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The Level of Parental Conflict and Children's Behavioral Reactions to Divorce

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THE LEVEL OF PARENTAL CONFLICT AND CHILDREN'S BEHAVIORAL REACTIONS TO DIVORCE

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Abstract

This research investigated the level of parental conflict as a contributor to children's behavioral difficulties up to one year after parental separation. Participants were parents who had been court ordered to attend the parent education class sponsored by the Kanawha County Family Court in Charleston, West Virginia. The *Conflict Tactics Scale 2 (CTS2)* was used to identify marital conflict and the *Achenbach Child Behavior Checklist/6-18 (CBCL)* parent report was used to determine childhood behavior problems. Correlation and multiple linear regression analysis found that children who were traumatized by domestic violence suffered from anxiety, depression, withdrawal symptoms, attention problems, somatic complaints, rule-breaking behavior, aggressive behavior, thought problems, social problems, internalizing behavior problems and externalizing behavior problems. Children from low conflict homes also demonstrated symptoms of anxiety and depression. Girls demonstrated more attention problems and more symptoms of anxiety and depression than boys.

The Level of Parental Conflict and Children's

Behavioral Reactions to Divorce

There is a large body of research that focuses on the negative effects of divorce on children. In an empirical review of such studies, Hanson (1999) concluded that children of divorced parents are at a disadvantage in a number of ways: they are less likely to perform well in school, more likely to exhibit behavioral problems, and more likely to have psychological and social difficulties. Children of divorce are at an increased risk for depression later in life, low self-concept, low social responsibility, low self-esteem, truancy, teen pregnancy and health problems (Emery, 2009). Sirvanli-Ozen (2005) adds that children of divorced parents are less educated, maintain a lower status, lower income, get married at a younger age, and are generally unhappy in their relationships. There have been a number of proposed explanations as to why children of divorce are at a disadvantage including the loss of the non-custodial parent, inter-parental conflict, adjustment of the custodial parent, economic distress, and multiple life changes (Hong & Rowe, 1996). Of these, LaHaye (2008) suggests that "the most important factor for children's well-being is limiting the amount and intensity of parental conflict." The level of parental conflict contributes to the diminished well-being of children of divorce suggesting that the problems children endure post divorce result from the pre-divorce and post-divorce parental conflict (Jekielek, 1998). The intensity of parental conflict was examined in the current research relative to the behaviors exhibited by the children of divorcing parents.

The current research will attempt to take a deeper look into the behavior problems often exhibited by children following parental separation. We will examine depression, somatic complaints, social problems, thought problems, attention problems, rule-breaking behaviors, aggressive behavior and the overall internalizing and externalizing behaviors of these children.

Internalizing and externalizing behavior problems are frequently used concepts that describe acting out versus self-blaming behaviors that are often associated with childhood behavior problems (Emery, 2009). We are interested in determining if a significant difference exists in behavioral outcomes when comparing children across a continuum of parental conflict. We will focus particularly on those children who witness the most extreme form of parental conflict - domestic violence and the behavioral consequences of such extreme exposure.

Effects of Domestic Violence on Children

Of the twenty-five percent of women who have been victims of domestic violence (Heru, 2008,) an estimated 3.3 million children and adolescents per year witness severe acts of emotional and physical abuse directed at parents by their spouses (VonSteen, 1997). Domestic violence is not simply a problem between men and women; the children of these relationships are also victims. The effects of domestic violence on children is significant because children of abused mothers are six times more likely to commit suicide, sixty times more likely to engage in delinquent behavior as an adult, and are at greater risk for drug and alcohol abuse (YMCA, 1997A). This “destructive conflict” is particularly damaging to children as they witness and often become involved in the hostile and unresolved conflict (Kellet, Swift & Trinder, 2008). Children growing up in this unstable and abnormal environment are in jeopardy of experiencing dysfunction in a number of domains.

Children’s responses to domestic violence do seem to support the belief that domestic violence has varied and numerous consequences. Many children witnessing violence in their homes have lowered self-concept, aggression, cognitive distortions, impaired social competence, school-related problems, somatic problems, and even post-traumatic symptoms (VonSteen, 1997). Many reports also seem to indicate that children’s reactions and symptoms

differ according to their age and gender (VonSteen, 1997). Studies suggest that boys have a tendency to exhibit externalizing behavior problems such as aggressiveness and disobedience (Sirvanli-Ozen, 2005). Females are more likely to experience internalizing behavior problems including anxiety, depression, and somatic complaints (Blakely, Engleman & Kolbo, 1996, & Sirvanli-Ozen, 2005). Of additional concern is the evidence showing that male children who witness the abuse of their mothers by their fathers are more likely to become men who batter in adulthood than are those male children from homes with low conflict marriages (Blakely et al., 1996).

Several studies have reported that children as young as 12 months of age show physiological and psychological reactions to witnessing high levels of conflict between their parents (VonSteen, 1997). Sirvanli-Ozen (2005) indicates that "children who witness marital conflict perceive their environment as being aggressive and develop their attitudes and form their personality traits accordingly." From infancy to adulthood, children's reactions to domestic violence can be categorized as follows:

Infants: Infants who witness domestic violence are often characterized by poor health, poor sleeping habits, and excessive screaming (Jaffe, Wolfe & Wolfe, 1990). It is also suggested that infants may suffer serious, unintended consequences due to their attachment needs being unmet by their mother (James, 1994).

Toddlers: Children at this age tend to experience frequent illness, severe shyness, low self-esteem, and trouble in daycare. They also exhibit a good deal of aggressive behaviors such as hitting and biting and being argumentative (James, 1994). Studies report boys' behavior being more externalized while girls' behavior is more internalized. For example,

girls exhibit more physiological symptoms and are more likely than boys to become withdrawn, passive, clingy, and anxious (VonSteen, 1997).

Preschoolers: Preschoolers tend to be more irritable and are often reluctant to separate from their mothers and they fear being alone (Eleoff, 2003). They may demonstrate a regression of the most recent developmental milestone and experience sleep disturbances (Eleoff, 2003). Preschoolers who witnessed domestic violence had higher levels of problematic behaviors and social deficits (Eleoff, 2003). Preschool aged boys showed the highest rating for aggressive and somatic difficulties when compared to females (VonSteen, 1997).

School Age: Children at this age have learned that violence is an appropriate way to resolve conflict (Jaffe et al., 1990). These children have difficulties with school work, including poor academic performance, not wanting to go to school, and concentration difficulties (James, 1994). They fight with their peers, rebel against adults, and are unwilling to cooperate with instruction or authority (Jaffe et al., 1990). Results of most studies of this age group confirm that males continue to exhibit externalizing behavior problems, whereas females more often experience internalizing problems (VonSteen, 1997). However, both genders tend to show lower levels of social competence, and they struggle with being eager to please and feeling aggressive (VonSteen, 1997).

Adolescents: Existing research on this age group indicates that adolescent witnesses of domestic violence experience a heightened level of aggression toward parents and peers, delinquency, somatic complaints, and depression (VonSteen, 1997). Some studies have indicated that males display aggression whereas females suffer from depression (Carlson, 1991). Others have agreed that, although females tend to be more depressed, they also

feel anger, and males at this age also report feeling sad and depressed (Cummings & Davies, 1994).

