

**Well-Being of Institutionalized Children:
A Comparative Study on Parental Deprivation**

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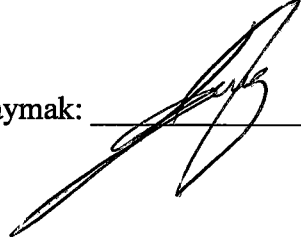
Binnur Kurtlar Meşic



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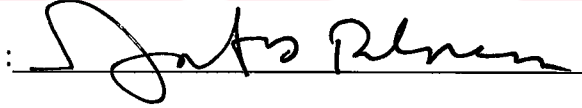
Assoc. Prof. Deniz Albayrak-Kaymak:
(Thesis Advisor)



Prof. Sevda Bekman
(Committee Member)



Assoc. Prof. Fatoş Erkman
(Committee Member)



September 2000

EL. ... KURULU
BOKHMANIAYON MERKEZİ

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ABSTRACT

Well-Being of Institutionalized Children: A Comparative Study on Parental Deprivation

by

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This causal-comparative research examined the effects of early parental deprivation on emotional and behavioral problems, peer relations, self-concept, and school achievement of institutionalized children. Participants of this study were 71 (34 female, 37 male) children from institutions, and 71 (35 female, 36 male) children from intact families. They were elementary school students from grades third to fifth. As negative indicators of well-being emotional and behavioral problems were measured by externalizing, internalizing, and total problem scores of the Teacher's Report Form (TRF) and aggressive/disruptive and sensitive/isolated scores of the Revised Class Play (RCP-T). Sociability/leadership scores of the RCP-T, self-concept scores obtained from the Piers-Harris Children's Self-Concept Scale (WIFAM), adaptive functioning ratings of the TRF and standardized cumulative grade point averages as well as academic performance ratings of the TRF were the positive indicators of well-being. A structured interview was developed to obtain demographic information about children and their families. Two-way analysis of variance was used to examine effects of parental deprivation and gender. Results indicated that children who live in institutions had lower school achievement and adaptive functioning, but higher self-concept, externalizing, and sensitive/isolated problems in comparison to their peers from intact families. There were no differences in sociability/leadership, aggression/disruption and internalizing problems between

the two groups. Finally, there was no differential effect of parental deprivation due to gender. However, institutionalized females had higher levels of internalizing problems than institutionalized males. It seemed that the teacher (TRF and GPA) and self assessments (WIFAM) distinguished the institutionalized and intact groups more than the peer (RCP-T) assessments (254 words).



ÖZET

Kurumda Yaşayan Çocukların Durumu:

Anne-Baba Yoksunluğu Üzerine Karşılaştırmalı Bir Çalışma

Bu nedensel-karşılaştırma desenli araştırma anne-baba yoksunluğunun yurtda yaşayan çocukların duygusal ve davranışsal sorunları, arkadaş ilişkileri, öz-kavramları ve okul başarısı üzerindeki etkisini incelemiştir. Araştırmaya 71'i (34'ü kız, 37'ü erkek) çocuk yuvasında, 71'i (35'i kız, 36'sı erkek) ailesinin yanında yaşayan çocuklar katılmıştır. Bunlar üç, dört ve beşinci sınıflarda okuyan ilköğretim okulu öğrencileridir. Öğrencilerin durumlarının olumsuz göstergesi olarak Öğretmen Bilgi Formu'nun dışsallaştırma, içselleştirme ve toplam sorun puanları ve Sınıf Oyunu'nun davranışsal ve duygusal sorunlar kullanılmıştır. Sınıf Oyunu'nun sosyallik/liderlik puanları, Piers-Harris Çocuklarda Öz Kavramı Ölçeği'nden elde edilen öz-kavramı puanları, TRF'nin uyumlu davranış derecelendirmeleri, standardize edilmiş yıl sonu ders notu ortalamaları ile TRF'nin akademik başarı derecelendirmeleri öğrencilerin durumlarının olumlu göstergeleri olarak alınmıştır. Çocuklar ve aileleri ile ilgili demografik bilgileri toplamak için yapılandırılmış bir görüşme geliştirilmiştir. İki yönlü varyans analizleriyle anne-baba yoksunluğunun ve cinsiyetin etkileri incelenmiştir. Sonuçlar, kurumlarda yaşayan çocukların ailelerinin yanında yaşayan çocuklara oranla daha düşük okul başarısı ve uyumlu davranış fakat daha yüksek öz-kavramı, dışsallaştırma ve duyarlılık/yalıtlanma sorunları olduğunu göstermiştir. Sosyallik/liderlikte, saldırganlık/bozgunculukta ve içselleştirme sorunlarında iki grup arasında fark bulunmamıştır. Son olarak, anne-baba yoksunluğunun cinsiyete göre farklı etkisi olmadığı görülmüştür. Ancak, kurumda yaşayan kızların içselleştirme sorunları kurumda yaşayan erkeklerden daha yüksektir.

Öğretmenlerin (TRF ve ders notları) ve çocukların kendi (WIFAM) değerlendirmelerinin kurum ve ev çocuklarını akran (RCP-T) değerlendirmelerinden daha fazla ayırdığı izlendi (208 sözcük).



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Chapter I

INTRODUCTION

The aim of this study is to investigate the long term effects of early parental deprivation for institutionalized children in Turkey. The influence of early parental deprivation on children from different ages has been investigated in various areas of development. Several studies show that early deprivation have significant influences on children's physical, psychological, emotional and social development, either temporary or permanently.

One of the most damaging events of early childhood is the infant's deprivation from his/her parents due to death or abandonment. Unlike others, this loss can not be compensated by adequate substitute care. But in all forms of parental deprivation, including parental neglect, rejection and hostility, children feel unloved and their self-esteem and self-confidence are adversely affected (Herbert, 1974).

Retrospective studies of separation and loss effects at different times in childhood have indicated that children of middle childhood may be the most vulnerable group to later difficulties in life, because this age group respond with the greatest difficulty to institutionalization, either in a children's home or with foster parents (Tennant, 1982, cited in Goodyer, 1990).

Many studies indicate that maternal deprivation has the biggest influence on children's personality development. Absence of mothering from birth or at least from two months of age leads to lack of development of the desire or the capacity for interpersonal relationships. Therefore, the child reacts by apathy, passive withdrawal, and denial towards the invitations of adults to communication. Some studies indicate that the most unbearable situation for a child is to experience some period of

mothering early in life and then separating from her. Such a child often has anxiety and violent paranoid hostility, and actively repulses the mothering contact (Caplan, 1951).

Although, maternal deprivation is the most influential loss in a child's life, some studies state that the father's absence could become significant later in life. Especially, in socialization of one child, fathers become models for various roles, such as man role, father role or husband role. Therefore, without father, the child would not learn these roles properly (Nagera, 1981; Phares, 1992).

Short-term and the long-term effects of parental (especially maternal) deprivation have been investigated in many studies. Short-term effects are observed in children as distress and developmental retardation. On the other hand, long-term effects are observed as intellectual retardation, antisocial behavior, delinquency, and indifference, and psychopathic personality (Herbert, 1974).

Bowlby (1979, cited in Schaffer, 1991) emphasized the future relationships of children with maternal deprivation. He stated that a break in the continuity at the mother-child relationship in the early years (stage of the development of child's social responses) might result in more or less permanent impairment of the ability to build relationship with people.

Developing successful relations with peers has been considered the most important psychological task of childhood. Cohn (1990) indicated that children, who had secure and continuous relations with parents or caregivers during childhood, would approach other children with positive expectations and with sense of confidence. However, children who did not have secure and continuous relations with parents or caregivers would approach their peers by negative expectations and lack of confidence.

Marcus (1991) emphasized that quality of relations with attachment figure has an influence on children's adaptation in school. School adaptation and achievement problems were more common among children who did not have secure attachment with their caregiver, and who did not receive love from them. On the other hand, children who feel more secure with their parents or caregiver, receive positive approaches and experience more physical and emotional love from them had fewer school adjustment and achievement problems.

The first five years of life are considered critical for children. Physical, psychological, emotional and social development starts in these ages and continue in adulthood. If one experiences a trauma during this period, such as parental deprivation due to loss or separation, his/her development could be affected adversely leading to problems later in life (Rutter, 1981).

This research is designed to investigate the impact of parental deprivation on institutionalized children's social and emotional well-being, namely, emotional and behavioral problems, sociability, self-esteem and school achievement. Elementary school children are the population of interest in this study. Such research might help us understand the difficulties and needs of these children in life.

A Brief History of Child Protection Institutions in Turkey

Protection of needy children has a particular importance in our history. Although parents are seen as the primary protectors of children, the government has this responsibility for parents if parents are not available. Child protection institutions were opened for protection of children who did not have adequate family care, due to parental abandonment or death.

Before the establishment of the Turkish Republic, the first legal institutions and foundations were opened by private enterprises that intended to help children who suffered. In 1873, Mithat Pasha opened some institutions to give occupational education for those children. Darüleytam and Darüşşafaka institutions were opened in the same year to care and educate children of inadequate parental income (Çağlar, 1982).

Himaye-i Etfal Association was opened by Atatürk's wish in 1921 to protect children who lost their parents during the Independence War. This institution was named Turkish Children Protection Institution in 1935. Laws and regulations were passed by the government to protect children who stay in these institutions. This institution was reorganized under the name of "General Directorate of Social Services and Child Protection" in 1983 (Ballar, 1988).

Currently, there are 43 institutions for children between 0-12 years of age, and 81 institutions for these between 13-18 years of age in Turkey. Seven of these for younger children and 4 of these for older children are in İstanbul. All these institutions are dependent on the General Directorate of Social Services and Child Protection (Oktay, 1988).

Beside this center-based approach, a protective family approach was adapted in 1961. This new method is considered better, because it gives institutionalized children an opportunity to learn the family atmosphere and become a part of it. These families do not have to adopt children, but care for them for certain periods of time. Because their responsibilities are limited, several families apply to become protective families of one or two children. They visit with and take the child from the institutions in the determined days and share their family atmosphere with them. Another approach is adoption. This approach has some difficulties. Families want to

adopt children when they are infants, but not many infants are available. Therefore, this approach serves only a small number of children. Unfortunately, these two approaches are not commonly used in our community (Bıyıklı, 1983).

Many studies indicate that although institutions protect children from external danger, providing a shelter for children is not sufficient. Because of the poor quality of care in these institutions, children have low levels of development in physical, social, emotional, and cognitive domains when compared to children who live with their parents (Yörüköğlü, 1985).

Alternatives or additional services to the child protection institutions have been suggested. These include improvement of the institutional systems, such as decreasing the number of children in each institution to allow for smaller grouping of children, allocation of trained personnel, regularly observing, evaluating and supervising institutions and encouraging the use of protective family, and adoption. The environment in the institution has to be made similar to the home environment (Oktay, 1989).

For Bowlby (1965, cited in Bowlby, 1973) these institutions should be such that groups are small enough, and well organized, and led by group mothers who are educated to meet the needs of these children.

Overall, one can say that child protection institutions in Turkey have many limitations and problems to provide adequate care. Their educational system needs to be reformed so that they could provide healthy and adequate care and education for protection of children who need adult support.

Chapter II

REVIEW OF LITERATURE

Attachment and Parental Deprivation

“Unhappiness in a child accumulates because he sees no end to the dark tunnel. The thirteen weeks of a term might just as well be thirteen years” (Bowlby, 1973, p. 3).

Separation is an undesirable, distressful and destructive experience in individuals' lives. Losing somebody who is loved causes some problems in one's life. Adults who experience separation could secure themselves from its long-term effects and force themselves to turn to realities of daily life. Children, on the other hand, are not as successful as adults in coping with separation are. Several studies indicate that mother is an essential variable in one child's life and her loss affects the child in many negative aspects.

Bowlby (1969) studied children's reactions to temporary separation or permanent loss. According to his attachment theory, infants form bonds with their primary caregivers by sucking, clinging, following, smiling and crying. The quality of the mother-child attachment in the first years has great influence in infant's later life. If a mother and child have continuous and consistent relation, the child develops trust toward his/her mother and the world. Similarly, if the mother is temporarily absent or permanently lost, the child is able to direct his/her attachment behavior towards other subsidiary figure or figures, such as father, older siblings, grandmother, grandfather or other relatives. If the child's interaction with the subsidiary figure is consistent and continuous, the child might develop trust toward his/her environment. It is observed that children, who develop secure attachment

with their mothers or subsidiary attachment figure, form relationships easily with others. Nevertheless, those children who have insecure attachment with their mothers or subsidiary attachment figure have difficulties in building relationships.

Besides the maternal separation, paternal separation is also studied. For a child, the father figure is needed as an object of love, security and identification. Heinicke and Westheimer (1965) observed that during the first week of paternal separation, nursery children's common reaction to father visit was to show affection and cry during his departure. However, after the second week of paternal separation children showed less affection to their father and cried less when he left the nursery. In, the third week of separation, they showed lack of response to the father's visit and leave. Bowlby's (1973) study with a two years old girl showed that she rejected her father who ignored to visit her in hospital. So it could be said that paternal separation does influence children's lives, although it may not as strong as maternal separation.

Iwaniec (1996) emphasized the quality of the attachment beside its consistency. She observed emotionally abused and neglected children, and stated that if the baby's basic needs (regular feeding, keeping in a warm and clean place, regular changing and washing, providing calm and peaceful nurturing atmosphere and helping for distress or discomfort) are not provided, the child's health, growth and well-being will suffer. These children are observed to be withdrawn, lethargic, apathetic and depressed. They also develop self-stimulating behaviors such as rocking, head-banging and pulling out hair. They often sit or lie motionless or are irritable. Thus, a weak and insecure bond between parents and children affects the child's later relationships adversely.

Bowlby (1973) studied the length of deprivation and its influence on children. Effect of separation from mother can be similar to the effects of smoking or

radiation. Effect of small doses may not appear dangerous, but they have cumulative effects. Thus, both short and long terms of separation have negative effect on children's lives.

Difference in reactions of children from different ages to temporary and permanent separation from the parents were investigated by Freud (1926, 1960, cited in Nagera, 1981), Anna Freud and Burlingham (1942, 1943, cited in Nagera, 1981), Spitz and Wolf (1946, cited in Nagera, 1981), Mahler and Bowlby (1960, cited in Nagera, 1981). Freud (1926, cited in Nagera, 1981) pointed out that the child can not distinguish between the temporary absence and permanent loss. He added that adult mourning in children is not possible until adolescence. Similar to Freud, Wolf (1958, cited in Nagera, 1981) believes that it is not possible to observe similar adult comprehension of death before the ages of ten or eleven. However, in contrast to Freud and Wolf, Bowlby (1960, cited in Nagera, 1981) states that the reaction of infants, when separated from important objects (loved one), is identical with the adult reaction of mourning. Agreeing with Bowlby, Furman (1964, cited in Nagera, 1981) believes that a two to three and four year-old is capable of understanding the meaning of the death and has the capacity to mourn like an adult.

It is generally believed that children can easily overcome and forget the experience of death. However, studies indicate the opposite. While an adult gets over the grief by adapting to the new situation, a child can not make this adaptation easily because he/she can not understand the death concept and its finality as an adult (Nagera, 1981).

It could be concluded that there is a controversy between theorists on the capacity of children to mourn after death. However, at least one thing that was

accepted by all theorists is that early parental deprivation adversely influences children's lives either temporary or permanently.

Short-term and Long-term Effects of Parental Deprivation

Influences of early separation are searched in two categories: immediate or short-term effects that occur immediately after the separation or parental loss and long-term effects that show its influences on children some years after the separation or loss.

Short-term effects have mostly been observed on children who stayed in hospitals or residential nurseries. Studies show that children's first reactions to their parents' departure were crying, acute distress and resistance. These responses were followed by hostile behavior, a breakdown in sphincter control, eating and sleeping disturbances, thumb and finger sucking, developing a cold, and possessiveness of material objects (Heinicke & Westheimer, 1965).

Long-term effects of separation or loss have been searched deeply. Separation from mother is itself an essential variable in determining the child's behavior and emotional states. Heinicke and Westheimer (1965) emphasized the first three months as critical in children's lives. When separation continued for longer than three months (as in permanent loss), the observed behaviors were sadness, withdrawal, disinterest and rejection of the outside world.

Emotional and Behavioral Problems

Several studies were conducted to explore the effects of parental deprivation on the emotional and behavioral development of children. Some of these studies were more specific than others, focusing on certain types of problems. These are reported later in this section after the studies that provide a broader examination.

One of the studies with a general look was conducted by Healy, Malley and Steward (1990, cited in Phares, 1993) who examined the importance of paternal involvement and gender on development of school age children. Children who were separated from or lost their fathers constituted the sample of this study. The maternal reports were used to obtain data about children. Results indicated that girls who had frequent and regular visits with their fathers showed low levels of behavior problems, whereas boys who had regular visits with their fathers showed high levels of behavior problems.

In their follow-up study Elizur and Kaffman (1982) investigated the influence of paternal loss on children's (age between 2 to 10) behavioral changes during the period of 3 ½ years after the loss. Subjects were 25 normal kibbutz children whose fathers died in the war. Psychiatric interviews and psychological tests were administered to all children. The most important finding in interviews with the mother and the child's teacher was the marked severity and prolonged course of the postbereavement emotional reactions. Over 40% of the children showed clinical evidence of pathological bereavement characterized by severe behavior problems and marked impairment in social functioning. On the other hand, only a minority of children did not show overt signs of emotional disturbance during the follow-up period.

Ainsworth (1980, cited in Iwanic, 1996) and Steinhauer (1983, cited in Iwanic, 1996) observed children who were separated from their parents due to maltreatment and have been given to foster-homes or to hospitals. They stated that neglected and rejected children did not show distress when they were separated from their parents. They did not discriminate between known and unknown persons, and they were making contact with anybody after separation. Their behaviors were

Almost all children develop some specific fears, such as darkness, some animals, and imaginary creatures. While some fears keep children away from objectively dangerous situations, other childhood fears disappear over time and could be considered as a normal developmental phenomenon. Those fears that are excessive and prevent children from following age appropriate pursuits, called phobia, such as dog phobia, school phobia, and water phobia (Ross, 1980).

In psychoanalytic approach anxiety and fear are closely related. Freud, (1926, cited in Bowlby, 1973) argued that danger situation is a recognized, remembered, expected situation of helplessness. Freud regards fear as a state of helplessness, and states that it is childish to yearn for the presence of a loved figure and to be anxious or distressed during her/his absence. He sees this situation not only childish, but also on the borderland of pathology.

Freud, (1926, cited in Bowlby, 1973) claimed that a real danger is a danger that threatens the person from an external object. So, whenever anxiety is about a known danger, it could be regarded as “realistic anxiety.” On the contrary, whenever anxiety is about an unknown danger, it can be regarded as “neurotic anxiety.” Since almost all children are afraid of some situations, such as being alone and darkness, they all are held to suffer from neurosis.

Bowlby (1973) discussed three distinct propositions about fear. First, when an individual is confident that an attachment figure (mother) will be available to her/him whenever s/he desires it, that person will be much less prone to either intense or chronic fear than an individual who has no such confidence. The second proposition concerns the sensitive period during which such confidence develops. It indicates that confidence in the availability of attachment figures, or lack of it, builds up during infancy, childhood, and adolescence and whatever expectations are

most children, who had separation experiences, recover and resume normal development.

According to Klein (1948, cited in Bowlby, 1973) anxiety develops from the child's complete dependence on the mother for the satisfaction of needs and the relief of tension. Differently than Freud, she defined neurotic anxiety as a consequence of the infant's apprehension that the loved mother has been destroyed or is in danger of being destroyed by her/his sadistic impulses, and this fear contributes to the infant's feeling that she will never return.

In Bowlby's view, (1973) however, the impact of separation on neurotic anxiety is not significant, because fear and anxiety are aroused in many kinds of situations. So, missing someone who is loved and longed for is just one of the keys we need for understanding of anxiety, and that particular form of anxiety to which separation and loss give rise is not only common but leads to great and widespread suffering. Bowlby believes that if the mother figure (who is important figure for secure attachment) departs or can not be found the child becomes anxious until she/he finds the mother. In case of maternal deprivation, the child develops separation anxiety, which could have negative influence on her/his emotional development and future relationship with adults.

Anna Freud (1952, cited in Bowlby, 1973) stated that the children's ties to their mothers are not only due to secondary drives. Children do not need to have an emotional tie to their mother, and they would not object a "replacement" as long as their physiological needs become satisfied. Children would develop anxiety at separation from mother or caregiver, because they are afraid that their physiological needs will go unmet.

dependency, conduct or oppositional disorders, mood and anxiety disorders, and adolescent disorders. Responses of girls and boys were similar.

Another study dealt with the effects of parental separation on children's behavioral problems (Lambert, Essen, and Head, 1977, cited in Schaffer, 1991). Their sample consisted of 16,000 children (between 7 to 11 years old) who had been taken to public care for a period, which was spent either in a children's home or in a foster home. For comparison, the target group (foster home children) was matched with their peers who never received any public care. Data were obtained from a standardized questionnaire by teachers and reports from public centers' authorities. Results of teacher reports on foster home children indicated more "outgoing" (antisocial) behaviors rather than "ingoing" (neurotic) behaviors. Information that was taken from the authorities of public care centers also indicated this trend for the target group.

Anxiety, fear and phobias. Freud (1963, cited in Bowlby, 1973) defined anxiety as an "automatic reaction to danger." He claimed that missing someone who is loved and longed is the key to understanding of neurotic anxiety. After a painful separation experience from the mother who gives basic security and love, the child's libido goes unsatisfied and he/she develops anxiety. So, the neurotic anxiety of adults is a reaction of the ego system towards the similar situation. Moreover, he claims that experiences of separation and loss, occurring recently or years before, play a big role in the origin of many clinical conditions.

Burlingham and Freud (1942, 1944, cited in Bowlby, 1973) made some links among anxiety, despair, and detachment and states of anxiety and depression that occur in adult years. They believe that whenever someone's emotional state gets disturbed it negatively affects the person's later life. However, studies indicate that

unstable, after the separation either they were clinging to their foster-mothers or showing some negative behaviors like screaming, fear, apprehension, and rigidity. Moreover, they appeared frightened, anxious and insecure so they were unable to move freely to explore the environment in an organized and purposeful way. Thus, maltreatment during infancy produces an insecure attachment and adversely affects the child's later intellectual and socio-emotional development.

Early maternal deprivation, due to hospitalization may have negative influence on children's emotional life. Bowlby, Ainsworth, Boston, and Rosenbluth (1956, cited in Schaffer, 1991) conducted a research which included 60 children in between ages 7 to 14 years who experienced prolonged separation from their homes. For purposes of comparison a control group was selected from the children's classmates, matched for age and sex. During the separation, contact with the parents was at most once a week, and there was no substitute mother in the hospital. The data for the follow-up were derived mainly from reports by teachers and educational psychologists. Results showed that there was a difference between the two groups. The observed long-term effect on target group were emotional maladjustment, including behavior problems and delinquency.

Similarly, Rutter (1979, cited in Sugawara, 1991) indicated that behavioral disorders associated with maternal death, when compared to studies on hospital admission and divorce are relatively weak.

In the 15-year longitudinal study of Fergusson, Horwood and Lynskey (1994) the influence of parental separation on adolescents' behavior problems were investigated. Subjects were 935 adolescents who were separated from their parents in early childhood. The results showed that children who were exposed to early parental separation developed serious adolescent problems, including substance abuse or

developed during these periods tend to persist relatively unchanged for the rest of life. The third proposition concerns the role of actual experience. These are real fearful events that one can always experience such as attack, kidnapping, or rape. It is claimed that the varied expectations of the accessibility and responsiveness of attachment figures are tolerably accurate reflections of the experiences those individuals have actually had.

