The Influence of College Students’ Perception of Parental (or Primary Caregiver) Expectations on Coping Behavior and Adjustment in Early Adulthood

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The Influence of College Students’ Perception of Parental (or Primary Caregiver) Expectations on Coping Behavior and Adjustment in Early Adulthood

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the requirements for the degree of
Master of Arts in Psychology

by

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Abstract

The Influence of College Students’ Perception of Parental (or Primary Caregiver) Expectations on Coping Behavior and Adjustment in Early Adulthood

By Jessica Smith

While some research has examined how parental expectations affect educational achievement, there is very little known about how parental expectations affect the development of coping skills and adaptive and maladaptive psycho-social functions. Participants were asked to complete a measure of their abilities in academics, sports, leadership, honesty, responsibilities, among other things. Then, they completed a measure of what they perceived their parents’ expectations of those areas were. Lastly, they completed the Behavioral Assessment System for Children-College Self Report of Personality form as a measure of adaptive and maladaptive functioning. The goals of this study are to investigate 1) if participants' actual ability level is related to coping skills and maladaptive behaviors, 2) if a discrepancy between abilities and mothers’ expectations affect development, 3) if a discrepancy between abilities and fathers’ expectations affect development, and 4) if a global assessment of the quality of the parent-child relationship affect development.
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The family unit is one of the most important factors in shaping human development. The way that parents interact with their children profoundly influences the way children think and act, as well as what they believe about themselves and the world around them (Roberts & Magrab, 1991). Researchers have begun to investigate how multiple variables interact to affect the development of a child. This growing body of research has revealed there is no one best way that parents and children should interact, because ultimately the health of the child is dependent upon characteristics of both the child and parent’s personalities.

One of the greatest concerns of parents within industrialized cultures is how their children perform in school. This parental concern stems from the fact that a child’s adult life is significantly influenced by the grades that he/she earns in school and whether those grades are sufficient to provide him/her with the opportunities to pursue future educational and/or career goals. It is a reality that some children do better in school than others. It is also a reality that some parents have different expectations about their children’s performance in school than others and may express their expectations to their children in both healthy (i.e. supportive, realistic expectations) and unhealthy ways (i.e. unrealistic expectations, pressure to excel). Factors underlying the development of parental expectations about their children’s school performance have received extensive attention from researchers. An important question for researchers, however, is what influence parental expectations have on the cognitive, social and emotional development of young adults. The influence of parental expectations on the emotional development and adjustment of young adults will serve as the primary focus of the present investigation.

The review of the parental expectations research literature will begin with a look at research examining the factors underlying the development of parental expectations of their
children’s school performance. Then, research examining the importance of the development of coping skills in the lives of adolescents will be reviewed. Next, research investigating the influence of parental expectations on the development of coping skills in adolescents will be examined. Then, research questions that have yet to be addressed by parental expectations researchers will be examined. Next, a discussion of the limitations and challenges associated with parental expectations research will be presented. Finally, the rationale for the present study will be presented along with a discussion of how the present study will advance existing research on the influence of parental expectations on the emotional development of young adults and attempt to address the limitations and challenges associated with prior research on parental expectations.

Parental Expectations

Research on parental expectations has examined the factors underlying the development of parental expectations about their children’s school performance. Many of these studies have attempted to examine the influence of single variables of interest on parental expectations of children’s school performance. However, these studies have often demonstrated the difficulty of separating the affects of multiple variables on the development of parental expectations. The most extensively researched variable has been parental education. The amount of education obtained by parents has been shown to strongly affect parental expectations of the level of school performance their children should achieve. However, the results of research on the influence of parental education are conflicting. Alexander, Entwisle, and Bedinger (1994) found that parents with a higher level of education had expectations that better matched their children’s school performance than parents with less education. However, Räty, Leinonen, and Snellman (2002) found that parents with more education tend to expect their children to go on to higher education
regardless of ability, while parents with vocational training tended to look at their child’s ability
and use that to develop their expectations as to their child’s likely level of school performance
and level of academic achievement.

