper, the perceptions of expectant parents, unmarried college students, and high school students about parenthood will be examined. A study such as this can provide interesting information concerning the views of parenthood of each group, and the degree to which each is prepared for parenthood. It can also provide information on whether these perceptions are different based on age, marital, and pregnancy status. Such information regarding high school and college students' knowledge and expectations about parenthood can serve as a very valuable needs assessment for classes on child development, family planning, or parenthood education in general. An examination of the perceptions of parents-to-be can provide useful information concerning the type of psychological and intellectual expectations they have about parenthood and children, and whether these expectations seem realistic and conducive to a positive parenting experience.

There has not been a great deal of this type of research previously. Some studies have been done which focus on the attitudes of new parents toward their infants using a questionnaire (Broussard and Hartner, 1971; Cohler, 1967; Schaefer and Bell, 1958; Schaeffer and Manheimer, 1960). A few other studies have investigated the attitudes of parents towards children before and after the birth of the first child through interviews and/or questionnaires (Davids and Holden, 1970; Jones and Lessen-Firestone, 1977; Leifer, 1977; and Shereshefsky and Yarrow, 1973). Marcos (1973) studied the views of expectant parents for their own child and an ideal

child. None of these samples included students as a comparison group and only a few included both mothers and fathers. The topics dealt with included: attitudes towards specific child care situations and behaviors, scheduling of child care activities, the demands of child care, the provision of physical comfort, infant personality, social expectations for the infant, mother-infant communication, and difficulties encountered in sleeping, feeding, and other areas.

This study is different from those done in the past in terms of the subjects who participated and the topics covered. It represents a combination of data concerning perceptions of children and parenthood from two sources--a University of Texas(UT) dissertation study by Pharis (1978), in which parents-to-be and UT students participated, and an evaluation study by Baenen and Matuszek (1978), in which high school students were surveyed. The specific topics of interest were the perceptions of expectant parents, undergraduate students, and high school students concerning:

1) the pace of infant development,
2) the abilities of the newborn,
3) confidence in child care abilities, and
4) changes in lifestyle after a child is born.

Method

Subjects. Couples expecting their first child were recruited through prenatal classes at two hospitals and through two obstetrical practices in Austin, Texas. Twenty couples who were younger (averaging 22-24 years of age) and twenty couples who were older (averaging 31-32 years of age) when having their first child were recruited. The hospitals involved handled private patients primarily. Only white couples were selected in an effort

to make the sample more homogeneous. The couples selected were generally middle and upper-middle class in terms of income and were fairly well educated. One hundred couples volunteered to talk to the researcher about participation in the study; those who were selected to participate fit the age catagories and did not have practical problems which prohibited participation. The recruitment phase for parents-to-be was completed between September, 1977 and January, 1978.

Fifty white undergraduate students at the University of Texas at Austin were recruited from the Department of Psychology subject pool. Half of the students were male and half were female, and none had been married or a parent previously. Students were informed of the time required to complete the questionnaire before they consented to participate.

During April, 1978, students in one section of a required health course per high school within the Austin Independent School District were surveyed. Most of the students involved were eleventh graders. Students were assigned to class sections fairly randomly, so the sample was considered representaive of all eleventh graders. Only the responses of the 128 Anglo students who completed the survey were included in these comparisons. The sample was fairly well balanced based on sex, and none of the students were married or a parent.

Survey development. As mentioned previously, none of the instruments found measured the specific topics of interest, and most were not worded in ways which were appropriate to both expectant parents and students. The questions discussed in this report actually represent a subset of the items on surveys given to each group. The items of interest here dealt with four areas: the pace of infant development (9 items), the abilities

of a newborn (5 items), confidence in child care abilities (7 items), and changes in lifestyle after the birth of a child (6 items). The questions were drawn from a larger study procedure by Pharis and Manosevitz (1978). The specific items used with Austin Independent School District students are shown in Figure 1. The items used for expectant parents and UT students were almost identical, except as noted below.

