A

ADJUSTMENT OF ADOPTED CHILDREN

A THESIS

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By

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CHAPTER I

GENERAL INTRODUCTION

Adoption in Michigan

The history of adoption is inextricably bound up with religious organizations. In the past it was only these institutions which took upon themselves the responsibility and care of orphans and "foundlings." As time went on, the civil agencies in the states looked upon this growing problem as a condition for which they too should accept responsibility. State operated organizations thus came into existence later than private adoption agencies, and laws were passed stipulating minimum requirements for eligibility of adoptive parents. These minimum requirements vary to some extent among the different states but they all have one factor in common: their purpose for existing is to insure the greatest possible protection and opportunity for the adopted child.

Legal adoption in the state of Michigan may be accomplished in either of two ways: by public or private agencies, both of which function through the court or County Agent's Office. In this state, the agency effecting the largest number of adoptions at this time is the State operated Michigan Children's Aid Society. The organization through which the second largest group of infants and children are adopted is

the Catholic Social Services of Wayne County, a private agency.[1] Other adoption facilities in the Detroit area are Detroit Children's Aid, Florence Crittenton Hospital, and Methodist Children's Village.

Although Michigan laws stipulate minimum requirements to be met in adoptions, private and public agencies strive to raise their own standards well above these to insure consistently high values in the criteria for eligible parents and children in the adoption plan.

The Agency

Private agencies such as Catholic Social Services of Wayne County are keenly mindful of the necessity of maintaining high standards in the field of adoption. This agency, because of its philosophy, follows rigorous principles with regard to the rights of the human individual and the duty of active charity imposed upon the Church. In one article, Msgr. Cooke states: "The objective, therefore, of our Catholic program of child care is the protection and fostering of the spiritual and moral welfare of every child in the United States who lives outside his or her own home."[2] For this reason this agency frequently evaluates its own standards to insure a high level of performance and has deemed it fitting to foster this present study.

Catholic Social Services is an individual organization under the auspices of the Council of Catholic Social Agencies,

and Catholic Charities of the Archdiocese of Detroit. It has a staff of about one hundred personnel; and its services, besides adoptions, include family counseling, marital counseling, help with individual personality problems, foster-home placement, service to unwed mothers, and a family counseling training program for parish priests. It is supported by United Community Services.

The professional staff of the adoption department consists of two supervisors, six infant adoption workers, one caseworker for placement of older children, and one foreign program caseworker engaged in resettlement of immigrants in Wayne County.

This department also has access to various auxiliary services, including those of a psychologist and a pediatrician. Its size has steadily increased since June, 1952, when it separated from Providence Hospital Social Service Department and assumed full responsibility for adoptions and services to unwed mothers. In January, 1957, the merger of the Catholic Family Center and Society of St. Vincent De Paul created the presently known agency of Catholic Social Services of Wayne County. Adoptions through this agency have rapidly multiplied during these years. Agency records indicate that 231 children were placed in adoption during the year 1958.

The Problem

This investigation concerns the adjustment of children

who have been placed in adoption through the agency during the period between birth and six months of age and who have been living with the adoptive parents for approximately six years. A follow-up study of this type must necessarily be discreet and render all identifying data confidential for protection of individuals concerned.

The maximum age of six months at time of placement of the children was selected to furnish a sufficient number of experimental subjects yet curtailing the amount of influence of the infants' environments before placement with adoptive families could be made.

To ascertain the adjustment of the experimental subjects, a control group was necessary for comparison of results. This group consisted of children living in the homes of their natural parents.

One of three possible conclusions may be derived from this study. Results may indicate that: (1), adjustment of the adopted children is inferior to that of the children in the control group, who live with their natural parents; (2), there is no significant adjustmental difference in the two groups; or (3), the adjustment of the adopted children is superior to that of the children in the control group.

Hypothesis

The hypothesis is: there is no significant difference in the adjustment of children adopted through Catholic Social

Services in 1952 and 1953, and adjustment of comparable children living with their natural parents.

In this hypothesis, the years of placement are indicated because there has been modification of the placement procedures during the subsequent years. "Comparable children" refers to those children in the control group who were matched with the adopted children on the bases of sex, age, parental occupation, and I.Q. This agency hopes to find out whether or not the selection of adoptive parents by means of the criteria used at the time these children were placed fulfilled the needs of the children effectively.

The children to be studied are, at this time, largely in the first grade of school -- a fact which, in itself, tends to complicate the securing of accurate information on behavior or general adjustment. This period of a child's life is one of stress and should be avoided when studying personality or intellectual factors. Other periods of stress within the process of maturation are the period of negativism between eighteen and thirty months and the pre-adolescent growth period.[3]

Rationale

This investigation is designed to determine whether or not the methods used to "match" the adopted children with the present adoptive parents were sound methods and succeeded in fulfilling the needs of the children. This is important

to know. If the adoptions have not accomplished their purpose adequately, then the responsible institution would require a further inquiry to determine what is lacking in the adoption procedure.

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CHAPTER II

REVIEW OF THE LITERATURE

Prior Studies of Children in Placement

Practically all aspects of the child's interaction with his environment have been studied by investigators. A number of studies have been accomplished in the area of the "artificial family unit." This is a term sometimes used to convey the idea that this unit of society did not occur naturally but rather by deliberate efforts on the part of a married couple to assimilate into its family unit, a member whom they did not beget. Many efforts have been made to assure the proper adaptation or adjustment of this new member to his "assigned" family. To do this, investigators have striven to study in a variety of ways the relationships between the child and his surroundings and to compare his development with that of other children his age. A study of ninety-eight families disclosed that a correlation of intelligence of unrelated pairs of adopted children within the same family yielded a coefficient of .65; whereas a correlation of adopted children with natural children within the same family resulted in a coefficient of only .21.[1] In another study, the same investigator was able to conclude that children from "generally inferior parents", raised in homes of intellectually superior parents were comparable in intelligence to the children of these same parents.[2] This would seem to negate the

findings in the first study.