The explanation for the conflicting results in research comparing the level of parental
education and parental expectations of children’s school performance may come from work done
by Zhan and Sherraden (2003). They found the mothers with more education had much higher
expectations of their children, but they also provided a richer home environment that led to their
children doing better in school. They theorized that parents that have a higher level of education
are better suited to teach their children the skills necessary for academic success. Also, more
educated parents tend to impart more positive views of academic achievement to their children.
Contributing to this interpretation, Smith, Brooks-Gunn, and Klebanov (1997) found that the
home environment could mediate both the level of parental education and income. When a
loving, nourishing environment is provided, children can overcome hurdles caused by a lack of
parental education or socioeconomic status and achieve academic success.

All parents have expectations for their children, and there is nothing intrinsically harmful
about that. However, there is quite a difference between realistic and unrealistic expectations.
Realistic expectations are based on the ability of the child, while unrealistic expectations are
based on factors outside the child’s control and are often unattainable despite the best efforts of
the child. Research has examined the factors more likely to cause parents to have unrealistic
expectations about their children. In addition to parental education, higher social standing can
also lead to unrealistic parental academic expectations because poor school performance on the
part of the child would be perceived by parents as reflecting badly on the parents or the family.
Rice, Lopez, and Vergara (2005) found that children in families with a high social standing place
more importance on fulfilling their parents’ expectations. However, when the expectations of the parent are not matched by the school performance of the child, it can potentially cause the child to have problems such as depression (Castro & Rice, 2003) and maladaptive perfectionism (Rice, Lopez, & Vergara, 2005). A difficult task for researchers has been to isolate individual factors that are able to differentiate positive and harmful levels of parental expectations because these expectations are often a product of the interaction between parenting style and the child’s personality. However, there are some factors that seem to prevent children from suffering the negative effects on emotional development that can result from unrealistic parental expectations.

One of these factors is a supportive and communicative home environment. Miller and Day (2002) found that children who feel emotional coldness from their parents, especially their mother, were more likely to have suicidal ideation. However, the reverse is also a possible problem, in that if children feel an extreme closeness to their parents, they may feel disloyal if they don’t agree with their parents’ perspective about what is expected of them (Miller, 1995). Miller (1995) also found that children who have trouble separating themselves from their parents often come from homes where parents show a conditional acceptance of their children based on achievement. It seems clear that children need to know their parents care about them regardless of whether they succeed or not. It is also important that children understand that their parents will continue to care for them, even if they disagree with their parents’ expectations concerning their academic potential and school performance.

A second line of research has examined how parental expectations affect the child’s likelihood of proceeding through and completing their education. Fan and Chen (2001) found that parental expectations had the strongest relationship to children’s school performance of all
the measures of parental involvement that they assessed, including parental communication styles and parental participation in children’s school activities.

Even though strong correlational evidence has been found showing a relationship between parental expectations and children’s school performance, there is still much debate about in which direction the correlation operates. Halle, Kurtz-Costes, and Mahoney (1997) found that after controlling for prior academic achievement, parental expectations still predicted children’s school performance in third and fourth grade. However, Goldenberg, Gallimore, Reese, and Garnier (2001) found that, in a longitudinal study that followed children from kindergarten to sixth grade, children’s school performance was shown to influence parental expectations rather than the reverse. Englund, Luckner, Whaley, and Egeland (2004) also conducted a longitudinal study that showed no significant effect of parental expectations on achievement, but did find a significant effect of achievement on expectations. However, their longitudinal study only followed children through third grade, and parental expectations predicted parental involvement in third grade but not in first grade, so it is possible that if the study had been taken farther there would have been an effect on achievement caused by higher parental involvement.

There seems to be little doubt that parental expectations affect development. However, most of the existing research has looked only at the influence of parental expectations on the academic achievement of a child (e.g. length of the child’s school career; school performance). While this line of research is important, it has not assessed how parental expectations affect the child in other areas of development, such as the development of emotional problems including depression and anxiety. Prior research has also failed to illuminate how parental expectations of
academic performance affect their children’s ability to cope with the pressures of life outside the academic world.