Survey administration. The expectant parents responded to the survey questions while completing an interview and questionnaire which took about three hours. They also answered a variety of other questions concerning their preparations for parenthood at the same time--the items of interest here probably took about 5-10 minutes to respond to. The only items which were part of the interview rather than the questionnaire were those concerned with estimates of the apce of development of the average baby. Questions concerning life changes after child birth were directed to their own lives, rather than a hypothetical situation.

The UT undergraduates responded to a condensed version of the interview and questionnaire completed by expectant parents. College students were not asked to estimate the number of diapers used per day for a baby in the first month of life (Item 26 in Figure 1).

The AISD students responded to the items shown in Figure 1 as part of a 15 minute survey designed in part as a needs assessment for parenthood education. Students were also asked some other questions about infant and toddler development, the cost of baby care items, the need for parenthood education classes, attitudes towards parenthood, and what they would do if they had a child before finishing high school. All of the students who were present in class that day completed the survey.

Data processing. Students' responses to the open-ended questions concerning estimates of developmental rates (items 27 to 31) were converted to number of months. Any answers that were over two digits long were considered missing data (there were only a few of these unreasonable responses). The parents and college students' experience with children was based on their level of contact with children under three years of age. AISD students' contact was based on their responses to one item on the survey, which asked how often they cared for children under five. The groups were simply split into a high level of baby care group (upper quartile) and a low level of baby care group (lower three quartiles). For AISD students, this meant that anyone who said they had contact with young children once a week or more (responses 4 and 5) was in the high baby care group. A point cutoff was used for the UT students and expectant parents.

The data were keypunched through the University of Texas Keypunching Service. The UT and expectant parent data cards were also verified by the service, while the AISD cards were verified by hand.

Data analyses. The Statistical Package for the Social Sciences (SPSS) was used for all data analyses (Nie, Hull, Jenkins, Steinbrenner, and Bent, 1975). One-way analyses of variance were carried out by group status (parents, UT students, and AISD students) for baby care experience, and for the items concerning developmental rates of young children, confidence in child care abilities, and perceived life changes after the birth of a child. Post hoc comparisons were then done using the Newman-Keuls procedure for unequal group sizes. Based on previous research (Pharis, 1978), it was felt that sex differences might exist for the developmental rate and confidence level items, so analyses of variance were also done for these items by sex. Finally, chi square analyses

were done for the five items dealing with the abilities of the newborn.

Results

Baby care. No significant differences were found in the ratings of experience with young children of expectant parents, UT students, and AISD students. A significant difference was found in the baby care experience of male and female subjects; females had significantly more experience with children ($p < .001$). It should be noted, however, that this rating of baby care experience was very general; the original scale used with AISD students was different from that used with expectant parents and UT students, and the responses were therefore collapsed into two groups of high and low baby care experience.

Developmental rates. Figure 2 shows the results for the analyses of variance by group and sex for these items. The way in which the means are arranged reveals the significant differences in responses.

Significant differences were found for seven of the nine items based on group status. Generally, the significant differences were found in the responses of expectant parents and UT students versus AISD students. Parents and UT students expected infants to smile, walk, use a cup, and wave earlier than AISD students. These two groups also expected a baby to cry less than did AISD students. In the case of the age at which a child first uses a cup, there were significant differences among the responses of all three groups. Parents-to-be expected this behavior earliest, followed by UT students, followed by AISD students. Parents expected a baby to sleep more in the first month than either AISD or UT students, and expected a baby to use more diapers than AISD students (UT students were not asked this question). No significant differences were found in the estimates

of the three groups in terms of the average baby's weight at birth, or the age at which toilet training begins. The range of responses to all of these items was generally broader for the students as compared to the expectant parents. Generally, parents and UT students were more realistic in terms of the demands of child care and the rate of development. They also viewed the child as being capable of independent action sooner than did high school students.

Sex differences were found for three of the nine items, which dealt with when a baby could walk, use a cup, and wave. Males expected babies to walk, wave, and use a cup later than did females. Females' estimates were more realistic in all three cases. These differences may be related to the fact that females had significantly greater contact with children than males. No differences were found on the other estimates based on sex.

