6-25-1996

Correlational study of self-concept, social self-perception, academic self-concept and behavior problems among elementary school children

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CORRELATIONAL STUDY OF SELF-CONCEPT, SOCIAL SELF-PERCEPTION, ACADEMIC SELF-CONCEPT AND BEHAVIOR PROBLEMS AMONG ELEMENTARY SCHOOL CHILDREN

by
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A Thesis

Submitted in partial fulfillment of the requirements of the
Master of Science in Teaching Degree in the
Graduate Division of Rowan College
1996

Approved by

Date Approved June 25 1996

ABSTRACT

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Correlational Study of Self-Concept, Social Self-Perception, Academic Self-Concept and Behavior Problems Among Elementary School Children
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Dr. Randall Robinson
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The purpose of this study was to examine the relationships, if any, between General Self-Concept, Social Self-Perception, Academic Self-Concept, and Behavior Problems among elementary school children. Twenty-two third grade students participated in this study. The Coopersmith Self-Esteem Inventory was used to measure self-concept. Social Self-Perception and Academic Self-Concept were measured by subscales of the Coopersmith Inventory. The Connors' Teacher Rating Scales-39 was used to measure the general dimension of behavior problems. Findings from these two measures indicated a significant positive correlation between General Self-Concept and Social Self-Perception; General Self-Concept and Academic Self-Concept; and Social Self-Perception and Academic Self-Concept. There was, however, an insignificant negative correlation between General Self-Concept and Behavior Problems; Social Self-Perception and Behavior Problems, and Academic Self-Concept and Behavior Problems.

MINI-ABSTRACT

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ACKNOWLEDGMENTS

The author wishes to express her sincere gratitude to the following people who were of invaluable assistance in the completion of this research project:

Dr. Randall S. Robinson, Graduate Advisor, Rowan College of New Jersey, whose patience, guidance and advice brought about the successful completion of this thesis.

Sincere appreciation is also expressed to my cooperating teacher Mrs. Sande Del Colle, and her students for their support and cooperation in making this research possible.

Special thanks to Ms. Kathy Valenti, a member of the Child Study Team in Medford, for her help and guidance.

Finally, I would like to thank my husband, Nagaraj, and my two wonderful children, Madhavi and Rajiv, for their patience, understanding, and encouragement.

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CHAPTER ONE

Scope of the study

Introduction

The enhancement of students' self-concept is valued as a goal of education and as a moderator and perhaps a cause of scholastic achievement (Shavelson and Bolus, 1982). Self-concept, broadly defined, is a person's perceptions of him or herself. These perceptions are formed through the interpretations of one's environment and are influenced especially by reinforcements, evaluations by significant others, and one's attributions for his/her own behavior (Shavelson et. al., 1976).

Social competence has long been regarded as a fundamental aspect of human capabilities. In an early formulation Thorndike (1927) suggested three types of intelligence, one of which was social intelligence or social competence. Assessment of student behavioral problems, social problems and emotional problems in school settings is being viewed increasingly as a valuable venture within the larger process of educating children (Merrell, 1994). Children with behavior problems such as conduct disordered, disruptive or withdrawn behaviors are particularly good targets for social skills interventions as their behavior interferes with successfully developing and maintaining positive relations with others. The quality of social behavior developed during childhood has been found to be strongly associated with a number of important outcomes later in life. Exploration of the behavioral and personality characteristics of children who exhibit

problems with peer relations has emerged as a research priority. Recent research indicates that self-perceptions of social competence may influence interpersonal behavior in ways that affect the quality of peer relations (e.g., Goetz, & Dweck, 1980).

Purpose of the study

The purpose of this study was to determine if there was a relationship between self-concept, self-perceptions of social relationships, academic self-concept, and behavior problems among elementary school children. Self-concept refers to the perceptions, attitudes and feelings we hold about ourselves (Marshall, 1989).

Peers are children of about the same age or maturity level. One of the most important functions of the peer group is to provide a source of information and comparison about the world outside the family. Children receive feedback about their abilities from their peer group. Children evaluate what they do in terms of whether it is better than, as good as, or worse than what other children do. Good peer relations may be necessary for normal social development. Social isolation, or the inability to "plug in" to a social network, is linked with many problems and disturbances ranging from delinquency and problem drinking to depression (Kupersmidt & Simons, Conger, & Wu, 1992).

Self-concept is the overall view that individuals have about themselves, as well as their view of how well they function in specific roles or under certain constraints. Children who early on display strong patterns of antisocial behavior such as aggression toward and harassment of others, are much more likely to carry these negative patterns of behavior into adulthood, along with the increased risk of criminal behavior and incarceration

(Loeber, 1985). Poor self-concept has always been linked with other types of problems such as anxiety, social withdrawal and poor academic performance (Merrell, 1994).

Since children are the future of our society, it is in our best interest to study the relationship between self-concept, peer acceptance, academic self-concept, and behavior problems of elementary school children.

Statement of the problem

Is there a relationship between self-concept, social competence, academic self-concept, and behavior problems in elementary school children? Specifically, do children with high self-concepts get along better with their peers than children with low self-concepts? Do children with high self-concept have a better academic self-concept than children wirh low self-concept? Also do children with high self-concepts display fewer negative behaviors than children with lower self-concepts?

Hypothesis

The following hypotheses were investigated:

1. Students with a high general self-concept score on the Coopersmith Inventory will show a high score on the social self-perception sub-scale of this test. This means that students with a good overall self-concept, also see themselves as having good relationships with their peers or being socially competent.

2. Students with a high general self-concept score on the Coopersmith Inventory will have a low score on the Connors' Teacher Rating Scales-39 which means that students with a good self-concept display more positive behaviors and fewer negative behaviors in the classroom.

3. Students with a high general self-concept score on the Coopersmith Inventory will have a high score on the school-academic self-concept subscale of this test.

This means that students with a good overall self-concept tend to feel good about their performance in school.

Limitations of the study

There were several limitations to this study. One was the limited number of students participating in the study. The population for this study consisted of 22 students in an intact third grade classroom in a New Jersey public school. The subjects were not randomly selected because the researcher was limited to an assigned classroom. Also due to the small number of subjects in the population, the results of this study cannot be inferred to the general population.

Another limitation was related to the interpretation of the questionnaire. The questionnaire items used were subject to the individual student's interpretation. For example, on the self-esteem inventory, the words "often" and "usually" may have been interpreted differently by different students. Also, the participants may or may not have responded honestly to the items in the questionnaire.

Some authors are troubled by teacher rating scales as a source of diagnostic information because they believe that the scales mistakenly give the appearance of objective data by assigning numerical scores to judgments which reflect only "subjective" impressions of teachers (Carey & McDivitt, 1980). More tenable objections are that global rating scales require sufficient knowledge of the child being rated, a criterion not always met, and that they are subject to halo and rater bias effects (Beitchman & Raman, 1979).