One study compared groups of children on the basis of academic achievement. The investigators found that well adjusted children performed superior to the maladjusted, foster-home, or orphan-home groups even though the groups were matched for intelligence.[3] In another similar investigation, the Stanford Achievement Test was used to study 77 boys and 61 girls between 9 years and 15 years of age, whose mean I.Q. was 105.1. The groups consisted of children in orphan homes, maladjusted children in a home for delinquents, and children in foster homes. It was concluded that the children in the orphan homes gave better performance than the delinquent children but did inferior work compared to the foster-home group. Generally lower scores were obtained by the maladjusted children in subtests requiring "exactitude of thinking."[4] Some general studies on the relationship between adjustment and social class have been published. Adolescents of five social classes were found receiving better treatment in school when the socio-economic status of their families was higher.[5] Further studies were accomplished on the psychological differences of social classes and the origin of class consciousness.[6] Using the reports of mothers, two investigators studied how aware elementary school children are of social symbols. They maintain that first grade children are almost entirely lacking in such awareness. These symbols,

however, are understood by children in the fourth grade. Children in the sixth and eighth grades are very much like adults in their regard for them. This study is pertinent to the present investigation because teachers may be inclined to rate a child's adjustment on the basis of his observance of social symbols. As children mature and become more cognizant of the social aspects of their environment, their needs for conformity and adjustment to their respective social classes and subcultures must be fulfilled.[7] Adjustment to social situations also has been studied indirectly by means of defense mechanisms.[8]

A follow-up study was conducted on 18 children who were adopted by three months of age. The investigator attempted to measure adjustment of the children by interviewing the adoptive parents and by inference drawn from a comparison of Cattell Infant Intelligence Scale scores. This test was administered to each child at the time of adoption and also at the time of the investigation, between three and four years later. She concluded that the general adjustment of the children was "good" on the basis of intelligence tests.[9] The value of such a criterion of adjustment is, of course, open to speculation.

One method of performing a follow-up study on adopted children was reported in which an executive of the adoption agency sent out letters to twenty-eight adoptive parents. In this respect it was similar to this present investigation.

In the letters, he stated that their adoption program was increasing in size and the ideas and experience of parents who adopted children recently would help the agency to make wise placements and to give sound advice to new adoptive couples presently seeking children through adoption. The agency received twenty-one replies from the parents whose aid was solicited.[10] Parental judgments, on the adjustment of 24 adopted children, were also used by the Boston Children's Friend Society. The results were inconclusive.[11]

A study of inter-correlations of 16 scores designed to be predictive of adjustment was reported. It included 66 adolescent boys in an orphanage. The instruments of measurement consisted of the California Test of Personality, Monroe Rorschach Check List, counselors' ratings, sociometric techniques, and a time sample of behavior. Approximately one-third of the 120 correlations were statistically significant beyond the one percent level of confidence. He concludes that an assessment of adjustment by just one technique is generally not very conclusive and has very little predictive value in relation to the results gained by another technique.[12]

From the foregoing, it becomes evident that the measurement of adjustment is rather complex. Blair[13] would seem to question the necessity of this instrumentation. He is of the opinion that "a person's behavior in a social situation can be considered a direct measure of his personality development." Groups coming to child clinics for psychological

services provide one source of information on adjustment. This, however, would include the variable of parents' previously having been acquainted with a social agency if the children in question were adopted.[14]

Fox and Segel[15] suggest that popularity among children is not a valid indicator of adjustment. In using the choice of friends as a method of measuring social adjustment, it was found that pupils tended to rate higher those who were more socially aggressive. They state:

> Furthermore, the selection of traits tending toward extroversion does not necessarily mean that pupils select traits related to social adjustment.
> The writers conclude that the Moreno choice type of social rating has little or no relation to social adjustment.[16]

The manner of treatment given adoptive parents at agencies is one variable which greatly affects the results of studies requiring their participation. This is discussed at some length in an article by Hannigan where she states that all too frequently contact between the parents and agency representatives is permanently severed upon completion of final adoption procedures. She suggests that a warm relationship and interest should prevail not only to assure the parents in their treatment of the child but also to aid the adoption workers to gain added insight with reference to criteria for future placements.[17]

Selection of Children to be Adopted

Adoption exists for the primary purpose of fulfilling the basic needs of the child when these needs might not otherwise be met. Fulfillment of parental needs serves as a secondary purpose of adoption.

To insure that adoption meets the end for which it is intended, careful measures must be exercised in the selection of parents and children so that, to a reasonable degree, compatibility of the child and the parents will be assured. There are some adults who, for various reasons, might be termed "poor risks." Some children may also bear such a classification and, therefore, may not be considered adoptable. Hallinan asserts that: "The adoptable child is one who has been legally surrendered by his parent or parents and who is able to contribute to and benefit from family life."[18] Although this definition has large scope, it serves well to judge specific cases. Usually, a child is termed adoptable upon surrender by the parents, if he is physically and mentally healthy. Some children who do not meet the requirement of health may also be adopted, but parents who are willing and able to provide an adequate home life for them are more difficult to find. Special efforts are exerted in finding suitable adoptive parents for exceptional children. From this, it may appear evident that children should not be "matched" with parents on a "formula basis."