The abilities of the newborn. Figure 3 shows the significance levels for the chi squares which were carried out for these items, along with the percent of each group that answered each item correctly. The chi square results indicate that for four of the five items, significant differences existed in the distribution of responses to each question by group. At least half of all the respondents gave the correct answer to four items. The other item may not have been interpreted as intended. There was a tendency for parents and AISD students to answer the items concerning the newborn's ability to suck and turn over correctly more often than UT students. Students (especially from AISD but from UT as well) generally knew that newborns could hear loud sounds and grasp objects somewhat less often than expectant parents. The percent of each group who said an infant could look where it wanted to was fairly similar across groups (23 to 28%). Generally, parents again showed a tendency to be more realistic about the abilities of an infant. For these items, however,

AISD students were more realistic than UT students for two items, which was not true for the developmental estimates.

Confidence levels. Figure 4 shows the results of the analyses of variance and Newman-Keuls comparisons by group and sex for the items concerning subjects' confidence in their ability to carry out various child care tasks for a child under one year of age.

Significant differences were found for four of the seven items based on group status. Parents had more confidence in their ability to be a good parent to a child under one year of age than either of of the student groups. Parents and AISD students were more confident than UT students about their ability to hold a baby properly. Parents were more confident than UT students about their ability to diaper a child, and more confident than AISD students about their ability to tell when a baby is sick. No difference was found in the confidence levels of the three groups in terms of their ability to soothe, bathe, or feed a child. Mean ratings of confidence were lowest for all three groups on the item dealing with the ability to tell when a child under one is sick (2.61 to 3.11 on a 5 point scale). On the average, the highest ratings were for the item concerning the ability to hold a baby properly (3.52 to 4.25); the highest individual group mean response was for expectant parents on the question of their ability to be a good parent to a child under one (4.45). Thus, expectant parents tended to have the most confidence in their child care abilities for 4 of the 7 confidence items. UT and AISD students had fairly similar levels of confidence, except that UT students had less confidence in their ability to hold a child.

Significant differences in confidence levels were found for male and female subjects on all of the items. Most of the differences were

highly significant ($p < .001$) except for the question dealing with their perceived ability to be a good parent ($p < .05$). Female subjects were more confident in their child care abilities than male subjects.

Life changes. The last six items deal with the subjects' perceptions of the ways in which their lives would be different with an infant around. Figure 4 shows the results of the analyses of variance and Newman-Keuls procedure by group.

Significant differences were found in subjects' responses to four of the six life-change items based on group status. No differences were found in the responses of expectant parents, UT students, and AISD students to the items concerning number of colds and degree of happiness. Generally, subjects did not expect much of a change in the number of colds they would have, but did expect to be happier than they are now. Expectant parents did not feel the time they spent with friends would change; UT students felt it would decrease a little; and AISD students felt it could decrease somewhat. All three groups felt the amount of sleep they received would decrease somewhat; AISD students expected it to decrease significantly more than expectant parents did. All three groups also felt they would eat out at least a little less often with a baby around. Parents-to-be and UT students only expected a slight decline, while AISD students expected to eat out somewhat less often. Finally, all three groups expected to have somewhat more financial worries, with AISD students expecting the greatest increase, and expectant parents the least.

The pattern which emerges seems to be one in which parents-to-be expect the least change in their lives, followed by UT students, and finally, AISD students. The direction of change is the same for all groups--students just expect the greatest degree of change (in a nega-

tive direction) in terms of the amount of time they will spend with friends, sleep, eat out, and worry about financial matters. However, even though all of the groups said they would expect some negative changes in their lives in these areas, all said they would be happier overall than they are now. The perceptions of the three groups seem fairly reasonable--all recognize that some negative aspects of the parenting experience do exist, but feel that the positive aspects outweigh them. And, in terms of life situations, the birth of a child would probably represent the greatest change in lifestyle for high school students, followed by UT students, and finally, expectant parents.