Definition of terms

Several key terms used in this study should be fully understood and are defined as follows:

Self-concept refers to the perceptions, attitudes and feelings we hold about ourselves (Marshall, 1989). Self-concept refers to both the overall view that individuals have about themselves, as well as their view of how well they function in specific roles or under certain constraints.

Self-esteem refers to the evaluation which the individual makes and customarily maintains with regard to himself (Perkins, 1975). Self-esteem is the evaluative and affective dimension of self-concept. Self-esteem is also referred to as self-worth or self-image (Santrock, 1994). In this study, the terms self-concept and self-esteem are used interchangeably.

Peer acceptance is defined as how well a person is liked by his peers. Peer acceptance refers to the successful maintenance of positive relations with peer groups. Hymel and Asher (1977) labeled children who received neither positive nor negative nomination from peers as neglected, and those who received several negative and no positive ratings as rejected. Peer acceptance represents and outcome of socially competent behavior.

Behavior problems are defined as those behaviors that are conduct disordered, disruptive, and withdrawn. Children with behavior problems are particularly good targets for social skills intervention as their behavior interferes with successfully developing and maintaining positive relations with others.

Academic self-concept refers to how the student views his or her academic performance in the classroom.

CHAPTER TWO

Related Literature

Introduction

The purpose of this study was to determine if there was a relationship between the self-concept of a child, self-perceptions of social relationships (i.e., popularity or peer acceptance), academic self-concept, and behavior problems in the classroom.

The Importance of Self-Concept

Self-concepts refer to the perceptions, attitudes, and feelings we hold about ourselves (Marshall, 1989). Since self-concepts appear to be vitally linked to individual's psychological well adjustment versus maladjustment, it is little wonder that so many studies have been conducted to enhance individuals' self-concepts, especially during later childhood (e.g., Craft & Hogan, 1985); Parish & Philip, (1982), adolescence (e.g., Hlongwane & Basson, 1990; Wasmund & Brannon, 1987), and adulthood (e.g., Niedenthal & Mordkoff, 1991; Snyder & Wills, 1989). A study was conducted by Necessary and Parish (1991), on a group of second grade students who were assessed on the Nonsexist Personal Attribute Inventory for Children (NPAIC). Then these students were presented the "Let's Get Excited About Life" program, which was found to enhance these students' self-concepts. The present study reassessed these students on the NPAIC

approximately a year later and discovered that the students' self-concepts were still significantly elevated compared to their pretreatment level.

Evidence reported by Asher, Hymel and their colleagues has shown that both loneliness and social anxiety are likely to be elevated among children who are low in peer acceptance, especially rejected children (Asher, Hymel & Renshaw, 1984; Asher, Parkhurst Hymel & Williams,1990; Asher & Wheeler, 1985; Hymel & Franke, 1985;Williams & Asher, 1987). The generally negative picture of unpopular children as anxious, lonely and depressed suggests that these children may also be expected to report low self-concepts. Exploration of the behavioral and personality characteristics of children who exhibit difficulty with peer relationships has become a research priority.

The results of a study by Cooley & Ayres (1988) indicate that pre-adolescent and early-adolescent students with learning disorders have poorer academic self-concepts than their normally achieving peers. This finding was consistent in other studies that focused on academic self-perceptions (Battle, 1979; Chapman & Boersma, 1979; Rogers & Saklofske, 1985). The studies examining the global self-concepts of students with learning disabilities have largely supported the hypothesis that students with learning disabilities have lower self-concept than normally achieving students. Rosenthal (1973) and Griffiths (1975) reported that children identified as dyslexic had poor self-concept scores. However these findings regarding global self-concept are not universally supported. Cooley & Ayres (1988) also found a difference in global self-concept between students with learning disabilities and normally achieving peers but statistical analysis indicated that the difference was largely due to the academic component within the Piers-

Harris measure of self-concept. When this academic component was removed, the self-concept difference disappeared.

Psychologically, it is extremely important that a child feels loved, wanted and accepted by his parents as they are his main source of security. Parental rejection fosters a distorted and devalued self-concept and self-image for the youngster. He frequently attempts to gain acceptance and positive social relationships through a variety of attention-seeking behaviors. The attention-seeking behaviors may be either positive or negative depending on the motivational aspects and the nature of the desired goals (Gerwirtz, 1956). Within a classroom setting, children may fight, kick, bite or display other aggressive or destructive attention-seeking behaviors which are disruptive in attaining pupil success in learning and teacher success in teaching (Dercon, 1962; Peretti, 1980).

Parental rejection jeopardizes the child's feelings of security, undermines their self-esteem and induces feelings of being unloved, unwanted, and unaccepted. The rejection may be overt or covert; it may be characterized by indifference and unconcern for the child's welfare or by active dominance and conspicuous hostility. Results of a study (Peretti, Clark, & Johnson, 1980) indicated a significant influence of parental rejection on negative attention-seeking classroom behaviors.

Peer relations is a critically important factor in child development. A child's interaction with peers provides a context for cognitive development, growth of social skills, the evolution of self-concept, and the establishment of moral and social values (Erickson, 1963; Piaget, 1965). A number of investigators have confirmed that childhood

problems in peer relations are related to serious maladjustment in adulthood (Parker & Asher, 1987). Children who are unpopular with their peers in one setting often continue to have difficulties making friends in the future (Rubin & Mills, 1988).

Although previous studies have found that high ability students generally get along well with their peers, this study (Cornell,1990) investigates high ability students who are unpopular with average and popular groups on measures of achievement, family social status, and personality adjustment. Results showed relatively few difference between average and popular students, but unpopular students are distinguished by lower social self-concept and academic self-esteem, as well as by less prestigious paternal occupations. They did not differ on measures of academic achievement, emotional autonomy or anxiety. These findings suggest that the counseling of unpopular students should focus on their social self-concept and perhaps their social skills rather than on academic ability or general personality.

Merrell (1993) studied the relationship between social behavior as measured by the School Social Behavior Scales (SSBS), and self-concept, as measured by the Self-Perception Profile for Children (SPPC). Subjects were 41 public school students in grades 5 and 6. These subjects were rated on the SSBS by their classroom teachers and also completed the SPPC as a self-report measure. A number of significant positive relationships were found between the social competence scores of the SSBS and the SPPC self-concept scores. The relationship between the problem behavior scores of the SSBS and the SPPC scores were very weak, and the coefficients obtained were not statistically significant.