*The Development of Coping Skills*

Coping is the process of adapting to the environment using strategies and resources (Williamson, Zeitlan, & Szczepanski, 1989). It has also been defined as “flexible and changing reactions to normative challenges” (Skinner & Edge, 1998, p. 357). The acquisition of coping skills is an integral part of development in that coping skills can be used to preserve one’s own physical and emotional well being. Kenny (2000) points out that coping includes all attempts to reduce stress, whether they are successful or maladaptive. Therefore, as children acquire coping skills as they develop, it is possible for them to acquire both adaptive and maladaptive coping responses to deal with the people and events in their lives.

Maccoby (1983; as cited in Kenny, 2000) found that young children need external cues from their parents to learn coping behaviors in stressful situations. As children age, they begin to internalize these responses and incorporate them into their patterns or styles of coping. Having a secure attachment to a primary caregiver is one of the most important factors in developing an understanding of how to deal with stressors (Fonagy, Steele, Steele, Higgit, & Target, 1994; as cited in Kenny, 2000). Insecure attachments have been strongly linked to maladaptive coping responses including depression and withdrawal (Main & Solomon, 1990; as cited in Kenny, 2000) as well as social incompetence (Zeanah, 1996; as cited in Kenny, 2000). These maladaptive coping responses that can result from insecure attachments to primary care-givers can impair children’s attempts to initiate and maintain social support networks and potentially lead to psychopathology (Kenny, 2000).
The Effect of Parental Expectations on Coping in Children

Stoiber and Houghton (1993) found that parental expectations significantly affected the coping skills and behavior of children as young as 6 months old. Calkins and Johnson (1998) also found that parenting is the most important external factor in the development of emotional-self regulation in children. Emotional self-regulation is an important component of coping, because being able to self-regulate one’s emotions allows an individual to exercise active coping skills instead of just reflexively reacting to their environment. Given that parental expectations have been shown to affect the development of children’s coping skills, even among infants, it appears safe to assume that parental expectations will continue to have a strong influence on the development of coping skills throughout childhood.

There are several reasons why parental expectations would affect the development of children’s coping skills. Since the relationship between parents and children represents the child’s first social interactions, these interactions contribute to how children interact with others throughout their life. In this role, parents mediate the amount of environmental demands placed on the child (Skinner & Edge, 1998). When children are unable to meet expectations of their parents, they may fail to develop confidence in their own abilities (Miller, Manhal, & Mee, 1991). Failing to meet parental expectations also seems to affect the child’s sense of what they deserve from the inter-personal relationships in their lives (Combrinck-Graham, 1989).

It is important to remember that while the level of parental expectations is important to the development of a child, of greater importance, is whether parental expectations are realistic and reasonable for a child. If a parent has unrealistic expectations and holds a child accountable for things outside of their control, or expects them to perform outside of their capabilities, it can cause a child to develop an unhealthy locus of control (LOC). While high parental expectations
may lead a child to develop an internal LOC, which is beneficial to his/her development (Rotter, 1990), Zuckerman, Knee, Kieffer, and Gagne (2004) found that it is also important for parents to be able to make the distinction between what a child can and cannot control. Children will often develop an internal LOC when their parents expect them to do well in school and the child is responsible for his/her level of academic success. However, it is possible that this can also be counterproductive if the parents hold their children responsible for things outside of their control, such as doing poorly in a class where the teacher isn’t helpful. Finally, a relationship in which parents have unrealistic expectations that their children are unable to meet can lead to abusive behavior on the part of the parents, which puts the child at greater risk for both physical and emotional danger (Azar, Robinson, Hekimian, & Twentyman, 1984).