By the time children have reached adolescence, they have discovered that there are other influences in their lives not relative to their immediate family. They have found support and influence from peer groups, school, church, sports, etc. They are becoming aware that there are different ways of thinking, feeling, and acting in the world and that they can begin to make their own decisions. Children who grow up in high-conflict homes are discovering at this age that their peers do not live with the stressor of domestic violence in their homes. Some children become so entrenched in their home environment that they have difficulty engaging in positive ways of social interaction (James, 1994). For this reason, numerous researchers have found that aggression and violence between parents are strongly related to future involvement in severe marital violence (James, 1994).

What exactly are children who live in these high-conflict homes witnessing? They are being exposed to deliberate physical, emotional, and sexual abuse between parents (YMCA, 1997A). For instance, domestic violence generally follows a pattern that begins with the batterer attempting to control the victim's access to the outside world by denying her use of the telephone, money for public transportation, or the simple freedom to leave her home unescorted. Shortly thereafter, an occasional smack or push and escalates to more serious abuse, such as burning, punching, or assault with an object or weapon (Center, 1997). James (1994) found that "Ninety percent of the respondents reported that the children had witnessed the domestic violence" (James, 1994); "Eighty-seven percent of the children were aware of the violence between adults partners" (James, 1994); Fifty-eight percent of the worst and last attacks took place in front of the children (James, 1994). The escalation of the violence is also of concern. In

a study of 3,003 domestic violence incidents reported to the police, 92 involved the threat or use of a gun. Children under the age of five witnessed sixty-five percent of these gun incidents, and children between the ages of 5 and 9 witnessed thirty-five percent. Another 84 incidents in this study involved the use of a weapon (usually a knife), where seventy-nine percent of these incidents were witnessed by children under the age of 5, and twenty-five percent were witnessed by children between the ages of 5 and 9 (James, 1994).

To illustrate the brutality of the violence that children are witnessing by their fathers, sixty-two percent of the women reported being strangled at least once, sixty-nine percent were beaten, with twenty-eight percent receiving more than fifteen beatings (James, 1994). Imagine how frightened a child would be receiving direct paternal threats after witnessing these attacks against his or her mother. More of these children would have seen the brutality of their fathers' aggression, making even a verbal threat or spanking from their father more terrifying.

It is clear that living in a domestic violence home and witnessing the violence has a powerful negative impact. Of interest here is the tendency for children who grow up in high-conflict homes to demonstrate high frequency of externalizing behavior problems notably, aggression, noncompliance, delinquency and internalizing behaviors characterized by withdrawal, anxiety, and somatic complaints (O'Keefe, 1994).

It is possible that internalizing problems could be a function of early abuse, scapegoating and severity of abuse, whereas externalizing behavior problems might be a function of pervasiveness of abuse (Feldman, Hammer, Rosario & Salzinger, 1992). Some research suggests that, the more stressful life events children in violent homes experience in addition to the family violence, the more likely it is that they will develop internalizing behavior problems. Some of

these family stress factors may include mother-child conflict, parental alcoholism or drug abuse, family size, and low socioeconomic status (O'Keefe, 1994).

So, how do these children cope with the stress of parental divorce? For children in high-conflict relationships, parents' separation and divorce present a greater risk of violence reaching lethal proportions. Research confirms that battering men often escalate violence to re-capture battered women and children who have sought safety in separation (Hart, 1992). Battered women seek medical attention for injuries sustained as a consequence of domestic violence significantly more often after separation. It is estimated that seventy-five percent of visits to the emergency room by battered women occur after separation (Hart, 1992). One investigation found that about seventy-five percent of the calls to law enforcement for intervention and assistance in domestic violence cases occur after separation (Hart, 1992). Statistics indicate that anywhere from ¼ to ½ of domestic homicides occur after female victims have separated from their abusive husbands (Indiana, 2010 & Hart, 1992). Hotton (2001) found that between 1991 and 1999, ex-marital partners were responsible for 38% of all homicides against women compared to 31% of women killed by current common-law partners or husbands (Hotton, 2001).

Although divorce exposed nearly all children to parental verbal arguments, children living in domestic violence homes are truly at-risk when their parents separate or divorce. So, what does the separation and divorce of these high-conflict marriages mean for the behavioral outcomes of these children? Children's capacities to adjust to their parent' divorce are seriously compromised when the children are exposed to ongoing parental conflict (Insabella, Little, Pruett, & Williams, 2003). They experience self-blame, stress, fearfulness, poor interpersonal skills, insecure attachments and generalized insecurities (Cummings & Davies, 1994). Equally

important for young children, parental conflict and marital disruption are consistent precursors to poor parent-child relationship and on-going conflict (Kelly, 1998).

Other Factors Affecting Adjustment

A number of other variables can influence the behavioral outcomes of children of divorced parents. Simon, Lin, Gordon, Conger & Lorenz (1999) indicate that factors such as parenting styles, continued level of conflict, frequency of contact with the non-residential parent, and the psychological stability of the residential parent can influence the degree to which children are affected by divorce. Separated and divorced adults consistently report greater psychological distress than married or never married adults (Insabella et al., 2003). Therefore, depression and anxiety can lead to a diminished capacity to parent and to poor adjustment in children (Insabella et al., 2003). Firm, consistent discipline is important in the early school years and continues to be important at older ages when children gain more independence (Jekielek, 1998).

A poor post-marital relationship may lead to increased inconsistency in discipline practices between parents, due to parents' lack of communication about each other's opinions (Cummings & Shifflett, 1999). Disruptions in authoritative parenting capabilities or a conflicted relationship with the nonresidential parent have been associated with lower academic achievement, less social competence, increased internalizing and externalizing behavior problems, and lower self-esteem (Insabella et al., 2003). Some researchers have also documented that inconsistent discipline has been linked to conduct problems, aggression, and juvenile delinquency (Cummings & Shifflett, 1999). Cooperation over discipline predicts positive child adjustment regardless of whether parents disagree over other matters (Cummings & Shifflett,

1999). It appears that children respond negatively to the inconsistency and excessive harshness demonstrated by conflictual parents.

Parental conflict has also been found to lead to deterioration in parent-child relationships (Amato, 1993). When parents are in conflict, they may become so preoccupied with their own problems that they start to become withdrawn or hostile toward their children and spend less energy addressing their children's problems (Cummings & Shifflett, 1999). It has been found that a warmer mother-child relationship buffers a child against behavior problems (Peterson & Zill, 1986).

Among families with young children, a critical element of parental conflict and paternal involvement following divorce is the gate-keeping that occurs between parents. Gate-keeping refers to the cooperation and inhibitory functions that may be exercised by one or both parents that determine who will have access to their children (Insabella et al., 2003). Maternal gate-keeping has been defined as a "set of beliefs and behaviors that inhibit collaborative efforts between fathers and mothers by limiting the men's opportunity for caring and rearing of their children" (Allen & Hawkins, 1999). As the mother is customarily the primary caretaker, she becomes the monitor, permission giver, and controller of the father's involvement with the child and the form of that involvement (Insabella et al., 2003). Strict gate-keeping may result in less involvement by the non-residential parent, more primary parent-child conflicts, and children's feelings of insecurity regarding their less-seen parent (Hanson, 1999).

Parental conflict and marital disruption evidently are important stressors in children's lives. Post-divorce experiences such as decreased income, absence of one parent, decreased parental warmth and inconsistent or more punitive discipline practices, unstable or erratic lifestyle, and poor parental adjustment have been linked to negative child outcomes (Amato,

1993). These characteristics of divorce may affect child outcomes; however, the differences in the well-being of children from divorced and intact families have been found to fade with time (Jekielek, 1998). Although erratic in the first two years after divorce, children's home environments have been found to stabilize after two years post-divorce (Kelly, 1993).