Self-Perceptions of Social Competence

Research indicates that self-perceptions of social competence may influence interpersonal behavior in ways that affect the quality of peer relations (e.g., Goetz & Dweck, 1980). The assessment of self-perceptions of social behavior seems to make an important contribution to understanding both the development of social self-concept as well as the relationship between self-view and social behavior. Most measures of children's self-concept like the Piers-Harris (1964) Children's Self-Concept Scale, and the Coopersmith (1967) Self-Esteem Inventory include a social subscale assessing children's evaluations of their social relationships or popularity. If social competence is conceptualized as skillful social behavior, then the idea of perceived social competence closely conforms to Bandura's (1977) construct of self-efficacy. Self-efficacy is defined as the belief that we can successfully perform behavior that is needed to produce desired outcomes. Children's self-efficacy was found to vary by grade and situation.

A study conducted by Bender & Golden (1988) compared the adaptive behavior, problem behavior and self-perception of behavior between 54 learning disabled children and 54 non-learning disabled children. Multivariate analysis revealed differences in the first two measures. The groups were different on each subscale of the adaptive behavior, and analysis of the problem-behavior scale showed differences between the groups on three of five subscales. In each case the scores of the learning disabled group were higher indicating less desirable adaptive behavior and more problem behavior in the classroom. Adaptive behavior differs from problem behavior by referring to those aspects of a child's behavior that are adaptive to the demands of the classroom. It includes classroom

behavior, the ability to use language in classroom social situations and socially cope with the demands of the environment (Weller, 1980; Weller &Strawser, 1981).

Many studies have examined the differences between learning disabled and non-learning disabled students' self-perception of behavior (Bender, 1986b, 1987). Generally the results indicate that learning disabled students demonstrate lower scores in self-perceptions of behavior. There should be training programs to prepare teachers to deal with a wider range of behaviors. Only then can mainstreaming be considered a legitimate placement option for disabled children with adaptive behavioral deficits (Bender & Golden, 1988).

Green, Forehand, Beck, & Vosk (1980) examined the relationship among four measures of children's social competence: teacher completed measure of children's social behavior, child's self-report measure, behavioral measure and sociometric measures - and their relationship to an academic measure. The subjects for this study were 116 third-grade students. The results indicated that children with high academic scores were liked by and interacted positively with their peers. Negative peer interaction was not related to the popularity of the student, while positive peer interaction was negatively correlated with peer dislike. Teacher ratings show that teachers can identify the children who are liked and disliked by their peers in the classroom. The child self-report measure showed few correlations with other measures. Recent research indicates that self-perceptions of social competence may influence interpersonal behavior in ways that affect the quality of peer relations (1.g., Goetz & Dweck, 1980).

Until recently, little was known about the self-perceptions associated with problematic peer relations. The evidence so far suggests that children experiencing peer problems tend to display a generally negative pattern of self-perceptions, including low perceived social competence, low self-efficacy, and low expectations for social outcomes and peer evaluations (Hymel & Franke, 1985).

Boivin and Begin conducted a study to evaluate the relations among peer status, self, and other perceptions of social competence among 9 and 11 year old children. Self-esteem, self-perception in various domains and teacher's evaluations were assessed along with peer status. A cluster analysis revealed that rejected children could be assigned to 1 of 2 groups with respect to self-perceptions, one displaying high self-perception and the other low self-perception. In contrast, popular children showed generally positive self-perceptions. Neglected and average children showed no difference in self-perception scores, whereas controversial children displayed lower self-esteem and perceived competence on the academic and behavior/conduct dimensions.

Patterson, Kupersmidt, & Griesler (1990) studied the relations among children's reports about their own competence, objective measures of their competence, and their views of significant relationships with others as a function of sociometric status. Five hundred and fifteen third and fourth grade students responded to questions about aspects of their personal competence and about their relationship with father, mother, teachers and best friends. There were several major findings about children's perceptions of self and of their relationships with significant others. Rejected-aggressive children reported the least supportive relationships with their fathers of any group studied; they also reported the

most conflict with friends. The neglected though not rejected children reported the least companionship from best friends and also the lowest perceived social competence with peers. The subjective reports of rejected-aggressive children significantly overestimated those given about them by other people on both social and behavioral competence. No other group of children consistently overestimated their own level of competence relative to information from other reliable sources. The subjective reports of rejected but not neglected children overestimated their social competence as rated by peers.

Behavior Problems

A relatively large body of literature now exists describing approaches toward educating students with severe conduct disorders. Although a variety of psychoeducational approaches have been applied in a variety of settings, very few writers have addressed the role parents play in the child's response to these varied procedures. Numerous research studies have shown that educational progress was more due to family factors than to educational practices. Murdock (1986) found that children who made the least academic gain in a residential school were those from the most dysfunctional families. The family had a "sleeper effect"; even when the child was away from home he was adversely affected by his family. It has been found that parents of conduct disordered children often display massive pathology themselves. They are so caught up with meeting their own needs that they have little energy to meet their child's needs. Because they have faced years of criticism in their own relationship with their parents, spouses or school authority figures, these parents' self-images are extremely low (Herrenkohl, Herrenkohl,

Toedter, & Yanushefski, 1984; Webster-Stratton, 1985). Murdock (1988) tries to help teachers and new clinicians understand how parents contribute to and maintain their child's aggression.

Two groups of children who experience problems in the area of peer relations can be identified using sociometric nomination procedures (Asher & Hymel, 1981). Rejected children are actively disliked by others and have few friends. Neglected children have few friends but are not disliked by their peers (Gronlund & Anderson, 1957). Concurrent problems associated with rejected status include hyperactivity (King & Young, 1981), antisocial behavior (Hartup, 1983), and academic difficulties (Bryan, 1976). Neglected children on the other hand, are labeled shy by peers (Coie, Dodge, &Coppotelli, 1982), observed to display less aggression (Coie & Kupersmidt, 1983), and engage in more solitary play than other children (Dodge, 1983). Conclusions that rejected children display more severe behavior problems than neglected children are supported by comparisons of behavior ratings of these children. Neglected children were seen as exhibiting no more problem behaviors than popular or average children, and in general, were scored as being less deviant than rejected individuals. The majority of rejected children display aversive and domineering behavior toward peers (Roff, Sells & Golden, 1972).

Social competence has long been regarded as an important aspect of human capabilities. Peer acceptance represents an outcome or a result of socially competent behavior. Social behavior is a broad construct that includes both positive and negative social behaviors. Positive social behaviors (social skills) may lead to desirable social

outcomes, whereas negative social behaviors (e.g., antisocial and aggressive behavior) may lead to negative outcomes (Merrell, 1993a). The quality of social behavior developed during childhood has been found to have important outcomes later in life. Development of good social skills during childhood appears to be correlated with personal, academic and occupational adjustment and success (e.g., Asher & Taylor, 1981; Hartup, 1983;Walker & Hops, 1976), whereas inadequate development of social competence is correlated with such negative outcomes as peer rejection, school dropout, and mental health problems (e.g., Cowen, Pederson, Babigan, Izzo, & Trost, 1973; Roff, Sells & Golden, 1972). Children who early on display patterns of antisocial behavior, like aggression and harassment of others are at an increased risk of carrying this pattern of behavior into adulthood, along with risk of criminal behavior and incarceration (Locker, 1985). Kazdin (1988), has connected the constructs of depression and self-concept, noting that at low self-concept is often a prominent feature of depression.