Kitayama, Markus, and Kurokawa (2000) found that in European cultures coping with failure is often difficult because success is perceived to be based on ability, which is seen as a static concept that can’t be increased. They found that continually failing to meet parental expectations led to rebellion or hopelessness in children. Continually failing to meet parental expectations can also lead to social withdrawal which is a maladaptive coping response (Elliot, Chirkov, Kim, & Sheldon, 2001). Castro and Rice (2003) conducted a study that examined the link between perfectionism in children resulting from parental expectations and depressive tendencies in children. They found that although Asian students had higher parental expectations that led to more “maladaptive” perfectionism, (i.e. greater concern about making mistakes; less self-confidence), they were no more likely to be depressed and less likely to perform poorly in school than American students. Castro and Rice (2003) felt that this difference is based on the higher level of parental support and assistance in Oriental cultures, whereas European cultures expect children to succeed independently with limited parental and/or outside assistance.
In summary, it is apparent from the parental expectations research that parental expectations do affect the coping strategies of children. The research indicates that how these parental expectations are communicated and how appropriate and realistic these expectations are for the child affects which coping strategies are developed and how these coping skills are used.

**Challenges in Parental Expectations Research**

While the influence of parental expectations on children’s school performance is an important area of investigation, parental expectations can also affect children’s emotional and cognitive development. A review of the literature reveals there has been little research on how parental expectations affect children emotionally. There is some research dealing with extreme cases of emotionality such as the role of parental expectations in children’s suicidal behavior (Miller & Day, 2002) and self-injurious behavior (Yip, Ngan, & Lam, 2003), but there is a lack of research on the less extreme and more appropriate coping mechanisms used by children who are unable to meet their parents’ expectations.

There is also a lack of research on parents whose expectations of their children’s school performance are lower than their child’s actual level of academic ability. David Elkind (1991) theorized about this sort of parent, referring to them as “narcissistic”. This type of parent feels that their child is average but through their superior teaching abilities, the parent has made their child a genius. He thought that while the children of such parents would excel in school, they would be unable to see their accomplishments as their own. However, there does not appear to have been any research done to date to support this speculation. Also, a lot of the research that has examined the coping problems children experience as a result of their parents’ expectations has not assessed whether the parents’ expectations are based on accurate and realistic perceptions of the child’s actual abilities. It is important to remember that high parental expectations that the
child can realistically achieve will have a more positive affect on the emotional development of the child than unrealistic expectations the child is unable to meet.

Another challenging for parental expectations researchers is that much of the existing research has examined the development of parental expectations for the school performance of young children. The existing research, therefore, may not provide a complete picture of how parental expectations affect children, because younger children may not be old enough to use their acquired coping resources to engage in emotional self-regulation and may not understand that they are not fulfilling their parents’ expectations. While coping begins to form in early childhood, many coping strategies aren’t fully functioning until adolescence.

Aside from the theoretical ground that hasn’t been covered by the existing parental expectations research, the research methods that have been used to assess the influence of parental expectations on children’s development leave much to be desired. Many studies use only one global question to assess parental expectations and this question typically asks parents how far in the educational system parents see their children advancing (Davis-Kean, 2005; Räty, Leinonen, & Snellman, 2002; Zhan & Sherraden, 2003). While one global question may be adequate for research examining the types of parents who expect their children to complete more education, it gives almost no indication of how parents feel about their child’s present academic performance or their academic potential. Even studies that have used more than one question to examine parental expectations often used only four or five general questions to assess parental expectations of children’s academic abilities (Oishi & Sullivan, 2005).

To advance the existing parental expectations research, future studies should pursue the following goals: (1) examine whether parental expectations of the child are realistic or unrealistic by comparing parental expectations with a measure of the child’s true level of ability (2) explore
the relationship between the discrepancy between parental expectations and the child’s true level of ability and the emotional development of the child (3) develop comprehensive measures of parental expectations that include domains beyond academic expectations rather than continuing the use a single item or a small number of items to assess parental expectations and (4) examine the impact of parental expectations on emotional development rather than continuing to focus on cognitive and academic development. The present study will use these goals as a foundation in an attempt to examine the influence of parental expectations on the emotional development of young adults (i.e. college-age).

