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THE RELATIONSHIP BETWEEN FAMILY COMPOSITION AND SOCIAL BEHAVIOR FOR STUDENTS WITH MILD DISABILITIES IN SCHOOLS

by

Amanda Clark

A thesis submitted to the faculty of

Brigham Young University

in partial fulfillment of the requirements for the degree of

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BRIGHAM YOUNG UNIVERSITY

GRADUATE COMMITTEE APPROVAL

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BRIGHAM YOUNG UNIVERSITY

As chair of the candidate's graduate committee, I have read the thesis of Amanda Clark in its final form and have found that (1) its format, citations, and bibliographical style are consistent and acceptable and fulfill university and department style requirements; (2) its illustrative material including figures, tables, and charts are in place; and (3) the final manuscript is satisfactory to graduate committee and is ready for submission to the university library.

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ABSTRACT

THE RELATIONSHIP BETWEEN FAMILY COMPOSITION AND SOCIAL BEHAVIOR FOR STUDENTS WITH MILD DISABILITIES IN SCHOOLS

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Previous research identifies significant differences in children's problem behavior across various family structures, particularly noting more challenging behaviors in children from single parent families. Utilizing a pre-existing data set of Behavioral Objective Sequence (BOS) scores, this study investigated teacher ratings of social behavioral skills in students with mild disabilities, focusing on differences between groups of students from a variety of family compositions. Results indicated no significant difference in social behavioral skills among children from different family groups, taking into account the student's age. The covariate of age was significant on each of six BOS subscales, suggesting that children develop and improve social behavioral skills as they age, regardless of family composition.



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INTRODUCTION

There are many who believe that the family is the basic unit of society. According to the U.S. Census Bureau, "The family is a vital institution in American society. Families are often the first and frequently the last source of support for individuals" (Fields, 2003a, p.6). It is within the family unit that one generally learns to walk, talk, and interact with others. Family members teach each other love, kindness, and sacrifice. Over the past few decades, the American family has changed dramatically. With substantial increase in divorce rates and children living with unmarried mothers or fathers, the traditional nuclear family prevalent in the 1950s is tending toward atypicality. From 1970 to 2003, the number of single-mother families increased from 3 million to 10 million (Fields, 2003a). The U.S. Census Bureau's report on the family states, "In 2002, 69 percent of children lived with two parents, 23 percent lived with only their mother, 5 percent lived with only their father, and another 4 percent lived in households with neither parent present" (Fields, 2003b, p.3).

Many researchers (Amato, 2001; Carlson & Cocoran, 2001; Popenoe, 1993) have examined how these changes in family structure affect children and their behavior. Amato (2001) conducted a meta-analysis of 67 studies published between 1990 and 1999 that compared samples of children in single-parent families with children living with continuously married parents. He found that, overall, children with divorced parents performed more poorly on a variety of measures related to social behavioral problems than did children of continuously married parents. Specifically, children with divorced parents had more conduct problems including misbehavior, aggression, and delinquency, and showed poorer psychological and emotional adjustment such as depression and anxiety, lower self-esteem, and weaker social relationships (Amato, 2001).



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Carlson and Corcoran (2001) found that children who spent some time living in a singleparent household had more reported social behavioral problems than those children who had lived in a biological family since birth. Some children raised in single-parent homes continuously since birth are at the greatest risk of poor academic and social behavioral outcomes. These researchers cite the effects of family structure on children's behavior as being attributable to several main factors, one of which is socialization. "When parents live apart, the residential parent often becomes the primary (or sole) provider of both economic and parental resources, and thus competing time demands necessarily entail less investment in monitoring and socializing children" (Carlson & Corcoran, 2001, p. 781). Typically, single parents work hard and do their best to provide for and teach their children; however, they must fill the roles of both father and mother with only limited resources.

This shift in family structure may be especially difficult for single parents of children with mild disabilities (i.e., emotional and behavioral disorders, communication disorders, mild mental retardation, and learning disabilities). McDonald and Gregoire (1997) found the following:

A child with a serious illness or disability [i.e. emotional disorder] presents challenges to the caregiver; when a child requires ... 24-hour supervision, and management of behavior, it is difficult for the caregiver to attend school functions important for other children in the family, have energy for paid work, spend enough time with other children in the family, maintain an intimate relationship, or even go grocery shopping. (p. 138)

The difficulties of raising and caring for a child with mild disabilities are compounded when the caregivers are single parents because a single parent is already trying to fulfill multiple roles on limited resources. Many single parents rely on external support systems such as friends



and family members to substitute when the parent cannot be there for the children. When a child has serious behavior problems, however, this external support may be more difficult to obtain. McDonald and Gregoire (1997) demonstrated that increases in external problem behaviors were related to a decrease in support from relatives and friends. This lack of support makes it increasingly difficult for parents to appropriately "socialize" their children and participate in school meetings and activities.

Statement of Problem

Researchers have looked at the effects of family composition on the social behaviors of children; however, most of these studies have relied on parents' ratings of behavior and have not included teachers' perceptions of behavior or social skills. In addition, while researchers have looked at the effects of family composition on the social behaviors of typical children at home and in school, there exists a need to examine the differences in social behavioral competency of children with mild disabilities across family composition groups.

Statement of Purpose

The purpose of this study is to examine how specific behaviors considered problematic at school by teachers of students with mild disabilities differ among family composition groups. In order to determine this, the researcher will investigate the differences between social behavioral skills and deficits of students with mild disabilities in special education with family composition using an Analysis of Covariance (ANCOVA) and an existing data set. The social behaviors were rated by special education teachers using the *Behavioral Objective Sequence* (BOS) as a rating scale.