Academic Achievement and Self-Concept

Numerous research studies have been done relating self-concept measures to academic achievement (Hansford and Hattie, 1982; Skaalvik and Hagtvet, 1990). The majority of studies have found positive correlations between self-concept and academic achievement. Shavelson (1976) reported that self-concept is structured hierarchically and has three identifiable levels. For children and adolescents, at the top is a fairly stable general self-concept; at the middle level are specific sectors of self-concept such as academic self-concept, emotional self-concept, and physical self-concept; at the bottom

level are specific subareas of self-concept such as mathematics self-concepts, science self-concepts, physical appearance self-concepts and peer relations self-concepts.

Results of a study (Crawford, 1979) conducted on 38 third graders showed that a positive correlation did exist between reading achievement and self-concept as measured by the Metropolitan Achievement Test and the Valett My Self Checklist. Hoge, Smit and Crist (1995) conducted a two-year longitudinal study of 322 sixth and seventh graders that compared the three levels of self-concept (high, middle and low) and studied the effects of self-concept on achievement and achievement on self-concept. Influences of self-concept on grades were weak but grades had a modest influence on subsequent discipline-specific self-concepts. The researchers concluded that past correlational studies have overstated the influence of self-concept on grades and of grades on self-concept.

CHAPTER THREE

Procedure and Design of the Study

Introduction

The purpose of this study was to compare the self-concept/self esteem of a child to his/her self-perception of social relationships, academic self-concept, and behavior problems in the classroom. This chapter will describe the procedures followed to gather the data for the study. These include : Description of the population, Description of the instruments, and Research Design and Procedure.

Description of the Population

The population for this study was composed of an intact third grade classroom in a South Jersey public school. There were twenty-five students in the classroom. Twenty-two of the twenty-five students participated in the study. Three students did not participate. There were twelve boys and ten girls among the participants in the study. All the twelve boys were 9 years old. Of the ten girls who participated, two girls were 8 years old and eight girls were 9 years old. All the participants were white, and from middle and upper middle class families. The determining factors of status were the location of their homes and whether or not they were receiving free lunches. None of the children were receiving free lunches and they all lived either in the vicinity of the school which was in a middle class neighborhood, or surrounding upper middle class neighborhoods.

Description of the Instruments

The instrument used to measure self-concept was the Coopersmith Inventory (see appendix A). This self-esteem inventory could be administered to groups or individuals. The school form was used with children or adolescents aged eight through fifteen. Administration time rarely exceeds ten minutes. During administration of the test, introductory or explanatory remarks had to be kept to a minimum. To prevent biased responses which could invalidate the test, the words self-esteem, self-concept, and self-evaluation were not be used.

This self-concept or self-esteem inventory consisted of 50 items which were statements regarding the self. The participant was required to check the box "like me" if the statement described him or her, or "unlike me" if the statement did not describe him or her. If the participant did not understand a particular statement, the examiner could rephrase it using simpler vocabulary or providing further explanation to the statement or word in question. It was strongly recommended that the scoring keys be used since they greatly reduced scoring time and possibility of errors.

The school form included 8 items that constitute the Lie Scale. The Lie Scale items are always scored separately; that is, responses to these items should never be included in the self-esteem score. The four subscales of the school form may be scored separately: they are General Self, Social Self- Peers, Home-Parents, and School-Academic. For the Self-Esteem Inventory, high scores correspond to high self-esteem. A high score on the Lie Scale may indicate that the examinee responded defensively or thought he or she understood the "intention" of the inventory and was attempting to

respond positively to all items. In such instances, the inventory may be invalid if a supplemental observation rating or teacher report indicates low or medium self-esteem for the examinee. Further evaluation was warranted.

The instrument used to evaluate classroom behavior was the Connors' Teacher Rating Scales-39 (see appendix B), a widely used instrument for clinical and research applications with children. This Scale was used to characterize the behaviors of a child and compare them to levels of appropriate normative groups. The Connors' Teacher Rating Scales-39 (CTRS-39) is a 39 item rating instrument completed by the child's teacher. Each CTRS-39 item was rated with one of four responses (not at all, just a little, pretty much, very much). Responses are coded 0, 1, 2, and 3. The CTRS-39 includes scales of : a)Hyperactivity; b) Conduct Problem; c) Emotional Overindulgent; d) Anxious - Passive; e) Asocial; and f) Daydream-Attention Problem. Normative data are reported on a sample of 9583 Canadian children aged 4 years to 12 years. Connors (1969) notes that the teacher has a long period to observe the child in a variety of situations and compare him or her with a standard established from numerous observations of normal children. As teachers spend a large amount of time with children, standardized checklists administered to them would seem to be an efficient method for obtaining information about children's social competence.

Research Design and Procedure

This project was designed to be carried out by the researcher in a student-teaching setting which limited the population to a classroom, thereby also limiting randomization.

The study was conducted in a third grade classroom. The self-esteem of the students was evaluated using the Coopersmith Self-Esteem Inventory.

The researcher began by getting the approval of the school principal and the cooperating teacher to complete the study. The researcher then prepared a letter for the parents of the students in her classroom (see appendix C). This letter explained the importance of self-concept or self-esteem in children and also the significance of the study. The letter also explained the role of the researcher as a student teacher and graduate student. The permission slip attached to the letter was to be signed by the parent and returned with either the permission granted or permission denied. A deadline for a response was provided.

Once permission was granted by the parents, the Coopersmith Inventory was administered to the subjects. The directions given were "Today you will be filling out a questionnaire. Your answers will help me know you and your likes and dislikes better." The words self-esteem, self-concept , and self-evaluation were not to be used, thus helping to prevent biased responses, which may invalidate the test.

The classroom teacher was the rater, who completed a Connors' Teacher Rating Scale -39 for each child participating in the study. The purpose of the rating was to develop an accurate and complete characterization of any problems that the teacher observed in the child. The teacher was encouraged to carefully remember the child in a variety of different situations before making the rating. The rater wrote the child's name and age on the appropriate form and carefully read the instructions before completing the form. The scoring key was underneath the response sheet. The researcher made sure that

the respondent's answers had been recorded properly in t he key sheet and that any ambiguous responses had been resolved.

The raw scores were converted to t-scores and plotted on the form making the profile stand out. In general, t-scores of 65 or greater are considered to be clinically significant. If one is doing routine screening of children generally believed to not have problems in order to identify the "hidden" problem children, it is more appropriate to use a t-score of 70 as indicating problems.