This is neither desirable nor even possible.[19]

In striving to assist caseworkers in wise selections of adoptive parents, various aids have been used. Brieland reports a number of attempts to screen applicants psychometrically to aid the judgment of caseworkers. Employed were such instruments as the Rorschach Psychodiagnostic Test and the Minnesota Multiphasic Personality Inventory.[20] Besides the use of psychometric aids for the selection of parents, certain tests have been found useful for the screening of infants. Infant testing for the purpose of adoption planning has only been used in recent years. In the construction of infant tests, psychologists sought to find the aspects of infantile behavior that could be considered as co-variant with mentality.[21] Some studies have produced psychometric instruments which have been found to be very useful in the measurement of infant and child intelligence. It has been found that the correlation of the Cattell Infant Intelligence Scale I.Q. at the ages of six months and one year is .38 and significant, although quite low. There is, however, no correlation between the I.Q. as measured at six months of age and other ages up to four years.[22] This was also found by Bayley. She writes:

> Tests given between two and four years will predict eight and nine years performance with less success, while scores made before eighteen months are completely useless in the prediction of school-age abilities.[23]

Serial testing at the three, six, and nine month levels has been recommended to facilitate accuracy in prediction of intelligence of infants.[24] It may be noted that caseworkers never predict brightness or school success of infants to parents. Rather frequently, they make careful distinctions, from psychological reports, regarding the appropriateness of placing the child with adults of superior, average, or low average intelligence.[25]

A number of characteristics are to be sought in adoptive parents: personal adjustment, attitudes toward each other, attitude toward their own parents and siblings, the deeper as well as ostensible motives for adopting the child, their attitude toward childlessness and infertility, the ability to accept the adopted child, and their understanding of children and their needs.[26] Other criteria most often used in determining the eligibility of adoptive parents are listed by the National Adoption Conference. These are age, marital status, race, nationality, citizenship, residence, religion, education, financial status, social position, legal capacity, living accommodations, physical and mental health, childlessness, and sterility.[27]

Maladjustment in Children

The question may be raised regarding the possibility of an accurate appraisal of personality development or adjustment in children at the age of six years when all the factors

molding the personality have not yet imposed their influence upon the individual. Pikunas[28] discusses a number of factors influencing personality development. Some of these are not experienced until after childhood. Examples may be cited; some of these are full social experience outside the family, maturation of sexual drives, and rounded life experiences.

To study the adjustment of children in this present investigation, a good understanding of characteristics of adjustment and symptomology of maladjustment was requisite. A large part of this understanding was gained from Tyson. He lists a total of 2,394 mental hygiene suggestions selected from 228 sources.[29]

There appears to be some confusion about the true nature of adjustment. The layman looks to mental hygiene for answers. Psychiatric conceptions of adjustment go deep into the unconscious where success and happiness become symptoms rather than factors.[30] Thompson[31] indicates various patterns of maladjustment. Among these are aggressive responses, withdrawal responses, rationalization, and regression. He states that "...the child must perforce learn to demonstrate the culturally accepted patterns of response in...social crises in order to be considered a normal well adjusted member of our society."[32] He goes on to list sixteen goals of achievement necessary to attain adjustment.[33] Thompson further discusses the elusiveness of personal adjustment and social

adjustment to accurate study:

> Those aspects of an individual's overt behavior that are observable to the people around him may be quite satisfactory and socially acceptable, yet this individual may report he is extremely 'unhappy'. Since individual 'happiness' is one of the social values for which we strive in our culture, this individual will be maladjusted in proportion to the amount of personal 'unhappiness' he may verbally report. This essentially 'private' aspect of psychological adjustment makes it exceedingly difficult to define 'normal' behavior.[34]

Although, in this study, personal adjustment and social adjustment are recognized as distinct "facets" of the individual's personality development, no attempt was made to distinguish between them. Adjustment, as studied here, comprises both the child's relation to his environment and his self-acceptance or "personal happiness."

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CHAPTER III

METHOD

Design of the Study

During the conception of this study, a number of questions were raised with regard to factors which should be controlled. A study has been done on the effects of residential mobility, insofar as the students changed schools, and no significant difference in "various factors of adjustment" was found between those children who moved frequently from one school to another, and those who maintained enrollment at one school.[1] It was found that the effects of family size, position in family, sibling sex and sibling age on academic achievement, personal adjustment, and social acceptance is, "to all practical purposes so slight as to be considered negligible."[2] In a study of 712 children between the ages of nine and twelve years, one conclusion asserts no relation found between emotional adjustment and race or locale. Adjustment, on the other hand, was reported to be closely related to socio-economic level of the parents. The degree of adjustment was found to be directly proportionate to the socio-economic status.[3] In accord with the conclusions of these three investigations, in the present study no effort was made to control family residential motility, sibling sex, age or position in the family. Noting the conclusion of the third

study above, socio-economic status was controlled.

With regard to limitations imposed on this study, agencies tend to withdraw from adoptive families after the adoption is complete. Researchers feel that the confidentiality encompassing the unwed mother also extends into the adoption. One investigator explains clearly that if follow-up studies are to be successful, the agencies must "lay the groundwork" prior to the study. He further suggests ways of facilitating research in adoption.[4] The status of investigations such as this is poignantly revealed in the following quotation:

> Until there are more funds and a substantial amount of research time available, it is unlikely that follow-up studies of adopted children will be more than pilot efforts. Limited studies will shed light on limited problems but will not involve sufficient samples to have implications for the field.[5]

Brieland[6] speaks of rating scales and intelligence tests as being the typical means in the past for follow-up studies on adjustment. He suggests other means of measuring adjustment; examples of these are projective techniques, interviews with parents, and interviews with children. Each of these methods, however, present their own practical problems. He asserts that: "Psychological tests of adjustment, at least for younger children, leave much to be desired."