Research Questions

This study will examine the following research questions:



- Are there significant differences after holding age constant among family composition groups in terms of scores on the Self-Management subscale of the BOS for children with mild disabilities?
- Are there significant differences after holding age constant among family composition groups in terms of scores on the Communication subscale of the BOS for children with mild disabilities?
- 3. Are there significant differences after holding age constant among family composition groups in terms of scores on the Adaptive subscale of the BOS for children with mild disabilities?
- 4. Are there significant differences after holding age constant among family composition groups in terms of scores on the Interpersonal subscale of the BOS for children with mild disabilities?
- 5. Are there significant differences after holding age constant among family composition groups in terms of scores on the Personal subscale of the BOS for children with mild disabilities?
- 6. Are there significant differences after holding age constant among family composition groups in terms of scores on the Task subscale of the BOS for children with mild disabilities?

Importance of the Study

Children and youth's social behavioral problems have serious consequences in schools since they impact the time teachers can spend in instruction (Martella, Nelson, & Marchand-Martella, 2003) thereby impacting the learning of other students in a classroom. Examining if these school behaviors differ among family structures may eventually lead to more salient



academic and behavioral interventions in schools for children with mild disabilities from different family composition groups and their families.



LITERATURE REVIEW

Mild Disabilities and Social Behavior

The category *mild disabilities* is a general term for various disabilities. The mild disabilities in this study include learning disabilities, emotional or behavioral disorders, communication disorders, and mild mental retardation. Children with these disabilities struggle not only academically, but socially as well.

Children with mild disabilities are neither exclusively cognitive nor exclusively social and affective entities, but rather are children with physical, cognitive, motivational, social, and affective dimensions that influence one another in a reciprocal fashion. An influence on one of these dimensions potentially impacts the others in a transactional manner. (Gresham, MacMillan, Ferguson, & Ferguson, 1997, p. 405)

Under the umbrella of mild disabilities, children classified as having a learning disability make up the largest portion of students in the general education classroom who receive special education services (Hardman, Drew, & Egan, 2005). The 2004 Individuals with Disabilities Education Act (IDEA) defines *learning disabilities* as

... a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which may manifest itself in an imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations... (Section 300.8 [a 10]).

There is a great deal of variability within this classification. Some students may do well in reading but have a disability that affects their ability to do math, while others may have difficulties in reading, writing, and math. Children with learning disabilities often experience frustration in the classroom as they struggle to complete the tasks given to them and to keep pace



with their peers. This frustration can lead to disruptive behavior and the acquisition of negative feelings of self-worth (Mercer & Pullen, 2005).

The category *emotional or behavioral disorders* (EBD), as it will be referred to in the present study, is also known as *seriously emotionally disturbed* (SED), or *emotionally disturbed and behaviorally disordered* (ED/BD). Not only are there different labels, for EBD but there are also several different definitions across the different fields of education and psychology. Educators have created their own way of defining EBD according to the behaviors they see at school. In essence, this definition includes children who behave in ways that are deemed by educators as harmful or inappropriate and cause academic and social problems. (Blackbourn, Patton, & Trainor, 2004). A specific example of this is the definition given in IDEA (2004). This definition is based on the child's exhibition of certain characteristics such as inability to build or maintain relationships with peers or teachers, or a general mood of unhappiness or depression. These characteristics could affect academic progression as they are often linked to non-compliance of teacher request, and lack of motivation.

Children classified as having emotional or behavioral disorders exhibit characteristics such as disorders of emotions and/or behavior, interpersonal problems, inability to learn or achieve at school, behavior that differs from the norm or age-appropriate expectations, and a need for special education (Kauffman, 1993).

Mild Mental Retardation within the school context is defined as "...significantly subaverage intellectual functioning and adaptive behavior limitations that adversely affect educational and life functioning" (Henley, Ramsey, & Algozzine, 1999, p.50). Some common characteristics found among children with mental retardation include failure to read social cues, a higher level of distractibility, inattentiveness, and impulsive behavior (Hardman, 2005). While



these students may experience deficits in many areas, it must not be assumed that they are lacking in feelings or emotions; "...there is nothing retarded about the emotions of these students... [they] have normal feelings. They want to be liked, accepted, and valued as human beings" (Henley, Ramsey, & Algozzine, 1999, p. 72).

Though each of these mild disabilities is unique, there are many common behaviors found among them. "There is a substantial body of literature suggesting that children in all mild disability groups exhibit deficient social skills and excesses in interfering problem behaviors" (Gresham et al., 1997, p. 389). Gresham et al. reviewed empirical research on social competence and affective functioning of children with mild disabilities. They found that the students with mild disabilities did experience deficits in their social skills functioning when compared to their non-disabled peers; however, there was little evidence to suggest that these groups differed among themselves in social competence functioning. These deficits in social skills often become problematic in the classroom, as the teacher is responsible for managing a number of students at a time. Specifically, Gresham et al. found the following:

The pattern of social behavior for most students with mild disabilities is problematic for teachers because it deviates substantially from a model behavioral profile, which is characterized by behaviors facilitating academic performance and distinguished by the absence of disruptive, noncompliant behaviors that disturb classroom ecology. (p. 400) *Families and Disabilities*

The special needs of children with mild disabilities create a unique situation that may require a great deal of time and effort from the primary caregiver and other family members. In order to be successful, these children require not only special help at school but assistance at home to complete homework and improve reading skills. Parents are often called to the school



for meetings with the teacher and other members of the school staff. Sometimes, when there are serious behavioral problems, the circumstances may even require parents to remove their child from school for the rest of the day. The availability of parents can therefore have a great impact on how well the child functions in the home and in school.