CHAPTER FOUR

Analysis of the Data

Introduction

The purpose of this study was to examine the relationship, if any, between self-concept, social self-perception, academic self-concept, and behavior problems among children in the elementary classroom. This research project examined the following questions:

1. Will the child who has a good general self-concept, also have a high level of social self-perception (i.e., he feels that he gets along well with his peers)?

2. Will the child who has a good general self-concept also have a good academic self-concept (i.e., he feels good about himself regarding his academic achievement in school)?

3. Will the child who has a good social self-perception also have high academic self-concept?

4. Will the child with a good general self-concept have a low incidence, if any, of behavior problems?

5. Will the child with a good social self-concept have a low incidence, if any, of behavior problems?

6. Will the child with good academic self-concept have very few, if any, behavior problems in the classroom?

Interpretation of the Data

In order to examine the relationship between the above variables, the researcher used three subscale scores from the Coopersmith Inventory - the general self-concept score, the social self-peers score, and the school-academic score. To measure problem

behaviors in children, the hyperactivity index from the Connors' Teacher Rating Scales-39 was used. Pearson r was calculated for each set of variables to see if there was a correlation between the variables. The hyperactivity index is a general dimension of problems. Children who score in the problem range in this scale tend to score high on other scales. The high scorer tends to constantly fidget, is easily frustrated, requires that his or her demands are met immediately, is restless or overactive, is excitable or impulsive, is inattentive or easily distracted, fails to finish things, has a short attention span, cries often and easily, disturbs other children, has quick mood changes, and may have temper outbursts.

Table 1 shows the scores for general self-concept and social self-perception as derived from the Coopersmith Inventory which was a self-report measure by the students.

table 1

Correlation between General Self-Concept and Social Self-Perception scores

General Self-Concept	Social Self-Perception
13	1
20	5
8	3
24	6
23	5
11	4
23	7
20	6
18	6
22	8
15	4
26	8
23	7

14	2
17	6
20	5
23	7
16	5
8	3
20	6
15	5
22	8

The Pearson r for the above scores was + 0.807 which meant that the general self-concept and social self-perception were positively correlated. This indicated that a person with a high general self-concept was very likely to have a high score on the social self-perception scale. The correlation coefficient of + 0.807 was statistically significant at the .001 level which indicated that this correlation could occur by chance alone, one time or less in a thousand.

Table 2 shows the general self-concept and school-academic scores from the Coopersmith Inventory.

table 2

Correlation between the General Self-Concept and School-Academic scores

General Self-Concept	School-Academic
13	3
20	7
8	6
24	8
23	8
11	6
23	7
11	6
23	7

20	4
18	6
22	8
15	6
26	8
23	7
14	4
17	5
20	6
23	8
16	5
8	4
20	7
15	4
22	7

The Pearson r for the above scores was + 0.714 which meant that there was a positive correlation between general self-concept and school-academic self-concept. This indicated that a person with a high general self-concept was likely to have a high score on the school-academic scale, meaning that a person with a good self-concept usually felt good about his or her academic progress in school. The correlation coefficient of + 0.714 was statistically significant at the .001 level which meant that this correlation could occur by chance alone, one time or less in a thousand.

Next, the correlation between social self-perception and school-academic self-concept was examined. Table 3 contains scores from the social self-perception and school-academic subscales.

table 3

Correlation between Social Self-Peers and School-Academic scores

Social Self-Peers	School-Academic
1	3
5	7
3	6
6	8
5	8
4	6
7	7
6	4
6	6
8	8
4	6
8	8
7	7
2	4
6	5
5	6
7	8
5	5
3	4
6	7
5	4
8	7

The Pearson r for these two variables was + 0.703 which indicated a significant positive correlation. The correlation coefficient of + 0.703 was statistically significant at the .001 level which meant that this correlation could occur by chance alone, one time or less in a thousand.

The next two variables examined were the general self-concept scores and the hyperactivity index scores. Table 4 displays these scores.

table 4

Correlation between General Self-Concept and Hyperactivity Index

General Self-Concept	Hyperactivity Index
13	13
20	1
8	2
24	7
23	1
11	10
23	1
20	15
18	1
22	3
15	14
26	9
23	11
14	2
17	13
20	11
23	13
16	12
8	5
20	4
15	1
22	1

The Pearson r for the above scores was - 0.012 which was a negative correlation that was not statistically significant. Table 5 shows the scores on the social self-perception subscale and the hyperactivity index.

table 5

Correlation between Social Self-Peers and the Hyperactivity Index

Social Self-Peers	Hyperactivity Index
1	13
5	1
3	2
6	7
5	1
4	10
7	1
6	15
6	1
8	3
4	14
8	9
7	11
2	2
6	13
5	11
7	13
5	12
3	5
6	4
5	1
8	1

The Pearson r was - 0.069 which was not statistically significant. The negative correlation indicated that as one variable increased, the other variable decreased.

The final table, Table 6, shows the scores on the school self-concept and hyperactivity index subscales.

table 6

Correlation between School-Academic score and Hyperactivity Index

School-Academic	Hyperactivity Index
3	13
7	1
6	2
8	7
8	1
6	10
7	1
4	15
6	1
8	3
6	14
8	9
7	11
4	2
5	13
6	11
8	13
5	12
4	5
7	4
4	1
7	1

The Pearson r for the above scores was - 0.228 which was not statistically significant.

In this study, and for the population sampled, a significant positive correlation was found between general self-concept and social self-perception; general self-concept and school-academic self-concept; and social self-perception and school-academic self-concept. A very insignificant negative correlation was found between general self-concept and behavior problems, social self-perception and behavior problems; and school-academic

self-concept and behavior problems. Since the population sample was very small, these results cannot be generalized and further studies on larger populations are recommended.

CHAPTER FIVE

Summary, Conclusions and Recommendations

Introduction

The purpose of this study was to examine the relationships, if any, between general self-concept, social self-perception, academic self-concept, and behavior problems among children in elementary school. Self-concept refers to the perceptions, attitudes and feelings that we hold about ourselves (Marshall, 1989). Social self-perception refers to how the student feels about being liked and accepted by his or her peers. Academic self-concept refers to how the student feels about his or her academic performance in school. Behavior problems are those behaviors that are conduct disordered, disruptive, and withdrawn.

Summary of the Problem

Is there a relationship between self-concept, social competence, academic self-concept, and behavior problems in the elementary classroom?

Summary of the Hypothesis

The hypothesis of this study was that students with a good self-concept will have good peer relations, a good academic self-concept, and will have very few, if any, behavior problems in the classroom.