Criteria of Maladjustment

Considering the nature of this study, and the questionable

validity of existing psychometric instruments used for measuring adjustment of young children, it was decided that a questionnaire developed from symptoms of maladjustment would serve the purpose of this investigation. Current psychological literature contains many reports firmly establishing symptomology of maladjustment.[7] In the selection of symptoms to be used in the questionnaire, both "specific" references and "general" references were used. Studies of specific personality disorders and symptomology were selected from Addis,[8] Chant and Blatz,[9] Doll,[10] Olson,[11] Ritvo,[12] and Sanford.[13] General works, each covering a variety of symptoms, were selected from Cameron,[14] Goldfarb,[15] Louttit,[16] and Young.[17] A few select items on the questionnaire were developed from symptoms frequently observed among children referred to this agency because of personality or behavior problems. Some other items were derived from a checklist used at St. Francis Home for Boys, in Detroit, for reporting personality characteristics and behavior patterns. A few items dealing with social competence were adapted from the Vineland Social Maturity Scale.

Selection of Cases

At the onset of this study, it was necessary to read through approximately 4,700 "three by five" cards on which were recorded adoptions through this agency and Providence Hospital during the past several years. From these files, a

total of 189 adoption cases were selected for this study. The following criteria for selection was used: placement of the child between July 22, 1952 and March 31, 1953, Caucasian, and a maximum of one other child in the adoptive home. The cut-off dates were determined to include only those children who were adopted through this agency once it became independent of Providence Hospital, and who very likely would now be in school. It was desirable to have the children in school for purposes of intelligence testing. Because the cards, from which the original sample was selected, did not contain sufficient information on each case, the complete adoption file on all those selected from the 4,500 cases, was checked in the "dead files" of the agency to ascertain parental occupation, new telephone numbers and addresses, other children in the family (frequently this did not agree with the data in the card files), and the assumed name of the child, which differed from the name given by the natural mother in almost every case. The following data in each case were recorded on a "four by six" card for this study: first and last names of the adoptive parents, original name of the adopted child, assumed name of the adopted child, date of birth of the child, date of placement with the adoptive family, number of months before placement, age of the child as of September 1, 1958, number of children in the adoptive family, subject's position in the family, coded occupational class of the adoptive father, and last known address and telephone number. During the search

through the "dead files" a few cases were discarded from the sample because they were unusual in some ways; an example of this would be an adoption study transferred from another agency. The sample was then presented to veteran workers at the agency who were active in these adoptions, for the purpose of discarding any cases in which they deemed it wise not to renew contact with the agency. Reasons for discard here consisted of poor professional relationship with the client or other unusual conditions present in the adoption procedure. A cut-off age of six months at time of adoptive placement was maintained. This further reduced the sample to eighty-one. This cut-off point was used to assure sufficient subjects for the study, and yet curtail, as much as possible, the amount of "pre-adoption" influence on the child. This same standard was used by the State University of Iowa in a follow-up study of adopted children. That sample was reduced from 180 to approximately 100 as a result of a "six-month criterion" for eligible subjects.[18]

The next step in this present study consisted of the drafting of a letter to be sent to the adoptive parents in each of the 81 cases. This letter was designed to encourage the greatest possible response from the parents. With this purpose in view, the letter was typed by a "Robotyper" at the agency. This machine automatically typed eighty-one original letters. The agency's director signed each letter, again to assure the best possible reaction by the parent.

After sending out the letters, the next phase of the study consisted of developing the questionnaire to its final form. For the purpose of procuring observations on the child at home and at school, two questionnaires were designed; one for parents' reports, and one for the children's teachers. The parent form finally consisted of fifty items to which "Yes" or "No" responses were solicited. The teacher form was comprised of thirty-three items which were to be answered in the same manner. Special effort was exerted in the wording of items in the parent form so it would not be threatening to the respondent. A more frank expression was used in wording the items of the teacher questionnaire. Items in this form were presented under five headings: play, maturity, social, nervous habits, and other. Items proper to these same categories were used in the parent questionnaire but were not grouped. A mimeographed letter was attached to the parent form to introduce it and explain how to fill it out. A short letter of explanation was also attached to each teacher form.

Upon completion of the questionnaires, each family was contacted by telephone. In several cases, the telephone number had been changed and was sought in city and suburban directories. This was not successful in every case. Telephone calls were made to each family to explain further the scope and purpose of the study without going into detail and also to secure permission to send a questionnaire to the adopted child's

teacher at school for the purpose of "gaining information on the child's activity in the classroom and on the playground." Among the families with which telephone contact was made, only one declined to participate in the study; and with one other family, subsequent repercussions, of a professional-relations nature, developed. This special effort was made to produce as full a response as possible from the families to be questioned. One investigator maintains that sending out a "cold questionnaire" would yield a twenty percent return, at most.[19] She feels that it "should be accomplished by a personal letter and a self-addressed, stamped envelope."[20]

Several of the letters originally announcing this study to the adoptive parents were returned to the agency, because the address had been changed. Those of this group who could not be located by the telephone directories were discarded from the sample. A few other cases were eliminated from the sample when repeated attempts to call them had failed. Only one subject of this sample was in kindergarten and was therefore also excluded from the study.

The questionnaires were mailed, with stamped and addressed return envelopes, to the parents. The questionnaires bore identification numbers to match a code number for each family. The name of the family, to which the questionnaire was sent, appeared on the attached explanatory letter.

A list was made of schools attended by the experimental subjects. Teacher questionnaires were mailed directly to

the school principals of schools attended by only one experimental subject. All schools, attended by more than one subject, were visited and the principals personally given the questionnaires, or else the questionnaires and return envelopes were left in the office for them in the event of their absence. Each school principal who was contacted was given a letter of explanation supplemental to the attached letter to the teacher. The letters to the principals were mimeographed but bore the principal's name in script and each letter was individually signed by the investigator. At the bottom of each questionnaire, the child's I.Q. score was requested along with the name of the test.