The Present Study

The present study seeks to advance existing parental expectations research by examining (a) the amount of discrepancy between parental expectations and young adult’s true levels of ability and (b) the influence of this discrepancy on the emotional development and acquisition of coping skills in young adults (i.e. college students). In the study, the participants (i.e. college students), will complete 3 measurement instruments. First, they will complete a self-perception instrument which will serve as the measure of their true level of ability. Next, they will complete a parental expectations instrument for each of their parents and/or primary care-givers. While completing each parental expectations instrument, participants will provide their perceptions of the expectations held by each parent or primary care-giver about the participant’s abilities. Finally, the participants will complete the BASC-2 instrument which will measure participants’ emotional development and the acquisition of adaptive and maladaptive coping skills and behaviors. The discrepancies between participants’ scores on the parental expectations instruments and the self-perception instrument will be computed. The relationship between these
discrepancies and scores on the BASC-2 scales of adaptive and maladaptive emotional
development will then be examined.

According to the goodness of fit theory, how high parental expectations are is not as
important as the degree to which these parental expectations are based on a realistic, accurate
assessment of the child’s true level of ability. Therefore, as the amount of discrepancy between
parental expectations and the child’s true level of ability increases, it could be speculated that the
child will experience more problems in their emotional development and the acquisition of
adaptive coping skills. The present study will attempt to determine whether this speculation is
supported by empirical evidence.

The present study will be exploratory in nature due to the absence of existing research
examining the discrepancy between parental expectations and children’s true level of ability and
the effect of this discrepancy on children’s emotional development. Given the exploratory nature
of the present study, the following research questions will be examined:

**Question #1**: As participants’ self-perceptions of their true ability level increase, will the
potential problems associated with their emotional development decrease (i.e. higher scores on
adaptive BASC-2 dimensions; lower scores on maladaptive BASC-2 dimensions)?

**Question #2**: As the discrepancy between the expectations of the participants’ mothers
and the participants’ true ability level increases, will the potential problems associated with their
emotional development increase (i.e. lower scores on adaptive BASC-2 dimensions; higher
scores on maladaptive BASC-2 dimensions)?

**Question #3**: As the discrepancy between the expectations of the participants’ fathers
and the participants’ true ability level increase, will the potential problems associated with their
emotional development increase (i.e. lower scores on adaptive BASC-2 dimensions; higher scores on maladaptive BASC-2 dimensions)?

**Question #4:** Will global ratings of the relationship between participants and their parents be a good predictor of participants’ level of coping behavior and emotional development (i.e. scores on adaptive and maladaptive BASC-2 dimensions) when global ratings are provided from the perspective of: (a) the participant (b) the participants’ perception of how their mother would have evaluated the quality of their relationship and (c) the participants’ perception of how their father would have evaluated the quality of their relationship?

**Method**

**Participants**

There were 46 participants (15 male; 31 female) between the ages of 18 and 41 years. The participants in the study were college students recruited from Introductory Psychology classes at a Mid-Atlantic University. The participants received course credit in exchange for their voluntary participation.

To participate in the study, participants were required to have had at least one primary caregiver that was consistently present throughout their life. Of the 46 participants, 45 listed their mother and 36 listed their father as a primary caregiver. In addition to parent(s), participants were able to list other individuals in their lives, who they considered to have been primary caregivers. Of the 46 participants, two listed a step-mother, three listed a step-father, nine listed a grandmother, three listed a grandfather, two listed a brother, two listed a sister, three listed an aunt, two listed an uncle, one listed a cousin, and one listed an “other” as the primary caregivers in their lives.
When looking at participant’s family structures, 5 of the 46 participants reported being an only child. Of the 41 participants who reported having siblings, 39 participants (84.8%) reported having one brother or less (range = 0-3 brothers) while 38 participants (82.6%) reported having one sister or less (range = 0-4 sisters). With respect to the participant’s birth order within their family, 17 participants (37.0%) were the oldest child, 6 participants (13.0%) were the middle child, and 18 participants (39.1%) were the youngest child. Three of the participants reported having been adopted. Twenty-five of the participants (54.3%) indicated they had experienced a traumatic event (e.g. illness, death of family/friends, etc.) during their lives which they felt they had difficulty coping with at the time.