Summary of the Procedures

The researcher first got the approval of the school principal, classroom teacher, and parents to complete this study. Twenty-two students in an intact third grade classroom participated in the study. The Coopersmith Inventory was the self-concept measure that was administered to the students. The classroom teacher completed the Connors' Teacher Rating Scales-39 for each participant to characterize patterns of student behavior.

Summary of the Findings

An analysis of the data revealed that there was a significant positive correlation between general self-concept and social self-perception, which indicated that students with a good general self-concept also had positive peer relations or were socially competent. There was also a significant positive correlation between general self-concept and academic self-concept which indicated that students who feel good about themselves also feel good about their school work. A significant positive correlation was found between social self-perception and academic self-concept which indicated that students who had good peer relations also felt good about their work in the classroom.

There was a negative correlation that was not statistically significant between general self-concept and behavior problems; social self-perception and behavior problems; and academic self-concept and behavior problems.

Conclusions

From the findings of this study, there appeared to be a significant positive correlation between general self-concept and social self-perception; general self-concept and academic self-concept; and social self-perception and academic self-concept. However, the researcher found that there was a negative correlation that was not statistically significant between general self-concept and behavior problems; social self-perception and behavior problems; and academic self-concept and behavior problems. From these results it can be concluded that for this sample, children with a good overall self-concept perceive themselves as being socially competent and successful in their school work. No conclusions can be drawn regarding the relationship between general self-concept and behavior problems; social self-perception and behavior problems; and academic self-concept and behavior problems, since the correlation coefficient was extremely weak regarding these variables.

Implications and Recommendations

The conclusions drawn from this study imply that self-concept plays a significant role in facilitating success in the academic environment, so the development of a good self-concept in children should be a priority with parents and educators. Further research is needed in the area of behavior problems to see if there is a relationship between behavior problems and self-concept. The researcher recommends that more and varied instruments be used for testing. The Piers Harris Self-Concept Scale is an example of

another instrument for measuring self-concept. The Connors' Parent Rating Scales may be used as another measure of behavior patterns. Self-concept may evolve with different experiences, so pre-testing and post-testing might yield varying information. A larger sampling of students may also lead to more conclusive results.

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APPENDIX A

COOPERSMITH SELF-ESTEEM INVENTORY

Like Me	Unlike Me		
☐	☐	1.	Things usually don't bother me.
☐	☐	2.	I find it very hard to talk in front of the class.
☐	☐	3.	There are lots of things about myself I'd change if I could.
☐	☐	4.	I can make up my mind without too much trouble.
☐	☐	5.	I'm a lot of fun to be with.
☐	☐	6.	I get upset easily at home.
☐	☐	7.	It takes me a long time to get used to anything new.
☐	☐	8.	I'm popular with kids my own age.
☐	☐	9.	My parents usually consider my feelings.
☐	☐	10.	I give in very easily.
☐	☐	11.	My parents expect too much of me.
☐	☐	12.	It's pretty tough to be me.
☐	☐	13.	Things are all mixed up in my life.
☐	☐	14.	Kids usually follow my ideas.
☐	☐	15.	I have a low opinion of myself.
☐	☐	16.	There are many times when I'd like to leave home.
☐	☐	17.	I often feel upset in school.
☐	☐	18.	I'm not as nice looking as most people.
☐	☐	19.	If I have something to say, I usually say it.
☐	☐	20.	My parents understand me.
☐	☐	21.	Most people are better liked than I am.
☐	☐	22.	I usually feel as if my parents are pushing me.
☐	☐	23.	I often get discouraged at school.
☐	☐	24.	I often wish I were someone else.
☐	☐	25.	I can't be depended on.
☐	☐	26.	I never worry about anything.
☐	☐	27.	I'm pretty sure of myself.
☐	☐	28.	I'm easy to like.
☐	☐	29.	My parents and I have a lot of fun together.

Short ☐

Like Me	Unlike Me		
☐	☐	30.	I spend a lot of time daydreaming.
☐	☐	31.	I wish I were younger.
☐	☐	32.	I always do the right thing.
☐	☐	33.	I'm proud of my school work.
☐	☐	34.	Someone always has to tell me what to do.
☐	☐	35.	I'm often sorry for the things I do.
☐	☐	36.	I'm never happy.
☐	☐	37.	I'm doing the best work that I can.
☐	☐	38.	I can usually take care of myself.
☐	☐	39.	I'm pretty happy.
☐	☐	40.	I would rather play with children younger than I am.
☐	☐	41.	I like everyone I know.
☐	☐	42.	I like to be called on in class.
☐	☐	43.	I understand myself.
☐	☐	44.	No one pays much attention to me at home.
☐	☐	45.	I never get scolded.
☐	☐	46.	I'm not doing as well in school as I'd like to.
☐	☐	47.	I can make up my mind and stick to it.
☐	☐	48.	I really don't like being a boy / girl.
☐	☐	49.	I don't like to be with other people.
☐	☐	50.	I'm never shy.
☐	☐	51.	I often feel ashamed of myself.
☐	☐	52.	Kids pick on me very often.
☐	☐	53.	I always tell the truth.
☐	☐	54.	My teachers make me feel I'm not good enough.
☐	☐	55.	I don't care what happens to me.
☐	☐	56.	I'm a failure.
☐	☐	57.	I get upset easily when I'm scolded.
☐	☐	58.	I always know what to say to people.

Gen	Soc	M	Sch	Total	L

APPENDIX B

CONNORS' TEACHER RATING SCALES - 39

CONNERS' RATING SCALES

Child Name:_____ **Child Age:**____ **Child Sex:**_____ **Teacher:**_____

CTRS-39

				A	B	C	D	E	F	I	
0	1	2	3								1
0	1	2	3								2
0	1	2	3								3
0	1	2	3								4
0	1	2	3								5
0	1	2	3								6
0	1	2	3								7
0	1	2	3								8
0	1	2	3								9
0	1	2	3								10
0	1	2	3								11
0	1	2	3								12
0	1	2	3								13
0	1	2	3								14
0	1	2	3								15
0	1	2	3								16
0	1	2	3								17
0	1	2	3								18
0	1	2	3								19
0	1	2	3								20
0	1	2	3								21
0	1	2	3								22
0	1	2	3								23
0	1	2	3								24
0	1	2	3								25
0	1	2	3								26
0	1	2	3								27
0	1	2	3								28
0	1	2	3								29
0	1	2	3								30
0	1	2	3								31
0	1	2	3								32
0	1	2	3								33
0	1	2	3								34
0	1	2	3								35
0	1	2	3								36
0	1	2	3								37
0	1	2	3								38
0	1	2	3								39
			Total	A	B	C	D	E	F	I	

CONNERS' RATING SCALES

Child Name:_____ **Child Age:**____ **Child Sex:**____ **Teacher:**_____

Instructions: Read each item below carefully, and decide how much you think the child has been bothered by this problem during the past month.