The original intention was to deliver the questionnaires to the schools personally to insure the largest possible returns but limitations of time made this impractical.

Control subjects could not be secured until the experimental questionnaires were received from the schools inasmuch as these contained the I.Q. scores with which control subjects were to be matched, along with age, sex, and parental occupation class.

As the questionnaires were received by mail from the schools, control subjects were sought at two parochial schools in the city of Detroit and two schools in suburban districts. Permission to examine the statistical cards on each first grade child at the schools was granted by the school principals and the Archdiocese Parochial School Office. The procedure

here consisted of selecting the control subjects matched with the experimental subjects on age, sex, parental occupational class, and I.Q. by use of T-scores. For all subjects in the study, the parents' occupations were grouped into six classes: I, professional; II, managerial; III, clerical; IV, skilled labor; V, semi-skilled labor; and VI, unskilled labor. Matching of occupations was performed on an individual occupational class basis. Once the control subjects were selected, the school principal was given a questionnaire and return envelope for the teachers of the children. With reference to the children selected at the two Detroit schools, the parents were called in most of the cases. The study was explained and their cooperation was asked. A parent questionnaire with a return envelope was then mailed to each of them, along with a letter of further explanation. At the suburban schools the procedure differed insofar as the teachers were given the questionnaires they were to complete and they were also given the parent questionnaires to be passed on to the selected children with instructions to give the "letters" to their parents. It later became apparent that both procedures were equally effective.

For the purpose of rapidly scoring the returned questionnaires, scoring stencils were made for each form on the basis of scoring "maladjustment responses" or "wrong answers." This meant that the higher the score on the questionnaire, the greater would be the maladjustment.

There was the possibility that the adoptive parents would be more protective in their responses than would be the natural parents of the control subjects. For this reason, a correlation was computed between the scores of the parent questionnaire and teacher questionnaire of the children in each the control group and the experimental group. Absence of any statistically significant difference between the coefficients of correlation would indicate no real difference in protectiveness of the two groups.

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CHAPTER IV

ANALYSIS OF THE DATA

As explained in the foregoing chapter, because different intelligence tests were used in the sample, matching for I.Q. would have to be accomplished by means of conversion to T-scores, thereby creating a "common denominator" for all I.Q. scores. This statistical technique revealed the absence of coincidence between quotients of one test and quotients of another. As an example, an I.Q. of 129 on the California Test of Mental Maturity is approximately equal to an I.Q. of 123 on the S.R.A. Primary Mental Abilities test. The formula used for computing T-scores was: $T = \frac{X - M}{S.D.} + 50$. All subjects then were rematched within a range of .30 of a "T-point"; e.g., 49.25 -- 49.55. This is approximately equivalent to a range of five I.Q. points.

Within the total sample tested, six different intelligence tests had been administered. Of these, only one test, the Detroit Beginning First Grade Intelligence Test, had not had a standard deviation computed from the standardization data. Also, no statistically determined mean had ever been established.[1] Inasmuch as these two data were not available, T-scores could not be computed and those subjects and the subjects matched with them had to be eliminated from the sample. A number of other subjects previously matched for

I.Q. scores had to be discarded because a one-to-one match on T-scores could not be effected. This necessary discarding of subjects unfortunately reduced the sample by approximately forty percent which permitted 29 pairs of subjects to be used in the final sample for this study.

In the final analysis of the data, three standard statistical tools were used. These were correlation and reliability measures, the Spearman-Brown Prophesy formula which was used in conjunction with the split-half reliability measure, and t-tests for small samples. This last technique was used to determine any statistically significant difference in the adjustment scores of the two matched groups.

There was the possibility that the parents of the experimental group (adopted children) would be more protective in their reporting on the questionnaires than would be the parents of the control group (natural children). The incidence of such subjectivity could taint the findings of this study. To determine if any such protectiveness existed to a significant extent, Coefficients of Correlation of the adjustmental scores were computed between the parents and teachers of the experimental group and between the parents and teachers of the control group. In the experimental group $r = -0.087$; in the control group $r = 0.048$. Neither of these coefficients was significant; a Coefficient of Correlation of ± 0.367 would be necessary for significance at the five percent level of confidence at 27 degrees of

freedom.[2]

These coefficients were sufficiently low to suggest no correlation at all between parents and teachers in their reporting. This could be due to parental reporting being incapable of distinguishing between normal and maladjusted children, or it could be caused by poor reliability of one or both questionnaire forms.

Another Coefficient of Correlation was calculated between total scores (parents plus teachers) of each the experimental group and the control group because the two groups were matched on other dimensions. In using the t-test, it is presupposed that the two groups tested are completely unrelated. A significantly high correlation of the two groups would necessitate the incorporation of the Coefficient of Correlation in the formula for the t-test of significance. Between the total scores of the two groups $r = -0.210$, a coefficient too low to be significant ($r = 0.367$ would be significant at the five percent level[3]).

Two t-tests were employed in the final phase of data analysis. Experimental parent scores versus control parent scores, and experimental teacher scores versus control teacher scores. The test of parental scores of the two groups yielded a t-value of 0.584 with 56 degrees of freedom and was not significant. Teacher ratings of the two groups rendered a t-value of 2.140 with 56 degrees of freedom and was statistically significant at the .05 level. In

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CHAPTER V

SUMMARY AND CONCLUSIONS

The act of adoption is one which, by its very nature, demands the best resources from which predictions of future consequences can be drawn. An agency through which adoptions are effected assumes a great responsibility in its matching of infants with selected parents. This responsibility behooves the agency to examine, from time to time, its procedures and standards in its role of adoption agent. The concept of this study evolved from such a need for "self-examination."