Research has examined the differences in children's adjustment two years post-divorce, but how do children fare immediately following the separation of their parents? This study is interested in examining children's level of depression, attention difficulties, somatic complaints, rule-breaking behaviors, aggressiveness, social problems, thought problems, and overall internalizing and externalizing behaviors up to one year post-separation. This research will examine how the behaviors of children living in high-conflict households differ from those children who have lived in low-conflict households in which rational, negotiation skills are used to resolve conflict. It is speculated that all of the children may experience elevated internalizing and externalizing behaviors post-divorce. However, due to the pre-divorce violence and the on-going conflict between parents, it is hypothesized that the girls exposed to high conflict will show greater internalizing symptoms such as depression, anxiety, and physiological complaints. The boys from high conflict families will display more externalizing behavior problems such as aggressiveness, disobedience, and destructiveness.

Method

The current study investigated children's reactions to high-conflict divorce, particularly those children who have lived in domestic violence households. It was expected that children who have been exposed to high levels of parental conflict will manifest increased levels of behavioral difficulties when compared to their low parental conflict counterparts. As evidenced in previous research, it was expected that males would display more aggressive, disobedient, and

rule-breaking behaviors, and females would show symptoms of depression, anxiety, and somatic complaints.

Subjects

Subjects were male and female parents who were self selected upon their arrival to participate in the court-ordered parent education class offered by the Kanawha County Family Court in Kanawha County, West Virginia. The parent education class was offered approximately one time a week at the Kanawha County Judicial Annex at 5:30 p. m. and data were collected at that time for approximately eight weeks. The adult participants of the class had been ordered by the court to attend the class prior to their divorce, but they were not assigned a specific date to attend. All parents who attended the parent education class for the eight weeks of data collection were asked to participate, but participation was not a requirement of the court or of the parent education class. Participation was completely voluntary. Demographics of the parents and children were limited reflecting parental responses for the behaviors of 18 boys and 44 girls.

Procedure

Volunteer participants were given informed consent prior to their participation in this study. After consent was received by participants, the adult participants were offered a file folder that included instructions for completion of the research, the *Conflict Tactics Scale 2 (CTS2),* and the *Achenbach Child Behavior Checklist 6-18 (CBCL).* Participants completed identifying information that was highlighted and limited to the date of form completion, child's date of birth, gender of parent and gender of child. Parents completed the entire *Conflict Tactics Scale 2* specifically regarding the conflict history of their relationship with their estranged spouse demonstrated within the past year. Page 3 and page 4 of the *Child Behavior Checklist/ 6-18* parent report form was completed by the same parent regarding the behavioral characteristics of

their oldest child between the ages of 6-18. Page 1 and page 2 of the *CBCL* were marked out and not completed or needed for the purposes of this research. Parents were instructed to select the oldest child between the ages of 6-18 of the union currently seeking divorce. For example, if the couple has a child who was older than eighteen, the parent respondent was asked to identify the behavorial characteristics of the next oldest child within the 6-18 year old age range. If the couple had children older and/or younger than 6-18 years of age, they were declined participation as the data did not fit the demographics of this study. The *CTS2* and the *CBCL/6-18* were collected and filed together using a numeric organizational system based on the date of completion.

These data were analyzed to determine significant correlations between parental conflict and behavioral outcomes. A stepwise linear regression analysis examined the predictibility of the types of conflict on the specific behavior problems identified. These analyses were completed using SPSS 18.0 (IBM, 2010).

Instruments

The Conflict Tactics Scales 2

The *Conflict Tactics Scale 2 (CTS2)* was completed by the parent to assess the level of conflict between parents who were currently seeking divorce. The instrument measures the extent to which the partners "engage in psychological and physical attacks and also their use of reasoning and negotiation to deal with conflicts" (Hamby, 1996). This instrument was the only assessment available that measures victimization and perpetration of three tactics that are often used in conflict between partners: physical assault, negotiation, and psychological aggression. The instrument also offers scales to measure injury and sexual coersion of and by a partner (Straus, 2007).

The *CTS2* assessed relationship discord by using a 78-item, 8-point Likert scale that asks respondents, "How often did this happen in the past year?" The 8-point scale identifies conflict ranging from 0 (never) to 7 (not in the past year, but it happened before) and allows the respondent to self-evaluate as well as evaluate the same behavior in their partner. This scale was modified in the data analysis to identify 7 as .5 to indicate that the incident has occurred more than "never" but not within the past year. The victim/perpetrator component of this assessment tool was essential to the outcome of the research because, the assessment being completed by either parent, allowed the respondent to allocate blame upon themselves and/or their estranged spouse to give a more complete picture of the level of conflict in the home prior to seperation. Additional benefits of using the *CTS2* include the reading ease (estimated at a fourth grade reading level) as well as its usability with multicultural groups (Straus, Hamby & Warren, 2003). The completion of the questionaire takes 10 to 15 minutes making the format practical in the setting in which it was used.

Several studies measuring the internal consistency of the CTS2 offer a varied sample including college students (N=317), incarcerated drug abusers (N=359), and two postpartum samples (N= 295 & N= 472) of mothers at high-risk for domestic violence and child abuse (Straus et al., 2003). The internal consistency data available from these samples and alpha coeffiecients reported in an additional forty-one articles indicate internal consistentcy reliability coefficients ranging from .34 to .94 across subscales yielding a mean of .77 (Straus, 2007).

Test-retest reliability coeffiecients for the CTS2 were limited due to the diffciulty in testing the same sample on more than one occasion. Test-retest correlations could be located for only two samples. The coefficients for the various scales ranged from .49 to .90 with a mean of .72 (Straus, 2007).

Although the construct validity measures for the CTS2 were in its initial stages, preliminary evidence was available regarding the correlations with measures of personal and relationship characteristics, average scores for men and women, interscale correlations, and factor structure (Straus, et al., 2003). A study conducted of 391 undergraduate students conducted by Straus and Mouradian (1999) indicate significant correlations between Straus and Hamby's *Personal and Relationship Profile* and the CTS2. These data indicate that the constructs in the CTS2 were correlated with that of the variety of constructs identified in the professional literature as relevant to studying partner violence (Straus et al., 2003).

The same college student sample was used to assess the gender differences associated with this instrument. The differences between scores follow expected patterns for men versus women. For example, "Men in the college student sample obtained higher scores across a much wider range than women on both the Injury and Sexual Coersion scales" (Straus et al., 2003) and similar findings were noted among the negotiation, psychological aggression, and physical assault scales. Some discrepancies were noted indicating a possible over-reporting by men of women's violent behaviors. By the same token, women may be less likely than men to admit to injurious or coercive behaviors due to cultural acceptance (Straus et al., 2003).

With strong evidence of validity and reliability, the CTS2 was an appropriate instrument for use in this study. It was easy to use, offered respondent as victim and perpetrator responses, and was relevant across all socioeconomic, cultural and gender barriers. The instrument was used to assess the level of conflict between separated parents by identifying independent variables using five different scales including Negotiation, Psychological Agression, Physical Assault, Sexual Coercion, and Injury. An additional independent variable scale was generated to

combine all of the physically violent scales (e.g. physical asssult, sexual coercion, and injury) and was labeled “All Aggression.”