Children, with anxious attachment in the early childhood, mostly develop school refusal and some social phobias. Children who are said to have separation anxiety may be afraid of losing their parents by death or abandonment and to reduce their fear they refuse going to school or other places without parents. This condition should not be confused with school phobia, because those children's fear is not what will happen in the school, but leaving home (Ross, 1980).

Agoraphobia, which is considered one kind of social phobia, is closely linked to school phobia. Children with agoraphobia have a fear of going in a place filled with other people. Studies indicate that children with anxious attachment and children with agoraphobia have some common problems, such as anxiety attacks, depression, over-dependence and psychosomatic symptoms. Finally, it is found that a significant number of agoraphobic patients refused to go to school as children (Ross, 1980).

Children who are raised in loveless, authoritative or over-permissive, punitive and disinterested family, might develop more anxiety, depression, withdrawn and psychosomatic problems, but develop less autonomy and self responsibility. On the other hand, children who are raised in democratic, supportive, interested family, develop high self-esteem, self-confidence, and self-reliance personality. Studies indicate that children, who had insecure attachment with their mothers, are not able

to develop self-confidence, but have dependent personality (Heinicke and Westheimer, 1965).

Conduct disorders. Broken homes have frequently been stressed as an important contributing factor in the development of conduct disorders. In comparison with non-deviant children, children with conduct disorders more frequently come from homes that have been disrupted by desertion, divorce, death, and absence of the father. Cross-cultural studies have found that in societies where father's effective presence is minimal, there is presence of high rate of theft and personal crime (Bacon & Barry, 1963, cited in Quarry & Werry, 1973).

In their excellent review of family interaction and juvenile delinquency Peterson and Becker (1965, cited in Quarry & Werry, 1973) suggest that both the cause of disruption and the conflict preceding separation must be considered in evaluating the effects of broken homes. In general, death of a parent seems less damaging than separation by divorce or separation following a period of strife.

The effect of parental absence, with subsequent institutionalization, have been related to conduct disorders in children, (Yarrow, 1961, cited in Quarry & Werry, 1973). Goldfarb (1945, cited in Quarry & Werry, 1973) did a comparative study of children. A group of children was reared in institution for the first three years of life and then placed in a foster home and another group was reared in foster home since infancy. Children were between 3-1/2, 6-1/2, 8-1/2 and 12 years of old. Compared to the other group the institutionalized children were more impulsive and inhibited, as manifested in temper tantrums, lying, and stealing; they showed more unpredictable cruelty and aggression to peers, adults, and animals; and they made more demands for attention and affection from adults. It was speculated that the lack of feeling and consideration for others demonstrated by those children at all ages is

based on the lack of early attachment to a specific caretaker. It is added that these children do not show appropriate guilt or anxiety following transgressions or unprovoked demonstration of hostility.

Depression and withdrawal. Depressive reactions are relatively rare in childhood, or at least depressed children do not come to the attention of clinics as other types of child disorders. A common view is that a major precipitant of depressive reactions is a loss of some kind, usually involving the physical or psychological withdrawal of another person (Quary & Werry, 1973).

Harris and Bifulco (1986, cited in Parkes, Hinde & Marris, 1991) studied the influence of early parental loss on depression in adulthood. Sample consisted of 225 women in age between 18 to 65. Among them 139 had lost a mother before age 17 (78 by death and 61 by separation of at least 1 year, with 91 of these also lost father). A further 41 had lost only a father. In addition, 45 women with broadly similar demographic characteristics without loss of either parent were selected to act as a comparison group. Data collected by semi-structured tape-recorded interviews, which encouraged the women to tell their own story with additional probing questions to ensure all items were covered. Interviews (who had undergone an extensive training) subsequently rated the respondents on a series of ordinal scales on the basis of the tape-recorded material. Results indicated that depression in the year of the study was more prevalent among those with loss of mother before age 11 than among those with no loss of mother. Those losing a mother between 11 and 17 had a raised, but not quite as high, rate of depression. For those losing only a father, depression was no more likely if that loss was by death, but evidence for the effect of separation from the father alone was more difficult to interpret, showing a trend which failed to reach statistical significance.

Crook and Elliot (1980, cited in Sugawara, 1991) found only weak associations between parental death in childhood and risk for later adult depression. Similarly, Laajus (1984) collected evidence that psychiatric disorder, depressive illness or predisposition to psychotic or neurotic depression were common in adults who bereaved before the age of 10 to 14 years. There was also a consistent relationship between separation and psychiatric illness for all age groups.

Child depression became the subject of detailed examinations in recent studies. Among these, Handford, Mattison, Humphrey and Laughlin (1986) examined the influence of loss of parents (death, divorce or separation) on development of depressive syndrome in children. The sample included 8 to 16 years old boys and girls who entered a residential school in the early 1982. Fifty percent of children came from divorced parents, twelve percent of children had a natural parent with a new partner, eleven percent of children had a widowed parent, ten percent of them had a parent who was never married, and only one child came from an intact family. Children Depression Inventory (CDI), Revised Children's Manifest Anxiety Scale (RCMAS), and Child Behavior Checklist (CBCL) were used. Results indicated that children who had experienced parent death, divorce or separation had more anxiety, depression and behavioral problems. In addition, observations showed children with depression had poor adjustment to residential school.

Separation resulting from parental death or divorce might also produce child disturbances with depression-withdrawal features. Eerdewegh and colleagues (1982, cited in Goodyer, 1990) conducted a comparative study of randomly selected children between ages 2 to 11 who lost one of their parents. These children were compared, at the time of 1 and 13 months after the loss, with their peers (matched by age and sex) who did not suffer such a loss. At first month there were signs of

depressive mood in over three-quarters of the bereaved children compared with one third of the non-bereaved controls. By 13 months, however, the reactions in the bereaved group were considerably diminished, and depressive symptoms were rare, although disinterest in school occurred in some adolescents. The results indicate that for many children the immediate consequences of bereavement may be severe but endure a relatively short duration. The duration of bereavement, however, depends on the quality of relationships antedating the loss and the subsequent relationships in the child's life.

The effects of separation from parents are confounded with the effects of living in an institutional setting by Spitz (1946, cited in Quay & Werry, 1973). He reported a study in which a constant environment was maintained for the infants except for the temporary withdrawal of the mothers. Infants of unwed mothers were kept in a nursery and their mothers were encouraged to spend considerable time with their children. From a sample of 123 infants (who were 6-10 months) who were observed during the first year of life, 19 were reported to have developed a clear-cut syndrome of depression-withdrawal. This reaction occurred when their mother had to be away from them for about three months. The reaction began about 4-6 weeks after the mother left, and the availability of a substitute mother did not help much in most cases. He reported that the infants returned to their normal state when their mothers returned.

Psychosomatic disorders. Many researchers formed a link between psychosomatic disorders and family interaction. Purcell and his colleagues (1969, cited in Quay & Werry, 1973) reported a study where family interaction variables strongly contribute to asthma in children whose attacks are frequently precipitated by emotional reactions. Parents of 60 asthmatic children were interviewed with respect

to the frequency of asthmatic attacks and were asked whether emotional reactions were important in instigating attacks. The selection procedure resulted in 13 families in which emotional factors were important and 12 families in which they were not important. These families then participated in an experiment where children were exposed to five different situations, each lasting two weeks: qualification period (no mention to children of separation from parents), pre-separation period (children were given information of separation), separation period, reunion period, and post-reunion follow-up. During separation, the entire family, except for the asthmatic child, moved out of the home, and lived in a motel. A substitute mother was provided to live with the child. Various measures of asthma were obtained during all these periods. Results showed a dramatic drop on all of the measures of asthma during the separation period for the group of children for whom the emotional factors played an important role. In the group of children for whom emotional factors were considered unimportant, only one variable, adult reported frequency of attacks, was significantly affected by separation.

Friedman and Kennedy (1960, cited in Alloway, Pliner & Kramers, 1975) argued that majority of individuals with anxious attachment, suffer also from a wide variety of other emotional problems including psychosomatic symptoms, for instance loss of appetite, stereotypes, insomnia, asthma, tics, obesity, enuresis and encopresis.

Quary and Werry (1973) stated that stereotypes, which occur in all infants and toddlers, are more frequent and persist longer in children (institutionalized, retarded, blind and psychotic) who receive less stimulation.

In cases of enuresis Bakwin (1961, cited in Quary & Werry, 1973) found a positive family history as evidenced by social disorganization, such as broken homes, mother-child separation and maternal incompetence.

Social Relationships

The first feature of the child's social world is the mother, father and his/her family. The mechanisms and processes involved in socialization, and children's relationships to previous individual and family experience, can provide important insights into child development and the genesis of some forms of developmental psychopathology, involving interpersonal difficulties and disturbances of emotions and behavior (Goodyer, 1990).

Although peer relations have received relatively little attention compared with those of mother-infant and family relations, it has been viewed as the most important psychological tasks of childhood. Failure in developing successful relations with peers in childhood is considered as a major risk factor for long-term difficulties in adjustment. However, successful peer relations help children develop social competence during childhood. For example, children who are rejected by their peers have been more aggressive, disruptive, and more likely to become delinquent and to drop out of school as adolescents. On the other hand, popular children are seen as cooperative leaders in the peer group and are not likely to develop later adjustment problems (Coie, 1990, cited in Cohn, et. al, 1991).

Family background and recent life events are considered as potential contributions to peer rejection in childhood. Especially, separation from parents due to divorce or death negatively affects children and their peer relations. Rutter (1975, cited in Patterson, Vaden & Kupersmidt, 1991) found that aggressive children often came from families in which there was much conflict, little affection, inconsistent discipline and divorce or separation of the parents.

Meshot and Leitner (1993) investigated the impact of death threat and parental loss on interpersonal style in a study with experimental and control group

design. The experimental group was composed of 20 young adults between 18 to 27 years old (10 females and 10 males) who had lost parent in the age between 12 to 18 years. The control group consisted of 22 young adults (20 females, 2 males) whose ages ranged from 18 to 22 years old. The parents of the group members were married and had never been divorced or separated. Interpersonal Repertory Grid (IRG) and Threat Index (TIP) were used to define Fundamental Interpersonal Orientation-Behavior (FIRO-B). The results indicated that the experimental group had significantly higher scores on the Wanted-Affection Scale of the FIRO-B as compared to the control. Thus, they tended to exhibit a strong interpersonal style marked by a desire to be included and noticed. For the Wanted-Affection Scale of the FIRO-B, the experimental group males scored higher than control group males, but experimental group females scored lower on the same scale than female control group members. Experimental group had lower death threat scores than the control group. No evidence was found for the role of death threat in mediating the impact of loss of one's interpersonal relationship.

Hetherington's study (1972) investigated the effects of father absence due to divorce or death on adolescent girls. Subjects were three groups of 24 lower and lower-middle-class, firstborn adolescence girls aged 13-17. They regularly attended a community recreation center. The first group was coming from intact families, the second group was from father absent families due to separation and the child had minimal contact with the father following the separation. The third group was father absent families due to death. None of the father-absent families had males living in home since separation from the father occurred. Observational measures of girls' behavior in the recreation center; measures of their nonverbal behavior in interacting with a male or female interviewer; ratings based on a structured interview with

daughters (the scale concerned with feminine interests, female friendships, positive attitude to the feminine role, security around female peers, female adults, male peers, and male adults, perceived restrictiveness-permissiveness of mother, conflict with mother, closeness to mother, similarity to mother, similarity to father, positive attitude to father, warmth to father, competence of father, masculinity of father, control of family, decision making of father, conflict with father before separation, disturbance at separation, close relation with any available adult male, and self esteem), ratings based on a structured interview with mothers (the scale concerned about child-rearing practices and attitudes toward her daughter, herself, and her spouse), scores on the California Personality Inventory Femininity Scale, the Internal-External Control Scale, the Manifest Anxiety Scale and the Draw-a Person Test were used in order to obtain data. Results indicated that disruption in interaction with males (attention and proximity seeking, early heterosexual behavior, various forms of nonverbal communication) occurred in subjects whose fathers were absent due to the separation or loss. Among this group, girls who separated from their fathers due to the divorce sought more attention from male adults and initiated more proximity seeking and physical contact with male peers and with male interviewer than girls who separated from their fathers due to the death. In contrast, subjects from the intact families did not show any of these behaviors. In addition, the father absent groups were divided into those who lost their fathers before age 5 and those who lost them later. Results indicated that early paternal separation had more severe effects than late separation. Lack of constructive interaction with a loving, attentive father has resulted in apprehension and inadequate skills in relating to males. This was seen in interview with male interviewer particularly. Girls from

early separated group due to the separation or loss showed high anxious behaviors, such as nail biting, hair, lip, and finger pulling.

Impact of mother-infant interaction on infant's sibling and peer relationships was investigated by Vandell and Wilson (1987, cited in Sugawara, 1991). Subjects consisted of 26 second-born infants who had 3 to 6 years old siblings. Each infant was observed at 6 1/2 and 9 1/2 months of their lives during the free play sessions of mother-infant, sibling-infant and peer-infant interaction. All sessions were videotaped and coded by teams of observers. Results indicated that the infants' interactions with their mothers during play sessions influenced the infants' subsequent interactions with their siblings and peers. Infants, who had secure attachment with their mothers during the play session, showed secure and comfortable interactions with their siblings and peers as well.

In times of family disruption due to death or separation, children often look to peers for emotional support and companionship. Freud and Dann (1951, cited in Sugawara, 1991) observed a group of children whose mothers had been killed in the war by the Nazis. These children were reared in a ward for motherless children at a concentration camp, and developed strong bonds with each other. These children evidenced no rivalry, jealousy or aggression amongst themselves. They became very upset when they were separated from one another, even for short period of time.

Anger and difficulties in future relationships. Anger is one of the responses toward separation from a loved person. Anger and aggressive behavior occur with or without function. In several papers Bowlby (1973) stated that anger is raised after loss, in children as well as in adults. When loss is permanent, anger and aggressive behavior occur without function. The bereaved person does not believe that the loss is really permanent, and he/she still tries to find the lost person, when his/her effort

fails anger is directed against the lost person and against other people who were related to the lost person.

Robertson (1952, cited in Bowlby, 1973) filmed one hospitalized child who were two and a half years old. During the hospitalization, most of the time she was crying and calling her mother. Some months after returning to home, she was angry especially toward her mother who came to take her from the hospital. She was looking reproachfully at her mother and she demanded “where were you mummy?” Here, the child was having dysfunctional anger within anxiety. Dysfunctional anger occurs whenever a person becomes so intensely angry with his/her partner that the bond between them is not strengthened, but instead, alienated. Clinical experiences indicate that especially in prolonged and repeated separation dysfunctional anger increases.

Heinicke and Westheimer (1965) studied residential nursery children between thirteen to thirty two months of age. They observed that children who were separated from their parents, displaced their aggression by hitting dolls during play time. After six weeks the separated children returned to their homes. Observations indicated that the majority of them were still behaved with hostility, especially towards mother.

Similarly, Anna Freud, Robertson and Rosenbluth (1961, cited in Heinicke and Westheimer, 1965) pointed out the frequency of hostile behavior such as “senseless destruction of toys, furniture, attacks on other children, biting and soiling” among the children who were deprived from their parents. They observed a close relation between aggressive behaviors of these children and their feeling of guilt and anxiety.

A child who experiences permanent or terminal loss of his/her parents first develops intense hostility toward them and, then generalizes this hostility toward other people. First, the child rejects all interactions that come from adults, and seeks new relations. If he/she finds people who love him/her as real parents, he can develop relations with them. However, since he/she has difficulty in finding a balance in his/her relations, he/she becomes “self centered” in these relations. Self-centered attitude leads to two inescapable results: child’s experience of rejection from others, and increased hostility in child’s life (Bowlby, 1980).

Overdependency or anxious attachment. “The child is all the more clinging the more it has an inner conviction that separation will repeat itself” (Burlingham & Freud, 1944, p. 237, cited in Bowlby, 1973). Clinging behavior either literally or figuratively can be seen at every age. Many adjectives were used to describe clinging, such as jealous, possessive, greedy, immature, over dependent and strong or intensely attached (Bowlby, 1973).

Burlingham and Anna Freud (1942, 1944, cited in Bowlby, 1973) had observed children who were between two and four years and stayed in residential nurseries since they were seventeen months. These children formed over dependency to a young nurse who had successfully looked after them. For instance, these children would not allow their nurse to handle other children or they were becoming intensely depressed when their nurse was absent for some reason. However, some children were unusually prone to become hostile towards their nurseries or reject them, or else to retreat into a state of emotional detachment.

Bowlby (1973) observed two children. One of them was separated from her affectionate mother at seventeen months and developed well in the nursery. During his stay in the nurse he formed very strong attachment with two nurseries. Although

he was otherwise a well-adjusted, active and companionable child, his behaviors become impossible where these attachments were concerned. He was clinging, over-possessive, and continually demanded something. These reactions stopped when his favorite nurse was absent for short periods. He was then quiet and impersonal. The other example was a two years old boy. When he came to the institution he was five months. During his stay in the institution he formed very passionate relationships with two nurseries. One of these attachments that he formed was suddenly broken at two years eight months when his nurse married. He was completely lost and desperate after her leaving, and refused to look at her when she visited him a fortnight later.

According to some traditionalists, these children became spoiled by taking too much attention and they were allowed too much in their own way. By contrast, since leaving home these children subjected to too many changes of mother figure and had too limited access to a nurse who was acting as their mother figure (Bowlby, 1973).

Ijzendoorn and Wolff (1997) conducted a meta-analysis including eight studies on the association between paternal sensitivity and quality of infant-father attachment among middle-class families. Results indicated that fathers were not as sensitive attachment figures as mothers and thus infants were not as securely attached to their fathers as they were to their mothers. In addition, mothers' secure attachment with their children was disrupted by fathers in some families.

Marcus (1991) investigated the impact of the quality of parental attachment on children behavior problems and school achievement. Subjects of this study were 52 foster children (23 girls and 29 boys), who had lived in foster homes at least for 1 month, children was 7 years, 11 months and their natural and foster parents. Foster

parents completed the Parent/Child Reunion Inventory measuring the “quality of reunion behavior” following separation. Foster mothers also completed the Child Behavior Checklist, and measures of adult empathy were collected from both foster parents. Foster care workers rated the quality and intensity of attachment between the child and all parents. Finally, foster children were interviewed concerning their social supports, perception of affection from adults, and the quality of their relationships with adults and friends. The results showed that there was a clear and consistent correlation between measures of attachment and affection and child adjustment. Internalizing type of problems were negatively correlated with workers’ ratings of the quality of the child’s attachments to the foster mother and to the natural mother, with secure attachments to the foster mother (foster parents’ ratings), and the child’s perceived physical affection from both foster parents. Children with fewer internalizing behavior problems showed better quality relationships with foster parents, but attachment strength was unrelated to problems. Internalizing problems correlated positively with insecure attachment to the foster parents. Externalizing type of behavior problems were negatively related to secure attachment to the foster mother and marginally related to perceived affection from both foster parents. Finally, school achievement was positively correlated with insecure attachment to both foster parents.

The importance of attachment to caregivers in early life and its influence on normal socialization have been studied by many researchers. Rutter (1981 cited in Goodyer, 1990) pointed out that although no clear theory or consensus on the relative importance of the links between attachment and friendship-making exists, there is reason to believe that the psychological similarities in close ties between persons share similar features at all ages.

Individual differences in caregiver responsiveness and sensitivity to infant needs influence later relationships outside the family, because parents who are responsive to their infants are able to provide a secure base to explore the environment. A child who is encouraged to develop autonomy, but who can feel confident that his/her emotional needs will be met, will be more likely to approach peer relations and adult relations with a sense of confidence and self-efficacy. More specifically, children who have formed secure attachment relationships develop a “working model” of the parent as responsive. As compared to children with insecure attachment relationships, securely attached children will be more likely to have positive expectations about peer responses to them and will be more likely to elicit positive responses from them (Mueller & Silverman, 1989, cited in Cohn, Patterson & Christopoulos, 1991).

Lynn and Sawrey (1991) investigated the impact of father absence on children’s peer relations. Subjects consisted of 40 father absent mother-child pairs in the experimental group and 40 father present mother-child pairs in the control group, each consisting equal number of girls and boys. Children who were between the age of 8 and 9-1/2, were given a projective test (Structured Doll Play) and asked to draw a picture of the family. Mothers, on the other hand, were administered a semi-structured interview. Results indicated that father present boys and girls showed more adequate peer adjustment than father-absent boys and girls. Father-absent boys showed poorer peer adjustment than father absent girls. However, father-absent girls showed a larger proportion of dependency to their mothers than father-absent boys.

Cohn (1990) investigated the association between maternal attachment and peer social competence. Subjects were 89 children (42 male and 47 female) and their mothers. The age of the children was 6. During the summer following kindergarten,

quality of attachment was assessed from reunion episodes following a 1-hour separation. Measures of sociometric status, peer behavior nominations, and peer liking ratings were collected. Teachers completed liking ratings and ratings of behavior problems and competence. Consistent with longitudinal studies of infants attachment and peer relations, insecurely attached boys were less well liked by peers and teachers, were perceived as more aggressive by classmates, and were rated by teachers as less competent and as having more behavior problems than were their secure peers. No such associations emerged for girls.

Similar to the findings reported above, longitudinal studies on Ainsworth's Strange Situations consistently showed connections between the quality of infant-parent attachment relations and the quality of children's social interactions with their peers for the first five years of life. Securely attached infants engaged in more positive interactions with their peers (Cohn, 1991).

Longing for approval and love. An important long-term effect of early parental deprivation is that children develop a strong wish to be loved and approved. This is because they lost the most important source of their support, love and approval of their parents and they wish to be loved and to be approved by other people. If they can not get these needs met, they become disappointed and develop serious emotional problems (Heinicke and Westheimer, 1965).

Early relations between a child and his/her parents are very important in providing role models for the child in his/her future life. Love can only be felt but not taught. A child who had experienced early parental deprivation, may have difficulty in giving and receiving love in future relationships (Bowlby, 1980).

After observing the institutionalized children and their relationships with others, Aubry (1950) concluded that these children wait for approval and

unconditional love from the caregivers, and had difficulties in giving love in their relationships.

Self-Esteem and Self-Concept

Personality develops early in life within a family environment where the child receives support, protection, comfort and love. When his/her parents provide these positive experiences, the child develops a strong ego and becomes capable of maintaining integration and self-regulation during the periods when no support is available. Such a child approaches the world with confidence. On the other hand, children who experience parental deprivation due to separation, loss or abandonment show some difficulties in developing strong ego system. They believe that they are not wanted and not lovable (Bowlby, 1980).

Family system is also considered as an important factor that affects children's self concept development. Heinicke and Westheimer (1965) claimed that children who are raised in democratic, supportive, interested family develop high self-esteem, self-confidence, and self-reliance. However, children who are raised in antidemocratic, indifferent family and who had insecure attachment with their mothers, are not able to develop self-confidence. Heinicke and Westheimer (1965) stated that "the child's feelings of well-being and self-esteem are highly dependent on the ever-present admiration and acknowledgment given in the context of basic acceptance, in the presence of parents." In case of abandonment, the child is in desperate effort to overcome the feeling of unloved and left which might seriously affect his self-concept and self-esteem.

Fleming (1972, cited in Bowlby, 1980) stated that self-confidence, self-esteem, and pleasure in independence develop out of trust and confidence in others. This trust is built during infancy and childhood through experience of mothering.

During these years, children build up expectation of how attachment figures are likely to behave towards them in various situations, and they build self-expectations accordingly. Once developed, these expectations tend to persist relatively unchanged for the rest of one's life.