Some prior work has been done to study various aspects of foster-children, children in boarding care, etc. In almost all follow-up studies of adopted children, the design of the investigation was rather loose. The factors controlled or held constant were few or non-existent, with the exception of the adoptive factor. Instruments employed in various studies are of dubious value in measuring the traits or powers in question.

The conception of the present investigation stems from the need to know whether or not the adoptions accomplished by the agency in question have met the needs of the children.

The design of this study is based, in part, on the previous work done. A careful attempt was made to avoid the shortcomings of other investigations in order to produce a valid measure of the adjustment of adopted children in comparison with their peers who live with their respective natural parents.

Inasmuch as personality may be studied validly by means of observation of symptoms or behavior, personality adjustment may be studied by the presence or absence of maladjustment symptoms. Such is the design of the instrument used here. The extent of maladjustment may be detected by the frequency of occurrence of one or more of its symptoms. To gain a more complete appraisal of each child's adjustment, these symptoms and personality traits were reported on by both the parents and the teachers of the adopted children and the natural children.

The statistical measures employed revealed that of the two instruments used in the investigation of the subjects, only one was sufficiently reliable to distinguish between adjustment and maladjustment. These calculations indicate that, inasmuch as the parent questionnaire is not sufficiently reliable for the purpose of this study, its results should not be considered in the final analysis of data. Data from the teacher questionnaire is used because the reliability is clearly established for that instrument.

On the basis of information yielded from the teachers'

reports, the adopted children are significantly better adjusted than the control subjects living with their natural parents. This conclusion is considerably more favorable than was hypothesized at the onset of the study.

Further questions and implications may be drawn from this conclusion. Both groups of children were equal on all pertinent characteristics except the factor of adoption. It is concluded that this one factor has a direct relation to the adjustment of these children. Why should this be true? It may be suggested that the parents of the children in the control group begot children because they were able to reproduce. This may be termed as the essential criterion upon which depended the birth of these children. It is, then, natural that these children should live with their parents whether or not these parents offer the type of relationship and environment conducive to good adjustment in children. This is true of natural children; it is not true of adopted children. Whereas parents of the children in the control group may have children even if they, themselves, are maladjusted, neurotic, or otherwise mentally abnormal, the adoptive parents cannot. The potential parents for adoptive infants or children are selected on the basis of traits which are most conducive to fulfilling the capacities and emotional needs of these children and therefore promoting sound adjustment. If the adoption planning is sound, it should not be surprising if the child involved becomes well

adjusted in his environment. One important factor to be considered is the fact that the adoptive parents want this child. In the control group, this factor does not necessarily exist.

From this conclusion, one might further hypothesize that there is a significant positive correlation between the adjustment of parents and that of their offspring.

In view of the foregoing, one may conclude that the Adoption Division at Catholic Social Services of Wayne County, Michigan is performing work of high quality. The results further suggest that, with added requirements which have been incorporated in the adoption process since the time the experimental subjects were placed for adoption, the children being placed in adoption at the present time through this agency have the added security of excellent potential adjustment. They may further be expected by their own betterment and the example they offer for others to contribute materially to the betterment of the communities in which they will reside. Besides their contribution to the perfection of society, they become more perfect as human individuals.

APPENDIX A

LETTERS USED IN THE STUDY

CATHOLIC SOCIAL SERVICES
OF WAYNE COUNTY

42

9851 HAMILTON AVE. • DETROIT 2, MICHIGAN
TULSA 3-2100

REV. PAUL J. HICKEY, DIRECTOR

March 10,1959

Dear Mr. and Mrs.--------:

For the first time in seven years, our agency is conducting a follow-up study of adopted children. The success of this study is dependent upon participation of people like yourselves who have a record of cooperation with the agency. Your name has been selected along with 75 others from 4700 families in our adoption files.

The purpose of this study is to help us to examine our practices and procedures in the light of past experience so that we can continue to maintain high standards in the interest of children and families. As in the case of the original adoption study, all information must be considered confidential and so protected. Any information provided will in no way be reflected on your standing with the agency.

We sincerely hope that you will assist us in this study. You are, of course, under no obligation. A member of our staff, Mr. Richard Dorais, will contact you within the next three weeks for some information about -------, your adopted child.

Sincerely yours,

Rev. Paul J. Hickey
Director

APPENDIX A (continued)

Dear Mr. and Mrs. _____:

This questionnaire and the inclosed stamped return envelope are for your convenience in participating in the adoption study recently discussed with you.

The items in the questionnaire refer only to your child whose name was indicated in Father Hickey's letter originally announcing this study.

Please answer carefully the various items "Yes" or "No" by placing an "X" in the box of the proper column. Please try to be as objective as you can in your answers and try to answer every item.

Your prompt completion of this questionnaire and its return will be deeply appreciated by us.

Very sincerely,

s/ Richard P. Dorais

Richard P. Dorais
Catholic Social Services of Wayne Ct.

CATHOLIC SOCIAL SERVICES
OF WAYNE COUNTY

9851 HAMILTON AVE. • DETROIT 2, MICHIGAN
TULSA 3-2100

REV. PAUL J. HICKEY, DIRECTOR

Dear Sister:

Our agency is conducting a study of a large number of first grade children from diversified backgrounds, who live in the Detroit area. For this, we earnestly solicit your help.

This study is concerned with personal and social adjustment of children whose background is in large part non-select, or otherwise matched for certain environmental factors of other children.

In every case, all names and other identifying information are considered confidential and so protected.

The Catholic Parochial Schools Office has approved this study and permission has been granted by the parents of the child to whom this refers.

Please arrange for the questionnaire(s) to be filled out for the child named at the top of each form and the intelligence test name and score to be indicated.

We are deeply grateful for your help toward the successful completion of this study.