James M. Kauffman (1993) described the somewhat complex relationship between family characteristics and emotional and behavioral development. This relationship does not occur in a vacuum, but interacts with many other factors such as the child's age, sex, and temperamental characteristics, the family's socioeconomic status, and sources of support outside the family. "Nevertheless, broken homes, an absent father, parental separation, divorce, and chaotic or hostile family relationships are known to increase children's risk of developing emotional or behavioral disorders" (p. 200).

Family Status Groups

Carlson and Cocoran (2001) used data from the National Longitudinal Survey of Youth to examine the effects of family structure on children's behavioral and cognitive outcomes. The sample consisted of the 1,809 children who were living with their mothers at the time of the 1994 interview. Children ranged in age from 7 to 10 years and represented a cross-section of children born to a nationally representative sample of women between the ages of 29 and 36. Behavioral problems, as reported by the child's mother, were measured by the *Behavior Problems Index* (BPI). Mother's psychological well-being was measured by the CES-D depression scale and the Perlin scale, which measured the extent to which the mothers felt like they had control over their lives.

Results from this study showed that mothers of children who had spent some time living in a single-parent household reported more behavioral problems compared to mothers of children



who had lived in a biological family since birth. The results also indicated several main factors for the effects of family structure on children's behavior. These main factors included socialization, stress, maternal psychological well-being, and economic status. They found that children reared in two-parent families since birth were better off in terms of family income and home environment, maternal characteristics, and cognitive and behavioral outcomes, than children who spent some time in a single-parent home (Carlson & Cocoran, 2001). Results also suggest a great deal of interconnection between these variables. For example, the effects of family structure are reduced when family income is controlled for; however, average income for single parent families is much lower than for two-parent families. Maternal psychological well-being was also shown to influence behavioral outcomes across family structure groups. The authors suggest that maternal psychological well-being is lower in single parent families, which may lead to more behavior problems in children. Finally, results showed the following:

Children who spend some time in a single-parent home are at higher risk for poor behavioral and cognitive outcomes, and among children who spend any time in a singleparent home, children reared in single-parent homes continuously since birth are at greatest risk. (p.789)

While much of the research has focused on two-parent and single parent households, there is also research that examines problem behaviors in children who have been adopted or live in foster care. Lansford, Ceballo, Abbey, & Steward (2001) compared child outcomes across five different family structures including adoptive households, two-parent households, biological households, single mother households, stepfather households, and stepmother households. The focus of this study was to compare adoptive households to the other four family structures. Their sample included 799 randomly selected families from the National Survey of Families and



Households. These were randomly selected families in which at least one child was 18 years of age or younger. Parents completed several forms to assess parent well-being and a rating scale to assess their child's well-being and adjustment. A history of behavior problems was also recorded. Other scales, completed by both children and parents, were used to measure family cohesion, family climate, and family relationships.

The results of this study showed that mothers in families with two biological parents reported that their children had fewer internalizing, externalizing, and problem behaviors. Adoptive mothers reported the most externalizing problems in their children. The overall results suggested that the processes occurring in families are more important than family structure in predicting well-being and relationship outcomes (Lansford et al., 2001).

Using data from a 17-year national longitudinal study of marital instability over the life course, Amato and Booth (2001) looked at parental pre-divorce relations and offspring postdivorce well-being. This study included 2,033 married persons (not couples) age 55 and under who were interviewed by phone in 1980, 1983, 1988, 1992, and 1997. A random sample of their offspring was also interviewed in 1992 and 1997 (n=691) as part of the study. The interview included questions about the quality of the parents' marriage, the psychological well-being of the children, the amount of support received from family and friends, the quality of relationships within the family and with others, and educational attainment.

The results of this study indicate that, when taken separately, conflict has more implications than divorce for children's long-term well-being. There was a relatively large difference (.67 of a standard deviation) between children from divorced families and nondivorced families in the interaction of conflict and divorce. An interesting finding from this study was that the termination of high-conflict marriage appeared to have a relatively benign or even



beneficial effect on offspring, while divorce among low-conflict marriages appeared to have a strong negative influence on offspring. Booth and Amato (2001) concluded the following:

Daily interaction with adults who care for them (and care for each other) is desirable because it helps children negotiate significant and frequent changes in their own lives... Stable relations with two caring adults can do much to help children adjust to immense changes in their lives. The loss of these resources is a distinct disadvantage to children and may result in stress overload. (p. 210)

Jackson, Sifers, Warren, and Velasquez (2003) studied the relation among family protective factors, family life events, and appraisal in predicting behavior outcome in school-age children. The sample included 260 participants ages 8 to 12 years. Of these students, 49% were boys. All were students in general classrooms at several schools in a semi-rural town. Several self-report measures and questionnaires were completed by parents and children and scored in order to measure family life events, family protective factors, and the child's adaptive, emotional, and behavioral functioning.

Results from this study showed that as negative family stress increased, externalizing behavior also increased. Additionally there were two significant interactions between the family relations and personal growth scales, and the negative family events scores. First, as negative family events increased, so did internalizing behaviors for children in the high family relations group; however, this was not the case for the children in the low family relations group, who scored a consistent decrease in internalizing behavior. Second, increase in negative family stress coincided with increase in internalizing behaviors for both high and low personal growth groups. Jackson et al. (2003) suggest that exposure to family stress might not directly impact behavioral



outcome. It may be better described as a bidirectional relationship that is moderated by several other variables.