Summary and implications. The pattern which emerges from studying all of the responses is one in which parents-to-be are more knowledgeable about the abilities and demands of young children, more confident in their child care abilities, and less likely to see a baby as being disruptive to their lifestyle compared to students. Basically, the expectant parents in this study view children in a more positive light than the college and high school students. There is a tendency (although it is not as strong) for UT students to be more realistic about the pace of infant development, and to feel that a child would not change their lives quite as much as high school students.

The fact that parents-to-be in this sample are more realistic about children, are more confident in their child care abilities, and expect less negative change in their lives due to the birth of a child compared to high school and college students is positive in the sense that it suggests that these expectant parents have prepared themselves psychologically and intellectually for the birth of their child. Their knowledge and attitudes seem conducive to a positive parenting experience. It should be recognized,

however, that these parents were recruited while attending child birth preparation classes, and may be more motivated than the "average" parent-to-be to prepare for parenthood. This possibility could be checked in future research.

The differences in the responses of UT and AISD students in terms of developmental rates could be attributed to higher average intelligence levels for college students. However, the opportunities each group has to take courses dealing with these topics in Austin are fairly similar, and the degree of experience each group reported to have with children was similar, so this does not seem to be a very powerful argument. It is also possible that differences in the age and maturity levels of the subjects involved may play a part in the variations in responses of the three groups. However, multiple regression analyses performed by Pharis (1978) earlier found that age was not a significant predictor of response patterns of college students and expectant parents, although parental status was. Differences in the responses of the three groups to the questions regarding life changes after the birth of a child seem to be fairly reflective of subjects' life situations--the change would probably not be as great for expectant parents, because of the greater planning and preparation for the child. For college and high school students, however, the birth of a child would probably cause more restructuring of lifestyles, life goals, and life plans. The sex differences that were found represented a fairly traditional pattern--females had more experience with young children, tended to be somewhat more realistic about child development rates, and were definitely more confident in their abilities to care for a child. The fact that females were only more realistic than males on three of the nine items regarding developmental rates suggests that the knowledge of some areas of

child development is similar for both sexes. However, the other two findings indicate that males do not have as much experience in dealing with children and are less confident in their ability to do so successfully compared to females.

The finding that college and high school students are less knowledgeable and less confident in their ability to deal with children has some interesting implications. Some would say that this is perfectly reasonable and requires no action--that these young people will seek out the needed information when necessary. However, others would contend that these results indicate a need for more parenthood education courses, and that they should ideally include some direct experience with children and be required for all students. The AISD high school students were asked whether they felt such courses were needed and over 90% said yes (Baenen and Matuszek, 1978). About 50% said they would probably or definitely take such a course. Supporters of education for parenthood courses also point to the high rates of teenage pregnancies and parenthood (generally unplanned) as evidence that these courses are needed, and should be taken by everyone. It is felt that if the courses are not required, those that need the courses the most may be the ones who do not take them. Supporters hope that such courses can decrease the rate of teenage pregnancies somewhat, help all students make more responsible decisions about whether and when to become parents, and increase the parenting abilities of all students.

DIRECTIONS: FILL IN THE BLANK WITH YOUR BEST ESTIMATE FOR EACH OF THE FOLLOWING ITEMS. FOR ITEMS 32-36, WRITE IN YOUR ESTIMATE OF THE NUMBER OF YEARS AND MONTHS AT WHICH A BABY STARTS EACH ACTIVITY. FOR EXAMPLE, IT YOU THINK AN ACTIVITY STARTS AT 3 MONTHS, WRITE IN 0 YEARS & 3 MONTHS. IF AN ACTIVITY STARTS AT 1½ YEARS, WRITE IN 1 YEAR & 6 MONTHS.