Respectfully,

Richard P. Dorais

rpd:jq

APPENDIX A (continued)

Dear Teacher:

Our agency is conducting a study of a number of kindergarten and first grade children from diversified backgrounds, who live in and around the Detroit area. For this, we earnestly solicit your help.

This study is concerned with personal and social adjustment of children whose background is in large part non-select, or otherwise matched for certain environmental factors of other children.

In every case, all names are held in confidence and are not divulged by us.

Kindly use the attached questionnaire which pertains to the child named at the top and indicate your judgment of each item by placing an "X" in the appropriate box. Please try to answer every item and be as objective as you can.

We will be deeply grateful to you for your prompt completion of this questionnaire and for its return in the accompanying stamped envelope.

Very sincerely,

s/ Richard P. Dorais

Richard P. Dorais
Catholic Social Services of Wayne Ct.

CATHOLIC SOCIAL SERVICES
OF WAYNE COUNTY

9851 HAMILTON AVE. • DETROIT 2, MICHIGAN
TULSA 3-2100

REV. PAUL J. HICKEY, DIRECTOR

Re:

Dear Mr. and Mrs.

For the first time in seven years our agency is conducting a study, through the schools in the Detroit area, of a large number of children selected for particular background characteristics. The success of this study depends, in large part, on your help.

In order for this study to be effective, the group of children we are studying must be compared with a "normal" or "control" group. Your child, named above, has been found qualified for selection in this control group through the kind assistance of the parochial school system.

All names and other identifying data used in this study are to be considered confidential and so protected.

We kindly ask your consideration in filling out the attached questionnaire, indicating the proper "yes" or "no" answer for each statement, being as objective as you can. A stamped return envelope is provided to aid your prompt return of this form.

We sincerely thank you for your kind consideration.

Very sincerely,

Richard P. Dorais

rpd:jq

APPENDIX B

QUESTIONNAIRES

SECTION ONE: PARENT QUESTIONNAIRE

SECTION TWO: TEACHER QUESTIONNAIRE

	Yes	No	
1.	( )	( )	Usually puts playthings away.
2.	( )	( )	Dresses self most of the time.
3.	( )	( )	Complains of headaches occasionally.
4.	( )	( )	Seldom becomes angry in play with other children.
5.	( )	( )	Has nightmares quite often.
6.	( )	( )	Usually washes own face.
7.	( )	( )	Frequently becomes jealous of brother or sister.
8.	( )	( )	Makes friends reluctantly.
9.	( )	( )	On occasions has told "white lies."
10.	( )	( )	Can go to school unattended.
11.	( )	( )	Seldom difficult to manage in church.
12.	( )	( )	Has thumb or finger sucking habit.
13.	( )	( )	Usually falls asleep any time after an hour.
14.	( )	( )	Helpful in small tasks about the house.
15.	( )	( )	Usually washes own hands satisfactorily.
16.	( )	( )	Rarely has any gagging or vomiting trouble in eating.
17.	( )	( )	Sometimes feigns illness to gain attention.
18.	( )	( )	Insists on doing things his/her own way.
19.	( )	( )	Would say child is "aggressive."
20.	( )	( )	Would say child is "passive."
21.	( )	( )	Child is neither aggressive nor passive.
22.	( )	( )	Shows adequate respect for elders and authority.
23.	( )	( )	Is often teased or taunted by other children.
24.	( )	( )	Rarely ever blames others for own faults.
25.	( )	( )	Generally has poor appetite.
26.	( )	( )	Enjoys playing quietly by himself/herself most of the time.

	Yes	No	
27.	( )	( )	Usually gets own drink without assistance.
28.	( )	( )	Likes to draw with chalk or crayon.
29.	( )	( )	Has bothersome whims about many foods.
30.	( )	( )	Has had bed-wetting difficulty, other than "accidents," since age five.
31.	( )	( )	Has had to be reprimanded for being mean to animals.
32.	( )	( )	Has a very large appetite.
33.	( )	( )	Has just about an average appetite.
34.	( )	( )	Child has a tendency to stutter or stammer frequently.
35.	( )	( )	Goes to the toilet without any assistance.
36.	( )	( )	Has instances of nervous twitches.
37.	( )	( )	Child has difficulty with temper displays or tantrums.
38.	( )	( )	Is quiet, insists on staying near parents much of the time.
39.	( )	( )	Frequently talks back when told to do something.
40.	( )	( )	Often attempts to eat things not considered edible.
41.	( )	( )	Seldom ever gets into fights with other children.
42.	( )	( )	Bites fingernails.
43.	( )	( )	Rarely scratches, picks, or wrinkles nose.
44.	( )	( )	Has no difficulty in going to sleep at night.
45.	( )	( )	Seldom cries in play with other children.
46.	( )	( )	Child still seems tired after twelve hours sleep.
47.	( )	( )	Rarely ever cries when left with baby-sitter.
48.	( )	( )	Must be reprimanded for taking things not belonging to him/her.
49.	( )	( )	Shows some instances of being mean to younger brother or sister.
50.	( )	( )	Would you like professional help with your child?

PLAY

	Yes	No	
1.	( )	( )	Engages in competitive games, athletics.
2.	( )	( )	Likes "constructive" play, games.
3.	( )	( )	Insists on own way in play.
4.	( )	( )	Is he/she shy and quiet?
5.	( )	( )	Plays actively with other children.
6.	( )	( )	Bullies other children.
7.	( )	( )	Gets into fights frequently.
8.	( )	( )	Would you call this child "very aggressive"?
9.	( )	( )	Cries more than usual.
10.	( )	( )	Does not like to participate in games.

MATURITY

11.	( )	( )	Draws with chalk or crayon.
12.	( )	( )	Drawings immature for age.
13.	( )	( )	Washes own hands.
14.	( )	( )	Goes to toilet unattended.
15.	( )	( )	Prints words with crayon or pencil.