Much of the research on family composition and child well-being shows diminished effects when other variables such as SES status, parental conflict, etc. are controlled. In discussing research on family structure, Menaghan (1996) points out that all other things being equal, family composition will likely not make a huge difference, but in a realistic world, all other things are *not* equal. She argues that research must be focused on the total set of conditions that make parent-child interactions more difficult in order to reach a broader understanding of how these interactions affect children (Menaghan, 1996).

Effects on Families

Zill (1996) reviewed the results of several studies looking at how changes in family structure influence students' performance in school. He found a significant relationship between family structure and student's academic performance and school behavior. Not only was there a significant relationship, but also students from single-parent families, stepfamilies, and all family types other than intact two-parent families showed lower achievement and higher incidence of school conduct problems than students from mother-father families (Zill, 1996). In addition to the aforementioned negative influences family structure may have on children, the stress that often accompanies low academic achievement and problem behaviors becomes another factor, particularly for children with disabilities and their families.

There exists a reciprocal relationship between family stress and children with disabilities. Being in a stressful family environment can be very problematic for children with disabilities, but the reverse is also true. Having a child with disabilities can be very stressful for a family. McDonald and Gregoire (1997) studied the relationship between problem behaviors in children



and level of caregiver stress. The sample included 259 primary caregivers, mostly mothers, of children with EBD. Participants filled out questionnaires that included questions about child characteristics, family/caregiver characteristics, social support, formal supports, service utilization, coping behaviors, perception of the child, and caregiver stress. The results showed that the child's external behaviors have the largest influence on caregiver stress. Not only do these behaviors affect caregiver stress directly, but also have an indirect impact by affecting family support and coping behaviors. According to the results, as external problem behaviors increased, the support the family received from relatives and other resources decreased, which in turn reduced coping, and as a result often led to increased caregiver stress (McDonald & Gregoire, 1997).

In a later study Early, McDonald and Gregoire (2002) examined the reciprocal nature of the relationship between child functioning and caregiver well-being further through a longitudinal study. "The major findings of this study were that child functioning and caregiver well-being mutually do affect each other and that measures of both child functioning and caregiver well-being are fairly stable over time" (Early et al., 2002, p. 385). Results also revealed that the well-being scores were stable over the two time periods, suggesting that caregivers do not become accustomed to their children's problems and therefore experience less burden over time (Early et al., 2002).

Although the aforementioned studies have indicated negative outcomes for families who have children with mild disabilities, some families have been able to use family and outside resources to make positive adaptations in order to meet the unique demands of raising a child with disabilities. Bennett and DeLuca (1996) conducted a study that interviewed 12 parents of children with disabilities. These families were at different stages in the life cycle and were



considered to be *positively adapted families*. The definition of positively adapted families used in this study included families that both accept the reality of the disability and are able to love the child for who he or she is. Additionally, they are headed by parents who manage not only to have emotionally well-adjusted children, but successful marriages as well (Bennet & DeLuca, 1996). These interviews were conducted in order to investigate the use of outside resources such as family members, friends, parent support groups, schools, and other professional organizations.

The results of this study indicated that family and friends proved a great source of emotional support, and acceptance of the child with disabilities. On the whole, the major resources used by the families surveyed included support from family and friends, parent groups, professionals, religion, and empowerment.

Overall, the research shows that there are advantages and disadvantages that go along with having a child with a disability in the family and in the classroom; one of the greatest disadvantages being problem behavior. As research has also shown variations in behavior of children from diverse family backgrounds, a greater understanding of family composition and how it relates to school behavior of children with mild disabilities will lead to better interventions for schools and families that increase the advantages and manage the disadvantages.

Interventions

Finding a difference in behaviors across family groups would suggest a need to look at interventions that are family focused rather than disability focused. The Positive Behavior Support (PBS) method has been suggested as a great way to include families in interventions (Lucychyn, Kayser, Irvin, & Blumberg, 2002). PBS is a type of behaviorism that has evolved from the theory and principals of Applied Behavior Analysis. Essentially, PBS is environmental



management; it involves adjusting or eliminating situations or events that are known to elicit a problem behavior in order to decrease the likelihood that the problem behavior will occur. A reduction in problem behavior will increase social, personal, and professional quality in their lives and the lives of their family members (Association for Positive Behavior Support 2005). As implied by the name, Positive Behavior Support focuses on creating a positive environment to elicit appropriate behaviors, rather than focusing on negative consequences to extinguish problem behaviors. PBS is also designed to help not only the individuals with problem behaviors, but to help their entire family. "The overall goal of the [PBS] process is to empower families with the knowledge and skills necessary to more meaningfully and successfully include their son or daughter with a disability into the rich and myriad patterns of family and community life" (Lucyshyn, Kayser, Irvin, & Blumberg, 2002, p. 97). Taking a family-centered approach to changing behavior through PBS means including members of the family in every step of the process. The intervention is designed not only to help the child succeed in school, but also to fit the needs, values and resources of the family so that the plan may be implemented more effectively across school and home settings.