The Child Behavior Checklist

The *Achenbach Child Behavior Checklist (CBCL/6-18)* parent report form was chosen for this study for a number of reasons including: ease of use, externalizing, internalizing, attention, thought problem and social problem sub-scales and high reliability and validity coefficients. The *CBCL* was easy to use, had understandable and comprehensive instructions, and used language appropriate for both professionals and non-professionals. Questions and instructions for completion of this assessment were provided by the researcher and eliminated the need for demographics other than the current date, date of birth of the child, parent and child gender. Additional portions of page 1 and page 2 of the *CBCL/6-18* were not completed by adult respondents. Pages 3 and 4 contributed to the dependent variables utilized by this study in requesting ratings of behavioral, emotional and social problems (Achenbach & Rescorla, 2001) and were the only items that required completion for this research.

Validity and reliability coefficients of the *CBCL/6-18* were derived from a subset of youths constructed from a pool of 6 to 18-year-olds who were grouped as either “nonreferred” or “referred.” The “nonreferred” group was defined as “children who had not received professional help for behavioral/emotional problems within the preceeding 12 months” (Achenbach & Rescorla, 1991). Whereas the “referred” group had been referred for mental health services or special education classes for behavioral/emotional problems within the past year. These 2,368 children were chosen to be representative of the 48 states with respect to ethnicity, SES, geographical region, and urban-suburban-rural residence (Furlong & Wood, 1998).

The CBCL/6-18 exhibits complementary coefficients across all age and gender groups regardless of the reliability form used. Content and criterion-related validity of the CBCL/6-18 showed significant findings (p <.01) between demographically matched referred and nonreferred children (Achenbach & Rescorla, 2001). Construct validity scales have also been supported through significant associations with other similar instruments and with DSM criteria (Achenbach & Rescorla, 2001). Internal consistencies for the problems scales on the CBCL/6-18 ranged from .78 to .97 and test-retest reliability scores ranged from .91 to .95 (Achenbach & Rescorla, 2001).

"The *CBCL* was designed to provide a reliable and standardized means of evaluating children's problems and competencies on the basis of parent observations" (Brown, Portes, Saylor & Sekhon, 2005). Content validity, construct validity, and criterion-related validity have been supported using various analyses, and the data obtained by the instument have demonstrated a relationship to clinical diagnosis, behavioral disturbances, and poor social outcomes (Furlong & Wood,1998). "The *CBCL* was designed to provide a reliable and standardized means of evaluating children's problems and competencies on the basis of parent observations" (Brown et al., 2005).

For these reasons, the *CBCL* seemed to be an appropriate instument to use for this study. It provided the data needed to determine if the behavior problems of children of high-conflict divorces were elevated when compared to those children of low-conflict divorces. The dependent variables identified using this instrument were Anxious/Depressed, Withdrawn/Depressed, Somatic Complaints, Social Problems, Thought Problems, Attention Problems, Rule-Breaking Behavior, Aggressive Behavior, Internalizing behaviors (combines anxious/depressed, withdrawn/depressed and somatic complaints scales), Externalizing behaviors (combines rule-

breaking behavior and aggressive behavior scales), All Depression (combines anxious/depessed and withdrawn/depressed), and Total Behavior problems (combines anxious/depressed, withdrawn/depressed, somatic complaints, social problems, thought problems, attention problems, rule-breaking behavior, and aggressive behavior).

Results

Correlation and Regression Analyses

The correlations of each dependent variable with the independent variables appear in Tables 1 – 12. The regression analysis of each dependent variable appears in Table 13.

Anxious-depressed. All 7 independent variables were significant predictors of Anxious-depressed (Table 1). The multiple regression analysis identified the four predictors that were significant when included together in the multiple regression equation: negotiation, sexual coercion, physical assault, and gender of child (in order of decreasing partial eta squared, Table 13).

Attention. All 7 independent variables were significant predictors of Attention Problems (Table 2). The multiple regression analysis showed that there were three predictors that were significant when included together in the multiple regression equation: psychological aggression, gender of child, and negotiation (in order of decreasing partial eta squared, Table 13).

Withdrawn-depressed. Six of the seven independent variables were significant predictors of children being Withdrawn-depressed. The exception was gender of child (Table 3). The multiple regression analysis showed that there were two predictors that were significant when included together in the multiple regression equation: negotiation and injury (in order of decreasing partial eta squared, Table 13).

Somatic Complaints. Only one of seven independent variables was a significant predictor of children suffering somatic complaints (Table 4). Regression analysis provided one significant predictor: sexual coercion (in order of decreasing partial eta squared, Table 13).

Rule-Breaking Behavior. Five of seven independent variables were significant predictors of Rule-breaking behavior excluding negotiation and gender of child (Table 5). The multiple regression analysis identified only one predictor that was significant: injury. The remaining variables were not significant predictors once injury was included in the model (Table 13).

Aggressive Behavior. Six of the seven independent variables were significant predictors of Aggressive Behavior excluding gender of child (Table 6). The multiple regression analysis identified one predictor that was significant: all aggression (in order of decreasing partial eta squared, Table 13).

Internalizing Behavior. Six of the seven independent variables were significant predictors of Internalizing Behavior problems excluding gender of child (Table 7). The multiple regression analysis identified two predictors that were significant when included together in the multiple regression equation: all aggression and negotiation (in order of decreasing partial eta squared, Table 13).

Externalizing Behavior. Five of the seven independent variables were significant predictors of Externalizing Behavior. The two variables that were not significantly correlated were negotiation and sex of child (Table 8). The multiple regression analysis showed two predictors that were significant when included together in the multiple regression equation: injury and psychological aggression (in order of decreasing partial eta squared, Table 13).

All Depression. Six of the seven independent variables were significant predictors of All Depression. The one variable that was not significantly correlated was gender of child (Table 9). The multiple regression analysis showed three predictors that were significant when included together in the multiple regression equation: negotiation, all aggression, and sexual coercion (in order of decreasing partial eta squared, Table 13).

Thought Problems. Five of the seven independent variables were significant predictors of Social Problems. The two variables that were not statistically significant were gender of child and sexual coercion (Table 10). The multiple regression analysis identified two predictors that were significant when included together in the multiple regression equation: injury and negotiation (in order of decreasing partial eta squared, Table 13).

Social Problems. Six of the seven independent variables were significant predictors of Social Problems. The one variable that was not statistically significant was gender of child (Table 11). The multiple regression analysis identified two predictors that were significant when included together in the multiple regression equation: all aggression and negotiation (in order of decreasing partial eta squared, Table 13).

Total Behavior Problems. Six of the seven independent variables were significant predictors of Total Behavior Problems. The one variable that was not significant was gender of child (Table 12). The multiple regression analysis identified three predictors that were significant when included together in the multiple regression equation: all aggression, negotiation and injury (in order of decreasing partial eta squared, Table 13).

Discussion

This study examined the behavioral difficulties experienced by children after parental separation using a sample of parents who identified the level of conflict in their spousal

relationship using the *Conflict Tactics Scale 2 (CTS2).* Children's behaviors were examined using the parent report version of the *Achenbach Child Behavior Checklist* for ages 6-18 year old children to determine if behavioral differences exist among children depending on the level of conflict within the martial relationship.

Hypothesis 1: Children whose parents' relationship is characterized by domestic violence demonstrate increased behavioral problems.