CTRS-39

Not at All	Just a Little	Pretty Much	Very Much	
				CLASSROOM BEHAVIOR
0	1	2	3	1. Constantly fidgeting
0	1	2	3	2. Hums and makes other odd noises
0	1	2	3	3. Demands must be met immediately - easily frustrated
0	1	2	3	4. Coordination poor
0	1	2	3	5. Restless or overactive
0	1	2	3	6. Excitable, impulsive
0	1	2	3	7. Inattentive, easily distracted
0	1	2	3	8. Fails to finish things s/he starts - short attention span
0	1	2	3	9. Overly sensitive
0	1	2	3	10. Overly serious or sad
0	1	2	3	11. Daydreams
0	1	2	3	12. Sullen or sulky
0	1	2	3	13. Cries often and easily
0	1	2	3	14. Disturbs other children
0	1	2	3	15. Quarrelsome
0	1	2	3	16. Mood changes quickly and drastically
0	1	2	3	17. Acts 'smart'
0	1	2	3	18. Destructive
0	1	2	3	19. Steals
0	1	2	3	20. Lies
0	1	2	3	21. Temper outbursts, explosive and unpredictable behavior
				GROUP PARTICIPATION
0	1	2	3	22. Isolates him/herself from other children
0	1	2	3	23. Appears to be unaccepted by group
0	1	2	3	24. Appears to be easily led
0	1	2	3	25. No sense of fair play
0	1	2	3	26. Appears to lack leadership
0	1	2	3	27. Does not get along with opposite sex
0	1	2	3	28. Does not get along with same sex
0	1	2	3	29. Teases other children or interferes with their activities
				ATTITUDE TOWARD AUTHORITY
0	1	2	3	30. Submissive
0	1	2	3	31. Defiant
0	1	2	3	32. Impudent
0	1	2	3	33. Shy
0	1	2	3	34. Fearful
0	1	2	3	35. Excessive demands for teacher's attention
0	1	2	3	36. Stubborn
0	1	2	3	37. Overly anxious to please
0	1	2	3	38. Uncooperative
0	1	2	3	39. Attendance problem

Not at All | Just a Little | Pretty Much | Very Much

CONNERS' RATING SCALES

Child Name: _____ Child Age: _____ Teacher's Name: _____

	A. Hyperactivity				B. Conduct Problem				C. Emotional-Indul.				D. Anxious-Passive				E. Asocial				F. Daydream-Attn.				I. Hyperactivity Index				
	3/	6/	9/	12/	3/	6/	9/	12/	3/	6/	9/	12/	3/	6/	9/	12/	3/	6/	9/	12/	3/	6/	9/	12/	3/	6/	9/	12/	
T	5	8	11	14	5	8	11	16	5	8	11	14	5	8	11	14	5	8	11	14	5	8	11	14	5	8	11	14	T
100+					35+	36+	37+												14+				12						100+
99					34	35			23+	22+	23+											12						26+	99
98							36										13+	13+											98
97					33	34	35		22												10+								97
96						33				21	22								13									25	96
95					32		34								18								11						95
94					31	32	33		21	20	21							12				11						24	94
93																	12												93
92	51				30	31	32		20						17	16			12		9							23	92
91	50				29	30	31			19	20	24	18	18						15									91
90	49																	11					10			30		22	90
89	48		51		28	29	30		19	18	19	23			16	17	11					10		12					89
88			50			28	29						17	17					11	14						29			88
87	47	51	49		27			39	18		18	22																21	87
86	46	50	48		26	27	28	36		17						16		10			8					28	00		86
85	45	49	47			26		37				21	16	16	15		10			13			9	11		27		20	85
84	44	48	45		25		27		17		17								10			8					29		84
83	43	47	44			25	26	36		16		20				15										26	28	19	83
82	42	46	43		24			35	16		16		15	15	14					12									82
81	41	45	42		23	24	25	34		15		19					9	9			7					25	27	18	81
80	40	44	41	51		23	24	33								14			9				8	10		24	26		80
79	39	43	40	50	22			32	15		15		14	14	13							8							79
78	38	42	39	49	21	22	23	31		14		18								11						23	25	17	78
77	37	41	36	48		21	22		14		14					13	8	8								22	24		77
76	36	39	37	47	20			30		13		17	13	13	12				8					9				16	76
75	35	38	36	45		20	21	29												10	6		7			21	23		75
74	34	37	35	44	19		20	28	13		13	16				12						7					22	15	74
73	33	36	34	43	18	19		27		12			12	12	11		7	7							30	20			73
72	32	35	33	42		18	19	26	12		12	15							7	9				8	29	19	23	14	72
71	31	34	32	41	17		18	25		11			11	11		11									28				71
70	30	33	31	39		17		24				14			10							6	6		27	15	20		70
69	29	32	30	38	16	16	17		11		11						6	6			5				26		19	13	69
68	28	31	29	37	15		16	33		10		13	10	10		10			6	8				7	25	17			68
67	27	30	28	36		15		22	10		10														24	16	18	12	67
66	26	29	27	34	14	14	15	21				12			9										23		17		66
65	25	28	26	33	13		14	20		9	9		9	9		9		5		7		5	5			15		11	65
64	24	27	25	32		13		19	8			11					5		5		4			6	22		16		64
63	23	26	24	31	12		13	18		8					8										21	14	15	18	63
62	22	24	23	29		12	12		8		8	10	8	8		8				8					20	13			62
61	21	20	22	28	11	11		17										4							19		14		61
60	20	22	21	27	10		11	16	7	7	7	9			7		4		4			4	4	5	18	12	13	9	60
59	19	21	20	26		10		15					7	7		7				5					17	11			59
58	18	20	19	24	9	9	10	14		6		8									3				16		12	8	58
57	17	19	18	23			9	13	8		8				6										15	10	11		57
56	16	18	17	22	8	8		12				7	6	6		6	3	3	3					4	14			7	56
55	15	17	16	21	7		8	11	5	5	5									4		3	3		13	9	10		55
54	14	16	15	18		7	7					6			5										12	8	9	6	54
53	13	15	14	16	6	6		10		4			5	5		5	2	2		3	2				11				53
52	12	14	13	17	5		6	9	4		4	5													10	7	8		52
51	11	13	12	16		5	5	8					4		4				2				2	3	9			5	51
50	10	12	11	14	4	4		7	6	6	3			4								2			8	6	7		50
49	9	11	10	13			4	6				4				4				2					7	5	6	4	49
48	8	9	9	12	3	3	3	5		2	2		3		3		1	1							6				48
47	7	8	8	11	2	2		4	2			3		3					1		1			2	5	4	5	3	47
46	6	7	7	10			2									5						1			4		4		46
45	5	6	6	6	1	1	1	3	1	1	1	2	2	2						1		1			3	3		2	45
44	4	5	5	7				2							2		0	0							2	2	3		44
43	3	4	4	6	0	0	0	1			0	1				2			0					1	1	2			43
42	2	3	3	5				0	0	0			1	1						0					0	1		1	42
41	1	2	2	3							0				1						0	0	0				1		41
40	0	1	1	2												1										0	0	0	40
39		0	0	1									0	0										0					39
38				0											0														38
37																0													37
36																													36
35																													35
34																													34