Procedure

To participate in the study, participants were required to be 18 years of age or older and to be participating voluntarily. Experimental materials were distributed to participants by the principal investigator. Participants were first instructed to read the Anonymous Survey Consent form and to keep the form for their personal records (See Appendix A). Participants were then instructed to respond to a series of questions (See Appendix B) designed to assess demographic information (i.e. age, gender), family structure information (i.e. primary caregivers; adoption status, number of brothers and sisters, birth order position), and life experience information (i.e. experience with traumatic life events).

Participants were then instructed to complete 3 measurement instruments. They completed a 30-item self-perception instrument (See Appendix C). For this instrument, the participants were instructed to reflect back to the time when they were in high school and to assess themselves on dimensions which included: academic ability, dependability, decision-making, leadership, athletic ability, empathy, honesty, intelligence, and their relationship with
their parents. Participants used a 5-point rating scale (1 = Never; 5 = Always) to provide their self-assessment ratings for each of the 30 items. Participant ratings were summed across the 30 items to compute a total self-perception score that was used in the present study as a measure of participants’ true level of ability. The self-perception instrument also contained a 31st item which asked participants to provide a global rating on a 9-point scale (1 = No/Extremely Poor Relationship; 9 = Perfect Relationship) of how they would describe their relationship with their parent(s)/primary caregiver(s).

Participants also completed a 30-item parental/primary caregiver expectation instrument (See Appendix D). Participants completed a separate expectations instrument for each individual they considered to have been a primary caregiver. A maximum of three primary caregivers were evaluated by the participants. The expectation instrument contained the same 30 items that were on the self-perception instrument, however, the items were now written from the perspective of the primary caregiver rather than from the perspective of the participant. For this instrument, the participants were instructed to reflect back to the time they were in high school and to assess the expectations of them held by each primary caregiver in their lives. Participants used a 5-point rating scale (1 = Never; 5 = Always) to provide their assessment of parental/primary caregiver expectations for each of the 30 items. For each expectations instrument completed, expectation ratings were summed across the 30 items to compute a total expectations score for each parent or primary caregiver evaluated by participants. These expectation scores were used in the present study as measure of parental/primary caregiver expectations. Each parental/primary caregiver expectations instrument also contained a 31st item which asked participants to provide a global rating on a 9-point scale (1 = No/Extremely Poor Relationship; 9 = Perfect Relationship) of how
they believed each parent/primary caregiver would have evaluated the quality of the relationship they had with the participant.

Participants also completed the 185-item BASC-2 instrument. The BASC-2 is designed to assess dimensions of coping behavior and emotional adjustment in college students between the ages of 18 and 25. Participant’s adaptive coping behavior and emotional adjustment was assessed through scores on 5 of the BASC-2 dimensions: (1) locus of control (2) relations with parents (3) self-esteem (4) self-reliance and (5) interpersonal relations. The participant’s maladaptive coping behavior and emotional adjustment were assessed through scores on 11 of the BASC-2 dimensions: (1) atypicality (2) social stress (3) anxiety (4) depression (5) sense of inadequacy (6) somatization (7) attention problems (8) hyperactivity (9) school maladjustment (10) sensation seeking and (11) alcohol abuse. For each of the 185 items on the BASC-2, the participants used a 4-point rating scale (0 = Never; 1 = Sometimes; 3 = Often; 4 = Always) when providing their evaluative ratings. Total scores were then computed for each of the 16 BASC-2 dimensions. The total dimension scores were then used in the present study as measures of coping behavior and emotional adjustment.

Half of the participants completed the self-perception survey, then the BASC, and the parental expectations survey last. The other half completed the parental expectations survey, the BASC, and then the self-perception survey. The BASC was administered between the two experimental surveys to minimize the chances of participants simply duplicating the answering given on the previous survey. The surveys were counter-balanced to make sure that ratings were not artificially inflated or deflated because of previous exposure to the questions. Analysis of completed surveys found no indication of an order effect.
After completing the demographic form, the self-perception instrument, parental/primary caregiver expectation instruments, and the BASC-2 instrument, participants were debriefed by the principal investigator as to the purpose of the present study and were then provided contact information should they have questions about the study after leaving the laboratory. Participants were then given their course credit in exchange for their participation and were excused from the lab by the principal investigator.