The regression analysis of this study indicate that increased parental conflict was a valid predictor of behavioral difficulties demonstrated by children following parental separation. For children between the ages of six and eighteen years of age, externalizing and internalizing problems were significant as were thought and social difficulties when parent report of conflict is elevated. These results were consistent with a meta-analysis of adolescent outcomes of children exposed to domestic violence conducted by Evans, Davies & DiLillo (2008). Their analysis of 60 studies of children aged from birth to age 18 also supported a significant relationship between childhood exposure to domestic violence and negative behavioral outcomes specific to internalizing problems, externalizing problems and symptoms related to trauma (Evans, et al. 2008). Additional evidence supported the idea that childhood exposure to domestic violence has a range of negative outcomes that include increased internalizing and externalizing behavior problems (Fantuzzo, Deppaola, Martino, Anderson & Sutton, 1991; Holden & Ritchie, 1991; Jaffe, Wolfe, Wilson & Zak, 1986; Rossman, 1998; Sternberg, et al., 1993), depressive symptoms and anxiety (Graham-Berman, 1996; Spaccarelli, Sandler & Roosa, 1994; Sternberg, et al.1993), physical aggression and overall behavior problems when rated by parents and teachers (Sternberg, Baradaran, Abbott, Lamb & Guterman, 2006).

Same-aged children within the current study whose parents reported rational, appropriate negotiation skills to resolve conflict were determined to be less likely to have behavioral problems. However, parent report of children's behavior indicate that **ALL** children, regardless of parental conflict, experience significant symptoms of depression specifically symptoms of anxiety and withdrawal. This behavioral outcome may not be related to the parental conflict at all, but to the separation and divorce and the consequences of that circumstance on the child. Further examination into the child's perception of the parental relationship and a self-report of behaviors would be additional research worth considering.

Hypothesis 2: Girls who come from homes with increased parental conflict will demonstrate more internalizing behavior problems when compared to boys. Boys coming from high conflict homes will demonstrate increased externalizing behavior problems compared to girls.

Gender analysis in this study showed that the effects of parental conflict on children's internalizing and externalizing behavioral outcomes were not significantly different for boys and girls. These results were consistent with Moylan, et al. (2010) who examined children's exposure to domestic violence, child abuse and dual exposure of domestic violence and child abuse to determine gender differences. Moylan, et al (2010) found that children exposed to child abuse, domestic violence and dual exposure demonstrated an increased risk for internalizing and externalizing outcomes in adolescence with statistically comparable effects for boys and girls. Kitzmann, Gaylord, Holt and Kenny (2003) in a meta-analysis of 118 studies and Wolfe et al. (2003) in a meta-analysis of 41 came to similar conclusions regarding differences in gender effects with domestic violence exposure. However, other studies have found significant gender differences in children exposed to domestic violence. Evans et al. (2008) reported that

externalizing behavior problems were significantly higher for boys exposed to domestic violence than for girls who were also exposed.

Although the current study is not indicative of gender differences related to overall internalizing and externalizing behaviors, specific gender differences were noted in attention, anxiety and depression. Girls exposed to increased parental conflict were at risk for more attention problems as well as symptoms of anxiety and depression. Sternberg et al. (1993) found similar results regarding girls' increased risk for depression when exposed to domestic violence; however, Sternberg et al. (1993) also reported increased internalizing and externalizing behavior problems for girls when compared to boys, whereas the current results failed to discern gender differences to overall internalizing and externalizing behaviors. It should be noted that the results of this study were based on a greater number of female than male children (N = F(44), M(18)) and the small N for males may have significantly impacted the results related to gender differences specific to internalizing and externalizing behavior problems. A larger study utilizing a larger population with equal distribution of male and female children may find very different results when comparing boys and girls behaviors.

The practical implications of this study are widespread and can be of great benefit to those who work with children. Parents, teachers, clinicians, judges, counselors can use the results from this research to understand and seek ways of remediating children's behavior. These results imply that children of families going through divorce will suffer some behavioral difficulties regardless of the level of parental conflict. The parental and courtroom focus should always be in the child's best interest because the children suffer the consequences when their parents no longer wish to be married. However, it is important for parents to remember that although they are no longer married, they can be partners for their children. Where it is appropriate, the parents

can work together to reduce conflict, and they can agree to parenting arrangements that do not threaten the relationship between the non-residential parent and the child. Parents can attend parenting education classes and seek individual therapy that will teach them how to cooperate with one another and how to cope with their own feelings resulting from conflict and divorce.

As the officials who work in the best interest of the child, Family Court Judges will find this research useful in their understanding of the extreme effects that exposure to domestic violence have on children. These families would benefit from ongoing parenting education, mediation and family/child therapeutic services with frequent follow-up from the court. These are important implications for Family Court Judges as they make decisions regarding the residential placement of children. Knowing all of the facts, using a Guardian Ad Litem to investigate the history of violence, the nature of the violence and the behavioral implications for each individual child is not only crucial in determining appropriate placement of the child, but also in determining who will make important parenting decisions and how much time will be spent with the non-residential parent.

Therapeutic interventions are often sought by parents, teachers, or courts because of parental divorce. It is important for clinicians to understand the results of this research as it relates to children's behaviors post-separation and divorce. Our results indicate that children exposed to all levels of parental conflict demonstrate some form of depression post separation. Clinicians may miss many of the behavioral implications resulting from high conflict within the home if the circumstances surrounding the separation and divorce are not further investigated. Clinicians have the opportunity to work with children, parents, and families in order to focus on parent communication, child and adult emotional reactions, behavioral plans, structure and consistency.

Additional research in this area and replication of this study with a larger sample would be beneficial. Longitudinal research using the Conflict Tactics Scale 2 and the Child Behavior Checklist at the time of divorce and utilizing the CBCL at intervals throughout the 6-18 year age range would provide useful information regarding the long-term behavioral impact of conflict in conjunction with divorce. Additional studies examining behavioral outcomes adjusted for the child's age and differences in sibling behavioral outcomes would also offer useful information.

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Table 1 Correlation Matrix of CBCL and CTS2 for Anxious-Depressed

		Anxious Depressed	Psych Aggression	Physical Assault	Injury	Sexual Coercion	Negotiation	All Aggression	Sex Child 01
Anxious		1	.421**	.449**	.324*	.442**	.427**	.449**	-.272*
Depressed	**N**	59	59	57	59	59	58	57	59
Psych		.421**	1	.813**	.351**	.291*	.303*	.960**	-.165
Aggression	**N**	59	62	60	62	62	61	60	62
Physical		.449**	.813**	1	.738**	.365**	.034	.941**	-.143
Assault	**N**	57	60	60	60	60	59	60	60
Injury		.324*	.351**	.738**	1	.647**	-.041	.660**	-.131
	N	59	62	60	62	62	61	60	62
Sexual		.442**	.291*	.365**	.647**	1	.132	.322*	.010
Coercion	**N**	59	62	60	62	62	61	60	62
Negotiation		.427**	.303*	.034	-.041	.132	1	.184	-.079
	N	58	61	59	61	61	61	59	61
All		.449**	.960**	.941**	.660**	.322*	.184	1	-.153
Aggression	**N**	57	60	60	60	60	59	60	60
Sex Child 01		-.272*	-.165	-.143	-.131	.010	-.079	-.153	1
	N	59	62	60	62	62	61	60	62