Zill (1996) suggests intervening with students and parents at the school level. This intervention is based on the theory that dealing with academic or behavior problems of students from disrupted families is less effective if the underlying family problems are not addressed. He makes several suggestions for schools. First, schools should encourage participation of parents from all types of families and plan activities that fit the needs and special circumstances of different families. Second, schools should be prepared to refer children experiencing problems related to family discord to a counseling program, and if possible should use these types of services at the school. The next suggestions take more of a proactive rather than reactive



approach by giving kids training about choices and consequences to help them plan their lives. More specifically, Zill suggests teaching students that unprepared parenthood is not wise, and that it often leads to child poverty, school failure, and welfare dependency. In addition, educators would teach that all family forms are not equally viable. The research on different types of families and the outcomes of children in these families should be the foundation for teaching youth about family life, parenting, and child development. This should be done in a forthright manner, without exaggerating the risks or demeaning individuals who come from single-parent families and step-parent families (Zill, 1996). This instruction, if presented in a simple and concrete manner, could be particularly helpful to children with mild disabilities who are in the transition stage of life.

Overall, the research indicates that children with mild disabilities often exhibit excessive problem behaviors and deficient social skills in comparison to non-disabled peers. As a result of their disabilities and problem behaviors, these students generally require a great deal of support from their family in order to thrive in school. Research has also examined the effects of divorce and growing up in different family structures on children's behavior and overall well-being. The majority of this research is based on children's behavior in the home as reported by the parent and indicates that children from intact two-parent families demonstrate less behavioral problems than do children from broken homes or single parent homes. These differences in child behavior have also been attributed to other factors such as processes occurring within the family unit, family conflict, and SES level. As indicated in the results from Carlson and Cocoron (2001), these variables are greatly intertwined with family composition. Menaghan (1996) also argues that because these variables are so closely connected, the total set of conditions surrounding a child should be considered and controlling for different variables does not give a realistic



representation of the child's circumstances. Zill (1996) suggests that understanding the interplay between the various factors related to family composition will aid in a preventative intervention at a school level by teaching students that all family forms are not equal and encouraging thoughtful family planning.



METHODS

This study analyzes data collected for two previous studies that examined relationships between teacher and student perceptions of student behavior (Wilder, 1999) and teacher perceptions of student behavior across cultural groups (Wilder, Shepherd, Murray, Rogers, Heaton, & Sontag, in press). The following is a description of the participants, the procedures, and the measures in the original study.

Participants

Participants included 449 students in special education programs and their teachers. Of these students, 287 were classified as having Learning Disabilities (LD), 121 with Emotional Disorders (ED), 21 with Mild Mental Retardation (MMR), 2 Communication Disorders (CD), and 39 with no identified classification. Students ranged in age from 4 to 19 years with the mean age being 12 years. There were 353 (78.3%) males and 98 (21.7%) females. Several samples were drawn from different schools and programs across the United States including Texas, Utah, Idaho, Pennsylvania, Arizona, Nevada, Washington, California, Washington, D.C., Florida, Virginia, Indiana, Wyoming, Illinois, and Montana. Seven different ethnicities were represented in this sample. Of the 449 student participants, 12.5% were Native Americans, 11.1% African Americans, 13.1% Asians, Pacific Islanders, or Hispanic Americans; the remaining participants were identified as European Americans and Bi-racial.

There were 177 teachers participating in this study, the majority of which were female and Caucasian. There were 27 (15.3 %) men and 12 (6.8%) ethnically diverse teachers. Teachers were recruited through various networking processes including professional contacts of the original researcher, lists of state mentors in EBD, mentors recruited other professionals they associated with, etc. Districts were chosen to represent the following range of geographical



areas: rural, small town, urban, and suburban. This study looked at student behavioral ratings as measured by teachers on the BOS across these family composition groups: two-parent, singleparent, blended, and guardian/foster. Subjects who did not have a family status group or an age listed were removed from the sample. The foster family group was too small to analyze (n = 2), hence it was removed from the sample. The final participants consisted of 89 students from twoparent families, 68 from single parent families, 17 from blended families, and 19 from guardian families.

Procedures

Teachers were given instructions to rate up to three randomly chosen students in his/her classroom with mild disabilities and fill out the following forms: teacher profile form, student demographic forms, and the BOS rating scales. The items on the teacher profile form asked for the following information: gender, total years of teaching, years of teaching special education, whether or not the teacher was licensed in mild disabilities, and teacher ethnicity. The student demographic forms requested birth date, grade, gender, ethnicity, family composition, socioeconomic status, medications, placement, year of the first IEP, secondary classification, achievement scores, IQ score, and other background information regarding community services received. Students were trained by an aide or other professional to fill out the self-report version of the BOS. These forms were returned to the researcher to be scored and entered into an Excel file. Procedures for this study include securing the database, obtaining IRB approval, isolating the family composition variables, and comparing these variables to scores on the BOS.

The Behavioral Objective Sequence (BOS) is a manual designed to assist special educators in assessing and designing interventions for students with EBD. The Rating Scale



Guide of the BOS was the instrument used in this study by teachers to rate student's behavior. It is a strength-based rating scale, rather than deficit-based. Reliability and validity for this scale was established through a two-year study, which looked at interrater reliability, test-retest reliability, content validity, sequence validity, factor analysis, and correlations with the Child Behavior Checklist. BOS split-half reliability mean across six subscales is .88 (Albrecht, 2003; Wilder, Braaten, & Sudweeks, 2001). The study also showed a correlation of .90 between the rating scale for the BOS and direct daily observation procedures.