23. How much does the average baby weigh at birth? _____ pounds

24. How many hours per day does the average baby sleep, in the first month? _____ hours

25. How many hours per day does the average baby cry, in the first month? _____ hours

26. How many diapers does the average baby use <u>each day</u> in the first month of life? _____ diapers per day

27. At what age does the average baby <u>first</u> smile at the mother or father? _____ year(s) & _____ months

28. At what age does the average baby <u>begin</u> toilet training? _____ year(s) & _____ months

29. At what age can the average baby <u>first</u> take three steps without support? _____ year(s) & _____ months

30. At what age can the average baby <u>first</u> use a cup to drink by itself? _____ year(s) & _____ months

31. At what age can the average baby <u>first</u> do a simple action on request, like wave when you say "bye-bye" or clap hands when you say "pat-a-cake"? _____ year(s) & _____ months

DIRECTIONS: THESE QUESTIONS DEAL WITH THE ABILITIES OF A NEWBORN BABY (A BABY IN THE FIRST WEEK OF LIFE). PLEASE READ EACH QUESTION, AND CIRCLE THE NUMBER OF THE BEST ANSWER.

32. Can a newborn hear loud sounds like a door slamming? 1. yes 2. no 3. don't know

33. Can the newborn look where it wants to voluntarily? 1. yes 2. no 3. don't know

34. Can the newborn suck by him/herself without learning? 1. yes 2. no 3. don't know

35. Can the newborn grasp objects in its hands? 1. yes 2. no 3. don't know

36. Can the newborn turn over by itself? 1. yes 2. no 3. don't know

Figure 1. SURVEY ITEMS. Items completed by high school students, college students, and expectant parents. Wording of instructions was slightly different for expectant parents for items 44-49. (page 1 of 2)

DIRECTIONS: HOW CONFIDENT DO YOU FEEL ABOUT YOUR ABILITY TO TAKE CARE OF CHILDREN UNDER ONE YEAR OF AGE? CIRCLE THE NUMBER WHICH INDICATES HOW MUCH CONFIDENCE YOU HAVE THAT YOU COULD DO THE FOLLOWING THINGS RIGHT NOW, TODAY:

DEGREE OF CONFIDENCE:	None	Little	Some	Quite a Bit	A Great Deal
37. Soothe a baby that is crying for "no reason".	1	2	3	4	5
38. Give a bath to a child under 1 year of age.	1	2	3	4	5
39. Feed a child under 1 year.	1	2	3	4	5
40. Change a diaper successfully when the baby is wet.	1	2	3	4	5
41. Hold a baby under 1 month of age in your arms properly.	1	2	3	4	5
42. Tell when a child under 1 year is sick.	1	2	3	4	5
43. Be a good parent to a child under 1 year of age.	1	2	3	4	5

DIRECTIONS: FOR THE SAKE OF THIS QUESTION, IMAGINE THAT IT IS 1980, AND THAT YOU ARE MARRIED AND HAVE A BABY. DURING THE FIRST YEAR AFTER THE BABY WAS BORN, HOW DO YOU THINK YOUR LIFE WOULD BE DIFFERENT THAN IT IS NOW? FILL IN THE BLANK WITH THE NUMBER WHICH BEST DESCRIBES THE CHANGE YOU WOULD EXPECT IN THE FREQUENCY OF EACH ITEM OCCURING COMPARED TO YOUR LIFE NOW. FOR EXAMPLE, IF YOU FEEL SOMETHING WOULD HAPPEN MUCH MORE THAN IT DOES NOW, FILL IN THE NUMBER 7 IN THE BLANK.

1	2	3	4	5	6	7
A lot less than now	Somewhat less	A bit less	No Change	A bit more	Somewhat more	A lot more than now

44. frequency of colds _____

45. happiness _____

46. amount of time spent with friends _____

47. amount of sleep each night _____

48. eating out _____

49. worry about financial matters _____

Figure 1. (continued, page 2 of 2)

LEVELS OF SIGNIFICANCE

Blank = no significant difference ** = significant at .01
* = significant at .05 *** = significant at .001