****Correlation is significant at the 0.01 level (2-tailed)**

*** Correlation is significant at the 0.05 level (2-tailed)**

Table 2 Correlation Matrix of CBCL and CTS2 for Attention Problems

		Attention Problems	Psych Aggression	Physical Assault	Injury	Sexual Coercion	Negotiation	All Aggression	Sex Child 01
Attention Problems		1	.552**	.478**	.324*	.273*	.369**	.530**	-.333
	N	62	62	60	62	62	61	60	62
Psych Aggression		.552**	1	.813**	.351**	.291*	.303*	.960**	-.165
	N	62	62	60	62	62	61	60	62
Physical Assault		.478**	.813**	1	.738**	.365**	.034	.941**	-.143
	N	60	60	60	60	60	59	60	60
Injury		.324*	.351**	.738**	1	.647**	-.041	.660**	-.131
	N	62	62	60	62	62	61	60	62
Sexual Coercion		.273*	.291*	.365**	.647**	1	.132	.322*	.010
	N	62	62	60	62	62	61	60	62
Negotiation		.369**	.303*	.034	-.041	.132	1	.184	-.079
	N	61	61	59	61	61	61	59	61
All Aggression		.530**	.960**	.941**	.660**	.322*	.184	1	-.153
	N	60	60	60	60	60	59	60	60
Sex Child 01		-.333**	-.165	-.143	-.131	.010	-.079	-.153	1
	N	62	62	60	62	62	61	60	62

****Correlation is significant at the 0.01 level (2-tailed)**

*** Correlation is significant at the 0.05 level (2-tailed)**

Table 3 Correlation Matrix of CBCL and CTS2 for Withdrawn-Depressed

		Withdrawn Depressed	Psych Aggression	Physical Assault	Injury	Sexual Coercion	Negotiation	All Aggression	Sex Child 01
Withdrawn Depressed		1	.552**	.478**	.324*	.273*	.369**	.530**	-.333
	N	61	62	60	62	62	61	60	62
Psych Aggression		.356**	1	.813**	.351**	.291*	.303*	.960**	-.165
	N	61	62	60	62	62	61	60	62
Physical Assault		.282*	.813**	1	.738**	.365**	.034	.941**	-.143
	N	59	60	60	60	60	59	60	60
Injury		.266*	.351**	.738**	1	.647**	-.041	.660**	-.131
	N	61	62	60	62	62	61	60	62
Sexual Coercion		.292*	.291*	.365**	.647**	1	.132	.322*	.010
	N	61	62	60	62	62	61	60	62
Negotiation		.354**	.303*	.034	-.041	.132	1	.184	-.079
	N	60	61	59	61	61	61	59	61
All Aggression		.342**	.960**	.941**	.660**	.322*	.184	1	-.153
	N	59	60	60	60	60	59	60	60
Sex Child 01		-.074	-.165	-.143	-.131	.010	-.079	-.153	1
	N	61	62	60	62	62	61	60	62

****Correlation is significant at the 0.01 level (2-tailed)**

*** Correlation is significant at the 0.05 level (2-tailed)**

Table 4 Correlation Matrix of CBCL and CTS2 for Somatic Complaints

		Somatic Complaints	Psych Aggression	Physical Assault	Injury	Sexual Coercion	Negotiation	All Aggression	Sex Child 01
Somatic Complaints		1	.552**	.478**	.324*	.273*	.369**	.530**	-.333
	N	60	62	60	62	62	61	60	62
Psych Aggression		.171	1	.813**	.351**	.291*	.303*	.960**	-.165
	N	60	62	60	62	62	61	60	62
Physical Assault		.086	.813**	1	.738**	.365**	.034	.941**	-.143
	N	58	60	60	60	60	59	60	60
Injury		.253	.351**	.738**	1	.647**	-.041	.660**	-.131
	N	60	62	60	62	62	61	60	62
Sexual Coercion		.377**	.291*	.365**	.647**	1	.132	.322*	.010
	N	60	62	60	62	62	61	60	62
Negotiation		.216	.303*	.034	-.041	.132	1	.184	-.079
	N	59	61	59	61	61	61	59	61
All Aggression		.137	.960**	.941**	.660**	.322*	.184	1	-.153
	N	58	60	60	60	60	59	60	60
Sex Child 01		-.044	-.165	-.143	-.131	.010	-.079	-.153	1
	N	60	62	60	62	62	61	60	62

****Correlation is significant at the 0.01 level (2-tailed)**

*** Correlation is significant at the 0.05 level (2-tailed)**

Table 5 Correlation Matrix of CBCL and CTS2 for Rule-Breaking Behavior

		Rule Breaking Behavior	Psych Aggression	Physical Assault	Injury	Sexual Coercion	Negotiation	All Aggression	Sex Child 01
Rule		1	.552**	.478**	.324*	.273*	.369**	.530**	-.333
Breaking Behavior	**N**	60	62	60	62	62	61	60	62
Psych		.380**	1	.813**	.351**	.291*	.303*	.960**	-.165
Aggression	**N**	60	62	60	62	62	61	60	62
Physical		.418**	.813**	1	.738**	.365**	.034	.941**	-.143
Assault	**N**	59	60	60	60	60	59	60	60
Injury		.529**	.351**	.738**	1	.647**	-.041	.660**	-.131
	N	60	62	60	62	62	61	60	62
Sexual		.366**	.291*	.365**	.647**	1	.132	.322*	.010
Coercion	**N**	60	62	60	62	62	61	60	62
Negotiation		.095	.303*	.034	-.041	.132	1	.184	-.079
	N	59	61	59	61	61	61	59	61
All		.434**	.960**	.941**	.660**	.322*	.184	1	-.153
Aggression	**N**	59	60	60	60	60	59	60	60
Sex Child 01		-.118	-.165	-.143	-.131	.010	-.079	-.153	1
	N	60	62	60	62	62	61	60	62

****Correlation is significant at the 0.01 level (2-tailed)**

*** Correlation is significant at the 0.05 level (2-tailed)**

Table 6 Correlation Matrix of CBCL and CTS2 for Aggressive Behavior

		Aggressive Behavior	Psych Aggression	Physical Assault	Injury	Sexual Coercion	Negotiation	All Aggression	Sex Child 01
Aggressive Behavior		1	.552**	.478**	.324*	.273*	.369**	.530**	-.333
	N	61	62	60	62	62	61	60	62
Psych Aggression		.481**	1	.813**	.351**	.291*	.303*	.960**	-.165
	N	61	62	60	62	62	61	60	62
Physical Assault		.457**	.813**	1	.738**	.365**	.034	.941**	-.143
	N	60	60	60	60	60	59	60	60
Injury		.450**	.351**	.738**	1	.647**	-.041	.660**	-.131
	N	61	62	60	62	62	61	60	62
Sexual Coercion		.378**	.291*	.365**	.647**	1	.132	.322*	.010
	N	61	62	60	62	62	61	60	62
Negotiation		.285*	.303*	.034	-.041	.132	1	.184	-.079
	N	60	61	59	61	61	61	59	61
All Aggression		.499**	.960**	.941**	.660**	.322*	.184	1	-.153
	N	60	60	60	60	60	59	60	60
Sex Child 01		-.164	-.165	-.143	-.131	.010	-.079	-.153	1
	N		62	60	62	62	61	60	62