SOCIAL

16.	( )	( )	Is quiet, reserved, reticent.
17.	( )	( )	Gets excited and anxious easily.
18.	( )	( )	Is frequently provoking in manner.
19.	( )	( )	Uses abusive language.
20.	( )	( )	Reveals temper displays or tantrums.
21.	( )	( )	Is obedient, shows respect for authority.
22.	( )	( )	Seldom gets into mischief.
23.	( )	( )	Is inclined to steal small things.
24.	( )	( )	Generally difficult to manage.
25.	( )	( )	School performance inferior to ability.

NERVOUS HABITS

	Yes	No	
26.	( )	( )	Sucks thumb, fingers.
27.	( )	( )	Bites finger nails.
28.	( )	( )	Scratches, picks, or wrinkles nose.
29.	( )	( )	Stutters or stammers.
30.	( )	( )	Has other consistent nervous habits.

OTHER

31.	( )	( )	Has nervous tics or twitches.
32.	( )	( )	Masturbatory activity or unusual sexual interest.
33.	( )	( )	Appears drowsy much of the time.

APPENDIX C

SECTION ONE: OCCUPATION CODES AND TEST DATA

SECTION TWO: SUBJECT DATA AND RAW SCORES

APPENDIX C

SECTION ONE

OCCUPATIONAL CODES BY WHICH PARENTS OF SUBJECTS WERE CLASSIFIED FOR MATCHING

I. PROFESSIONAL

II. MANAGERIAL

III. CLERICAL

IV. SKILLED LABOR

V. SEMI-SKILLED LABOR

VI. UNSKILLED LABOR

APPENDIX C

SECTION ONE (continued)

MEAN AND STANDARD DEVIATION OF TESTS USED IN THE STUDY

M	S.D.	Tests
100.0	16.0	California Short Form Test of Mental Maturity, Primary Form S-57.
99.0	13.5	S. R. A. Primary Mental Abilities. Primary.
102.0	11.4	Kuhlmann-Anderson Intelligence Test, Form A, Sixth Edition.
100.0	16.0	Pintner-Cunningham Primary Test, Form A.

APPENDIX C

SECTION TWO

EXPERIMENTAL SUBJECTS: IDENTIFICATION NUMBER, SEX, PARENTAL OCCUPATIONAL CLASS, I.Q. AND TEST, AND QUESTIONNAIRE SCORES

Code No.	Sex	Parental Occup.	I.Q.	Test	Parent Scores	Teacher Scores
14	F	III	104	CMM	10	1
17	M	IV	112	CMM	14	1
27	F	VI	104	CMM	2	16
28	F	III	107	CMM	9	0
36	F	V	124	CMM	15	0
39	M	IV	123	CMM	7	3
40	F	II	96	CMM	10	4
43	F	II	111	CMM	8	3
45	M	II	102	CMM	13	19
47	F	VI	108	CMM	12	8
54	F	VI	104	CMM	14	3
67	M	I	116	CMM	6	5
75	F	VI	87	CMM	17	2
81	M	V	99	CMM	11	1
86	F	IV	113	CMM	13	0
91	M	V	99	CMM	13	4
96	F	V	121	CMM	3	3
104	M	I	132	CMM	5	2

APPENDIX C

SECTION TWO (continued)

Code No.	Sex	Parental Occup.	I.Q.	Test	Parent Scores	Teacher Scores
112	M	II	104	CMM	7	2
116	M	IV	104	CMM	12	1
121	F	III	107	SRA	10	7
123	F	IV	103	CMM	8	3
126	F	V	118	CMM	16	10
137	F	III	112	P-C	12	1
152	M	III	100	CMM	7	1
161	F	III	100	CMM	3	5
175	F	II	115	CMM	6	2
186	F	V	116	SRA	9	1
188	F	VI	86	CMM	4	6

CMM: California Short Form Test of Mental Maturity, Primary S-57

SRA: S.R.A. Primary Mental Abilities: Primary

P-C: Pintner-Cunningham Primary Test, Form A

APPENDIX C

SECTION TWO (continued)

CONTROL SUBJECTS: IDENTIFICATION NUMBER, SEX, PARENTAL OCCUPATIONAL CLASS, I.Q. AND TEST, AND QUESTIONNAIRE SCORES

Code No.	Sex	Parental Occup.	I.Q.	Test	Parent Scores	Teacher Scores
06	F	VI	100	SRA	6	5
015	M	IV	112	K-A	7	4
016	F	V	116	K-A	9	0
018	F	II	111	K-A	9	10
019	F	V	117	K-A	7	9
020	F	IV	110	K-A	15	3
021	F	VI	103	K-A	16	7
023	F	V	119	CMM	14	0
024	F	II	115	CMM	7	0
025	M	I	131	CMM	6	7
026	M	V	100	CMM	8	17
027	F	V	125	CMM	7	3
028	M	I	119	CMM	7	2
029	M	IV	124	CMM	14	9
030	M	III	99	CMM	18	4
031	M	II	105	CMM	7	9
032	F	VI	107	CMM	19	15
033	F	III	115	CMM	9	9

APPENDIX C

SECTION TWO (continued)

Code No.	Sex	Parental Occup.	I.Q.	Test	Parent Scores	Teacher Scores
034	M	V	99	CMM	7	11
035	F	III	104	SRA	11	13
036	F	III	101	SRA	8	4
040	M	IV	101	SRA	16	14
041	F	IV	101	SRA	10	3
042	M	II	100	SRA	4	2
044	F	II	99	SRA	10	11
045	F	III	99	SRA	9	7
046	F	VI	89	SRA	12	4
047	F	VI	88	SRA	2	9
049	F	III	108	SRA	21	2

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