The BOS rating scale is used by teachers to establish a student's current level of performance on certain objectives. The scale consists of 233 skills that are divided into six subscales: (a) Adaptive (i.e., the student responds appropriately to routine and new expectations), (b) Self-Management (i.e., the student responds with self-control and seeks to be successful), (c) Communication (i.e., the student demonstrates appropriate verbal and nonverbal skills), (d) Interpersonal (i.e., the student interacts appropriately with others in social and task situations), (e) Task (i.e., the student engages in learning tasks and activities that are assigned by teachers), and (f) Personal (i.e., the student engages in dialogue to resolve issues, develop skills, and build self-worth) (Braaten, 1998). The scale is a four-point Likert scale that measures how frequently the student performs these skills, ranging from never or rarely to always or almost always. Items within each subscale are arranged in three developmental levels. A rating of 0 on this subscale means the rater had no basis for judgment or did not know how often the student performed the task. Level 300 is the lowest developmental level and includes skills typically mastered by students who are kindergarten age or younger. Sample items at this level include "wait or take turns without physical intervention" and "appropriately seek assistance from an adult." Level 200 includes skills that students master during their elementary school years. Sample items at the



second level include "work or play without disrupting the work of others" and "seek counseling to avoid conflict." Level 100, which is the highest level, consists of skills that are generally mastered during adolescence. Sample items at this level include "praise and personally support others without adult prompts" and "work independently for periods of 30 to 40 minutes." High scores on the BOS indicate that these students exhibit more prosocial behaviors than do students with low scores (Wilder et al., in press). The BOS manual asserts the following:

A rating should be completed only by individuals who have had direct experience with the student over an extended period of time. Administration of a rating scale represents the rater's perception at a moment in time and evaluators should note that these ratings are vulnerable to a variety of "observer biases." These bias effects can be diminished by use of multiple ratings, multiple raters, and by team consensus ratings. (Braaten, 1998)

Statistical Analysis

This study examined the differences among family composition groups in terms of student behavioral ratings on the BOS rating scale subscales including the following: Communication, Self-Management, Personal, Interpersonal, Adaptive, and Task. Using the WINSTEPS program (Linacre, 2000) the Rasch Scaling method was used to convert ordinal (Likert) rating scores from the BOS into abstract, equal-interval scores. A further benefit of Rasch Scaling was that it compensated for the fact that ratings of 0 (which indicated "no basis for judgment") would not unduly depress students' scores. Students' Rasch scores were created for each subscale and mean scores were compared across family groups. Because social competency is directly related to age, an ANCOVA was used to control for the effect of age on scores.



RESULTS

Research Question 1

Are there significant differences after holding age constant among family composition groups in terms of scores on the Self-Management subscale of the BOS for children with mild disabilities?

Table 1 provides the mean scores and standard deviations for each family status group in terms of ratings on the Self-Management scale. Scores ranged from -2.12 to 6.15. Students from blended families received the highest scores overall, with a mean of .9953, while students from single parent families received the lowest scores overall with a mean of .5334.

Table 1

Means of Rasch Calibrations Across Family Status Groups for the Self-Management Scale

Family Status	М	SD
2 parent	.6511	1.63248
Single parent	.5334	1.32026
Blended	.9953	1.03639
Guardian	.6153	1.54304

The results of the Analysis of Covariance show no significant differences at the .05 level among family status groups after holding the age of the subjects constant in terms of selfmanagement scores [F(3,188) = .354, ns]. Table 2 presents the variance of Self-Management scores across groups and significance values. Age was a significant covariate. Students differed



significantly on the Self-management scale according to age; however, they did not differ significantly according to family status after holding age constant.

Table 2

Analysis of Covariance for Self-Management

	Type III Sum of		Mean		
Source	Squares	Df	Square	F	Sig.
Corrected Model	25.750 ^a	4	6.438	3.115	.016
Intercept	4.119	1	4.119	1.993	.160
AGE	22.811	1	22.811	11.038	.001
FAMSTAT	2.193	3	.731	.354	.787
Error	388.538	188	2.067		
Total	492.460	193			
Corrected Total	414.288	192			

^a $R^2 = .062$ (Adjusted $R^2 = .042$)

Research Question 2

Are there significant differences after holding age constant among family composition groups in terms of scores on the Communication subscale of the BOS for children with mild disabilities?

On the Communication subscale, scores ranged from -4.63 to 6.61. Table 3 provides the mean scores and standard deviations for each family status group in terms of ratings on this



scale. Students from blended families received the highest scores overall, with a mean of .8006, while students from two-parent families received the lowest scores overall with a mean of .0838.

Table 3

Means of Rasch Calibrations Across Family Status Groups for the Communication Scale

Family Status	М	SD
2 parent	.0838	1.46945
Single parent	.1507	1.66161
Blended	.8006	1.21729
Guardian	.1805	1.21232

The results of the Analysis of Covariance show no significant differences at the .05 level among family status groups after holding the age of the subjects constant in terms of Communication scores [F(3,188) = 0.906ns]. Table 4 presents the variance of Communication scores across groups and significance values. Age was a significant covariate. Students differed significantly on the Communication scale according to age; however, they did not differ significantly according to family status after holding age constant.



			Mean		
Source	Type III Sum of Squares	Df	Square	F	Sig.
Corrected Model	33.315 ^a	4	8.329	3.922	.004
Intercept	13.881	1	13.881	6.536	.011
AGE	25.887	1	25.887	12.189	.001
FAMSTAT	5.774	3	1.925	.906	.439
Error	399.277	188	2.124		
Total	438.849	193			
Corrected Total	432.592	192			
$^{a}R^{2} = .077$ (A)	diusted $R^2 = .057$)				

Analysis of Covariance for Communication

.077 (Adjusted R =.037)

Research Question 3

Are there significant differences after holding age constant among family composition groups in terms of scores on the Adaptive subscale of the BOS for children with mild disabilities?