****Correlation is significant at the 0.01 level (2-tailed)**

*** Correlation is significant at the 0.05 level (2-tailed)**

Table 7 Correlation Matrix of CBCL and CTS2 for Internalizing Behaviors

		Internalizing Behaviors	Psych Aggression	Physical Assault	Injury	Sexual Coercion	Negotiation	All Aggression	Sex Child 01
Internalizing Behaviors		1	.552**	.478**	.324*	.273*	.369**	.530**	-.333
	N	57	62	60	62	62	61	60	62
Psych Aggression		.406**	1	.813**	.351**	.291*	.303*	.960**	-.165
	N	57	62	60	62	62	61	60	62
Physical Assault		.369**	.813**	1	.738**	.365**	.034	.941**	-.143
	N	55	60	60	60	60	59	60	60
Injury		.359**	.351**	.738**	1	.647**	-.041	.660**	-.131
	N	57	62	60	62	62	61	60	62
Sexual Coercion		.373**	.291*	.365**	.647**	1	.132	.322*	.010
	N	57	62	60	62	62	61	60	62
Negotiation		.380**	.303*	.034	-.041	.132	1	.184	-.079
	N	56	61	59	61	61	61	59	61
All Aggression		.406	.960**	.941**	.660**	.322*	.184	1	-.153
	N	55	60	60	60	60	59	60	60
Sex Child 01		-.232	-.165	-.143	-.131	.010	-.079	-.153	1
	N	57	62	60	62	62	61	60	62

****Correlation is significant at the 0.01 level (2-tailed)**

*** Correlation is significant at the 0.05 level (2-tailed)**

Table 8 Correlation Matrix of CBCL and CTS2 for Externalizing Behaviors

		Externalizing Behaviors	Psych Aggression	Physical Assault	Injury	Sexual Coercion	Negotiation	All Aggression	Sex Child 01
Externalizing Behaviors		1	.552**	.478**	.324*	.273*	.369**	.530**	-.333
	N	60	62	60	62	62	61	60	62
Psych Aggression		.468**	1	.813**	.351**	.291*	.303*	.960**	-.165
	N	60	62	60	62	62	61	60	62
Physical Assault		.464**	.813**	1	.738**	.365**	.034	.941**	-.143
	N	59	60	60	60	60	59	60	60
Injury		.500**	.351**	.738**	1	.647**	-.041	.660**	-.131
	N	60	62	60	62	62	61	60	62
Sexual Coercion		.390**	.291*	.365**	.647**	1	.132	.322*	.010
	N	60	62	60	62	62	61	60	62
Negotiation		.225	.303*	.034	-.041	.132	1	.184	-.079
	N	59	61	59	61	61	61	59	61
All Aggression		.499**	.960**	.941**	.660**	.322*	.184	1	-.153
	N	59	60	60	60	60	59	60	60
Sex Child 01		-.154	-.165	-.143	-.131	.010	-.079	-.153	1
	N	60	62	60	62	62	61	60	62

****Correlation is significant at the 0.01 level (2-tailed)**

*** Correlation is significant at the 0.05 level (2-tailed)**

Table 9 Correlation Matrix of CBCL and CTS2 for All Depression

		All Depression	Psych Aggression	Physical Assault	Injury	Sexual Coercion	Negotiation	All Aggression	Sex Child 01
All Depression		1	.552**	.478**	.324*	.273*	.369**	.530**	-.333
	N	58	62	60	62	62	61	60	62
Psych Aggression		.429**	1	.813**	.351**	.291*	.303*	.960**	-.165
	N	58	62	60	62	62	61	60	62
Physical Assault		.417**	.813**	1	.738**	.365**	.034	.941**	-.143
	N	56	60	60	60	60	59	60	60
Injury		.332*	.351**	.738**	1	.647**	-.041	.660**	-.131
	N	58	62	60	62	62	61	60	62
Sexual Coercion		.415**	.291*	.365**	.647**	1	.132	.322*	.010
	N	58	62	60	62	62	61	60	62
Negotiation		.412**	.303*	.034	-.041	.132	1	.184	-.079
	N	57	61	59	61	61	61	59	61
All Aggression		.443**	.960**	.941**	.660**	.322*	.184	1	-.153
	N	56	60	60	60	60	59	60	60
Sex Child 01		-.195	-.165	-.143	-.131	.010	-.079	-.153	1
	N	58	62	60	62	62	61	60	62

****Correlation is significant at the 0.01 level (2-tailed)**

*** Correlation is significant at the 0.05 level (2-tailed)**

Table 10 Correlation Matrix of CBCL and CTS2 for Thought Problems

		Thought Problems	Psych Aggression	Physical Assault	Injury	Sexual Coercion	Negotiation	All Aggression	Sex Child 01
Thought Problems		1	.552**	.478**	.324*	.273*	.369**	.530**	-.333
	N	62	62	60	62	62	61	60	62
Psych Aggression		.300*	1	.813**	.351**	.291*	.303*	.960**	-.165
	N	62	62	60	62	62	61	60	62
Physical Assault		.257*	.813**	1	.738**	.365**	.034	.941**	-.143
	N	60	60	60	60	60	59	60	60
Injury		.476**	.351**	.738**	1	.647**	-.041	.660**	-.131
	N	62	62	60	62	62	61	60	62
Sexual Coercion		.435**	.291*	.365**	.647**	1	.132	.322*	.010
	N	62	62	60	62	62	61	60	62
Negotiation		.231	.303*	.034	-.041	.132	1	.184	-.079
	N	61	61	59	61	61	61	59	61
All Aggression		.315*	.960**	.941**	.660**	.322*	.184	1	-.153
	N	60	60	60	60	60	59	60	60
Sex Child 01		-.075	-.165	-.143	-.131	.010	-.079	-.153	1
	N	62	62	60	62	62	61	60	62

****Correlation is significant at the 0.01 level (2-tailed)**

*** Correlation is significant at the 0.05 level (2-tailed)**

Table 11 Correlation Matrix of CBCL and CTS2 for Social Problems

		Social Problems	Psych Aggression	Physical Assault	Injury	Sexual Coercion	Negotiation	All Aggression	Sex Child 01
Social Problems		1	.552**	.478**	.324*	.273*	.369**	.530**	-.333
	N	61	62	60	62	62	61	60	62
Psych Aggression		.453**	1	.813**	.351**	.291*	.303*	.960**	-.165
	N	61	62	60	62	62	61	60	62
Physical Assault		.439**	.813**	1	.738**	.365**	.034	.941**	-.143
	N	59	60	60	60	60	59	60	60
Injury		.544**	.351**	.738**	1	.647**	-.041	.660**	-.131
	N	61	62	60	62	62	61	60	62
Sexual Coercion		.469**	.291*	.365**	.647**	1	.132	.322*	.010
	N	61	62	60	62	62	61	60	62
Negotiation		.298*	.303*	.034	-.041	.132	1	.184	-.079
	N	61	61	59	61	61	61	59	61
All Aggression		.482**	.960**	.941**	.660**	.322*	.184	1	-.153
	N	61	60	60	60	60	59	60	60
Sex Child 01		-.165	-.165	-.143	-.131	.010	-.079	-.153	1
	N	61	62	60	62	62	61	60	62

****Correlation is significant at the 0.01 level (2-tailed)**

*** Correlation is significant at the 0.05 level (2-tailed)**

Table 12 Correlation Matrix of CBCL and CTS2 for Total Behavior Problems

		Total Problems	Psych Aggression	Physical Assault	Injury	Sexual Coercion	Negotiation	All Aggression	Sex Child 01
Total Problems		1	.516**	.499**	.510**	.385**	.342*	.543	-.259
	N	55	55	54	55	55	54	54	55
Psych Aggression		.516**	1	.813**	.351**	.291*	.303*	.960**	-.165
	N	55	62	60	62	62	61	60	62
Physical Assault		.499**	.813**	1	.738**	.365**	.034	.941**	-.143
	N	54	60	60	60	60	59	60	60
Injury		.510**	.351**	.738**	1	.647**	-.041	.660**	-.131
	N	55	62	60	62	62	61	60	62
Sexual Coercion		.385**	.291*	.365**	.647**	1	.132	.322*	.010
	N	55	62	60	62	62	61	60	62
Negotiation		.342*	.303*	.034	-.041	.132	1	.184	-.079
	N	54	61	59	61	61	61	59	61
All Aggression		.543**	.960**	.941**	.660**	.322*	.184	1	-.153
	N	54	60	60	60	60	59	60	60
Sex Child 01		-.259	-.165	-.143	-.131	.010	-.079	-.153	1
	N	55	62	60	62	62	61	60	62