Similarly, Rutter (1987, cited in Sugawara, 1991) pointed out that the ability of children to cope successfully with life challenges has much to do with their overall feelings of self-esteem, confidence and conviction in their ability to deal with a variety of life's changes and adaptations. Children with a high sense of self-esteem have an optimistic view of life, and they are able to tolerate external stress without becoming excessively anxious. On the other hand, children with a low sense of self-esteem are harshly critical of their failures, and register only short-lived pleasure when they succeed. Therefore, high self-esteem is protective for children. In Freud and Dann's study (1951, cited in Sugawara, 1991) indicated that children who fared well after being separated from their parents during the war, were those who had a high sense of independence as individuals. Brown, Harris and BiFulco (1986, cited in Sugawara, 1991) found that among women who lost their mothers early in life, depression was related to a lack of self-esteem and this was also true for children whose mothers were incarcerated. Furthermore, Simmons and Miller (1987, cited in Sugawara, 1991) found that low parental supporting adolescence was positively related to low self-esteem which was related to depression.

Bowlby (1980) stated that when children lose their parents due to the separation, death or abandonment, they may blame somebody, including themselves, for having caused or contributed to this painful event. Children are not capable of understanding death or abandonment, thus they believe that they made a very big mistake and this is why their parents abandoned them. They feel unlovable and

unwanted by their parents, and this lowers their self-esteem. Self-blame is sometimes so strong that it could cause suicidal attempts.

Arthur and Kemme (1964, cited in Bowlby, 1980) investigated the children's and adolescents' reactions to parental loss due to death and they found that 40% of them attributed the cause of the parent's death either to themselves or to the surviving parent.

The association between attachment and self-esteem was investigated by Cassidy (1988). Subjects consist of 52 children (aged 5 to 6 years old). Data were collected in two play sessions and the quality of attachment was assessed in each session as based on a system devised by Main and Cassidy. Aggregated attachment ratings and classifications were assessed in both reunions. Results of self-esteem assessment, which were obtained through interviews, indicated that securely attached children had higher self-esteem than the insecure ones.

Thomes (1968) studied the effects of father absence in socialization of children. Subjects consisted of 47 children (aged between 9 to 11 boys and girls) who live in low socioeconomic-status, father-absent homes and their matched peers from father present homes. Children's self-concepts, their peer-relationships, their concepts of parental roles and their attitudes and feelings about family members studied. Interviews conducted with children and their mothers. Several similarities found between the groups. The only difference was in children's concepts of parental roles. Bereaved children and their matched group were asked whether mother or father should do given statements in a family and the bereaved children made significantly fewer choices of the father to carry out these parental activities.

Boy, Ernestina, Garcia and Torreblanca (1985) studied the effect of maternal deprivation on children's development of sense of personal security. Subjects were

two groups of 16 children aged between 3-6 years old. Experimental group consisted of children who had been separated from mothers in their early childhood and living in institutions. Control group on the other hand, consisted of children who were living with their natural mothers. Both groups were studied with observational and interview methods. Significant differences were found between two groups. Experimental group's children showed more insecure behaviors, isolation and less affiliation than the control group.

School Adjustment and Academic Achievement

The quality of children's emotional ties to others appears to play a significant role in their psychological adjustment and school achievement. Children who feel more secure with their parents, who experience more positive emotional ties with them, and who receive physical affection from them are psychologically better adjusted and experience fewer achievement problems in school (Marcus, 1991).

Several studies were conducted to examine the cognitive development of children who were separated from their parents due to the loss, divorce or abandonment. Douglas's (1975, cited in Schaffer, 1991) study concentrated on the influence of early parental deprivation due to hospitalization on adolescents' behaviors and learning. A total of 958 children who had parental separation in the first 5 years were the sample of this study. Data obtained from teachers' ratings of behavior, reading tests, police records of delinquency and employment records were used as follow-up. The results showed that "nervousness" (as rated by teachers) showed no association with early separation, but all other measures namely "troublesome behavior" (also rated by teachers), poor reading scores, delinquency and unstable job history, were markedly more among the separated adolescents compared to nonseparated counterparts.

School adjustment of children with parental deprivation has been an interest to many researchers. A longitudinal study which was conducted by Harlow (1970, cited in Bornstein and Bruner, 1989) showed that warm, sensitive, affectionate, nonrestrictive parental care was positively associated with cognitive growth in children. Maternal effectiveness during feeding when infants were 4 and 12 months of age, determined the children's language performance at 3-years of age and intelligence at 4-years of ages. Similarly, mothers' touching, rocking, holding, and smiling at their 6-month-olds determined the cognitive and language competence in the same children at 2-years of age.

Sugawara (1991) examined the influences of living with one parent on children's school achievement. The data were obtained through a questionnaire from 69% of 9000 families with school age children. Results indicated that children at age 13 living with their mothers scored lower than those with two parents on educational aptitude and achievement. There was a larger difference for girls and boys in mathematics than in verbal messages. Low achievement in the mathematical and technical sphere characterized the subjects with no father in the home.

Similarly, Mulkey, Crain and Harrington (1992) investigated the effect of parental deprivation on children's grades. A longitudinal survey was conducted on 15,000 students who were sophomores in 1980 and seniors in 1982. Results indicated that children from one-parent households had significantly lower grades than subjects from two-parent households.

Manesh, Mojdehi and Tashakkori (1984) studied the effects of environmental enrichment in the institutions on children' mental and psychomotor development. In the initial phase of the study subjects consisted of 14 pairs of infants (16 boys and 12 girls), aged 4-13.6 months, residing in the nursery. Infants were excluded from the

sample if they had apparent mental/physical handicaps or a history of recent severe illness or hospitalization, or were born premature. Each member of the pair was then assigned to the experimental or control groups. The independent variable was the “extra” interaction of tactile, auditory and visual stimulation and interpersonal communication provided to the experimental children in 5 min (\pm 30 sec) daily individual sessions, 5 days a week for a period of 6 weeks. “Extra” interaction for the experimental subjects was provided by two female senior psychology students who were randomly assigned to each child at the beginning of each session. The typical session consisted of the student going to the experimental baby’s crib and starting a one-to-one interaction, talking, having eye-contact and touching. During these sessions the control subjects were left to the routine of the orphanage and, not subjected to any comparable interaction. The children were tested before and after the experimental manipulations were presented, and 6 months later as a follow-up. The Bayley Scales of Infant Development was used to measure mental and psychomotor development. The results of the study show that with relatively simple environment manipulation for a brief period of time appreciable progress was measured in mental and psychomotor functioning of experimental group compared to the control group.

Factors Influencing Behaviors of Children with Parental Deprivation

Age of Deprivation

Spitz, Schaffer and Callender (1960, cited in Heinicke & Westheimer, 1965) observed separation responds of children during the first six years. They found that reactions about six months of age were different than the reactions about the second and third years of life. Children aged six months showed apprehension, sadness,

often weeping, lack of contact, rejection of environment, withdrawal, retardation of development, retardation of reaction to stimuli, slowness of movement, dejection, stupor, loss of appetite, refusal to eat, loss of weight and insomnia. Children two years old however, did not show serious withdrawal retardation and prolonged insomnia. Instead of refusing food, they usually became greedy. They were also weepy and sad.

David, Ancellin and Appell (1961, cited in Heinicke & Westheimer, 1965) investigated both the initial and later reactions to brief separations of children aged between three years and six years. First, all children showed distress after separation. Crying and states of confusion, dejection, prostration and inertia characterized the distress. Second, children had observable difficulties in adapting to the environment and people in the nursery.

According to Maccoby (1986, cited in Sugawara, 1991) the ability of children to respond to stressful life events, such as maternal absence depends on the age of the child. Studies on hospital admissions pointed out that the age between six months and four years was the time of greatest risk for children. In addition, in studies on institutionalization, the period of infancy appears to engender the greatest concern among researchers (Richardson, 1984, cited in Sugawara, 1991 & Rutter, 1979, 1987, cited in Sugawara, 1991). Vulnerability appears to decrease as the entry age of the child increases. However, studies on maternal death (Brown & Harris, 1978, cited in Sugawara, 1991; Garnezy, 1983, cited in Sugawara, 1991; Rutter, 1979, cited in Sugawara, 1991) and incarceration (McGowan & Blumenthal, 1978, cited in Sugawara, 1991) indicated that middle childhood and adolescent years are open to greatest vulnerability.

Sex of Child

Corter (1968, cited in Alloway, Pliner & Krames, 1975) studied response differences between male and female infants regarding a separation. He indicated that male infants after a brief period away from the mother tried to find her, but female infants did not show such a reaction. He found that for both sexes novel toys, novel person, and an opportunity to see the mother increased the length of time spent away from mother without seeking for contact. But this time period was shorter for males. In contrast, in another study Corter (1968, cited in Alloway, Pliner & Krames, 1975) found that male infants did not try to find their mothers, but female infants did. He suggested that sex differences depend on who leaves whom, because when a mother leaves her child, both male and female children tend to follow the mother. However, when the child leaves the mother and goes to play room, children from both genders stay longer away from their mother.

However, the studies were not quite sufficient to determine the exact difference between the female and male responses to separation, because sex is only one of the contributing factors, affecting the separation responses. For instance, if there is no adequate relation with mother, neither male nor female infants attend to follow the mother during the separation. Thus, different responses of male and female infants to separation event may depend on differences in previously established patterns of interaction between mother and infant in separation situations (Corter, 1968, cited in Alloway, Pliner & Krames, 1975).

Cognitive Abilities

The cognitive abilities of children appear to moderate the impact of parental absence (including death of family members, parental separation/divorce and hospitalization) on children's behavior and development. Highly intelligent and

scholastically achieving children show low rates of behavioral disorders in circumstances characterized by family stress and adversity (Dubow & Tisak, 1989, Garnezy, 1981, cited in Sugawara, 1991).

Children's abilities to cognitively appraise an event can lead them to develop beneficial problem solving and coping skills. According to Brenner (1984, cited in Sugawara, 1991) these problem solving and coping skills are important to children in their dealings with a variety of stressful life circumstances. In their research Band and Weiz (1988, cited in Sugawara, 1991) described the different kinds of coping skills used by children in dealing with every day life stress. For example, primary coping skills (trying to change the stressful circumstance) were most frequently used to deal with separation, loss, school failure and peer difficulties, while secondary coping skills (trying to adjust to the circumstance) were most frequently used to deal with medical stress. However, as the age of children increased, the use of primary coping skills decreased, and the use of secondary coping skills increased, particularly when related to stressful medical circumstances. Therefore, children's cognitive abilities may be a salient factor in moderating the impact of maternal absence on children's behavior and development.

Influence of Family Relationships

Children's relationship to their parents before the separation could influence their reaction to separation. Studies indicate that children who had secure and positive interaction with their mothers before the separation avoid the caregivers in nurseries during the first week of separation. Bowlby (1973) pointed out that children with inadequate previous experience of maternal care were affected less from separation than children whose maternal care had been adequate. Besides, changes in

the family and its effects on mothers may affect children's response to reunion with their parents.

Similarly, Rutter (1981) pointed out that the presence of adverse ongoing social experiences in the life of the family might alter the likely impact of separation. Thus, infants and children, who experience poor relationships with their caregivers, may exhibit substantial distress at the time of separation. Therefore, the impact of separation increases because of the absence of an adequate relationship with a caregiver.

Contact with the Family during the Separation

Heinicke and Westheimer (1965) pointed out that children, who were visited by their parents every week during the residence in nursery, cried and showed more hostility toward their parents. In contrast, children who were visited rarely by their parents cried less and did not show hostility and anger toward their parents.

Pringle and Bossio (1958, cited in Heinicke and Westheimer, 1965) observed three groups of children in nursery. The first group of children regularly received letters, were visited and taken on holidays. Parents or relatives visited the second group of children irregularly, only at the request of the children's officer. The third group of children had very little or no contact at all with their parents. Results of the study indicated that children who had no contact with their parents or relatives were more seriously retarded on tests of intelligence, emotional adjustment, language development and reading comprehension than those children who had either some or regular contact. This study implied that contact with parents during the separation helps children to ease the tension experienced in separation period.

Sugawara (1991) found that during the parental deprivation relatives and other adults in children's lives have been important in helping them with the

circumstance of deprivation. These relatives consist of a wide range of individuals, including grandparents, uncles/aunts, friends, neighbors, teachers, counselor, nurses, and housekeepers/custodial caretakers. Children in various ways use these relatives and adults, including companionship and friendship, surrogate parenting and care-taking, attachment figures, counseling and assistance, and supervision. These characteristics appear to have a protective effect for children in conditions of parental absence due to death, abandonment or family disruption. However, the absence or modification of these characteristics may also have an adverse effect on children's behavior and development during times of parental absence.

Rutter (1986, cited in Sugawara, 1991) found that after maternal separation frequent changes in adult caregivers were related to long-term psychiatric disturbances in children. Likewise, following such experience, children's "poor" relationships with their maternal replacement figures were related to early onset of behavior disorders and experiences and with neurotic depression. In addition, Vandell and Corasaniti (1988, cited in Sugawara, 1991) pointed out that children who were cared for by a relative, grandmother, housekeeper or friend had negative peer nominations compared to children who were cared for by their parents.

Nature of the Substitute Care

The quality of the substitute care is important for a child who experiences early parental deprivation. If a child gets securely attached to his/her caregiver, he/she becomes free to explore the environment and have new experiences. Aubry (1950, cited in Heinicke & Westheimer, 1965) examined the influence of institutions on children's development. He reported that stable caregiver is the most important thing in one's life. Children, whose caregivers change frequently, show anxiety, anger and maladaptation to the institution.

Similarly, Rutter (1979, cited in Sugawara, 1991) pointed out that children who were admitted to institutions during the first two years of life appear to be most vulnerable to the adverse effects of such conditions. Constantly changing caretakers, none of whom last long enough for the child to establish emotional bonds and the impoverished nature of the institutional environment appear to constitute the damaging factors in this experience. Deficits in social, psychological, cognitive and physical development have been observed among children in institutions. However, Richartson (1984, cited in Sugawara, 1991) indicated that the conditions of institutions have changed somewhat for the better over the years, and institutions' damaging effects can be averted if they offer children stimulating enriched environments in which caretakers are consistently available for interaction with children, and to act as attachment figures.

Similar to Richardson, Freud and Burlingham (1942, 1944, cited in Bowlby, 1973) reported that children, who were cared by one nurse in the institution, showed quick and easy adaptation to the place. Similarly, Rheingold's study (1970, cited in Bowlby, 1973) demonstrated that six-month-old children in an institution became more socially responsive when cared by one person. Both of these studies indicate the importance of a consistent caregiver in a child's life after separation.

Foster care is the another way of the protecting children who are separated from their parents. It is reported that multiple foster home placements can contribute to the development of later psychological disorders among children. However, the problems occur not because of the placement of children in different foster homes, but the nature of experiences they receive there (Garmezzy, 1983, cited in Sugawara, 1991). Robertson and Robertson, (1971, cited in Sugawara, 1991) studied the impact of foster parenting on children's behavior and development. They compared the

short-term fostering of children whose mothers were hospitalized due to pregnancy in a family setting with the residential nursery children. Results indicated that children in both settings showed some degrees of distress when they were separated from their mothers. However, more marked distress reactions were found among the residential nursery children than among those in the family settings. The researchers concluded that the family fostering situation was better because children had opportunity to continue intense personal relationships with an adult caretaker. In addition, the foster family took some special steps to maintain the children's bonds with their natural mother and this attitude helped children to adapt more easily this environment.

Length of Separation

Heinicke and Westheimer (1965) indicated that there is a significant association between the length of separation and variation in children's behavior during the last week of separation and reunion. Significant differences were found between children who stayed less than two weeks and those who stayed longer in an institution. Children who stayed more than two weeks in an institution, were more ambivalent to people, and showed hostility, and less affectionate to the father on his visits. In addition, they developed either strange relationship or distinct preference to certain nurses, and became greedier. They showed a greater concern over lapses in sphincter control, they frequently acted as parents in doll play and showed high degree of maternal possessiveness. During the reunion they showed the same reactions until they got accustomed to their home.

Similarly, Spitz (1960, cited in Heinicke & Westheimer, 1965) pointed out that separation continued more than three months impoverished expression of affect in children. Wolkind and Rutter (1985, cited in Goodyer, 1990) also pointed out that

separation disrupts normative experiences, for both mother and child. However, if it is brief and innocuous it is not likely to result in adverse consequences for the relationship between the child and mother.

Rowdiness and Appell (1962, cited in Heinicke & Westheimer, 1965) studied children aged between one to four years. Children's developmental level was measured by the Gesell Test. They found that children who were separated longer than three months had problems in motor development, manual dexterity, adaptability, expression of language, comprehension of language, and social reactions. Besides the length of the separation, they also emphasized the importance of the age at the time of separation. They pointed out that children who were about two years old scored less developmental quotient (DQ) scores in the first eight days, than those children who were separated younger.

In contrast to all these findings, Pringle and Bossio (1958, cited in Heinicke & Westheimer, 1965) indicated that early separation from mother results in negative effects on the children development. Similarly, complete deprivation has a significant ill effect. However, they did not signify that length of institutionalization has a negative effect on children development.

Turkish Studies on Impact of Parental Deprivation

Parental deprivation due to loss, divorce or separation and its influence on cognitive-psycho-social development, peer relations, self-concept and school achievement has been subject of several studies in Turkey. Part of these studies focused on well-being of institutionalized children.

Effect of early parental loss on children's self-concept, peer relations, emotional and behavioral problems and school achievement was examined in a study

conducted by Özgül (1995). In addition to effects of loss, effects of gender were investigated. Subjects were 68 (34 boys, 34 girls) elementary school students. Half of them had experienced early parental loss while the remaining half came from intact families. Piers-Harris Children's Self-Concept Scale, a sociometric rating, teacher ratings of externalizing and internalizing problems, standardized cumulative grade point averages and a structured interview were used. Results showed that the loss group had lower self-concept, peer popularity, school achievement and higher externalizing behaviors than the intact group. Effects of loss were equally detrimental for both genders.

Ayaz (1983) studied the impact of the broken families (due to parent's death, separation or divorce) on children's problem behaviors. The subjects of the study were 40 elementary school children between 9 to 12 years old. The experimental group consisted of 20 broken family children (10 male, 10 female) and the control group consisted of 20 intact family's children (10 male, 10 female). In order to gather information about children, researcher conducted an interview with children and children's class teachers in their homes. In addition, to understand the problem behaviors, Beler Sentence Completion Test was used. Demographic information indicated that in the experimental group percentile of father death was 20%, mother death was 30% and percentile of divorce was 50%. In the experimental group 35% children were living with their mothers, 10% with their fathers, 10% with brothers/sisters, 15% with stepfathers and mothers, 15% with step mothers and fathers, 15% with grandmothers or grandfathers. Both experimental and control groups were living in shanties and the SES levels were middle in both of the groups. The percentile of drinking alcohol and gambling among the experimental group's parents was 70%, but it was 15% in the control group. The result of the home

observations indicated that experimental group's attitude toward their past was 80% negative. On the other hand, in the control group it was 1%. The attitude toward future was 90% negative in the experimental group and 20% negative in the control group. Attitude toward self-esteem was 10% negative in the experimental group and 0% negative in the control group. Attitude toward mother and father was 95% and 70% negative in the experimental group and 0% and 30% negative in the control group. Attitude toward fear and anxiety was 90% negative in the experimental group and 10% in the control group. Attitude toward guilty feeling was 95% negative in the experimental group and 30% was in the control group. Attitude toward school and job was 85% negative in the experimental group and 0% in the control group. The Beler Sentence Completion Test indicated that the reactions toward positive answers were highly negative in the experimental group. However, reactions of the control group were highly positive. Similarly, the reactions toward negative answers were highly positive in the experimental group, but in the control group the reactions were highly negative. The interview, which was conducted in schools, indicated that lying (80%), stealing (55%), escaping from school (70%), escaping from home (65%) were common in the experimental group. On the other hand, the control group percentages of these behaviors were 50%, 15%, 30% and 20%, respectively.

To investigate the impact of broken families Bulut (1983) conducted another related study on children's behaviors. The subjects were 68 elementary school children. The experimental group was consisted of 23 children who come from broken families (due to parent's death, separation or divorce). The control group consisted of 45 children who come from intact families. The data were obtained through observations and questionnaires filled by classroom teachers. The percentage of children in the experimental group living only with mother was 73.8; the

percentage of children living with mother and stepfather was 13.1%. When family relations of children from broken families are observed it was seen that they did not receive enough love and care from their parents. On the other hand, children from intact families expressed that every member of family loves them. Physical punishment was high (91%) in the experimental group, while it was 77% in the control group. When peer relations of children were observed, it was seen that most children from broken families had friends from other broken families. In both experimental and control groups children had good relations with their friends. School or house preferences indicated that both groups have chosen a school instead of home. Children from broken families preferred to be together with their teachers instead of with their mothers. According to teachers, study habits of the two groups were different. Teachers pointed out that children from broken families had irregular study habits, but children from intact families were regular. Psychological conditions of children were also investigated in this study and it was found that children from broken families were shy, quiet, and introverted. However, children from intact families were relaxed, extroverted, and active. Both groups were asked to whom they would like to resemble. Results showed that children in the both groups mostly wanted to resemble their mothers in the future.

Gündoğdu and Muslu examined identity formation of the institutionalized adolescents (1999). Subjects were 219 adolescents (113 living in institution and 106 living with parents) whose identity formation was measured by Ego Identity Status. Results indicated significant differences between identity achievement, moratorium and identity diffusion scores of the adolescents living in the institutions and the adolescents living with parents. The adolescents living with parents were better identity achievers and adolescents living in institutions experiencing identity

diffusion and moratorium. Furthermore, girls were facing more identity diffusion than boys.

Antar (1982) investigated the fears of 35 institutionalized boys as compared to 35 matched boys from intact families. They were 10-12 years old. Compositions were written by children to explain why and from what they afraid and a sentence completion test was used. The results indicated that children who lived in institutions had the following fears: loneliness (25.71%); dream (17.34%); being ill (11.42%); animals, and teachers (8.57%); darkness and being killed (5.71%); murder, devil, skeleton or snake (2.85%). On the other hand, children who lived with their parents had fears of God, adults or ghosts (60.57%); darkness or needle (5.71%); being dead, being killed, animals school manager, horror movies, monsters or insects (2.85%). The researcher concluded that institutionalized children's fears originate from loneliness, abandonment, indifference and low self-esteem. On the other hand, imitating adult fears was the common factor in the group of children from intact families.

Bıyıklı (1982) conducted a study to investigate the institutionalized children's cognitive and psycho-social development. Subjects of the study were 60 institutionalized children at ages of 7, 9, and 11 and their matched peers from intact families. Wechsler intelligence Scale for Children-Revised (WISC-R) and Adaptive Behavior Scale (AAMD) were used. WISC-R results indicated meaningful differences between the two groups. Children from institutions got lower scores than children from intact families. AAMD Adaptive Behavior Scale was used to gather information about independent activity, physical development, economical activity, language development, number and time concepts, house-hold jobs, occupational activity, self-management, responsibility, socialization, and adaptation. Results

indicated that children from institutions had significantly lower scores than their peers from intact families.

Similarly, the impact of institutions on children's development was studied by Sarp (1987). On 126 institutionalized children (aged between 0-6 years old) and their matched peers from one daily care center. Denver Development Test was used which indicated that the length of stay in institution was an effective factor on children's development. Children who stayed five, six years in institutions had developmental retardation. On the other hand, children who stayed one year did not have any developmental retardation. Besides, children who were left in the institutions by their mother, father or relatives had more developmental retardation than children who were abandoned by their parents when they were small. Among all the effects mother death was found the most negative effect on children's development. Children who were less visited by their parents or relatives had more serious developmental retardation than children who are visited frequently by their parents or relatives. Thus, results indicated that institutionalized children had significant retardation in self, social, language, fine-motor, and gross-motor areas of development.