Results

Research Question #1

Pearson product moment correlation coefficients were computed to examine research question #1 which asked: As participants’ self-perceptions of their ability level increase, will potential problems associated with their emotional development decrease? Correlations were computed between participants’ self-perception score total and the dimension score totals for each of the 5 adaptive BASC-2 dimensions and 11 maladaptive BASC-2 dimensions. For the 5 BASC-2 dimensions assessing adaptive coping behavior and emotional adjustment, 4 significant correlations were found. Specifically, the correlations indicated as participants’ self-perception of their ability level increased, relations with parents ($r = .649, p = .000$), interpersonal relations ($r = .487, p = .001$), and self-reliance ($r = .440, p = .002$) increased and locus of control became more internal and adaptive ($r = -.355, p = .018$).

For the 11 BASC-2 dimensions assessing maladaptive coping behavior and emotional adjustment, 5 significant correlations were found. Specifically, these correlations indicated as participants’ self-perception of their ability level increased, atypicality ($r = -.387, p = .009$), social stress ($r = -.391, p = .008$), sense of inadequacy ($r = -.482, p = .001$), attention problems
(r = -.570, p = .000), and school maladjustment (r = .324, p = .032) decreased. In summary, for 9 of the 16 BASC-2 dimensions, higher participant self-perceptions of ability were associated with healthier, adaptive coping behavior and emotional adjustment.

Research Question #2

Pearson product moment correlation coefficients were computed to examine research question #2 which asked: As the discrepancy between the expectations of participants’ mother and the participants’ true ability level increases, will the potential problems associated with their emotional development increase? For those participants who listed their mother as a primary caregiver, discrepancy scores were computed by taking the participants’ total score on the self-perception instrument and subtracting the total score from the parental expectations instrument participants completed from the perspective of their mother. If the discrepancy score was a positive value, it indicated the participant had a more positive assessment of their ability than their mother. If the discrepancy score was a negative value, it indicated the participant had a more negative assessment of their ability than their mother. This discrepancy score was then correlated with the dimension score totals for each of the 5 adaptive BASC-2 dimensions and the 11 maladaptive BASC-2 dimensions.

For the 5 BASC-2 dimensions assessing adaptive coping behavior and emotional adjustment, no significant correlations were found. For the 11 BASC-2 dimensions assessing maladaptive coping behavior and emotional adjustment, only 1 significant correlation was found. Specifically, the correlation indicated when participants perceived their mothers’ expectations to be higher than their own self-assessment of their ability level, they were more likely to exhibit hyperactivity (r = -.377, p = .013).
Although only 1 significant correlation was found when examining the discrepancy between participants’ self-assessment of their ability level and the perceived expectations of their mother, some significant correlations did emerge when examining the relationship between the perceived expectations of participants’ mother and the dimension score totals for each of the 5 adaptive BASC-2 dimensions and the 11 maladaptive BASC-2 dimensions. For the 5 BASC-2 dimensions assessing adaptive coping and emotional adjustment, 3 significant correlations were found. Specifically, the correlations indicated that participants who perceived their mother as having lower expectations were more likely to have an external locus of control ($r = -.391, p = .010$) which indicates lowered coping ability. Participants who perceived their mother as having higher expectations were more likely to have healthy relations with parents ($r = .714, p = .000$) and healthy interpersonal relations ($r = .451, p = .002$).

For the 11 BASC-2 dimensions assessing maladaptive coping behavior and emotional development, 5 significant correlations were found. Specifically, the correlations indicated that participants who perceived their mother to have lower expectations were more likely to exhibit atypicality ($r = -.388, p = .01$), social stress ($r = -.455, p = .002$), sense of inadequacy ($r = -.394, p = .009$), attention problems ($r = -.434, p = .004$), and sensation seeking ($r = -.408, p = .000$). In summary, the perceived expectations of participants’ mothers was a significantly better predictor of participants’ BASC-2 dimension score totals than the discrepancy between participants’ self-assessment of their ability level and the perceived expectations of their mother.