****Correlation is significant at the 0.01 level (2-tailed)**

*** Correlation is significant at the 0.05 level (2-tailed)**

Table 13 Regression Analysis by Children's Behavior

	Unstandardized Coefficients					
Predictor	B	Standard Error	*t*	*p*	Partial eta squared	R squared
Anxious Depressed						
Physical Assault	0.076	0.029	2.606	.012	.118	.478
Negotiation	0.074	0.021	3.504	.001	.194	.478
Sexual Coercion	0.211	0.075	2.800	.007	.133	.478
Sex Child 01	-1.942	0.926	-.219	.041	.079	.478
(Constant)	0.340	1.112	0.306	*Ns*		
Attention Problems						
Psychological Aggression	0.077	0.020	3.909	<.001	.233	.417
Sex Child 01	-2.354	0.993	-2.370	.021	.099	.417
Negotiation	0.046	0.023	2.011	.049	.066	.417
(Constant)	0.641	1.204	0.532	*Ns*		
Withdrawn/Depressed						
Negotiation	0.064	0.021	3.045	.004	.141	.201
Injury	0.329	0.137	2.401	.020	.086	.201
(Constant)	-0.107	1.035	-0.104	*Ns*		
Somatic Complaints						
Sexual Coercion	0.246	0.070	3.534	.001	.142	.142
(Constant)	1.251	0.309	4.044	<.001		
Rule-Breaking Behavior						
Injury	0.580	0.119	4.861	<.001	.280	.280
(Constant)	2.210	0.439	50.29	<.001		
Aggressive Behavior						
All Aggression	0.079	0.018	4.358	<.001	.249	.249
(Constant)	2.784	1.110	2.508	.015		
Internalizing Behavior						
All Aggression	0.071	0.025	2.880	.006	.140	.269
Negotiation	0.132	0.050	2.635	.011	.120	.269
(Constant)	-0.296	2.446	-0.121	*Ns*		
Externalizing Behavior						
Injury	1.075	0.354	3.036	.004	.131	.321
Psychological Aggression	0.110	0.050	0.276	.033	.095	.321
(Constant)	4.148	1.906	2.176	.034		
All Depression						
All Aggression	0.051	0.021	2.448	.018	.105	.369
Negotiation	0.114	0.040	2.839	.006	.136	.369
Sexual Coercion	0.304	0.137	2.223	.031	.088	.369
(Constant)	-0.715	1.968	-0.363	*Ns*		
Thought Problems						
Injury	0.507	0.135	3.748	<.001	.250	.290
Negotiation	0.055	0.022	2.434	.018	.081	.290
(Constant)	-0.817	1.100	-0.743	*Ns*		
Social Problems						
All Aggression	0.034	0.009	3.777	<.001	.206	.304
Negotiation	0.043	0.018	2.402	.020	.095	.304
(Constant)	-0.312	0.887	-0.351	*Ns*		

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Cindi J. Settle

Experience

8/2006-Present Logan County Board of Education Logan, WV

School Psychologist

- Provide psychoeducational services to Logan County Schools at the elementary, middle and high school level to include psychological evaluations and report preparation with classroom and home recommendations.
- Collaborate with regular education and special education staff, parents and students to assess students' strengths and weaknesses and to incorporate appropriate intervention techniques into the classroom.
- Provide developmental guidance, crises counseling and therapeutic services to students in need.
- Educate teachers, parents and other school personnel on topics that relate to student success in the classroom.

3/2006-8/2006 Dr. Christina Arco Charleston, WV

Psychometrician

- Administered complete psychoeducational assessments including intelligence, achievement, visual-motor integration, adaptive, self-concept, self-affect, and behavioral scales to children and adolescents.
- Prepared files and completed the scoring of these instruments using hand-scoring and computer-scoring software in a timely manner in preparation for parent feedback consultations.
- Interpreted test results into a psychological report utilized by parents, educators, and medical doctors for psychoeducational planning and medical intervention.

2/2006-6/2006 Dr. Fred J. Krieg & Associates Berkeley Springs, WV

Supervised School Psychologist

- Provided psychoeducational services to Morgan County Schools at the Elementary, Intermediate, Middle, and High School level.
- Evaluated students using the Wechsler Intelligence Scale for Children-Fourth Edition and the Beery-Buktenica Developmental Test of Visual Motor Integration.
- Interpreted psychological evaluation reports integrating assessments completed by the educational diagnosticians including achievement, adaptive, and Attention Deficit Hyperactivity Scales.

2003-2004 Arlington County Commonwealth Attorney Arlington, VA

Victim Specialist

- Provided continuous communication with victims of crime throughout the court proceedings to provide crises intervention, referrals, and court

support.

- Assisted attorneys with victim/witness interviews, victim impact statements, victim notifications, and victim reimbursement.
- Maintained up-to-date records of victims assisted and services provided to allow statistical analysis of such data.
- Maintained appropriate communication with victims of crime throughout the court proceedings.

2002-2003 Center for Children LaPlata, MD

Supervised Visitation Coordinator

- Developed and oversaw the Volunteer/Supervised Visitation Programs in St. Mary's County, Maryland.
- Worked with the Department of Social Services, Circuit Courts, Attorneys, and shelters concerning child custody cases.
- Explained, coordinated, and oversaw visitation sessions between children and their non-custodial parent.
- Provided and organized case management files, monthly reports, and communications with the judges and courts.

1997-2002 Kanawha County Sheriff's Department Charleston, WV

Victim Services Coordinator

- Developed and directed the Victim Services Program with the department.
- Provided crises counseling, referral services, and court support to victims of crime. .
- Trained law enforcement officers on the dynamics of domestic violence, stalking, and sexual assault.
- Provided community outreach and education on types of crime victims and referral services available to victims in the community.
- Assisted in the development of various new programs throughout the county including high-risk assessment team and Court Watch.

2000-2002 Family Psychiatric Services Charleston, WV

Psychometrician

- Administered and scored intelligence, achievement, and personality assessments to adults, adolescents, and children.
- Utilized therapy/counseling techniques to clients as needed throughout the testing process.
- Maintained and provided psychological assessments and psychological reports in an organized and timely manner.

1999 CAMC Family Resource Center Charleston, WV

Clinical Psychology Intern

- Administered neuropsychological assessments tools to discern neurological brain disorders in children.
- Scored and interpreted neuropsychological assessments providing a neuropsychological report for parent, educational, and pediatric use.
- Utilized therapeutic techniques to assist children and parents with behavioral,

academic, social, and cognitive difficulties.

- Participated in DEC (Developmental Evaluation for Children) by providing infant and preschool assessments to children displaying symptoms of Pervasive Developmental Disorders.

Education

2005-2008 Marshall University Graduate College Charleston, WV

- School Psychology Student

1996–2006 Marshall University Graduate College Charleston, WV

- M.A. in Clinical Psychology

1992-1996 University of Charleston Charleston, WV

- B.A. in Psychology
- Minor courses in English and Theatre