CTRS-39: Male Profile Form

Child Name:_____ Child Age:_____ Teacher's Name:_____

T	A. Hyperactivity 3/ 5	6/ 8	9/ 11	12/ 14	B. Conduct Problem 3/ 5	6/ 8	9/ 11	12/ 14	C. Emotional-Indul. 3/ 5	6/ 8	9/ 11	12/ 14	D. Anxious-Passive 3/ 5	6/ 8	9/ 11	12/ 14	E. Asocial 3/ 5	6/ 8	9/ 11	12/ 14	F. Daydream-Attn. 3/ 5	6/ 8	9/ 11	12/ 14	I. Hyperactivity Index 3/ 5	6/ 8	9/ 11	12/ 14	T
100+	44+	48+	47+		26+	25+	25+										12+	13+			10+		10+			26+	25+	14+	100+
99																						10+							99
98	43	47	46						23+	19+									12+	11+						25	27		98
97					25	24	27				19+						12											13	97
96	42	46	45					39	22														8				26		96
95	41	45	44		24	23	26	36		18																			95
94	40	44	43					37			16						11				9					24			94
93		43	42			22	25		21																		25		93
92	39	42		51	23			36		17									11	10		9				20		12	92
91	38		41	50			24	35	20		17	24		18	18		11										24		91
90	37	41	40	49	22	21		34																		22			90
89		40	39	48			23			16	16	23					10						8	12			23		89
88	36	39	38	47	21	20		33	19					17	17				10		5					21			88
87	35	38		46			22	32				22	18					10				8					22	11	87
86	34	37	37	45	20	19			18	15	15					9													86
85			36	44			21	31				21		16	16		9							11		20	21		85
84	33	36	35	43	19	18		30	17	14	14	20	17			18		9	9				7		30	19	20	10	84
83	32	35	34	42			20	29						15	15						7								83
82	31	34	33	41	18	17			17	13	13	19	16			8				8		7		10	29	18	19		82
81	30		32	39	17		18	27						14	14		8								28				81
80	29	32	31	38		16		26				18	13			17										17	16	9	80
79	28	31	30	37	16		17		15					14	14			8							27				79
78		30	29	36		15		25		12	12	17				16			9		6		8	9	26	16			78
77	27	29		35			16	24	14				14	13	13		7										17		77
76	26	28	28	34	15	14		23				16				15				7		6			25			8	76
75	25		27	33			15			11	11							7	7						24	15	16		75
74		27	26	32	14	13		22	13				13	12	12									8					74
73	24	26	25	31			14	21				15				14									23	14	15		73
72	23	25	24	30	13			20	12	10	10						8				5		5		22			7	72
71	22	24		29		12	13					14	12	11	11	13		6	6	6		5				13	14		71
70	21	23	23	28	12			19	11															7	21				70
69			22	27		11	12	18		9	9	13	11												20	12	13		69
68	20	22	21	26	11			17						10	10	12												6	68
67	19	21	20	25		10	11		10	8		12					5		5						18		12		67
66	18	20		24	10			16			8		10			11		5			4		4	6	18	11			66
65		19	19	23		9	10	15	9			11		9	9					5		4					11		65
64	17		18	22	9					7															17	10			64
63	16	18	17	21		8	9	14			7	10	9			10	4								16		10	5	63
62	15	17	16	20	8			13	8					8	8			4	4					5		9			62
61		16	15	19			8	12		6	6	9	6												15		9		61
60	14	15		18		7			7					7		9				4	3		3		14	8			60
59	13	14	14	17	7		7	11				8			7							3					8	4	59
58	12		13	16		6		10		5	5		7			8	3	3	3					4	13	7			58
57		13	12	15	6		6	9	6			7		6											12		7		57
56	11	12	11	14		5									6														56
55	10	11		13	5		5	8	5	4	4	6	6			7					2	2	2		11	6	6	3	55
54	9	10	10	12		4		7						5						0					10				54
53			9	11	4		4	6				5			5	6	2	2	2					3		5			53
52	8	9	8	10					4	3	3		5												9		5		52
51	7	8	7	9	3	3	3	5				4		4											8	4		2	51
50	6	7	6	8				4	3				4		4	5											4		50
49		6			2	2	2	3		2	2	3					1	1	1	2				2	7	3			49
48	5	5	5	7										3		4					1	1	1		6		3		48
47	4		4	6	3	1	1	2	2				3		3													1	47
46	3	4	3	5				1		1	1	2													5	2	2		46
45		3	2	4	0	0	0		1					2		3		0						1	4				45
44	2	2		3				0				1	2		2		0		0							1	1		44
43	1	1	1	2					0	0	0					2				1	0				3			0	43
42	0	0	0	1								0	1	1								0	0		2	0	0		42
41				0											1									0					41
40																1									1				40
39													0	0											0				39
38															0	0				0									38
37																													37
36																													36
35																													35
34																													34

CTRS-39: Female Profile Form

APPENDIX C

March 29, 1996

Dear Parents,

I am currently a student teacher in Mrs. Del Colle's classroom. As a graduate student at Rowan College, I am writing a research paper about the importance of self-concept in children. Self-Concept refers to the perceptions, attitudes and feelings we hold about ourselves. This research project investigates whether there is a relationship between self-concept of children, peer relations, and a child's success in the classroom. The instrument used to investigate self-concept will be the Coopersmith Inventory, a nationally normed instrument. I would like your permission to have your child participate in this research project.

As a participant, your child will be required to complete the Coopersmith Inventory. The information from this questionnaire will be very valuable to my research project. You can be assured that your child's responses will be kept confidential. If you have any questions or concerns, please feel free to contact me at the school.

Please return the attached permission slip by April 4, 1996. Thank you for your time and cooperation.

Sincerely,

Malthi Lingaraju

Name _____

_____ I do wish my child to participate in the research project.

_____ I do not wish my child to participate in the research project.

Signed _____

VITA

Name:	Malthi Lingaraju
Date and Place of Birth:	October 25, 1954 Bangalore, India
Elementary School:	St. Francis Xavier's School Bangalore, India
High School:	Sacred Heart Girls High School Bangalore, India
College:	Mount Carmel College Bangalore, India B.A. (Hons) Political Science
Graduate School:	Bangalore University Bangalore, India M.A. Political Science 1975
	Rowan College of New Jersey Glassboro, New Jersey M.S.T. - Elementary Education 1996