ITEMS	GROUP MEANS			ANOVA	SEX MEANS		ANOVA
	PARENT	UT	AISD	SIG	MALE	FEMALE	SIG
WEIGHS (pounds)	7.13	6.90	7.17		7.25	6.95	
SLEEPS (hours/day)	17.27	15.28	16.02	**	15.98	16.63	
CRYS (hours/day)	2.66	2.54	5.72	***	4.10	4.14	
DIAPERS (number/day) (no UT students)	17.34		7.93	***	10.97	11.93	
SMILE (age in months)	1.69	1.56	5.71	***	4.18	3.06	
TOILET (age in months)	17.97	17.82	20.45		20.09	18.33	
WALK (age in months)	12.93	11.72	16.00	***	15.60	12.78	**
USE CUP (age in months)	13.48	19.08	22.41	***	21.73	16.10	***
WAVE (age in months)	12.70	11.86	18.98	***	18.35	12.85	***

Figure 2. ANALYSES OF DEVELOPMENTAL PACE ITEMS. Includes results of analyses of variance and Newman-Keuls procedure ($p < .05$). Means presented on the same line are not significantly different from one another; those on different lines are significantly different from one another.

		CHI SQUARE	PERCENT CORRECT		
			Parents	College(UT)	High School(AISD)
HEAR LOUD SOUNDS	(yes)	**	97.5	92.0	84.7
LOOK WHERE WANT	(yes)		28.8	28.0	23.0
SUCK	(yes)	**	90.0	76.0	81.3
GRASP	(yes)	*	65.0	52.0	51.6
TURN OVER	(no)	*	76.3	70.0	79.0

Figure 3. ANALYSES OF ITEMS ON THE ABILITIES OF A NEWBORN. Shows significance of chi squares (same symbols as Figure 2) and percent of each group which answered question correctly.

LEVELS OF SIGNIFICANCE

Blank = no significant difference
* = significant at .05
** = significant at .01
*** = significant at .001

ITEMS	GROUP MEANS PARENT	UT	AISD	ANOVA SIG	SEX MEANS MALE	FEMALE	ANOVA SIG
SOOTHE	3.73	3.42	3.44		3.21	3.84	***
BATHE	3.76	3.36	3.28		3.05	3.71	***
FEED	4.00	3.62	3.70		3.34	4.22	***
DIAPER	3.80	3.22	3.63 3.63	*	2.95	4.25	***
HOLD	4.25	3.52	4.04	**	3.69	4.32	***
TELL WHEN SICK	3.11	2.74 2.74	2.61	**	2.45	3.14	***
BE A GOOD PARENT	4.45	3.30	3.24	***	3.47	3.80	*

Figure 4. ANALYSES OF ITEMS CONCERNING SUBJECTS' ABILITY TO CARE FOR A CHILD UNDER ONE YEAR OF AGE. Range of possible responses was 1 to 5 (no confidence to a great deal of confidence). Means on same line are not significantly different from one another based on the Newman-Keuls--those on different lines are significantly different ($p < .05$).

LEVELS OF SIGNIFICANCE

Blank = no significant difference ** = significant at .01
* = significant at .05 *** = significant at .001

ITEMS-CHANGE IN:	GROUP MEANS PARENTS	UT	AISD	ANOVA SIGNIFICANCE
NUMBER OF COLDS	4.15	4.26	4.26	
DEGREE OF HAPPINESS	5.09	5.42	5.55	
TIME WITH FRIENDS			2.76	***
		3.46		
	3.89			
AMOUNT OF SLEEP		2.66	2.36	*
	2.74	2.66		
TIMES EATING OUT			2.21	***
	3.21	2.98		
FINANCIAL WORRIES	5.04	5.26		*
		5.26	5.55	

Figure 5. ANALYSES OF ITEMS CONCERNING THE CHANGE IN LIFE THAT WOULD BE CAUSED BY THE BIRTH OF A CHILD. The range of possible responses was 1 to 7. An answer of 4 indicated "no change", 1 indicated "a lot less", and 7 indicated "a lot more". Differences in means are based on Newman-Keuls comparisons, set at the .05 level of significance. Means presented on the same line are not significantly different from one another--those on different lines are significantly different.

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