Table 5 provides the mean scores and standard deviations for each family status group in terms of ratings on the Adaptive scale. Scores ranged from -2.03 to 5.88. Students from blended families received the highest scores overall, with a mean of 1.5094, while students from single parent families received the lowest scores overall with a mean of .8490.



Family Status	М	SD
2 parent	1.1563	1.54278
Single parent	.8490	1.44685
Blended	1.5094	1.22220
Guardian	1.2021	1.46769

Means of Rasch Calibrations Across Family Status Groups for the Adaptive Scale

The results of the Analysis of Covariance show no significant differences at the .05 level among family status groups after holding the age of the subjects constant in terms of Adaptive scores [F(3,188) = 1.069, ns]. Table 6 presents the variance of Adaptive scores across groups and significance values. Age was a significant covariate. Students differed significantly on the Adaptive scale according to age; however, they did not differ significantly according to family status after holding age constant.

Research Question 4

Are there significant differences after holding age constant among family composition groups in terms of scores on the Interpersonal subscale of the BOS for children with mild disabilities?

On the Interpersonal subscale, scores ranged from -6.50 to 6.51. Table 7 provides the mean scores and standard deviations for each family status group in terms of ratings on this scale. Students from blended families received the highest scores overall, with a mean of .8647, while students from guardian families received the lowest scores overall with a mean of .0989.



-	Type III Sum of		Mean		
Source	Squares	$d\!f$	Square	F	Sig.
Corrected	26.959 ^a	4	6.740	3.224	.014
Model					
Intercept	.001	1	.001	.000	.985
AGE	19.396	1	19.396	9.279	.003
FAMSTAT	6.705	3	2.235	1.069	.363
Error	392.989	188	2.090		
Total	646.577	193			
Corrected	419.947	192			
Total	-2	<u> </u>			

Analysis of Covariance for Adaptive

^a $R^2 = .064$ (Adjusted $R^2 = .044$)

Table 7

Means of Rasch Calibrations Across Family Status Groups for the Interpersonal Scale

Family Status	М	SD
2 parent	.3135	1.35436
Single parent	.2029	1.61636
Blended	.8647	1.32692
Guardian	.0989	1.12025



The results of the analysis show no significant differences at the .05 level among family status groups after holding the age of the subjects constant in terms of Interpersonal scores [F(3,188) = .983, ns]. Table 8 presents the variance of Interpersonal scores across groups and significance values. Age was a significant covariate. Students differed significantly on the Interpersonal scale according to age; however, they did not differ significantly according to family status after holding age constant.

Table 8

	Type III Sum of		Mean		
Source	Squares	$d\!f$	Square	F	Sig.
Corrected	28.849 ^a	4	7.212	3.713	.006
Model					
Intercept	9.710	1	9.710	4.998	.027
AGE	22.003	1	22.003	11.326	.001
FAMSTAT	5.730	3	1.910	.983	.402
T.	265 210	100	1.0.42		
Error	365.219	188	1.943		
Total	111 667	102			
Total	411.007	195			
Corrected	394.068	192			
Total	27	172			
3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	-2	· · · ·	······································		

Analysis of Covariance for Interpersonal

^a $R^2 = .073$ (Adjusted $R^2 = .053$)

Research Question 5

Are there significant differences after holding age constant among family composition groups in terms of scores on the Personal subscale of the BOS for children with mild disabilities?



Table 9 provides the mean scores and standard deviations for each family status group in terms of ratings on the Personal scale. Scores ranged from -5.10 to 6.59. Students from blended families received the highest scores overall, with a mean of .1353, while students from guardian families received the lowest scores overall with a mean of -.6484.

Table 9

Family Status	М	SD
2 parent	2579	1.52277
Single parent	3909	1.39212
Blended	.1353	1.50726
Guardian	6484	1.31533

Means of Rasch Calibrations Across Family Status groups for the Personal Scale

The results of the Analysis of Covariance show no significant differences at the .05 level among family status groups after holding the age of the subjects constant in terms of Personal scores [F(3,188) = .916, ns]. Table 10 presents the variance of Personal scores across groups and significance values. Age was a significant covariate. Students differed significantly on the Personal scale according to age; however, they did not differ significantly according to family status after holding age constant.



	Type III Sum of		Mean	-	
Source	Squares	$d\!f$	Square	F	Sig.
Corrected	24.726 ^a	4	6.181	3.035	.019
Model					
Intercept	25.930	1	25.930	12.731	.000
-					
AGE	18.493	1	18.493	9.080	.003
FAMSTAT	5.596	3	1.865	.916	.434
Error	382.901	188	2.037		
Total	426.001	193			
Corrected	407.627	192			
Total			_		

Analysis of Covariance for Personal

^a $R^2 = .061$ (Adjusted $R^2 = .041$)

Research Question 6

Are there significant differences after holding age constant among family composition groups in terms of scores on the Task subscale of the BOS for children with mild disabilities?

On the Task subscale, scores ranged from -3.94 to 6.22. Table 11 provides the mean scores and standard deviations for each family status group in terms of ratings on this scale. Students from blended families received the highest scores overall, with a mean of .1.1318, while students from guardian families received the lowest scores overall with a mean of .0168.