Another related study in Turkey was conducted by Firıncioğlu (1982). This study examined the effect of parental deprivation on institutionalized and family reared children's emotional and cognitive development. Experimental group consisted of 70 institutionalized children and the control group consisted of two groups of children from low and high socioeconomic status. Koppitz' Human Figure Drawing test was used to measure developmental stage. Results indicated that institutionalized group's intellectual development was slower than the control

groups. They also showed more emotional disturbances when compared to the control groups.

Büyüksolak (1995) investigated the impact of institutionalization on children's behaviors and academic success. The sample was 72 institutionalized children of age 11 to 12 chosen from three different institutions. A questionnaire was given to institutionalized children's study hall teachers in order to obtain information about these children's daily habits, peer relations, responsibility, study habits and academic success. Results showed that all children in the three institutions spent their free time by watching television, playing games and reading books. Proper cleaning habits were found in 70%, 81%, and 56% of investigated children in the three institutions. Proper eating habits were found in 57%, 73%, and 65% and proper peer relations were found in 80%, 76%, and 72% of examined children in the three institutions. Taking responsibility, obeying rules, working independently, and work planning were scored on three-grade scale: very good, good and moderate. Total percentages of children with grade above moderate for three observed institutions were 72%, 61% and 64%. The results of academic success ratings indicated that the academic success of the first institution subjects' was 76.22%, the second was 72.24%, and the third was 71.98%. Therefore, the three institutions' children's academic success showed similarity. But, male children were found more successful than female children in the three institutions. While male children's academic success were 78.91%, 80.33%, 81.40%, female children's academic success were 60.98%, 46.34%, 39.02%.

Summary

One of the most potentially damaging events of childhood occurs when the infant is separated from her/his parents by death, divorce or abandonment. If this loss is not mitigated by adequate substitute care, a child could develop many problems in emotional, behavioral, social, physical and intellectual developmental areas.

Bowlby (1973) studied the effects of temporary separation and permanent loss on children. In his attachment theory, he emphasized that an infant develops strong attachment to her/his parents, especially mother. This strong, continuous and consistent bond is actually source of security for the child. Sudden absence of an attachment figure has a negative impact on the child's ability to build secure relationships with others. However, an adequate subsidiary figure can also help the child to cope with maternal deprivation. Researchers studied not only maternal separation, but also paternal separation and its effects. Heinicke and Westheimer (1965) stated that although paternal separation is not identified as significant as maternal separation, it has influences on love, security and identification.

Death of parents or one parent is the type of permanent separation. Anna Freud and Burlingham (1942, 1943, cited in Nagera, 1981), Freud (1926, 1960, cited in Nagera, 1981), Mahler and Bowlby (1960, cited in Nagera, 1981), and Spitz and Wolf (1946, cited in Nagera, 1981) and investigated the reactions of children to permanent or temporary separation at different ages. Although they had different ideas about children's understanding of temporary or permanent separation, they all agreed that early parental deprivation either temporarily or permanently have negative impact on children's lives. Heinicke and Westheimer (1965) explained various reactions of children to short-term separation from parents such as crying, acute distress, resistance, hostile behavior, a breakdown in sphincter control, eating

and sleeping disturbances, thumb and finger sucking, developing cold and possessiveness of material objects.

The long-term effects of parental separation are studied by researchers more deeply. Emotional and behavioral problems, social relationship problems, impairments in self-esteem and school achievement problems are examined mainly as long-term effects of parental separation. Anxiety, fear, phobias, conduct disorder, depression, withdrawal and psychosomatic disorders are investigated under emotional problems of separation from parents. Although separation anxiety was explained differently by some theorists Anna Freud (1952, cited in Bowlby, 1973), Bowlby (1973), Freud (1926,1963, cited in Bowlby, 1973), Friedman and Kennedy (1960, cited in Alloway, Pliner & Kramers, 1975), Heinicke and Westheimer (1965), Klein (1948, cited in Bowlby 1973), Ross (1980), they agreed that a mother figure is important in a child's life. Ross (1980) stated that if a child experienced separation anxiety, he/she probably would develop some phobias, such as school and agoraphobia. Goldfarb (1945, cited in Quarry & Werry, 1973) studied the effects of institutional setting. He stated that children from institutions developed conduct disorder and showed temper tantrums, lying, stealing, unpredictable cruelty and aggression to peers, adults and animals.

Several researchers studied the association of conduct disorder, depression, withdrawal and psychosomatic illness of children with parental separation. They stated that children who have been separated from their parents due to death, abandonment or divorce were developing these problems more than their peers from intact families were. Moreover, Spitz (1946, cited in Quarry & Werry, 1973) studied children who live in institutional settings and found that these children had mostly conduct disorder.

Empirical researches of Ainsworth (1980, cited in Iwanic, 1996) and Steinhauer (1983, cited in Iwanic, 1996), Ayaz (1983), Bowlby, Ainsworth, Boston and Rosenbluth (1956, cited in Schaffer, 1991), Bulut (1983) Ijzendoorn and Wolff (1997), Eluzur and Kaffman (1982), Fergusson, Harris and Bifulco (1986, cited in Parkes, Hinde and Marris, 1991), Handford, Mattison, Humpfrey and Lauglin (1986), Healy, Malley and Steward (1990, cited in Phares, 1993), Horwood and Lynskey (1994), Marcus (1991), Özgül (1995), indicated that children who have been separated from their family due to loss, divorce or abandonment develop more emotional and behavioral problems than children from intact families. Lambert, Essen and Head (1977, cited in Schaffer, 1991), Fıncıoğlu (1982) and Antar (1983) studied children who are living in institutions and found that institutionalization has a negative influence on children's development. They developed higher levels of emotional and behavioral problems compared to peers from intact families. On the other hand, Büyüksolak (1995) studied institutionalized children from different institutions and found no big difference among them.

Bowlby (1973), Heinicke and Westheimer (1965), Burlingham and Freud (1942, cited in Bowlby, 1973) state that quality of interaction with parents especially with mother determine social relationships of children in the future. Children who had secure and healthy interactions with both parents will approach the others (adults or peers) with a sense of confidence. On the other hand, children whose emotional and physical needs were not met by their parents will approach the others with negative expectations and with a sense of distrust. In addition, these deprived children will have difficulty in capacity to love, hostility and building relationships.

Empirical studies of Cohn, (1990, 1991), Freud and Dann (1951, cited in Sugawara, 1991), Hetherington (1972), Meshot and Leitner (1993), Mueller and

Silverman (1989, cited in Cohn, Patterson & Christopoulos, 1991), Rutter (1975, cited in Patterson, Vaden & Kupersmidt, 1991), Rutter (1981, cited in Goodyer, 1990), Vandell and Wilson (1987, cited in Sugawara, 1991), showed that the quality of parental attachment have a strong influence on social relationships. Children who could not build successful relations with their peers and are rejected by them tend to show more aggressive, disruptive behaviors and are prone to develop delinquent behavior during adolescence. On the other hand, children who built successful relationships with their peers and who are accepted by them do not develop adjustment problems, but they develop social competence. In addition, family background and recent life events are considered influential factors in peer acceptance and peer rejection among children. Studies indicate that children who came from broken family due to death or divorce had more adjustment problem in making friendship. In addition, these children are mostly rejected by their peers because of their aggressive and disruptive behaviors. This rejection has further impact on developing increasingly adjustment problems. However, children from intact families do not show adjustment problems in making friendship and they are mostly accepted by their peers.

Theorists who claimed that the separation from parents may lead to decrease in self-esteem and self-concept (Bowlby, 1980); Heinicke and Westheimer, 1965); Fleming, 1972, cited in Bowlby, 1980; and Rutter, 1987, cited in Sugawara, 1991) stated that since children can not understand the reason of the separation, they could think that they are responsible for it and feel guilty and this destroys their self-esteem.

Limited number of empirical research has been conducted by Thomes (1968), Boy, Ernestina, Garcia and Torreblance (1985) and Cassidy (1988). Results of their

studies indicate that children, who had insecure attachment with their parents, especially with mother, develop lower self-esteem and self-concept than children who had secure attachment. Similarly, Gündoğdu and Muslu examined identity formation of the institutionalized adolescents (1999) and found that adolescents living with parents were better identity achievers and adolescents living in institutions experiencing identity diffusion and moratorium.

Both theoretical and empirical studies indicate that the quality of parental relationships have an influence on children psychological adjustment and school success. Children who come from disruptive families due to death, divorce or abandonment and children who live in institutions had unadequate and unstable early interaction with their parents or care-givers. These negative experiences reflect to their adjustment to school life. Empirical studies (Mones, Mojdehi and Tashakkori, 1984; Harlow, 1970, cited in Bornstein & Bruner, 1989; Douglas, 1975, cited in Schaffer, 1991; Mulkey, Crain and Horrington, 1992; Sugawara, 1991; Bıyıklı, 1982; Özgül, 1995; and Büyüksolak, 1995) indicate that children who experience early parental loss, separation or abandonment or children who are residents of institutions show lower school adjustment and lower school success than those children who come from intact families.

Children who experienced parental deprivation could have unique characteristics, such as age, sex, cognitive abilities, quality of family relationships, contact with the family during the separation, nature of the substitute care and length of separation. All these factors are interdependent. For example, one child could be separated from his/her parents in a critical age but, he/she could be brought up by adequate substitute figure in an institution and can overcome negative influences of

the loss easier than someone who had inadequate substitute figure in a noninstitutional environment.

Both in Turkey and abroad several studies indicate that children who are separated from their parents due to death, divorce or abandonment have more problems in emotional and behavioral development, difficulty in building social relations, low self-esteem and low school achievement than their peers from intact families. In addition, effects of institutional settings on children's development has been a subject of many research. Results of these studies so far indicate that these settings are mostly inadequate and have negative influence on children's development.

Most of conducted studies in Turkey have concentrated on a single or few aspects of institutionalized children's development. This study aims to examine a broader range of developmental areas of institutionalized children as influenced by parental deprivation. It will provide a global picture of the impact of parental deprivation on self-concept, peer relation, emotional and behavioral problems and school achievement. Based on these goals the following questions are formed.

Research Questions

In order to examine the group differences between children who live in institutions and children who live at home, comparisons were made on children's emotional and behavioral problems, sociability, self-concept and school achievement. Questions were formed to examine differences between groups (institutionalized/comparison) and influence of gender on these differences.

- 1) Is there any difference between emotional and behavioral problem scores

of the institutionalized children and their peers from the comparison group as measured by teacher (the TRF) and peer (the RCP-T) ratings? Does gender have an effect on these differences?

2) Is there any difference between the sociability-leadership ratings for the institutionalized children and their peers from the comparison group as measured by the RCP-T? Does gender have an effect on these differences?

3) Is there any difference between the self-concept scores of the institutionalized children and their peers from the comparison group as measured by the WIFAM? Does gender have an effect on these differences?

4) Is there any difference between the school achievement of the institutionalized children and their peers from the comparison group as measured by standardized GPAs and academic performance ratings of teachers (the TRF)? Does gender have an effect on these differences?

Chapter III

METHOD

This causal-comparative study was designed to examine the effects of parental deprivation on children living in institution. Dependent or outcome variables were children's emotional and behavioral problems, sociability, self-concept and school achievement. The following sections describe participants, instruments and methods used in this research.

Sample

The population consisted of children from grades three to five who live in child protection institutions in İstanbul, while the target population was three of these institutions. These three institutions were visited to obtain information about schools and classes children attend which were 15 elementary schools and 37 classes. Table 1 presents institution and grade level distribution of children in the target population.

Children in these institutions were selected as based on the school they attend. School selection procedure was dependent on two criteria: the number of institutionalized children (the more, the better) and proximity to the researcher's residence. An attempt was made to achieve equal gender representation. There were 7 elementary schools and 18 classes in the sample (Table 2). The sample selected constituted 46.10 % (47.89 % and 44.58 %, for girls and boys, respectively) of the target population. Target sample consisted of 38.02 % children attending third grade, 33.80 % attending fourth grade and 28.16 % attending fifth grade.

Table 1:

Distribution of Male and Female Children in the Target Population by Grade Level and Institution.

Grade Level	Gender		Institution			Total
			I	II	III	
III	Female	f	10	-	10	20
		%	6.5	-	6.5	13
	Male	f	12	9	13	34
		%	7.8	5.8	8.4	22.1
IV	Female	f	9	5	13	27
		%	5.8	3.2	8.4	17.5
	Male	f	8	8	14	30
		%	5.2	5.2	9.1	19.5
V	Female	f	12	9	3	24
		%	7.8	5.8	1.9	15.6
	Male	f	11	5	3	19
		%	7.1	3.2	1.9	12.3
Total	Female	f	31	14	26	71
		%	20.1	9.1	16.9	46.1
	Male	f	31	22	30	83
		%	20.1	14.3	19.5	53.9
	Total	f	62	36	56	154
		%	40.2	23.4	36.4	100

Table 2:

Distribution of Male and Female Children in the Target Sample by Grade Level and Schools.

Grade Level	Gender		School							Total
			I	II	III	IV	V	VI	VII	
III	Female	f	1	-	-	-	3	6	3	13
		%	1.4	-	-	-	-	-	-	18.3
	Male	f	-	-	-	8	2	3	1	14
		%	-	-	-	11.3	2.8	4.2	1.4	19.7
IV	Female	f	-	-	2	5	3	-	-	10
		%	-	-	2.8	7.0	4.2	-	-	14.1
	Male	f	-	-	-	8	6	-	-	14
		%	-	-	-	11.3	8.4	-	-	19.7
V	Female	f	-	1	-	9	1	-	-	11
		%	-	1.4	-	12.7	1.4	-	-	15.5
	Male	f	1	2	-	5	1	-	-	9
		%	1.4	2.8	-	7.0	1.4	-	-	12.7
Total	Female	f	1	1	2	14	7	6	3	34
		%	1.4	1.4	2.8	19.7	9.9	8.4	4.2	47.9
	Male	f	1	2	-	21	9	3	1	37
		%	1.4	2.8	-	29.6	12.7	4.2	1.4	52.1
	Total	f	2	3	2	35	16	9	4	71
		%	2.8	4.2	2.8	49.3	22.5	12.7	5.6	100

While selecting the comparison group, the goal was to obtain comparable children in terms of demographic variables except living in an institutionalized or a noninstitutionalized environment which is the major independent variable of the study. For this purpose, demographic information forms obtained from the classmates of the target children were examined to select children who have experienced family disruption like parental separation, loss or divorce. However, as Table A5 (Appendix A) shows, there were only 24 such children in the total pool which constituted about one third (33.8 %) of the comparison sample. The rest of the comparison group was selected among children whose parents had low levels of educational and job status (tables A1-A4 in Appendix A). Despite all these attempts, the target sample was still more disadvantageous (in terms of many family related characteristics explained in Appendix A tables) than the comparison sample, but it was not possible to find a more disadvantageous comparison group within the target population.

Table 3 shows the distribution of children in both groups by gender and grade level. Gender distribution was nearly identical in both groups and there were 142 (69 female and 73 male) children in the entire sample. Half of the sample was from the target group, while the other half was from the comparison group.

Table 3 also shows the similar distribution of females and males inside each grade level for both groups. Of all children, 38 % of them were third, 33.8 % were fourth, and 28.2 % were fifth graders.

Table 3:

Distribution of Male and Female Children in the Total Sample by Group and Grade.

Group	Gender		Grade			Total
			III	IV	V	
Institutionalized	Female	f	13	10	11	34
		%	38.2	29.4	32.3	47.9
	Male	f	14	14	9	37
		%	37.8	37.8	24.3	52.1
	Total	f	27	24	20	71
		%	38.0	33.8	28.2	50.0
Comparison	Female	f	15	10	10	35
		%	42.8	28.6	28.6	49.3
	Male	f	12	14	10	36
		%	33.3	38.9	27.8	50.7
	Total	f	27	24	20	71
		%	38.0	33.8	28.2	50.0
Total	Female	f	28	20	21	69
		%	40.6	29.0	30.4	48.6
	Male	f	26	28	19	73
		%	35.6	38.3	26.0	51.4
	Total	f	54	48	40	142
		%	38.0	33.8	28.2	100.0

Further Demographic Information

To have better understanding of children's background, some demographic information about children and their families were collected. These information were: age of children, parental education, parental occupation, reason for family disruption, gender of the lost parent, presence of step parents, length of separation, length of institutionalization, frequency of contact with parents, other adults available at home, frequency of contact with other adults, children holiday activities, frequency of holiday activities in weekdays and weekends.

It should be noted, that since all the demographic information were gathered through a group interview with the child, who sometimes did not know the answer, some portion of relevant information is missing. For the institutionalized group, some part of the missing information was restored through contact with their social service professional. However, for the children from the comparison group there was no such an opportunity, and we had to rely on their self-reports.

Percentages in all tables were calculated in comparison to the total subsample size. However, for Table A8 (Frequency of Contact with Mother), Table A9 (Frequency of Contact with Father), and Table A13 (Children's Holiday Activities), percentages were calculated separately for the disrupted and nondisrupted subsample sizes within the home group.

Age of children. For the institutionalized children, age in months ranged from 107 to 180 with a mean of 137.8 and for the comparison group it ranged from 101 to 149 with a mean of 121.51. Specifically, the youngest child in the institutionalized group was 8 years, 10 months and 16 days old; the oldest was 14 years, 11 months and 20 days old. In the comparison group, the youngest child was 8 years, 5 months and 5 days old, and the oldest was 12 years, 4 months and 10 days old. The average

age of children for maternal loss was 5.38 years and average age for paternal loss was 4.92 years for the institutionalized group. On the other hand, the average age for paternal loss was 3 years for the comparison group and maternal loss did not exist in this group.

Parental education. In order to understand children's parental background, some information about families were collected. Specific information about parent's educational level can be found in tables A1 and A2 of Appendix A. The figures indicate that mothers and fathers from the institutionalized group have mostly elementary school education, 85.9 % and 77.4 % respectively. Middle school education was 12.7 % for mothers and 19.7 % for fathers. Parents with high school education were very rare (1.4 % and 2.8 % respectively for mothers and fathers). In this group there was no parents who have university level education. On the other hand, fathers from the comparison group had mostly secondary school education (50.7 %), while for mothers elementary school education is predominant (52.1 %). High school education was 7 % and 5.6 % for mothers and fathers, respectively. University graduates constituted 4.2 % of mothers and 1.4 % of fathers. There was missing information about one mother's educational level in this group. We can conclude from these numbers that the parents of comparison children were better educated than those of institutionalized children.

Parental occupation. Parent's occupation was categorized into seven groups. The first category of occupation was unemployed/housewife. The second category was including unskilled jobs like cleaner, worker, gatekeeper and pedlar. The third category included technician, and skilled worker such as manicurist and electrician. The fourth category was for lower-level civil servants such as accountant, clerk and cashier. On the other hand, the fifth category was including middle-level civil

servants such as teacher, army officer and laboratorian. Small scale business jobs including butcher, hairdresser, greengrocer and furnisher are classified in the sixth group. Finally, professionals consisting of engineer and doctor formed seventh group. As can be seen from Table A3 and Table A4 in Appendix A, most of the mothers from the institutionalized group (43.7 %) and from the comparison group (74.6 %) were housewives. However, most of the fathers from the institutionalized group (52.1 %) and from the comparison group (43.7 %) were unskilled workers. These tables indicate that especially in terms of father occupation the comparison group had an advantage, yet both groups had a rather similar family background which is low class urban background. It should be noted that children from both groups who had loss were not included in this part of the demographic information.

Reason for family disruption. Information about reason for disruption in family relationships were examined (Appendix A, Table A5). Parental loss occurred in 43.7 % of the institutionalized group, and 5.6 % in the comparison group. Divorce was 45.1 % in the institutionalized children group, and 28.2 % in the comparison group. As based on interview data, children abuse, parental illness and abandonment were present, though not common, among the institutionalized group, while these were not reported by the comparison group children. Furthermore, in the comparison group 21.1 % of the children whose parents were divorced were living with mother, 1.4 % were living with father, 5.6 % were living with mother and step father, 1.4 % were living with father and step mother and 2.8 % were living with relatives.

Gender of the lost parent. Table A6 of Appendix A illustrates the gender of the lost parent. As seen in the table, the institutionalized group had higher maternal than paternal loss (32.4 % and 21.1 %, respectively). The comparison group had only paternal loss (5.6 %).

Presence of step parents. Presence of stepparents in both groups was examined (Appendix A, Table A7). Results indicate that the percentage of having stepparents was higher in the institutionalized group (31 %) than the comparison group (9.9 %).

Length of separation. The length of separation from parent(s) was inspected. The mean of separation length was 4.13 years for the institutionalized group and 4.30 for the comparison group. It should be noted that four children in the comparison group had missing information about length of separation.

Length of institutionalization. The average length of time staying in institution for all institutionalized children was 4.13 years. The longest time of staying in institution was 11 years and the shortest was 1 year.

Frequency of contact with parents. In order to understand if children from both of the groups have contact with their parents and how often, related information were obtained from children. Results indicated that 54.9 % of the institutionalized children have contact with mother and 59.2 % of them have contact with father. On the other hand, 98.6 % of the children from the entire comparison group have contact with mother and 90.1 % of them have contact with father. Frequency of these contacts were such that, only 1.4 % of the institutionalized children see their mothers and fathers every day. However, 100% of the comparison group children from the nondisrupted families and 87.5 % from the disrupted families see their mother every day. On the other hand, 91.5 % of the comparison group children from the nondisrupted families and 25.0 % from the disrupted families see their fathers every day. Institutionalized children tended to have monthly or weekend contacts with their parents. Of the institutionalized children, 14.1 % do not have any contact with mother and 21.1 % of them do not have any contact with father. In the comparison

group, 4.2 % of the comparison group children from the disrupted families do not have any contact with mother and 12.5 % of them do not have any contact with father. These information is provided in Tables A8 and A9 in Appendix A.

Other adults available at home. Results revealed that 33.8 % of the institutionalized children had other adults available at home, but remaining 62.0 % had no other adults available. In 4.2 % cases information was missing. Similarly, 26.8 % of the comparison group had other available adults at home while 73.2 % did not have (see Appendix A, Table A10). Responses on the question about other adults living in home indicate that most of the institutionalized children have some close relative such as married sister, aunt, uncle, grandmother and grandfather. The comparison group had also similar close relatives at home. Table A11 in Appendix A illustrates that both groups mostly have one or two available adults at home. The numbers show that in the institutionalized group 7.0 % of children had one adult available at home and 8.5 % of them had two adults available at home. In the comparison group this distribution was 16.9 % and 7.0 %, respectively. In both groups mostly opposite gender was available at home (19.7 % for the institutionalized and 21.1 % for the comparison group). The numbers for same gender available were lower (14.1 % in the institutionalized group and 9.9 % in the comparison group).

Frequency of contact with other adults. Institutionalized children had contact with other adults mostly on weekends (11.3 %). Monthly contact was present in 9.9 %, every six months contact was in 5.6 %, yearly contact was in 4.2 % and once in several years contact was in 2.8 % of cases in the institutionalized group. On the other hand, children in the comparison group had every day contact with other adults

in most of the cases (18.3 %). Weekend contact was 5.6 % and monthly contact was 2.8 % (Appendix A, Table A12).