The results of the Analysis of Covariance show no significant differences at the .05 level among family status groups after holding the age of the subjects constant in terms of Task scores [F(3,188) = 1.725, ns]. Table 12 presents the variance of Task scores across groups and significance values. Age was a significant covariate. Students differed significantly on the Task



scale according to age; however, they did not differ significantly according to family status after holding age constant.

Table 11

	Means of Rasci	h Calibrations A	Across Family	v Status Gro	ups for the	Task Scale
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Family Status	М	SD
2 parent	.3891	1.60873
Single parent	.1331	1.82135
Blended	1.1318	1.81514
Guardian	.0168	1.35952

Table 12

Analysis of Covariance for Task

			Mean		
Source	Type III Sum of Squares	df	Square	F	Sig.
Corrected	46.791 ^a	4	11.698	4.355	.002
Model					
Intercept	14.284	1	14.284	5.318	.022
AGE	31.053	1	31.053	11.562	.001
FAMSTAT	13.902	3	4.634	1.725	.163
Error	504.937	188	2.686		
Total	572.450	193			
	551 729	100			
Corrected	551.728	192			
Total	2			<u>_</u>	

^a $R^2 = .085$ (Adjusted $R^2 = .065$)



DISCUSSION

Much of the research examining problem behavior in children across various family structures has found significant differences, particularly in children from single parent families and children from two-parent families. This study looked at whether there were differences among family groups in terms of social behavioral skills of students with mild disabilities in the classroom as measured by the BOS scale, specifically looking at differences in scores on each of the following six subscales: adaptive, communication, interpersonal, personal, self-management, and task. The results of the Analysis of Covariance after holding the age of the subjects constant showed no significant differences among family groups on any of the six subscales. The covariate of age, however, was significant on each of the six subscales. This suggests that children develop the skills measured by the BOS as they age regardless of the family composition group in which they are raised. An implication that can be drawn from these results for intervention is that, barring other extraneous factors, teachers of children with mild disabilities can expect students of similar age from various family composition groups to attain these skills in the classroom setting at about the same rate and thus plan their social skills training accordingly.

There are many possible explanations for this finding. The measurement tool used in this study was the *Behavioral Objective Sequence* (BOS) rating scale. The BOS measures social behavioral skills and is strength-based rather than deficit-based; the BOS indicates social behavioral skills not yet mastered. Previous studies have used measures that are deficit based or that target problem behaviors. While children from different family composition groups may exhibit different levels and frequencies of problem behaviors, they do not differ significantly in their demonstration of certain abilities or skills in the classroom. These children may develop the



same skills in different contexts. Some may develop good self-management or communication skills by modeling both parents' behavior while others may develop these same skills out of necessity because they help a single parent raise younger siblings. The children also may be learning the social behavioral skills in the classroom. It appears that the interactions and processes within the family may play a larger role than the structure of the family itself (Lansford et al., 2001).

Previous studies have shown significant differences in behavior as reported by parents between children who have spent time in a single parent home and those who have not (Carlson & Cocoran, 2001), while other studies suggest that conflict and the processes occurring in families have more implications for children's well being than divorce or family composition do (Amato & Booth, 2000; Lansford et al., 2001). Specifically, Amato and Booth (2001) found that termination of high-conflict marriage was beneficial for the children. In this study and often in life, labels are placed on families according to one common characteristic, the structure of the family. In this instance, family composition labels did not predict differences in social behavioral skills as measured by the BOS. It appears that social behavioral growth of individual family members, particularly the children, is not limited by the *type* of family they belong to, but rather it is how family members interact with one another in their given circumstances that molds how they will grow and the skills they will develop. The present study included no measure of family cohesiveness, the amount of conflict in the home, or the different processes that occur between family members. This study also had no measure for length of time since the divorce or separation in single parent or step-parent family groups. These different factors can greatly influence social competence and possibly affect scores on the BOS, particularly on items on the



Communication and Self-Management subscales such as "verbally direct feelings of anger at appropriate source" or "touch others in appropriate ways."

Another possible explanation is that the raters for this study were teachers while a majority of the previous research cited used ratings from parents. Children may exhibit very different behaviors and skills in a classroom than they exhibit at home; the classroom is often a well-structured environment with clear expectations. At school they have the added social pressure to fit in to motivate appropriate behavior and the demonstration of appropriate social skills.

Previous studies have shown a connection between family composition and socioeconomic status, with socioeconomic status being a major contributing factor to child well being. Differences across family composition groups are diminished when socioeconomic status is controlled for (Menaghan, 1996). Due to the nature of the BOS as a measure of skills, age was considered to be a major contributing factor to variations in scores and was thus chosen as the covariate instead of socioeconomic status.

The study is also limited by a disproportionate sample. There were 17 participants from 19 blended families, 17 from guardian family groups, 2 from foster families and no participants from adoptive families in comparison to 89 participants from two-parent families and 68 from single parent families. Another study limitation is the degree of variability of ability level within each disability category and across the categories. This study grouped all of these students under the category of mild disability.

This study raises some questions and directions for further research regarding the influence of families on the behavior of or exhibition of different social skills of children with mild disabilities. Among these questions is whether there is a significant difference between



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parent ratings and teacher ratings of these skills and if so, is it due to a true variance in child behavior across settings of home and school, or merely rater biases? Another question raised is whether the amount of conflict in a family or the degree of family cohesiveness would significantly influence how a student with mild disabilities behaves in the classroom. The finding that no significant differences existed between students with mild disabilities from different family composition groups in social behavior in this study can be interpreted as a hopeful sign; students do progress in a developmental sequence and do make continual social behavioral progress in the classroom regardless of family composition.



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