Children holiday activities. Both of the groups were having summer and winter holidays. Of the institutionalized children, 2.8 % had home visits in contrast to 4.3 % of comparison group children from nondisrupted families and 4.2 % of comparison group children from disrupted families. Similarly, 16.9 % of the institutionalized children were visiting parents and family during the holidays. However, only 4.3 % of comparison group children from nondisrupted families and 8.3 % of comparison group children from disrupted families were visiting parents or relatives at holidays. Of the children from the comparison group, 6.4 % of comparison group children from nondisrupted families and 20.8 % of comparison group children from disrupted families were going to sea or camp which is relatively small in comparison with 52.1 % for institutionalized children. This type of holiday was predominant for institutionalized group. However, 61.7 % of comparison group children from nondisrupted families and 54.2 % of comparison group children from disrupted families had opportunity to exercise two different types of holidays. Moreover, 19.1 % of comparison group children from nondisrupted families and 4.2 % of comparison group children from disrupted families had three or more different possibilities. In contrast, very few institutionalized children had more than one different possibility (23.9 %) and just one of them (1.4 %) had been reporting to have spent her holidays on three different ways. Finally, 2.8 % of the institutionalized children and 6.4 % of comparison group children from nondisrupted families; 4.2 % of comparison group children from disrupted families were not going to holidays and they were staying in İstanbul (Appendix A, Table A13).

Frequency of holiday activities in weekdays and weekends. Tables A14 and A15 in Appendix A represent the frequency of outdoor activities during weekdays and weekends and what institutionalized and the comparison group children are doing during their holidays. These tables show that the institutionalized children were outside during the weekdays more often than children from the comparison group were. Going to some place almost every day was 31 % in the institutionalized group, but 23.2 % in the comparison group. At weekends on the other hand, the children from the comparison group were outside more often than the institutionalized children were. Of the comparison group 81.7 % was going to holiday every weekends, while this was 76.1 % in the institutionalized group.

Instruments

Teacher's Report Form (TRF)

The Teacher Report Form (TRF) was developed by Achenbach and Edelbrock in 1986 to obtain teachers reports on their pupils' (aged between 5-11 and 12-18) adaptive functioning and problems in a standardized format. The TRF is modeled after the Child Behavior Checklist (CBCL)\4-18, which was developed to obtain parental reports on children's competencies and problems. Although the TRF is designed primarily for teachers, it could also be completed by other school personnel who have similar knowledge about pupils, such as guidance counselors, administrators, and special educators (Achenbach, 1991).

The TRF provides an efficient means for comparing a particular child's school functioning, with the functioning of normative samples of peers, as perceived by their teachers. The TRF could also be used to compare the same child's functioning by reports of teachers and other school personnel, such as guidance

counselors. However, for such school-based assessment, some additional sources are needed to provide a broad picture of the child's functioning, such as direct assessment of children by classroom observations, clinical interview, and structured self-reports (Achenbach, 1991).

Academic and adaptive functioning items of the TRF and scoring procedure.

Page one of the TRF covers demographic information including the child's age, sex, race, grade in school, and parents' occupations, from which an index of socioeconomic status may be calculated. The following six questions are also included to obtain clinically useful background information and academic performance: (1) How long have you known this pupil? (2) How well do you know him/her? (3) How much time does he/she spend in your class per week? (4) What kind of class is it? (5) Has he/she ever been referred for special class placement, services, or tutoring? (6) Has he/she ever repeated a grade? The teacher's ratings of performance in academic subjects are from 1 (much less) to 5 (much more).

The following four questions provide valuable information about pupils' adaptive functioning: (1) How hard he/she is working? (2) How appropriately he/she is behaving? (3) How much he/she is learning? (4) and How happy he/she is? The teacher's ratings for the four adaptive characteristics are scored 1 to 7 for categories ranging from 1 (much less) to 7 (much more). Academic performance, working hard, behaving appropriately, learning and happy sub-tests determine total functioning scale.

The ratings of academic performance and adaptive functioning are scored on the adaptive functioning scale of the TRF profiles. Space is provided for teachers to report recent achievement test scores and the results of IQ, school readiness, or

aptitude tests, as well as for teachers' comments about the pupil's work, behavior, and potential. These open-ended questions are not scored (Achenbach, 1991).

Problem items of the TRF and scoring procedure. The TRF has 118 problem items plus two open-ended items where additional problems may be written by the researcher (item 56 and item 113). The behavior problem items were adapted from the parent version of the CBCL. These problem items include broadband problems of internalizing (socially withdrawn, psychosomatic problems and anxiety/depression), externalizing (aggressive behaviors and delinquent behaviors) and other problems which are not listed under broad-band problems (social problems, thought problems and attention problems). These internalizing, externalizing and other problem subtests determine total behavior scale. Teachers are asked to rate the child for how true each item is now or within the past 2 months, using the 0 to 2 response scale. Zero indicates that the item is "not true," 1 indicates that the item is "somewhat or sometimes true," and 2 indicates that it is "very often true." Higher scores are indicative of presence of problems. Teachers are asked to base their ratings on the previous 2 months, which is baseline specified for the TRF. The shorter period was chosen to avoid restricting the use of teachers' ratings to the last part of the school year and to allow time for assessing change by repeating ratings within the same school year (Achenbach, 1991).

Syndrome and total problem scales. Besides than describing children in terms of specific items, the TRF is designed to identify syndromes of problems. As an instrument of the syndromes' identification, principal components analyses-with varimax rotation were used. The TRF problem items were scored for clinically referred children, separately for each sex at ages 5-11 and 12-18. Two sets of analyses were performed for each sex and age group. In one set of analyses, all but

very low prevalence problem items were included. In the second set, only the 89 items common to the TRF, CBCL, and YSR were considered. Syndromes identified in multiple sex and age groups were compared in order to identify items that were common to a syndrome across sex and age groups. These items were used to construct a core syndrome of items to be scored on the 1991 TRF profile. The version of the core syndrome derived from the 89 common items was compared with analogous core syndromes determined from the CBCL and YSR. Items that were found in the analogous core syndrome from at least two of the three instruments were used to form a “cross-informant syndrome construct” (Achenbach, 1991).

The following eight cross-informant syndromes are displayed on the 1991 TRF profile: Withdrawn, Somatic complaints, Anxious/Depressed, Social Problems, Thought Problems, Attention Problems, Delinquent Behavior, and Aggressive Behavior. The syndrome scales designed as Withdrawn, Somatic Complaints, and Anxious/Depressed are grouped under the broad-band heading Internalizing. The syndrome scales designed as Delinquent Behavior and Aggressive Behavior is grouped under the broad-band heading Externalizing. These groupings of syndromes reflect a distinction that has been detected in numerous multivariate analyses of children’s behavioral/emotional problems. The two group of problems have been variously called Personality Problem versus Conduct Problem (Peterson, 1961, cited in Achenbach, 1991), Inhibition versus Aggression (Miller, 1967, cited in Achenbach, 1991), and over-controlled versus under-controlled (Achenbach & Edelbrock, 1978, cited in Achenbach, 1991). On all 1991 profiles, the Internalizing grouping is operationally defined as the sum of scores on the problem items of the Withdrawn, Somatic Complaints, and Anxious/Depressed scales. The externalizing

grouping is defined as the sum of scores on the problem items of the Delinquent and Aggressive Behavior scales (Achenbach, 1991).

Reliability. To assess reliability in both the rank ordering and magnitude of scale scores, test-retest correlation and t tests of differences were computed between teachers' ratings of 44 8- and 9-year-old pupils at an interval of 15 days (range=7 to 30 days). Most of the pupils had been low birth-weight infants, while about one third had been full-term infants. The pupils were in different classrooms of many different schools. The mean of the reliability for the adaptive scales for girls, for boys and in the combined groups was .90. The mean of total problem scales for boys was .90, for girls was .95, and in the combined groups was .92 (Achenbach, 1991).

To assess stability of problem scores, TRF problem scale scores were obtained at 2- and 4-month intervals from 19 boys who were referred to special services for behavioral/emotional problems. The mean correlation of .75 over 2 months and .66 over 4 months indicated good stabilities (Achenbach, 1991).

The inter-teacher agreement was determined by examining the TRF ratings by pairs of teachers for pupils who were referred to mental health or special education services for behavioral/emotional problems. Most pairs of teachers rated the same pupil in different classes. The magnitude of the correlation did not differ much among the four-sex and age groups. The highest correlation was found .74 for Academic Performance in the 5-11 year old boys group ($N=55$), and .61 for Academic Performance and for Aggressive Behavior in the 12-18 year old boys group ($N=92$). The highest correlation was found .81 for Aggressive Behavior in the 5-11 year old girls group ($N=22$), and .87 for Happy in the 12-18 year old girls group ($N=38$). The highest correlation were for Aggressive Behavior ($r=.68$ in the

combined group, $N=207$), and Externalizing ($r=.66$ in the combined group, $N=207$) (Achenbach, 1991).

The correlation was similar with inter-teacher agreement. The highest correlation was .71 for Aggressive Behavior and .69 for Working Hard and for Externalizing in the combined group ($N=635$). The highest correlation was .60 for Academic and Adaptive scores, and .55 for Total Problems in the combined groups ($N=635$) (Achenbach, 1991).

Validity. In order to determine the content validity, teacher ratings for 1275 pupils who were referred to services for behavioral/emotional problems and for 1275 demographically similar non-referred pupils were compared. The referred pupils obtained significantly higher scores on almost all the TRF problem items and lower scores on all the adaptive functioning items than the non-referred pupils, this indicates that the TRF items were indeed related to mental health concerns (Achenbach, 1991).

To assess the current validity, the Conners Revised Teacher Rating Scale was used. Children ($N=38$ boys, $N=7$ girls aged 5-16) who were referred to mental health or special education services were rated by the Conners Revised Teacher Rating Scale and by TRF with an average interval of 6.8 days between the two instruments. The correlation ranged from .80 to .83. The closest counterparts of the Conners Hyperactivity scale were the TRF Aggressive Behavior ($r=.67$) and Externalizing ($r=.71$). Thus, the relations between the counterpart TRF and Conners scales were strong (Achenbach, 1991).

Translation and adaptation of the TRF into Turkish. TRF was translated and adapted into Turkish by Akkök and her colleagues in 1988. Adaptation and standardization studies were done for 7-12 year old boys in 1988-1989. The 1991

form was revised and differences between the last one and the new one were determined in 1992 by Erol and Akçakın (cited in Erol & Şimşek, 1994). The corrections and differences in the format of the measure were rewritten according to the original form by Akkök and his colleagues in 1992 (cited in Erol & Şimşek, 1994). Then the form was revised again and some changes were made to suit better Turkish meaning by one Turkish language scientist. Like the original form, Turkish TRF form consists of a 4-page questionnaire (Erol & Şimşek, 1994).

The first part of the TRF covers demographic information about the child's name, age, sex, birth date, parents' education level and occupation. As in the original form TRF requests relevant background information and ratings of academic performance with six questions. To obtain these information, teachers rate their pupils at 5-point scales 1 (much less), 5 (much more). The second part of the TRF is similar to the CBLC / 4-18. CBLC and TRF have 89 shared problem items, and both of the scales have 118 total problem items. The problem items have three sub-tests, which are, Externalizing, Internalizing and the problems that are not belonging to these two groups. As in the original form, sum of these sub-tests form the total problem scores. Teachers are asked to rate their children on a 0-1-2 scale, where 0 indicates the item is "not true" of child, 1 indicates it is "somewhat or sometimes true," and 2 indicates it is "very often true" (Erol & Şimşek, 1994).

In the reliability study, the TRF was given to 20 teachers of 49 students (aged between 7-12) to apply it in two trials with 15 days interval. Test-retest reliability of the total problem score was .88. In order to determine the internal consistency, the TRF was applied to 2340 children between ages 7 and 12. The internal consistency, determined by Cronbach Alpha Coefficient, was .82 for internalizing, .81 for externalizing, and .87 for total problem scores. The correlation coefficients for total

problem were calculated separately for different settlements. Results indicated that total problem correlation coefficient was found .87 for urban, .87 for semi-urban, and .86 for rural settings. These results indicate that the internal consistency of the scale is high and the scale is reliable for both sexes and different age groups, and also reliable in cities, districts and villages (Erol & Şimşek, 1994) (A copy of the Turkish Form of the TRF is in Appendix B).

No information was available regarding the validity of the TRF. Personal contact with Erol revealed that factor analysis was underway.

In this study, Internalizing, Externalizing, Total Problem, Adaptive Functioning and Academic Achievement scores were utilized and for analysis, raw scores were used.

The Revised Class Play (RCP)

The Revised Class Play was developed by Masten, Morison and Pellegrini (1985) in order to improve the assessment of social competence and stress resistance in children. The “class play” technique of peer assessment was used for several purposes. Class Play scores have been found significantly related to concurrent emotional maladaptation, high-risk status, observed maladaptive behaviors and later success in high school (Masten, et al., 1985).

The Revised Class Play (RCP) consists of 30 roles, 15 positive and 15 negative. The content of the RCP represents a significant difference from the original Lambert-Bower instrument; many new items were incorporated into the instrument, especially from previous measures (Masten, et. al., 1985). Administration of the RCP is based on role casting made by peers and administrated twice once for girls and once for boys to eliminate gender differences in votes (Masten, et. al., 1985).

Item content was modified for several purposes. The first purpose was to improve the sampling of positive aspect of social competence. Positive role items were added on the basis of rational content analysis. Second, several new items were constructed or adapted to represent polar opposites of social attributes already indexed by existing roles. For instance, to describe a class leader the role “a person who can not get others to listen” was added. Third, items in previous measures that directly referred to academic and intellectual ability rather than to social competence (“someone who is smart and usually knows the answer”) were excluded to reduce the likelihood of “halo effects” related to classroom performance that may affect peer or teacher assessment. Fourth, an attempt was made to simplify the complicated and confusing roles. For example, “someone who is jolly and does not cause any trouble in class.” (Masten, et. al., 1985).

To examine the structure of the RCP results from two school administrations were factor analyzed separately. Scores subjected to factor analysis consisted of the number of “votes” received by each subject on each of 30 items (roles). All item scores were standardized within classroom and sex to adjust for differences in the number of voters as well as the number of votees for different administrations, because both affect the number of votes a child can receive. In each factor analysis, a principal-components analysis was conducted to determine the number of major dimensions characterizing the data. Three principal factors, accounting for 64% of the variance, were rotated to the varimax criterion of simple structure. All of the positive items loaded substantially on the first factor, forming a dimension that was labeled Sociability-Leadership. The negative items generally divided into two factors that were labeled Aggressive-Disruptive and Sensitive-Isolated (Masten, et. al, 1985).

Reliability and validity study of the RCP was conducted by Masten and her colleagues (1985). The RCP was administered to 612 sample from third through sixth grade students of two elementary schools. To obtain stability data, the RCP was re-administered approximately 6 months later in six of the third through sixth grade classrooms of the original sample ($N=161$), and again after 17 months the RCP administered to all fourth through sixth grade students ($N=163$) (Masten, et. al., 1985).

Reliability. The internal consistency coefficients of the three scores were as follows: .95 and .93 for the sociability-leadership from two different schools, respectively; .93 and .90 for disruptive-aggressive; and .85 and .81 for sensitive-isolation (Masten, et. al., 1985).

The reliability of the three reputation scores was determined by comparing how boys and girls voted for the same individual. To obtain this correlation, new scores were computed within sex of voters. When voting for boys, the correlation between scores from boy voters and girl voters were .84 for sociability-leadership score, .86 for disruptive-aggressive score and .75 for sensitive-isolated score; when voting for girls, the correlation were .78 (sociability-leadership), .82 (disruptive-aggressive), and .82 (sensitive-isolated) respectively. So, good cross-sex reliability was obtained (Masten, et. al., 1985).

Stability data of the RCP was provided by the three administrations in one school at interval of 6 and 17 months. The 6-month stability correlation was .87 for sociability-leadership score, .77 for the aggressive-disruptive and .80 for the sensitive-isolated scores. After 17 months the stability correlation scores remained and the results for the same scores were .63 (sociability-leadership), .64 (disruptive-aggressive), and .66 (sensitive-isolation), respectively (Masten et. al., 1985).

Inter-correlation among the three RCP scores were low to moderate. The disruptive-aggressive score showed the lowest correlation with the other two scores: $-.17$ ($p < .001$) and $-.12$ ($p < .05$) with the sociability score and $.09$ ($p = ns$) and $.15$ ($p < .01$) with the sensitive-isolated score in two school samples. The inter-correlation of sociability-leadership and sensitive-isolated score was $-.37$ ($p < .001$) for one school and $.38$ ($p < .001$) for the other school (Masten et. al., 1985).

Validity. Correlation of the sociability-leadership, disruptive and isolated scores with teacher ratings, achievement scores, and IQ were computed and found moderately significant. The sociability-leadership score was positively related to IQ scores, achievement and teacher ratings. The disruptive-aggressive score was strongly related to teacher ratings of “disruptive-oppositional” behavior and modestly related to academic achievement, but in the negative direction. Finally, the sensitive-isolated score was strongly and negatively related to IQ, achievement and teacher ratings of classroom competence (Masten, et. al., 1985).

Masten and Morison (1991) conducted a follow-up study to provide information for predictive validity of the RCP. The sample was 207 third to sixth graders. Seven years later, 88% of these children and their parents joined in the follow-up. The three RCP scores were significantly related to both adolescent competence and psychopathology, supporting the predictive validity of the RCP. The disruptive-aggressive dimension of peer reputation was related to externalizing behavior and antisocial activities in adolescence. However, the disruptive-aggressive score was negatively related to academic performance, job competence, and parental view of self-esteem. The sensitive-isolated dimension of peer reputation was inversely related to later social competence. The sociability-leadership dimension of peer reputation had consistent positive relations with social competence, academic

achievement, job competence, sport and activities, perceived self worth, and internalizing and externalizing symptoms. Thus, it was indicated that the sociability-leadership score was the best predictor of adolescence adjustment alone.

Scoring the Revised Class Play (RCP). A positive reputation score (sociability/leadership) was based on 15 items and each of the two negative scores (disruptive and isolated) were based on 7 items. One item (#15) was not used in any composite score because of its weak factor loading. Item 14 was included in the isolated score although it had relatively high loading on the disruptive factor. The number of votes received from children of both sexes on the relevant items was first tallied and averaged for each child. These “raw” summary scores were then standardized through z-score transformations within classroom and sex to adjust for unequal sex and classroom size distributions (Masten et. al., 1985).

Translation and adaptation of the RCP into Turkish. The translation of the original English Revised Class Play into Turkish was done independently by Kurttutan and her thesis advisor Albayrak-Kaymak (1997). The Turkish form of the RCP (RCP-T) was obtained by comparison of the original items with their back-translation (A copy of the RCP-T is in Appendix C).

After the translation and pilot study, the RCP-T was given to 756 third through fifth grade students from three different elementary schools in Istanbul to examine its validity and reliability. Each school approximated low, middle and high levels of SES. In the sample there were nearly equal number of female and male students (Kurttutan, 1997).

Exploratory and confirmatory factor analyses indicated that the same 3-factorial structure was valid for the Turkish sample. Six of the items (6, 9, 11, 15, 16, and 26) that did not fit into this structure were eliminated from the Turkish RCP

(RCP-T). Thus, the final form consists of 24 items. The sociability-leadership dimension of the Turkish form of the RCP consists of 11 items (1, 4, 7, 10, 12, 13, 19, 20, 23, 25) and 28; the aggressive-disruptive dimension of the Turkish RCP consists of 7 items (2, 5, 6, 8, 21, 27 and 29); the sensitive-isolated dimension of the Turkish form of the RCP consists of 6 items (3, 14, 17, 18, 22, 24). All the items in these three dimensions belong to the same dimensions in the original RCP. The final factor analysis with 24 items explained 60.4% of the total variance (28.1%, 19.9%, and 12.3%, for the sociability-leadership, the aggressive-disruptive and the sensitive-isolated dimensions, respectively) for females and 61% (29.4%, 17.7%, and 13.9%) for males (Kurttutan, 1997).

The alpha reliabilities of the RCP-T were generally high. They were .93 for the sociability-leadership dimension, .88 for the aggressive-disruptive dimension and finally .83 for the sensitive-isolated dimension. The correlation between the female and male voters was high. When voting for girls the correlation coefficients between scores of male voters and female voters ($N=366$) were .87 for the sociability-leadership, .86 for the aggressive-disruptive, and .85 for the sensitive-isolated factor. When voting for boys ($N=388$) the correlation coefficients between scores of boys voters and girls voters were .85, for the sociability-leadership, .85 for the aggressive-disruptive and .82 for the sensitive-isolated factors.

Test-retest reliabilities of the RCP-T were tested over an eight-month interval with 483 fourth and fifth grade students. Stability was .66 for sociability-leadership, .79 for aggressive-disruptive, and .67 for sensitive-isolated. Thus, it was seen that RCP-T had above average stability (Albayrak-Kaymak and Kurttutan, 1998).

The validity of the RCP-T was tested by correlation of these three factor scores with teacher ratings of internalizing and externalizing problems, sociometric

ratings, and grade point averages (GPA). Results indicated that sociability-leadership scores of both females and males were negatively related with teacher ratings of externalizing and internalizing problems. The correlation between aggressive-disruptive scores of females and males and teacher ratings of internalizing and externalizing problems were non-significant. Sensitive-isolated scores of both females and males were positively correlated with teacher ratings of externalizing and internalizing problems. Correlation of sociability-leadership scores of females and males with sociometric ratings was positive. Aggressive-disruptive scores of females did not correlate significantly with one of the sociometric ratings, but had a low positive correlation with another sociometric rating. Aggressive-disruptive scores of males did not significantly correlate with any of the sociometric ratings. Sensitive-isolated scores of females had negative but low correlation with sociometric ratings. Female correlation was higher than male correlation. The correlation between sociability scores of females and males with GPA were low. The correlation between aggressive-disruptive scores of females and males with GPA were non-significant. Finally, the correlation between sensitive-isolated scores of females and males with GPA was low and negative (Kurttutan, 1997).

In this study, for analysis of RCP-T scores obtained from the three factors were used. These were first standardized (t) within class and gender.

Piers-Harris Children's Self-Concept Scale

Piers-Harris Children's Self Concept Scale, or the Way I Feel About Myself (WIFAM) Scale, was developed by Piers and Harris (1964) to measure children's (aged between 9-16) self-concept. WIFAM is a paper-pencil test and consists of 80 items with "yes" or "no" responses. High scores indicate adequate self-concept, and low scores indicate inadequate self-concept. Administration of the scale takes

approximately 20-25 minutes. High scores indicate positive self-concept and low scores indicate negative self-concept (Öner, 1996).

Reliability. WIFAM's standardization study was conducted on 3rd to 12th grade children. The reliability of the scale was tested with internal consistency and test-retest reliability. Internal consistency coefficients determined by Spearman Brown and Kuder Richardson 21 were between .78 and .93. Test-retest reliability coefficients over four months intervals determined by Pearson product-moment correlation were between .71 and .77.

Validity. The construct validity of this form was determined by Lippsitt-Student Problem checklist and significant positive correlations ($r=.68$ and $r=.64$) between the WIFAM and the Lippsitt. Factorial analysis of the original scale yielded 10 factors. Of these ten factors only six (behavior, intellectual and school status, physical appearance and attribute, anxiety, popularity, happiness and satisfaction) were large enough for interpretation. Factor analysis indicated that these six factors accounted for 42% of the total self-concept variance (Öner, 1996).

Translation and adaptation of the WIFAM. WIFAM was translated and adapted into Turkish by Çataklı and Öner in 1986-1987 (A copy of the WIFAM is in Appendix D). Adaptation and standardization studies were done for 447 students from 2th and 8th classess. In the reliability study, WIFAM was given to students to apply it in two trials with 7 days interval. To determine the test-retest reliability it was also given to 668 students from two different schools with 5 months and 1 years intervals. Test-retest reliability of the scale was between .53 and .70, respectively. The internal consistency which was determined by Kuder Richardson 20 was .81 and .89. Biserial correlations of item-total score was .09 to .50.

The construct validity of WIFAM was determined by finding the correlations between self concept and test anxiety scores ($r = -.48$ to $-.46$), self concept and parent concept scores ($r = -.28$ to $-.15$) and self concept and school success ($r = -.24$ to $-.23$). The factorial analysis of the original scale yielded 10 factors. Only six of these factors were large enough for interpretation. These factor are: happiness, anxiety, popularity, behavior, physical appearance and school status. The order difference of these six factors were explained as a concequence of cultural differences. Factor analysis indicated that these six factors accounted for 41.7% of the total self-concept variance (Öner, 1996).

In current analyses, raw scores of the WIFAM were used.

Demographic Information Form

A form was developed to obtain demographic information from students (See Appendix E). This form includes information such as current age, sex, age of loss or separation, family's educational and occupational background, whether her/his parents are alive, whether she/he meets with one of the parent (if she/he meets how often), whether her/his parents live together, whether she/he meets with her/his

relatives (whom she/he meets and how often) and gender of the lost or separated parent. Obtaining information by the demographic form takes approximately 10 minutes for each child. This form also included some open-ended questions, such as parental occupation, other adults available for children and children holidays. The responses given to the open-ended questions were classified into several categories to include the range of possibilities present in children's answers. These categories can be examined from the appendix tables (Appendix A).

Information on Institutionalized Children

A brief form consisting of questions that are designed to capture information on the length of stay, reasons for placement and contact with family members was developed to be filled out by the researcher about each institutionalized child. When if the institutional records were incomplete the directors, social workers and psychologists of the institution were interviewed to complete the missing information (A copy of this form is attached to Appendix F).

Cumulative Grade Point Averages

By the end of the school year students' cumulative grade point averages (GPA) were calculated by obtaining grades from the school records. These were standardized within gender and class to eliminate differences that could be due to class, school, gender and differential numbers representing each of them.

For the analysis of school achievement, standardized GPAs within class and gender (t-scores) were used.

Procedure

Three child protection institutions in İstanbul were identified for selection of subjects. The letter written to obtain legal permission from the City Directorate of Social Services is attached to Appendix G. First, these institutions were visited by the researcher to obtain the names, schools and classes of the students. Then, appropriate legal procedures were followed to obtain permission to conduct the study in the identified schools. The permission letter written to the Ministry of Education is attached to Appendix H.

As the researcher gathered the names of the students from the records at the child protection institutions, she also noted the information as the target children's duration of stay in the institution, the present family contacts and reasons that brought them to the institutions.

After the permission was obtained from the Ministry of Education, the researcher visited the institutionalized children's regular school settings. She administered the WIFAM, distributed and collected the demographic form and got a copy of the class attendance list to prepare the RCP-T forms for administration.

Student responses on the demographic form were used to identify other students who have similar characteristics (age, gender, family status, etc.) as the institutionalized children in order to identify the comparison group.

During the second visit to schools, the researcher administered the RCP-T twice, once for each gender. In the meantime, teachers were given the TRF to fill out for the target student(s) and his/her matched peers. To ease the procedure to assure the validity of the teacher ratings, they were not asked to rate more than 10 students. To avoid teacher biases, they were not informed that the purpose of the study relates

to institutionalized children. Instead, they were told that the students for whom they do the rating were selected randomly from the class list.

The final visit to schools was made to obtain the GPAs of target students and the comparison group. Means and standard deviations of GPA of each class for each gender were also calculated to be used in the standardization procedure.



Chapter IV

RESULTS

In this section the results of the study are organized in the same order of the research questions. These questions were examined by two-way analyses of variance (ANOVA) (institutionalized vs comparison group and male vs female). Findings of main effects for group answer the first part of each question, while interaction effects answer the second part of each question. Descriptive statistics for each dependent variable by independent variables are provided before analyses of group differences.

All statistical analyses were conducted by use of the Statistical Package for Social Sciences (SPSS-PC) program where alpha was set at .05 level of significance. Differences in subsample sizes in the analyses were due to missing data.

Research Question 1

Is there any difference between emotional and behavioral problem scores of the institutionalized children and their peers from the comparison group as measured by teacher (the TRF) and peer (the RCP-T) ratings? Does gender have an effect on these differences?

This research question was answered by use of two measures, namely teacher ratings (internalizing, externalizing, total problem and adaptive functioning of the TRF) and peer ratings (aggressive-disruptive and sensitive-isolated scores of the RCP-T).

Teacher Ratings

As seen in Table 4 the means of internalizing ratings for females obtained from the institutionalized group were higher than those of the comparison group, but there was an opposite trend for males.

Table 4:

Means and Standard Deviations of Emotional, Behavioral Problems and Adaptive Functioning Scores of the TRF for Children from Institutionalized and Comparison Group.

TRF Scores	Gender	Institutionalized			Comparison		
		n	Mean	SD	n	Mean	SD
Internalizing	Female	34	13.794	7.919	35	10.943	8.185
	Male	37	8.459	6.234	36	10.667	7.167
Externalizing	Female	34	11.676	13.629	35	5.800	8.778
	Male	37	15.027	15.740	36	6.583	6.813
Total problem	Female	34	45.294	26.958	35	26.457	22.310
	Male	37	42.405	28.506	36	30.000	19.218
Adaptive Functioning	Female	34	11.853	3.125	35	16.114	3.393
	Male	37	12.324	3.300	36	15.806	3.396

The variance analysis showed no differences between the institutionalized and the comparison group ($F(1,138)=.067$; $p=.796$) (Table 5). The significant difference was due to gender ($F(1,138)=5.105$; $p=.025$) and as understood from the

significant interaction effect ($F(1,138)=4.150$; $p=.044$), the gender difference existed for the institutionalized group only. In other words and as further confirmed by one-way ANOVAs, institutionalized females had higher internalizing ratings ($F(1,69)=10.03$; $p=.002$) (Table 6) than institutionalized males, but there was no such gender difference in the comparison group ($F(1,69)=.023$; $p=.880$) (Table 7).

Table 5:

Two-way Analysis of Variance of the Internalizing Ratings of the TRF by Group and Gender.

SV	SS	df	MS	F	p
Main effect	507.176	3	169.059	3.092	.029
Sex	279.122	1	279.122	5.105	.025
Group	3.678	1	3.678	.067	.796
Sex x Group	226.869	1	226.869	4.150	.044
Residual	7544.634	138	54.671		

Table 6:

One-way Analysis of Variance of the Internalizing Ratings of the TRF Score of Females by Group.

SV	SS	df	MS	F	p
Group	504.238	1	504.238	10.030	.002
Residual	3468.748	69	50.272		

Table 7:

One-way Analysis of Variance of the Internalizing Ratings of the TRF Score of Males by Group.

SV	SS	df	MS	F	p
Group	1.354	1	1.354	.023	.880
Residual	4075.886	69	59.071		

Table 4 shows that externalizing ratings of both females and males from the institutionalized group had higher means than the comparison group. Males also tended to have higher externalizing ratings than females in both groups. As seen in Table 8, the two-way ANOVA revealed significant main effects for group ($F(1,138)=13.005$; $p=.000$). The institutionalized group had higher externalizing ratings than the comparison group. However, there was no gender ($F(1,138)=1.084$; $p=.300$) and no interaction effect between group and gender ($F(1,138)=.418$; $p=.519$).

Table 8:

Two-way Analysis of Variance of the Externalizing Ratings of the TRF by Group and Gender.

SV	SS	df	MS	F	p
Main effect	2063.102	3	687.701	4.919	.003
Sex	151.515	1	151.515	1.084	.300
Group	1818.164	1	1818.164	13.005	.000
Sex x Group	58.434	1	58.434	.418	.519
Residual	19292.8	138	139.803		

Total problem ratings were higher for the institutionalized group than the comparison group (Table 4). Besides, females of the institutionalized and males of the comparison group had higher total problem ratings compared to the other gender within each group. As Table 9 indicated the only significant effect was for group ($F(1,138)=14.374$; $p=.000$). No any main effect for gender ($F(1,138)=.006$; $p=.937$) or an interaction effect between gender and group ($F(1,138)=.609$; $p=.436$) existed.

Table 9:

Two-way Analysis of Variance of the Total Problems Ratings of the TRF by Group and Gender.

SV	SS	df	MS	F	p
Main effect	8938.273	3	2979.424	4.949	.003
Sex	3.794	1	3.794	.006	.937
Group	8654.168	1	8654.168	14.374	.000
Sex x Group	366.751	1	366.751	.609	.436
Residual	83084.7	138	602.063		

As a negative indicator of emotional and behavioral problems adaptive functioning was used. These means were lower for the institutionalized group than the comparison group (Table 4). Again, the main effect for group was significant ($F(1,138)=48.589$; $p=.000$), while gender ($F(1,138)=.021$; $p=.884$) and interaction effects ($F(1,138)=.493$; $p=.484$) were not significant (Table 10).

Table 10:

Two-way Analysis of Variance of the Adaptive Functioning of the TRF by Group and Gender.

SV	SS	df	MS	F	p
Main effect	534.333	3	178.111	16.282	.000
Sex	.235	1	.235	.021	.884
Group	531.506	1	531.506	48.589	.000
Sex x Group	5.396	1	5.396	.493	.484
Residual	1509.555	138	10.939		

As a summary, except for internalizing problems, the answer for the first part of the question was “Yes,” i.e., there were significant group differences between institutionalized and control group children in externalizing and total problem scores as well as adaptive functioning scores. However, such group differences did not exist for internalizing problems. Group differences did not differ for gender. There was no gender difference in these scores except for the finding that institutionalized females had higher internalizing scores than institutionalized males. Thus, the answer for the second part of the question was “No.”

Peer Ratings

Table 11 presents the means and standard deviations of emotional and behavioral problems as gathered from the RCP-T for the institutionalized and comparison group. Overall, female children tended to score higher than male children, and institutionalized children tended to score higher than comparison children in both problems.

Table 11:

Means and Standard Deviations of Emotional and Behavioral Problem Scores of the RCP-T for Children from Institutionalized and Comparison Group.

RCP-T Scores	Gender	Institutionalized			Comparison		
		<u>n</u>	<u>Mean</u>	<u>SD</u>	<u>n</u>	<u>Mean</u>	<u>SD</u>
Aggressive-Disruptive	Female	34	52.186	11.903	35	50.024	8.466
	Male	37	51.484	10.640	36	47.600	7.790
Sensitive-Isolated	Female	34	57.605	13.244	35	51.626	10.789
	Male	37	52.936	11.522	36	51.339	9.364

As one can observe from Table 12 the ANOVA on aggressive-disruptive scores indicated that group differences approach to significance level ($F(1,138)=3.360$; $p=.069$), but there was no significant gender ($F(1,138)=.898$; $p=.345$) or interaction ($F(1,138)=.273$; $p=.602$) effect.

Table 12:

Two-way Analysis of Variance of the Aggressive-Disruptive Score of the RCP-T by Group and Gender.

SV	SS	df	MS	F	p
Main effect	437.903	3	145.968	1.513	.214
Sex	86.611	1	86.611	.898	.345
Group	324.122	1	324.122	3.360	.069
Sex x Group	26.290	1	26.290	.273	.602
Residual	13312.1	138	96.464		

Group differences in sensitive-isolated scores for the institutionalized group were higher than the comparison group ($F(1,138)=3.992$; $p=.048$) (Table 13), but gender ($F(1,138)=1.708$; $p=.193$) and interaction ($F(1,138)=1.336$; $p=.250$) effects were not significant.

Table 13:

Two-way Analysis of Variance of the Sensitive-Isolated Score of the RCP-T by Group and Gender.

SV	SS	df	MS	F	p
Main effect	871.611	3	290.537	2.279	.082
Sex	217.813	1	217.813	1.708	.193
Group	508.899	1	508.899	3.992	.048
Sex x Group	170.360	1	170.360	1.336	.250
Residual	17593.9	138	127.492		

In sum, for aggressive-disruptive ratings the answer for the first and the second part of question was “No,” but for sensitive-isolated ratings the answer for the first part of the question was “Yes,” and the second part of the question was “No.” In other words, there were no significant group and gender differences between institutionalized and comparison group children in aggressive-disruptive scores. There was no interaction between group and gender, either. On the other hand, there were significant group differences between institutionalized and comparison group children in sensitive-isolated scores in favor of the comparison group. However, gender was not important variable in sensitive-isolated scores.

Research Question 2

Is there any difference between the sociability-leadership ratings for the institutionalized children and their peers from the comparison group as measured by the RCP-T? Does gender have an effect on these differences?

Table 14 presents the means and standard deviations of RCP-T's sociability-leadership scores for the institutionalized and the comparison group. Comparison group females seemed to have slightly higher scores than the institutionalized group females, but male means of these groups were nearly identical. However, as seen in Table 15, none of the variances were significantly different ($F(1,138)=1.255$; $p=.265$; $F(1,138)=.035$; $p=.852$; $F(1,138)=1.575$; $p=.212$, respectively, for group, gender and interaction effect).

Table 14:

Means and Standard Deviations of Sociability-Leadership Scores of the RCP-T for Children from Institutionalized and Comparison Group.

	Institutionalized			Comparison		
	<u>n</u>	<u>Mean</u>	<u>SD</u>	<u>n</u>	<u>Mean</u>	<u>SD</u>
Female	34	46.182	4.618	35	48.984	8.986
Male	37	47.441	8.150	36	47.282	5.274

Table 15:

Two-way Analysis of Variance of the Sociability-Leadership Score of the RCP-T by Group and Gender.

SV	SS	df	MS	F	p
Main effect	137.983	3	45.994	.932	.427
Sex	1.736	1	1.736	.035	.852
Group	61.954	1	61.954	1.255	.265
Sex x Group	77.783	1	77.783	1.575	.212
Residual	6813.865	138	49.376		

In sum, for the Sociability-Leadership factor the answer for the first part of the question and for the second part of the question was “No.” That is to say, group and gender were not important variables in the Sociability-Leadership ratings.

Research Question 3

Is there any difference between the self-concept scores of the institutionalized children and their peers from the comparison group as measured by the WIFAM? Does gender have an effect on these differences?

Table 16 presents the means and standard deviations of WIFAM scores for the institutionalized and the comparison group. Unlike what one would expect, children from the institutionalized group had higher means than children from the comparison group. Institutionalized males scored higher than institutionalized females, but there was an opposite tendency for the comparison group. However, the ANOVA results indicated only a group effect ($F(1,129)=10.049$; $p=.002$) in favor of the institutionalized group, gender ($F(1,129)=.032$; $p=.858$) and interaction ($F(1,129)=.883$; $p=.349$) effects were not significant (Table 17).

Table 16:

Means and Standard Deviations of the WIFAM Self-Concept Scores for Children from Institutionalized and Comparison Group.

Gender	Institutionalized			Comparison		
	<u>n</u>	<u>Mean</u>	<u>SD</u>	<u>n</u>	<u>Mean</u>	<u>SD</u>
Female	29	24.760	10.720	31	20.241	12.222
Male	37	26.300	12.927	36	17.975	10.292

Table 17:

Two-way Analysis of Variance of the WIFAM Self-Concept Scores by Group and Gender.

<u>SV</u>	<u>SS</u>	<u>df</u>	<u>MS</u>	<u>F</u>	<u>p</u>
Main effect	1572.357	3	524.119	3.881	.011
Sex	4.329	1	4.329	.032	.858
Group	1357.245	1	1357.245	10.049	.002
Sex x Group	119.215	1	119.215	.883	.349
Residual	17422.5	129	135.059		

As a summary, for the WIFAM measure the answer to the first part of the question is “Yes,” while it is “No” to the second part. These findings indicated that gender was not an important variable in self-concept scores of either the institutionalized or the comparison group of children, but all institutionalized children had higher self-concept than comparison children.

Research Question 4

Is there any difference between the school achievement of the institutionalized children and their peers from the comparison group as measured by standardized GPAs and academic performance ratings of teachers (the TRF)? Does gender have an effect on these differences?

Examination of Table 18 shows that children in the comparison group received consistently higher GPAs and academic performance scores than the children in the institutionalized group. Indeed, these differences were significant for both indicators of school achievement, namely, GPA ($F(1,138)=31.664$; $p=.000$) and the TRF academic performance ratings ($F(1,138)=27.762$; $p=.000$) (Table 19 and 20). Gender differences seemed to favor males in standardized GPAs and institutionalized males in the TRF academic performance ratings (Table 18), but these did not reach the significance level ($F(1,138)=1.897$; $p=.171$ and $F(1,138)=.378$; $p=.540$, respectively) (Table 19 and 20). Likewise, interaction effect did not exist for either variables ($F(1,138)=.088$; $p=.767$ and $F(1,138)=.627$; $p=.430$) standardized GPAs and TRF academic performance ratings, respectively (Table 19 and 20).

Table 18:

Means and Standard Deviations of Standardized GPAs and Academic PerformanceScores of the TRF for Children from Institutionalized and Comparison Group.

School Achievement	Gender	Institutionalized			Comparison		
		<u>n</u>	<u>Mean</u>	<u>SD</u>	<u>n</u>	<u>Mean</u>	<u>SD</u>
Standardized GPAs	Female	34	40.824	9.225	35	48.924	10.482
	Male	37	42.465	8.581	36	51.470	7.765
TRF Academic Performance	Female	34	234.265	65.288	35	298.114	55.836
	Male	37	249.081	72.112	36	296.250	55.890

Table 19:

Two-way Analysis of Variance of the Standardized GPAs by Group and Gender.

<u>SV</u>	<u>SS</u>	<u>df</u>	<u>MS</u>	<u>F</u>	<u>p</u>
Main effect	2749.200	3	916.400	11.186	.000
Sex	155.398	1	155.398	1.897	.171
Group	2594.081	1	2594.081	31.664	.000
Sex x Group	7.250	1	7.250	.088	.767
Residual	11305.5	138	81.924		

Table 20:

Two-way Analysis of Variance of the TRF Academic Performance Ratings by Group and Gender.

SV	SS	df	MS	F	p
Main effect	112055	3	37351.7	9.489	.000
Sex	1487.362	1	1487.362	.378	.540
Group	109277	1	109277	27.762	.000
Sex x Group	2466.969	1	2466.969	.627	.430
Residual	3936.200	138			

In conclusion, both for standardized GPAs and the TRF academic performance ratings, the first part of the question received a “Yes,” and the second part received a “No” answer. These results indicate that there were significant group differences between institutionalized and comparison group children in GPAs and the TRF academic performance ratings in favor of the comparison group. On the other hand, gender was not important variable in GPAs and the TRF academic performance ratings.

As a general summary of the results, two-way ANOVAs showed significant group differences for externalizing problem, total problem, adaptive functioning, sensitive-isolated problem, self-concept, standardized GPAs and academic performance. In other words, there were group differences in all examined variables except for internalizing problem scores obtained from the TRF and the sociability-leadership ratings of the RCP-T, while differences in aggressive-disruptive ratings of RCP-T approached the significance level. In addition, all the existing differences, except for self-concept, favored the comparison group. The only significant interaction and gender effects were in internalizing problems analysis, which

indicated that there was no gender difference in comparison group children, but there was gender difference in the institutionalized children in favor of males. It can be stated that, in general, the parental deprivation was equally detrimental for both genders. However, self-concepts of institutionalized children were better off than the comparison group children, and sociability/leadership status of institutionalized and intact group children were similar.



Chapter V

DISCUSSION

As reviewed in the literature, previous studies conducted mostly in western countries showed that one of the most potentially damaging events of childhood is parental deprivation. As the results of this study present, compared to their peers from intact families, institutionalized children had higher externalizing and total problem scores as rated by teachers, higher sensitive-isolated scores as rated by peers and self-concept scores as rated by themselves. In addition, they had lower adaptive functioning and academic performance as rated by their teachers and lower school grades. Teacher ratings of internalizing problems and peer ratings of sociability/leadership did not differentiate the two groups. But, among all these results only self-concept scores were in favor of the institutionalized children. These findings are generally supportive of the existing theoretical and empirical research that if parental deprivation was not mitigated by adequate substitute care, a child could develop problems in emotional, behavioral, adaptive and academic functioning.

Effects of parental separation due to loss, divorce or abandonment were studied by several researchers who reported that children who experienced parental separation due to these reasons develop more emotional and behavioral problems such as fears, phobias, anxiety, depression and psychosomatic disorders than their peers from intact families (Ainsworth, 1980, cited in Iwanic, 1996; Bowlby, Ainsworth, Boston and Rosenbluth, 1956, cited in Schaffer, 1991; Eluzur and Kaffman, 1982; Fergusson, Harris and Bifulco, 1986, cited in Parkes, Hinde and Marris, 1991; Handford, Mattison, Humptrey and Lauglin, 1986; Healy, Malley and

Steward, 1990, cited in Phares, 1993; Hetherington, 1972; Horwood and Lynskey, 1994; Ijzendoorn and Wolff, 1997; Marcus; 1991; and Steinhauer, 1983, cited in Iwanic, 1996). The results of our study are generally consistent with their findings.

Goldfarb (1945, cited in Quarry & Werry, 1973) and Spitz (1946, cited in Quarry & Werry, 1973) studied the effects of institutional settings and stated that children from institutions had more conduct disorders, impulsivity, temper tantrums, lying, stealing, unpredictable cruelty and aggression to peers, adults and animals than children from foster homes. Actually, in taking care of children who are in need of protection, more recent practice is towards systems of adoptive or foster families rather than institutionalization. Lambert, Essen and Head (1977, cited in Schaffer, 1991) studied effects of living in institutions and found that institutionalization has a negative influence on children's emotional development. They stated that children from institutions had higher levels of antisocial behaviors than children from intact families. Bowlby (1973) claimed that parental deprivation, especially maternal, could cause separation anxiety and this could have negative influences on children's emotional development and future relationships with adults. Findings of Rutter's study (1975, cited in Patterson, Vaden & Kupersmidt, 1991) were similar to the present study in showing the negative effects of parental deprivation (due to loss, divorce or hospitalization) in the sense that children from broken families were aggressive. Similarly, findings of the present study indicated that compared to their peers from intact families children from institutions had higher externalizing problems as rated by their teachers and tended to be perceived more aggressive and disruptive by their peers. Our findings in the externalizing dimension were more supportive of this finding, but in the internalizing dimension, our findings were less

clear. Teacher ratings were not different for the institutionalized child in internalizing problems, but peer ratings were higher in sensitive-isolated factor for these children.

Lynn and Sawrey's study (1991) indicated gender differences within the father absent boys and girls. Boys had poorer peer adjustment, while girls had higher dependency to their mother. However, in our study parental deprivation was equally detrimental for the well-being of institutionalized children of both gender.

The current study did not find any unfavorable results in sociability/leadership dimension of peer relations. Inconsistencies in teacher and peer ratings could be derived from the fact that teachers are poor observers of internalizing problems, but better observers of externalizing problems (Albayrak-Kaymak, 1999). Findings of less dramatic group differences in peer ratings could be because peers are more tolerant of certain behaviors than teachers.

Bowlby (1980) stated that when children lose their parents (due to loss, divorce or abandonment), they could blame themselves, feel unlovable or unwanted by their parents, and this lowers self-esteem. Similarly, Cassidy (1988) found that children who were securely attached had higher self-esteem than insecure ones. In contrast to these findings, our study indicated that institutionalized children who had parental deprivation had higher self-concept than children from intact families. This may be due to several reasons. These children may have been forced to care about themselves more, and thus have higher levels of self-reliance or they have unrealistic perceptions of self.

Sugawara (1991) and Mulkey, Crain and Harrington (1992) stated that children who experienced parental separation showed lower school achievement than children who did not experience parental separation. Similar to these findings, the present study showed that institutionalized children showed lower cumulative school

grades and teacher ratings of academic performance compared to children from intact families.

Studies conducted in Turkey also presented similar results that strongly support our study. Özgül-Erten (1995) studied the influences of early parental loss among noninstitutionalized elementary school children. She found that children who had parental loss showed more externalizing problems, and lower self-concept, peer popularity and school achievement than their peers from intact families. Similarly, our findings indicated that institutionalized children developed higher externalizing and total problems than children who come from intact families and they had lower peer popularity, adaptive functioning and school achievement.

Just like our findings, Özgül-Erten also found that effects of loss were equally detrimental for both genders. In contrast to her study, however, our institutionalized females had higher internalizing problems than institutionalized males. First difference between Özgül-Erten's study and our is that we found no negative influence on sociability/leadership which could be due to differences in methodology (she used sociometric ratings, and the RCP-T which has more inclusive social behaviors). The second difference is that although the same measure (i.e., WIFAM) was used by both studies Özgül-Erten found lower self-concepts for the loss group, while we found higher self-concepts for the institutionalized group. This contradiction could be due to unique characteristics of the institutionalized child as compared to the child with loss who lives in custodial family. It could be that institutionalized children who live with children like themselves, maintain higher self-perception than those who live in more heterogeneous environments, i.e., homes like in Özgül-Erten's study. In institutions children's reference groups were other disadvantaged children like themselves, while in home groups reference groups

could come from more advantageous environments. Another reason for higher self-concept of institutionalized children could be due to the fact that these children had to adapt to difficult living conditions, and thus developed certain survival skills that their home raised peers do not have. These survival skills might have raised their self perceptions.

Ayaz (1983) investigated effects of broken families on children's problem behaviors. She found that children from broken families had higher emotional and behavioral problems than children from intact families. The present study is consisted with Ayaz's findings.

Bulut (1983) examined the impact of broken families. She compared elementary school children who come from disruptive families (due to loss, separation or divorce) and children who come from intact families. Results showed that children from both groups had good relations with their friends, but children from broken families mostly had friends from other broken families. The present study's findings on peer ratings indicated that institutionalized children were rated somewhat more aggressive-disruptive, but significantly more sensitive-isolated by their classmates who did not rate the institutionalized children any differently than the comparison group children on sociability-leadership factor.

Fıncıoğlu (1982) studied the effects of living in institutions and found that it has negative effects on children's emotional and cognitive development. Institutionalized children showed more emotional disturbances and slow intellectual development than their peers from intact families did. Our study also found that institutionalized children had higher emotional problems and lower academic achievement (which could be viewed as an outcome of cognitive development) than children from intact families.

Büyüksolak (1995) studied behaviors and academic success of institutionalized children in three different institutions. Findings showed that behaving appropriately (taking responsibility, working independently, work planning) was above moderate. Academic success was also examined which indicated that male children were more successful than female children. In the present study however, adaptive functioning and academic achievement of institutionalized children were lower than children from intact families were, and no significant differences between female and male institutionalized children on academic achievement were found.

Bıyıklı (1982) conducted a study to investigate psychosocial and cognitive development of institutionalized children which yielded that institutionalized children had lower psychosocial (occupational activity, self-management, responsibility, socialization and adaptation) development than their peers from intact families. They were also lower in cognitive development. In the present study, similarly, adaptive functioning and academic performance of institutionalized group children were lower than the intact group children.

This study attempted to examine the influences of parental deprivation of institutionalized children in various domains of development namely: emotional and behavioral problems, peer ratings, self-concept and school achievement. Except for self-concept, which was an unexpectedly high, the results of this research provided support for all the expectations the researcher had for the questions of the study. Thus, we can conclude that institutionalization has widespread negative effects on children compared to noninstitutionalized children. An attempt was made to constitute the comparison group from children of similarly disruptive conditions, although this was not achieved the comparison group was more disadvantageous than

a regular intact group. In any case, comparative negative effects of institutionalization was still observable, implying that children of parental disruption who are raised in family environments are more advantageous from their counterparts in institutions. Parental deprivation together with institutional conditions may have additional negative influences on children.

Limitations of the Study

Certain characteristics of the current study limit the generalizability of its findings. First, the sample size was drawn from only three institutions in İstanbul and the age range of children was 8 years and 5 months to 14 years and 11 months.

Another limitation of the study was that the comparison group was a mixed one in terms of family disruption. Although all children were from relatively low socioeconomic status not all of them had experience of family disruptions.

Obtaining demographic information on families through group interviews with children is the another limitation of the study. This was done due to time restrictions, but resulted in some missing information which sheds doubts on the validity of the sample description.

The study utilized a survey methodology, which was based on group testing, however, in-depth and qualitative information could be obtained by use of idiographic data and individual testing. This limits our understanding of children, like whether high self-concepts of institutionalized children were due to realistic or inflated perceptions of self.

Recommendations for Future Research

Limitations of the current study could be overcome by future research of different methodologies. First, samples including other child protection institutions in

Istanbul and elsewhere in Turkey could be included to obtain more generalizable results. When one can obtain large enough sample, different age groups can be separately studied and compared to see whether the effects of parental deprivation differ by age. Given larger samples and adequate time, future research can focus on attaining a noninstitutionalized but equally disrupted comparative sample and using other means to gather more accurate demographic information about the related characteristics of the institutionalized children.

Future researchers are recommended to use qualitative techniques to obtain in-depth information on effects of parental deprivation. This would allow us to have a better understanding of the internal dynamics of institutional living and within institution differences.

Similarities and differences among the institutionalized children, as well as differences due to institution related factors could be elaborated, such as type and range of institutional activities and staff/student ratio, quality of care and education of the personnel.

Long-term effects of institutional care needs to be examined by use of longitudinal designs. There is a need for applied research in institutions which could contribute to the betterment of living conditions for children of parental deprivation. For example, psychoeducational programs could be provided in these institutions to support children's growth and coping.

The current study revealed two findings inconsistent with the existing literature, thus future studies are needed to clarify them. First, self-concepts of institutionalized children should be further examined to see whether they are realistically higher or inflated. Second, peer relations of institutionalized children

should be elaborated to see the relative strengths and weakness present in seemingly comparable levels of sociability and leadership.



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APPENDIX A



TABLES OF DEMOGRAPHIC INFORMATION

Table A1:

Mother Education.

Level of mother education	Institutionalized						Comparison					
	<u>Female</u>		<u>Male</u>		<u>Total</u>		<u>Female</u>		<u>Male</u>		<u>Total</u>	
	<u>f</u>	<u>%</u>	<u>f</u>	<u>%</u>	<u>f</u>	<u>%</u>	<u>f</u>	<u>%</u>	<u>f</u>	<u>%</u>	<u>f</u>	<u>%</u>
Primary school	31	91.2	30	81.1	61	85.9	17	48.6	20	55.6	37	52.1
Middle school	3	8.8	6	16.2	9	12.7	14	40	11	30.6	25	35.2
High school	-	-	1	2.7	1	1.4	1	2.9	4	11.1	5	7
University	-	-	-	-	-	-	2	5.7	1	2.8	3	4.2
Missing	-	-	-	-	-	-	1	2.9	-	-	1	1.4

Table A3:

Mother Occupation.

Type of occupation	Institutionalized						Comparison					
	Female		Male		Total		Female		Male		Total	
	f	%	f	%	f	%	f	%	f	%	f	%
Unemployed/ housewife	12	35.3	19	51.3	31	43.7	24	68.6	29	80.5	53	74.6
Unskilled worker	8	23.5	6	16.2	14	19.7	6	17.1	3	8.3	9	12.7
Technician – skilled worker	1	2.9	-	-	1	1.4	-	-	1	2.8	1	1.4
Lower-level civil servant	-	-	1	2.7	1	1.4	4	11.4	1	2.8	5	7
Middle-level civil servant	-	-	-	-	-	-	-	-	1	2.8	1	1.4
Small-scale business owner	-	-	-	-	-	-	-	-	-	-	-	-
Professional	-	-	-	-	-	-	1	2.8	1	2.8	2	2.8
Missing	13	38.2	11	29.7	24	33.8	-	-	-	-	-	-

Table A4:

Father Occupation.

Type of occupation	Institutionalized						Comparison					
	Female		Male		Total		Female		Male		Total	
	f	%	f	%	f	%	f	%	f	%	f	%
Unemployed	5	14.7	5	13.5	10	14.0	1	2.9	1	2.8	2	2.8
Unskilled worker	16	47.0	21	56.8	37	52.1	16	45.7	15	41.7	31	43.7
Technician – skilled worker	-	-	2	5.4	2	2.1	6	17.1	6	16.7	12	16.9
Lower-level civil servant	-	-	-	-	-	-	3	8.6	3	8.3	6	8.5
Middle-level civil servant	1	2.9	-	-	1	1.40	-	-	3	8.3	3	4.2
Small-scale business owner	3	8.8	3	8.1	6	8.4	7	20	4	11.1	11	15.5
Professional	-	-	-	-	-	-	-	-	1	2.8	1	1.4
Missing	9	26.5	6	16.2	15	21.1	2	5.7	3	8.3	5	7.0

Table: A5

Reason for Family Disruption.

Reason	Institutionalized						Comparison					
	Female		Male		Total		Female		Male		Total	
	f	%	f	%	f	%	f	%	f	%	f	%
Loss	17	23.9	14	19.7	31	43.7	1	1.4	3	4.2	4	5.6
Divorce	13	18.3	19	26.8	32	45.1	12	16.9	8	11.3	20	28.2
Child abuse	-	-	1	1.4	1	1.4	-	-	-	-	-	-
Parental illness	1	1.4	-	-	1	1.4	-	-	-	-	-	-
Abandonment	3	4.2	3	4.2	6	8.4	-	-	-	-	-	-
Total	34	47.9	37	52.1	71	100	13	18.3	11	15.5	24	33.8

Table: A6

Gender of the Lost Parent.

Parent	Institutionalized						Comparison					
	Female		Male		Total		Female		Male		Total	
	f	%	f	%	f	%	f	%	f	%	f	%
Mother	13	18.3	10	14.1	23	32.4	-	-	-	-	-	-
Father	9	12.7	6	8.5	15	21.1	1	1.4	3	4.2	4	5.6

Table: A7

Presence of Step Parents.

Institutionalized						Comparison					
Female		Male		Total		Female		Male		Total	
f	%	f	%	f	%	f	%	f	%	f	%
12	16.9	10	14.1	22	31	4	5.6	3	4.2	7	9.9

Table A8:

Frequency of Contact with Mother.

Frequency of contact	Institutionalized						Comparison					
	Female		Male		Total		Female		Male		Total	
	f	%	f	%	f	%	f	%	f	%	f	%
Every Day	1	1.4	-	-	1	1.4	33	46.8 (45.8)	35	53.2 (41.7)	68	100 (87.5)
Weekend	5	7.0	4	5.6	9	12.7	-	-	1	- (4.2)	1	- (4.2)
Monthly	5	7.0	5	7.0	10	14.1	-	-	-	-	-	-
Every 6 Months	1	1.4	4	5.6	5	7.0	-	-	-	-	-	-
Yearly	2	2.8	7	9.9	9	12.7	-	-	-	-	-	-
Once in several years	3	4.2	2	2.8	5	7.0	1	- (4.2)	-	-	1	- (4.2)
None	5	7.0	5	7.0	10	14.1	1	- (4.2)	-	-	1	- (4.2)

Note. Comparison group percentages were calculated separately for children from the nondisrupted and disrupted (shown in parantheses) groups.

Table A9:

Frequency of Contact with Father.

Frequency of contact	Institutionalized						Comparison					
	Female		Male		Total		Female		Male		Total	
	f	%	f	%	f	%	f	%	f	%	f	%
Every Day	1	1.4	-	-	1	1.4	23	44.7 (8.3)	26	46.8 (16.7)	49	91.5 (25.0)
Weekend	6	8.5	7	9.9	13	18.3	-	-	-	-	-	-
							6	(25.0)	1	(4.2)	7	(29.2)
Monthly	9	12.7	3	4.2	12	16.9	-	-	-	-	-	-
							1	(4.2)	2	(8.3)	3	(12.5)
Every 6 Months	2	2.8	5	7.0	7	9.9	-	-	-	-	-	-
							1	(4.2)	1	(4.2)	2	(8.3)
Yearly	1	1.4	5	7.0	6	8.5	-	-	-	-	-	-
Once in several years	2	2.8	3	4.2	5	7.0	-	-	-	-	-	-
							2	(8.3)	1	(4.2)	3	(12.5)
None	6	8.5	9	12.7	15	21.1	-	-	-	-	-	-
							1	(4.2)	2	(8.3)	3	(12.5)

Note. Comparison group percentages were calculated separately for children from the nondisrupted and disrupted (shown in parentheses) groups.

Table A10:

Other Adults Available at Home.

Other adults available at home	Institutionalized						Comparison					
	Female		Male		Total		Female		Male		Total	
	f	%	f	%	f	%	f	%	f	%	f	%
Yes	8	11.3	16	22.5	24	33.8	6	8.5	13	18.3	19	26.8
No	24	33.8	20	28.2	44	62.0	29	40.8	23	32.4	52	73.2

Table A11:

Number of Adults Available at Home.

Number of adults available at home	Institutionalized						Comparison					
	Female		Male		Total		Female		Male		Total	
	f	%	f	%	f	%	f	%	f	%	f	%
1	1	1.4	4	5.6	5	7.0	1	1.4	11	15.5	12	16.9
2	2	2.8	4	5.6	6	8.5	3	4.2	2	2.8	5	7.0
3	-	-	1	1.4	1	1.4	-	-	-	-	-	-
4	-	-	1	1.4	1	1.4	-	-	-	-	-	-

Table: A13

Children's Holiday Activities.

Type of holiday activities	Institutionalized						Comparison					
	Female		Male		Total		Female		Male		Total	
	f	%	f	%	f	%	f	%	f	%	f	%
Home visits	1	1.4	1	1.4	2	2.8	3	4.3 (4.2)	-	-	3	4.3 (4.2)
Parents/family visits	8	11.3	4	5.6	12	16.9	2	2.1 (4.2)	2	2.1 (4.2)	4	4.3 (8.3)
Swimming/camping	14	19.7	23	32.4	37	52.1	6	6.4 (12.5)	2	- (8.3)	8	6.4 (20.8)
Staying at home	-	-	2	2.8	2	2.8	-	-	4	6.4 (4.2)	4	6.4 (4.2)
Two of above	10	14.1	7	9.9	17	23.9	18	25.5 (25.0)	24	36.2 (29.2)	42	61.7 (54.2)
Three or more of above	1	1.4	-	-	1	1.4	6	10.6 (4.2)	4	8.5 -	10	19.1 (4.2)

Note. Comparison group percentages were calculated separately for children from the nondisrupted and disrupted (shown in parantheses) groups.

Table: A14

Frequency of Holiday Activities in Weekdays.

Frequency of weekday activities	Institutionalized						Comparison					
	Female		Male		Total		Female		Male		Total	
	f	%	f	%	f	%	f	%	f	%	f	%
Once per week	5	7.0	12	16.9	17	23.9	14	20.2	9	13	23	33.3
Few days per week	17	23.9	15	21.1	32	45.1	14	20.2	16	23.2	30	43.5
Almost every day	12	16.9	10	14.1	22	31	7	10.1	9	13	16	23.2

Table: A15

Frequency of Holiday Activities in Weekends.

Frequency of weekend activities	Institutionalized						Comparison					
	Female		Male		Total		Female		Male		Total	
	f	%	f	%	f	%	f	%	f	%	f	%
Once in a month	3	4.3	5	7.1	8	11.4	6	8.4	3	4.2	9	12.7
Twice in a month	4	5.7	4	5.7	8	11.4	3	4.2	1	1.4	4	5.6
Every weekend	27	38.6	27	38.6	54	76.1	26	36.6	32	45.1	58	81.7

APPENDIX B

TURKISH VERSION OF THE TEACHER REPORT FORM (TRF)



ÖĞRETMEN BİLGİ FORMU

Öğrencinizle ilgili verdiğiniz yanıtlar, aynı yaşta ki öğrencilerden elde edilen ve diğer kaynaklardan sağlanan bilgilerle karşılaştırılacaktır. Her bir maddeden elde edilen puan öğrencinizin genel davranışını belirlemeye katkıda bulunacaktır. Maddelerin tümünü işaretlemeye çalışınız. Ekleme istediğiniz bilgiler ve öneriler olursa lütfen boşluklara ve arka sayfalara yazınız.

ID: _____

ÖĞRENCİNİN ADI, SOYADI		ANNE BABANIN İŞİ, EĞİTİMİ (Son bitirilen okula göre eğitim durumları):	
CINSİYETİ: <input type="checkbox"/> ERKEK <input type="checkbox"/> KIZ		BABANIN İŞİ: _____ EĞİTİMİ: _____	
BUGÜNÜN TARİHİ GÜN _____ AY _____ YIL _____		ANNENİN İŞİ: _____ EĞİTİMİ: _____	
SINIFI: _____		FORMU DOLDURAN: <input type="checkbox"/> Sınıf öğretmeni (adı) _____ <input type="checkbox"/> Rehber öğretmen _____ <input type="checkbox"/> Diğer _____	
DOĞUM TARİHİ (Biliniyorsa) AY _____ GÜN _____ YIL _____		OKULUN ADI: _____	

I. Bu öğrenciyi ne kadar zamandır tanıyorsunuz? _____

II. Bu öğrenciyi ne kadar iyi tanıyorsunuz? _____

1. İyi tanıyorum 2. Oldukça iyi tanıyorum 3. Çok iyi tanıyorum

III. Bu öğrenciye haftada kaç saat dersiniz var? _____

IV. Okulun türü ve uygulanan eğitim sistemini lütfen belirtiniz.

1. Devlet okulu 1. Tam gün
2. Özel okul 2. Yarım gün
3. Üçlü eğitim 3. Üçlü eğitim

V. Öğrencinizin herhangi bir alanda özel eğitime ihtiyacı var mıdır? _____

- Bilmiyorum 0. Hayır 1. Evet-Ne tür _____

VI. Öğrenciniz hiç sınıfta kaldı mı?

- Bilmiyorum 0. Hayır 1. Evet-Kaçıncı sınıfta _____

VII. Şu anda okul başarısı nasıldır-Dersleri sıralayıp uygun sütunu lütfen işaretleyiniz:

DERS	1. Sınıf düzeyinin çok altında	2. Sınıf düzeyinin altında	3. Sınıf düzeyinde	4. Sınıf düzeyinin üstünde	5. Sınıf düzeyinin çok üstünde
1. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ÖĞRETMEN BİLGİ FORMU

VIII. Yaşıtlarına oranla öğrenciniz:	1. Çok az	2. Oldukça az	3. Az	4. Normal sayılır	5. Fazla	6. Oldukça fazla	7. Çok fazla
1. Derslerinde başarılı mıdır?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Uyumlu mudur?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Kolay öğrenir mi?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Mutlu mudur?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

IX. Bu yıl öğrencinize okulda herhangi bir anket ya da ölçek uygulandı mı?

Hayır

Evet-Adı _____

X. Bu yıl öğrencinize okulda zeka ya da yetenek testleri uygulandı mı?

Hayır

Evet-(Testlerin adı) _____

Sonucu: _____

Bu öğrencinin herhangi bir hastalığı, fiziksel rahatsızlığı ya da zihinsel zihinsel özürü var mıdır?

Hayır

Evet-açıklayınız _____

Bu öğrencinin sizi en çok kaygılandıran özelliği nedir?

Bu öğrenciyi en iyi tanımlayan olumlu özelliklerini belirtiniz:

Bu öğrencinin ders durumu, davranışları ve becerileri ile ilgili görüş ve önerilerinizi lütfen yazınız:

ÖĞRETMEN BİLGİ FORMU

Aşağıdaki öğrencilerin özelliklerini tanımlayan maddeler bulunmaktadır. Her bir madde öğrencinin şu andaki ya da son 2 ay içindeki durumunu belirtmektedir. Bir madde öğrenciniz için çok ya da sıklıkla doğru ise 2, bazen ya da biraz doğru ise 1, hiç doğru değilse 0 sayılarını yuvarlak içine alınız. Lütfen tüm maddeleri işaretlemeye çalışınız.

0: Doğru Değil (bildiğiniz kadarıyla)	1: Bazen ya da Biraz Doğru	2: Çok ya da Sıklıkla D	
0 1 2	1. Yaşından daha küçük bir çocuk gibi davranır	0 1 2	33. Kimsenin onu sevmediğine inanır ve bundan yakınır
0 1 2	2. Sınıfta mırıldanır, garip sesler çıkarır	0 1 2	34. Başkalarının ona zarar vereceğini, kötülük yapacağını düşünür
0 1 2	3. Çok tartışır	0 1 2	35. Kendini değersiz hisseder
0 1 2	4. Başladığı işi bitiremez	0 1 2	36. Çok sık bir yerlerini incitir, başı kazadan kurtulmaz
0 1 2	5. Karşı cinsten biri gibi davranır	0 1 2	37. Çok kavga döğüş eder
0 1 2	6. Öğretmenlerine ve diğer okul personeline karşı gelir	0 1 2	38. Onunla çok alay edilir (Arkadaşları onunla çok alay eder)
0 1 2	7. Övünür, yüksekten atar, hava yapar	0 1 2	39. Başı belada olan kişilerle dolaşır
0 1 2	8. Dikkatini uzun süre bir konu üzerinde toplayamaz	0 1 2	40. Olmayan sesler işitir (açıklayınız): _____
0 1 2	9. Bazı düşünceleri kafasına takar ve bunları aklından çıkaramaz (açıklayınız): _____	0 1 2	41. Düşünmeden ya da aniden hareket eder (aklına eseni yapar)
0 1 2	10. Yerinde rahat duramaz, çok hareketlidir	0 1 2	42. Başkalarıyla beraber olmaksızın yalnız kalmayı tercih eder
0 1 2	11. Yetişkinlerin dizinin dibinden ayrılmaz, onlara çok bağımlıdır	0 1 2	43. Yalan söyler ve hile yapar
0 1 2	12. Yalnızlıktan yakınır	0 1 2	44. Turnaklarını yer
0 1 2	13. Kafası karışık, şaşkın görünür	0 1 2	45. Sinirli ve gergindir
0 1 2	14. Çok ağlar	0 1 2	46. Kasları oynar, seğirir, tikleri vardır: _____
0 1 2	15. Kıpır kıpırdır	0 1 2	47. Kurallara çok fazla uyar
0 1 2	16. Başkalarına eziyet eder, zalimce ve kötü davranır	0 1 2	48. Diğer öğrenciler tarafından sevilmez
0 1 2	17. Hayale dalar gider, düşüncelerinde kaybolur	0 1 2	49. Öğrenme güçlüğü vardır
0 1 2	18. Bile bile kendine zarar verir ya da intihar girişiminde bulunur	0 1 2	50. Çok korkak ve kaygılıdır
0 1 2	19. Hep dikkat çekmek ister	0 1 2	51. Baş dönmesi vardır
0 1 2	20. Eşyalarına zarar verir	0 1 2	52. Kendini çok suçlu hisseder
0 1 2	21. Ailesine ya da başkalarına ait eşyalara zarar verir	0 1 2	53. Sırasını beklemeden konuşur
0 1 2	22. Söylenenleri anlamakta güçlük çeker	0 1 2	54. Ağrı yorgundur
0 1 2	23. Okulda söz dinlemez	0 1 2	55. Çok kiloludur
0 1 2	24. Diğer öğrencileri rahatsız eder	0 1 2	56. Tıbbi nedeni bilinmeyen bedensel şikayetleri vardır:
0 1 2	25. Diğer öğrencilerle iyi geçinemez	0 1 2	a. Ağrılar, sızılar
0 1 2	26. Yanlış davranışından dolayı suçlanmış gibi görünmez	0 1 2	b. Baş ağrıları
0 1 2	27. Genellikle kıskançtır	0 1 2	c. Bulantı, kusma hissi
0 1 2	28. Yenilip içilmeyecek şeyleri yer, ya da içer (kum, kil, kalem, silgi gibi) (açıklayınız): _____	0 1 2	d. gözle ilgili şikayetler (açıklayınız): _____
0 1 2	29. Bazı hayvanlardan ve okul dışı ortamlardan ya da yerlerden korkar (açıklayınız): _____	0 1 2	e. Döküntüler ya da başka cilt sorunları
0 1 2	30. Okula gitmekten korkar	0 1 2	f. Mide-karın ağrısı ve kramplar
0 1 2	31. Kötü bir şey yapmaktan ya da düşünmekten korkar	0 1 2	g. Kusma
0 1 2	32. Mükemmel olmasının gerektiğine inanır	0 1 2	h. Diğer (açıklayınız): _____
		0 1 2	57. İnsanlara fiziksel saldırıda bulunur

ÖĞRETMEN BİLGİ FORMU

0: Doğru Değil (bildiğiniz kadarıyla)

1: Bazen ya da Biraz Doğru

2: Çok ya da Sıklıkla Doğru

- 0 1 2 58. Burnuyla, cildiyle, vücudunun başka kısımlarıyla oynar ya da yolar (açıklayınız): _____
- 0 1 2 59. Sınıfta uyur
- 0 1 2 60. Hevessiz, isteksiz ve durgundur
- 0 1 2 61. Okul başarısı düşüktür
- 0 1 2 62. Dengesiz ve sakardır
- 0 1 2 63. Kendinden büyük çocuklarla olmayı tercih eder
- 0 1 2 64. Kendinden küçük çocuklarla olmayı tercih eder
- 0 1 2 65. Konuşmayı reddeder
- 0 1 2 66. Bazı hareketleri tekrar tekrar yapar (açıklayınız): _____
- 0 1 2 67. Sınıf disiplinini bozar
- 0 1 2 68. Çok bağırır, çağırır
- 0 1 2 69. Sır vermez, düşüncelerini kendine saklar
- 0 1 2 70. Olmayan şeyleri görür (açıklayınız): _____
- 0 1 2 71. Sıkılgan ve utangaçtır
- 0 1 2 72. Dağınık, düzensiz çalışır
- 0 1 2 73. Sorumsuzca davranır (açıklayınız): _____
- 0 1 2 74. Gösterişten hoşlanır, maskaralık yapar
- 0 1 2 75. Çekingen ve ürkektir
- 0 1 2 76. Beklenmedik, ani, fevri hareketleri vardır
- 0 1 2 77. İstekleri yerine getirilmezse hevesi çabuk kırılır
- 0 1 2 78. Dikkati çabuk dağılır, dikkatsizdir
- 0 1 2 79. Konuşma gücünü vardır (açıklayınız): _____
- 0 1 2 80. Boş gözlerle uzun uzun bakar
- 0 1 2 81. Eleştirildiğinde incinir, gücenir
- 0 1 2 82. Evin dışında çalmaları vardır
- 0 1 2 83. İhtiyacı olmayan nesnelere toplar, biriktirir (açıklayınız): _____
- 0 1 2 84. Acayip, tuhaf davranışları vardır (açıklayınız): _____

- 0 1 2 85. Acayip, tuhaf düşünceleri vardır (açıklayınız): _____
- 0 1 2 86. İnatçı, somurtkan ve rahatsız edicidir
- 0 1 2 87. Duygu durumunda ani değişiklikler olur, bir anı bir anını tutmaz
- 0 1 2 88. Çok sık küser
- 0 1 2 89. Şüphelidir
- 0 1 2 90. Küfürlü ve açık seçik konuşur
- 0 1 2 91. Kendini öldürmekten söz eder
- 0 1 2 92. Başarısızdır, yeterince çaba göstermez
- 0 1 2 93. Çok fazla konuşur
- 0 1 2 94. Başkalarıyla çok dalga geçer, alay eder
- 0 1 2 95. Öfke nöbetleri vardır, çok çabuk öfkelenir
- 0 1 2 96. Cinsel konuları fazla düşünür
- 0 1 2 97. İnsanları tehdit eder
- 0 1 2 98. Okula ve derse geç kalır
- 0 1 2 99. Temizliğe ve titizliğe aşırı düşkündür, çok önem verir
- 0 1 2 100. Kendine verilen ödevleri yerine getirmez
- 0 1 2 101. Okuldan kaçır, dersini asar
- 0 1 2 102. Hareketsiz ve yavaştır, enerjik değildir
- 0 1 2 103. Mutsuz, üzgün, çökkün ve keyifsizdir
- 0 1 2 104. Çok gürültücüdür
- 0 1 2 105. Tıbbi amaç dışında alkol ya da ilaç kullanır (açıklayınız): _____
- 0 1 2 106. Başkalarını memnun etmeye çok meraklıdır
- 0 1 2 107. Okulu sevmez
- 0 1 2 108. Hata yapmaktan korkar
- 0 1 2 109. Sızlanır, mızırdanır
- 0 1 2 110. Dış görünüşü temiz değildir
- 0 1 2 111. İçe kapanıktır, başkalarıyla birlikte olmak istemez
- 0 1 2 112. Evhamlıdır, herşeyi dert edinir
- 0 1 2 113. Öğrencinizin yukarıdaki listede belirtilmeyen başka sorunu varsa lütfen yazınız: _____
- 0 1 2 _____
- 0 1 2 _____
- 0 1 2 _____

APPENDIX C

TURKISH VERSION OF THE REVISED CLASS PLAY (RCP-T)



Öğretmen _____ İsim _____ Sayfa 1

Bu rolü oynayabilecek biri _____
Tarih _____

SINIF OYUNU

Okul _____ Sınıf _____

1. İyi bir lider olan bir kişi.	2. Birçok kavgaya karışan bir kişi.	3. Başkalarıyla oynamaktansa kendi başına oynayan birisi.	4. Yapılacak şeyler hakkında iyi fikirler üreten bir kişi.

Bu rolü oynayabilecek biri

9. Sırasını beklemeyi bilen birisi.					
10. Herkesin sözünü dinlediği bir kişi.					
11. Adil birisi.					
12. Arkadaş edinmede güçlük çeken birisi.					

Bu rolü oynayabilecek biri

	13. Başkalarna kendini dinletemeyen bir kiři.	14. Çok utangaç bir kimse.	15. Kibar birisi.	16. Kolayca yeni arkadaşlar edinen bir kimse.	

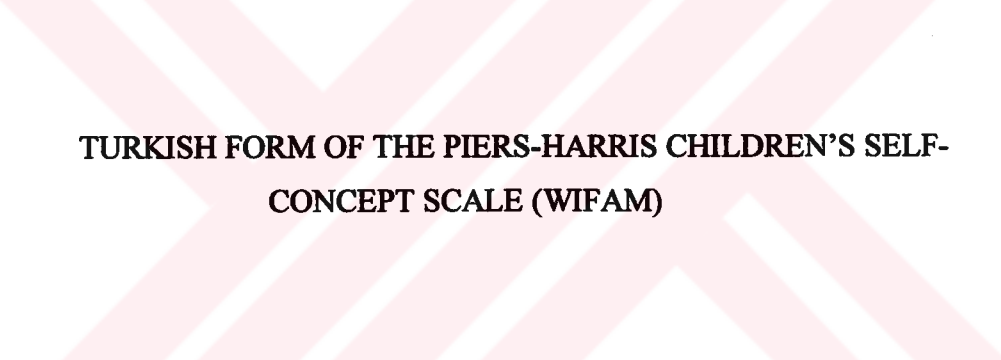
Bu rolü oynayabilecek biri

17. Çok hükmedici bir kişi.					
18. Sık sık dışlanan birisi.					
19. Yardıma gereksinim duyanlara yardım eden birisi.					
20. Genellikle üzüntülü olan birisi.					

Bu rolü oynayabilecek biri

	21. Herkesin birlikte olmaktan hoşlandığı bir kişi.		22. Diğer çocuklarla çok fazla dalga geçen bir kimse.	23. Genellikle mutlu olan birisi.	24. Diğer çocuklara sataşan bir kimse.

APPENDIX D



**TURKISH FORM OF THE PIERS-HARRIS CHILDREN'S SELF-
CONCEPT SCALE (WIFAM)**

AÇIKLAMA: Aşağıda 80 cümle var. Bunlardan sizi tanımlayanları evet tanımlamayanları ise hayır ile cevaplandırın. Bazı cümlelerde karar vermek zor olabilir. Ama lütfen bütün cümleleri işaretleyin. Aynı cümleyi hem evet hem de hayır diye işaretlemeyin. Unutmayın, cümledeki ifade genellikle sizi anlatıyorsa evet, genellikle sizi anlatmıyorsa hayır şeklinde işaretleyeceksiniz. Cümlelerin size uygun olup olmadığını en iyi siz bilebilirsiniz. Bunun için kendinizi gerçekten nasıl görüyorsanız öyle cevaplayın. Cevaplarınızı cevap kağıdına işaretlerken, cümle numarası ile cevap kağıdındaki numaranın aynı olmasına dikkat ediniz.

1. İyi resim çizerim.
2. Okul ödevlerimi bitirmem uzun sürer.
3. Ellerimi kullanmada becerikliyimdir.
4. Okulda başarılı bir öğrenciyim.
5. Aile içinde önemli bir yerim vardır.
6. Sınıf arkadaşlarım benimle alay ediyorlar.
7. Mutluyum.
8. Çoğunlukla neşesizim.
9. Akıllıyım.
10. Öğretmenler derse kaldırıncaya heyecanlanıyorum.
11. Dış görünüşüm beni rahatsız ediyor.
12. Genellikle çekingenim.
13. Arkadaş edinmekte güçlük çekiyorum.
14. Büyüdüğümde önemli bir kimse olacağım.
15. Aileme sorun yaratıyorum.
16. Kuvvetli sayılırım.
17. Sınavlardan önce heyecanlanıyorum, korkuyorum.
18. Okulda terbiyeli, uyumlu davranırım.
19. Herkes tarafından pek sevilen biri değilim.
20. Parlak fikirlerim vardır.
21. Genellikle kendi dediklerimin olmasını isterim.
22. İstedğim bir şeyden kolayca vazgeçerim.
23. Müzikte iyiyim.
24. Hep kötü şeyler yaparım.
25. Evde çoğu zaman huysuzluk ederim.

26. Sınıfta arkadaşlarım beni sayarlar.
27. Sinirli biriyim.
28. Gözlerim güzeldir.
29. Sınıfta derse kalktığımda bildiklerimi sıkılmadan anlatırım.
30. Derslerde sık sık hayal kurarım.
31. (Kardeşiniz varsa) Kardeş(ler)ime sataşırım.
32. Arkadaşlarım fikirlerimi beğenir.
33. Başım sık sık derde girer.
34. Evde büyüklerimin sözünü dinlerim.
35. Sık sık üzülür, meraklanırım.
36. Ailem benden çok fazla şey bekliyor.
37. Halimden memnunum.
38. Evde ve okulda pek çok şeyin dışında bırakıldığımı sanıyorum.
39. Saçlarım güzeldir.
40. Çoğu zaman okul faaliyetlerine gönüllü olarak katılırım.
41. Şimdiki halimden daha başka olmayı isterdim.
42. Geceleri rahat uyurum.
43. Okuldan hiç hoşlanmıyorum..
44. Arkadaşlar arasında oyunlara katılmak için bir seçim yapılırken, en son seçilenlerden biriyim.
45. Sık sık hasta olurum.
46. Başkalarına karşı iyi davranmam.
47. Okuldaki arkadaşlarım iyi fikirlerim olduğunu düşünürler.
48. Mutsuzum.
49. Pek çok arkadaşım var.
50. Neşeliyim.
51. Pek çok şeye aklım ermez.
52. Yakışıklıyım (güzelim)
53. Hayat dolu bir insanım.
54. Sık sık kavgaya karışıyorum.
55. Erkek arkadaşlarım arasında sevilirim.
56. Arkadaşlarım bana sık sık sataşırlar.
57. Ailem benle düş kırıklığına uğruyor.
58. Hoş bir yüzüm vardır.

59. Evde hep benle uğraşırlar.
60. Oyunlarda ve sporda başı ben çekerim.
61. Ne zaman birşey yapmaya kalksam herşey ters gider.
62. Hareketlerimde sakarım.
63. Oyunlarda ve sporda oynamak yerine seyrederim.
64. Öğrendiğimi çabuk unuturum.
65. Herkesle iyi geçinirim.
66. Çabuk kızarım.
67. Kız arkadaşlarım arasında sevilirim.
68. Çok okurum.
69. Bir grupla birlikte çalışmaktansa tek başıma çalışmaktan hoşlanırım.
70. (Kardeşiniz varsa) Kardeş(ler)imi severim.
71. Vücutça güzel sayılırım.
72. Sık sık korkuya kapılırım.
73. Her zaman birşeyler düşürür ve kırarım.
74. Güvenilir bir kimseyim.
75. Başkalarından farklıyım.
76. Kötü şeyler düşünürüm.
77. Kolay ağlarım.
78. İyi bir insanım.
79. İşler hep benim yüzümden ters gider.
80. Şanslı bir kimseyim.

APPENDIX E



DEMOGRAPHIC INFORMATION FORM

Demografik Bilgi Formu

- 1) Adınız: _____ Soyadınız: _____
- 2) Cinsiyetinizi işaretleyiniz: () Kız () Erkek
- 3) Doğum tarihiniz: _____
(yıl) (ay) (gün)
- 4) Okulunuzun adı: _____
- 5) Kaçınıcı sınıfa gidiyorsunuz? _____
- 6) Şubeniz: _____
- 7) Annenizin en son bitirdiği okul:
() İlkokul () Lise
() Ortaokul () Üniversite
- 8) Anneniz çalışıyor mu? () Evet () Hayır
- 9) Anneniz çalışıyor ise ne iş yapıyor?

- 10) Anneniz hayatta mı? () Evet () Hayır
- 11) Eğer anneniz hayatta ise, kendisini görüyor musunuz? () Evet () Hayır
- 12) Annenizi görüyorsanız, ne kadar sıklıkta?
() Her gün () Senede iki kez
() Hafta sonları () Senede bir kez
() Ayda bir kez () Birkaç yılda bir
- 13) Eğer anneniz hayatta değil ise, siz kaç yaşınızdayken vefat etti? _____
- 14) Babanızın en son bitirdiği okul:
() İlkokul () Lise
() Ortaokul () Üniversite

- 1) Babanız çalışıyor mu? () Evet () Hayır
- 2) Babanız çalışıyor ise, ne iş yapıyor? _____
- 3) Babanız hayatta mı? () Evet () Hayır
- 4) Eğer babanız hayatta ise, kendisini görüyor musunuz? () Evet () Hayır
- 5) Eğer babanızı görüyorsanız, ne kadar sıklıkta?
- () Her gün () Senede iki kere
- () Hafta sonları () Senede bir kere
- () Ayda bir kere () Birkaç yılda bir kere
- 6) Eğer babanız hayatta değil ise, siz kaç yaşınızdayken vefat etti? _____
- 7) Şu anda kimin yanında yaşıyorsunuz?
- () Anne ve babamın yanında () Babam ve üvey annemle
- () Annemin yanında () Yakın bir akrabamın yanında
- () Babamın yanında () Komşumuzun yanında
- () Annem ve üvey babamla () Bir çocuk yurdunda
- () Diğer Açıklayınız _____
- 8) Anne ve babanız hayatta ise, birlikte mi yaşıyorlar? () Evet () Hayır
- 9) Anne ve babanız hayatta ise ama birlikte yaşamıyorlarsa:
- () Boşandılar () Ayrılar
- 10) Anne ve babanız ayrı ya da boşanmış iseler, ne kadar zamandır ayrılar? _____
- 11) Üvey anne ya da babanız var mı? () Var () Yok
- 12) Anne ve babanız dışında, sizinle aynı evde yaşayan başkaları var mı?
- () Var () Yok
- 13) Eğer var ise, bu büyükleriniz kimler? _____

14) Anne ve babanızın dışındaki bu büyüklerinizle ne kadar sıklıkta görüşüyorsunuz?

Her gün

Senede iki kere

Hafta sonları

Senede bir kere

Ayda bir kere

Bir kaç yılda bir kere

15) Okula gitmenin dışında, hafta içi evin (ya da kaldığınız yerin) dışına ne kadar sıklıkta çıkıyorsunuz?

Haftada bir kere

Haftada birkaç kere

Hemen her gün

16) Okula gitmenin dışında, hafta sonu evin (ya da kaldığınız yerin) dışına ne kadar sıklıkta çıkıyorsunuz?

Ayda bir kere

Onbeş günde bir

Her hafta sonu


31) Yaz ve dönem tatillerinizi nasıl geçiriyorsunuz? Kısaca anlatın.

APPENDIX F



INFORMATION ON INSTITUTIONALIZED CHILDREN

Information on Institutionalized Children

- 1) İlkokul üçüncü, dördüncü ve beşinci sınıflarda okuyan çocukların isimleri ve soyisimleri (Names and last names of the students who are in the third, fourth and fifth grades).
 - 2) Doğum tarihleri (Birthdates).
 - 3) Bu çocukların gittikleri okullar ve sınıfları (Schools and classes to which these children attend).
 - 4) Kuruma geliş nedenleri (Reasons for their being in the institution).
 - 5) Kurumda ne süredir buldukları (For how long they have been in the institution).
 - 6) Anne-baba ya da diğer yakınları ile ne sıklıkta görüştikleri (How often they have contact with parents or relatives).
- 

APPENDIX G



THE LETTER OF PERMISSION TO THE CITY

DIRECTORATE OF SOCIAL SERVICES

27 Ocak 1998

Sosyal Hizmetler İl Müdürlüğüne:

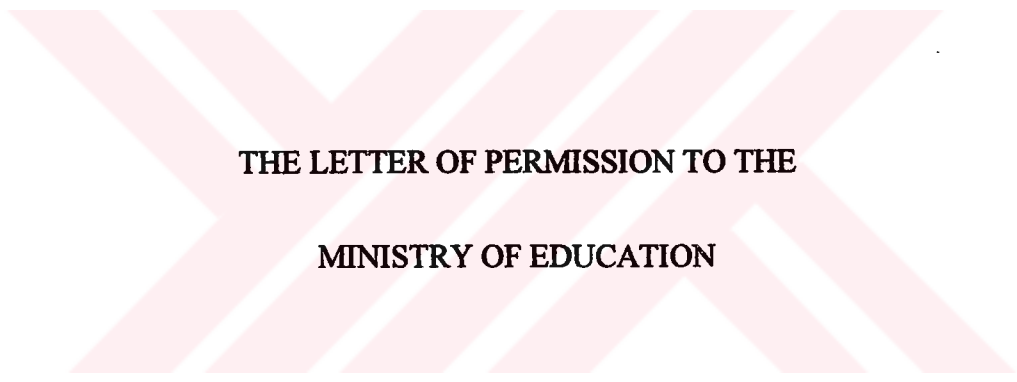
Boğaziçi Üniversitesi, Eğitim Bilimleri Bölümü master öğrencisi olan Binnur Kurtlar Mesiç, rehberlik ve psikolojik danışmanlık alanındaki uzmanlık tezini benim danışmanlığım altında yürütmeye başlamıştır.

Binnur'un tez konusu ana-baba yoksunluğunun çocuklar üzerindeki etkilerine ilişkindir. Bu konunun araştırılması için izleyeceğimiz desen, çocuk esirgeme kurumlarında yaşayan ilköğretim yaşındaki öğrencilerin, ana-babalarıyla birlikte yaşayan öğrencilerle duygusal, sosyal ve akademik açıdan kıyaslanmasına dayanmaktadır. Bu boyutların değerlendirilmesi için, herbiri A.B.D'nde geliştirilmiş ve uluslararası araştırmalarda kullanılan üç ölçek kullanılacaktır. Bunların ilki Erol ve meslektaşları tarafından Türkçeye uyarlanmış olan "Öğretmen Gözlem Formu," ikincisi Albayrak-Kaymak ve Kurttutan tarafından Türkçeye uyarlanmış olan "Sınıf Oyunu," üçüncüsü ise Öner tarafından Türkçeye uyarlanmış olan "Çocuklarda Öz-kavramı" ölçeğidir. Akademik değerlendirme öğrencilerin ders notu ortalamalarına dayanacaktır. Bunların yanısıra, öğrencilere ve ailelerine ilişkin demografik bilgilerin alınacağı kısa bir bilgi formu doldurulacaktır.

Yukarıdaki işlemleri kapsayan uygulamaların İstanbul'un çeşitli semtlerindeki çocuk esirgeme kurumlarından seçilecek yarısı kız, yarısı erkek toplam 60 öğrenci üzerinde yapılması planlanmaktadır. Bu çocukların gittikleri okullar, kurumda kalma süreleri, ailelerinden ayrılık nedenleri ve anne-babalarıyla ya da diğer yakınları ile görüşme sıklıkları kurum kayıtlarından öğrenilecek ve aynı okullarda okuyan, ancak ana-babası ile birlikte yaşayan 60 öğrenci kıyaslama grubu olarak belirlenecektir. Böylece eşleştirilmiş olan iki grup yukarıdaki değerlendirmeler yoluyla karşılaştırılacaktır. Ancak öğrencilerin okullarında toplanan veriler, kurumlarda yaşayan öğrencilerin bulunduğu sınıfın tümüne uygulanarak, dikkatin bu öğrenciler üzerine çekilmesine engel olunacaktır.

Yukarıdaki çerçevesi anlatılmış olan araştırmayı, Göztepe Semiha Şakir, Bahçelievler, ve Küçükalyalı çocuk esirgeme kurumlarından seçilecek öğrencilerle gerçekleştirmeyi planlıyoruz. Bu çalışmanın yapılabilmesi yolunda gereği için bilgi ve izinlerinizi saygılarımla arz ediyorum.

APPENDIX H



**THE LETTER OF PERMISSION TO THE
MINISTRY OF EDUCATION**

İl Milli Eğitim Müdürlüğü'ne:

Boğaziçi Üniversitesi, Eğitim Bilimleri Bölümü master öğrencisi olan Binnur Kurtlar Mesiç, rehberlik ve psikolojik danışmanlık alanındaki uzmanlık tezini benim danışmanlığım altında yürütmeye başlamıştır.

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Yukarıdaki çerçevesi anlatılmış olan araştırmaya, il müdürlüğünüze bağlı olan Göztepe Semiha Şakir, Muhsine Zeynep, Bağlar, Bahçelievler, Fikret Yüzatlı, Şair Zihni ve Şirinevler İlköğretim Okulları'ndan seçilecek öğrencileri de dahil etmeyi planlıyoruz. Kurumda kalan öğrencilerle çalışmamızı yürütebilmek için Sosyal Hizmetler Çocuk Esirgeme Kurumu'ndan aldığımız iznin bir kopyası ilişiktir. Çalışmanın yapılabilmesi yolunda gereği için bilgi ve izinlerinizi saygılarımla arz ediyorum.