Research Question #3

Pearson product moment correlation coefficients were computed to examine research question #3 which asked: As the discrepancy between the expectations of participants’ father and the participants’ true ability level increases, will the potential problems associated with their
For those participants who listed their father as a primary caregiver, discrepancy scores were computed by taking the participants’ total score on the self-perception instrument and subtracting the total score from the parental expectations instrument participants completed from the perspective of their father. If the discrepancy score was a positive value, it indicated the participant had a more positive assessment of their ability than their father. If the discrepancy score was a negative value, it indicated the participant had a more negative assessment of their ability than their father. This discrepancy score was then correlated with the dimension score totals for the 5 adaptive BASC-2 dimensions and the 11 maladaptive BASC-2 dimensions.

For the 5 BASC-2 dimensions assessing adaptive coping behavior and emotional adjustment, no significant correlations were found. For the 11 BASC-2 dimensions assessing maladaptive coping behavior and emotional adjustment, once again, no significant correlations were found.

Although no significant correlations were found when examining the discrepancy between participants’ self-assessment of their ability level and the perceived expectations of their father, some significant correlations did emerge when examining the relationship between the perceived expectations of participants’ father and the dimension score totals for each of the 5 adaptive BASC-2 dimensions and the 11 maladaptive BASC-2 dimensions. For the 5 BASC-2 dimensions assessing adaptive coping and emotional adjustment, 4 significant correlations were found. Specifically, the correlations indicated that participants who perceived their father as having lower expectations were more likely to have an external locus of control ($r = -.430$, $p = .010$) which indicates lowered coping ability. Participants who perceived their father as having
higher expectations were more likely to have healthy relations with parents \( (r = .601, p = .000) \), healthy interpersonal relations \( (r = .351, p = .039) \), and greater self-reliance \( (r = .383, p = .023) \).

For the 11 BASC-2 dimensions assessing maladaptive coping behavior and emotional development, 4 significant correlations were found. Specifically, the correlations indicated that participants who perceived their father to have lower expectations were more likely to exhibit higher social stress \( (r = -.421, p = .012) \), attention problems \( (r = -.569, p = .000) \), sensation seeking \( (r = -.442, p = .008) \), and hyperactivity \( (r = -.386, p = .022) \). In summary, the perceived expectations of participants’ father was a significantly better predictor of participants’ BASC-2 dimension score totals than the discrepancy between participants’ self-assessment of their ability level and the perceived expectations of their father.

**Research Question #4:** Pearson product moment correlation coefficients were computed to examine research question #4 which asked: Will global ratings of the relationship between participants and their parents be a good predictor of participants’ level of coping behavior and emotional development? Correlations were computed between dimension score totals for the 5 adaptive BASC-2 dimensions and 11 maladaptive BASC-2 dimensions and the global ratings of the relationship between participants and their parents provided from the perspective of: (a) the participant (b) the participants’ perception of how their mother would have evaluated the quality of their relationship and (c) the participants’ perception of how their father would have evaluated the quality of their relationship?

With respect to participants’ perception of the relationship between themselves and their parents, participants with more positive perceptions of the relationship reported more positive relations with parents \( (r = .623, p = .000) \) and interpersonal relations \( (r = .333, p = .027) \). With respect to participants’ perception of how their mother would have evaluated the quality of the
relationship, participants who perceived their mother to have more positive perceptions of the relationship were more likely to experience positive relations with parents \( (r = .563, p = .000) \) and healthy interpersonal relations \( (r = .480, p = .001) \) and were less likely to experience social stress \( (r = -.357, p = .019) \), a sense of inadequacy \( (r = -.362, p = .017) \), and alcohol abuse \( (r = -.335, p = .028) \). With respect to the participants’ perception of how their father would have evaluated the quality of the relationship, participants who perceived their fathers to have a more positive perception of the relationship were less likely to experience hyperactivity \( (r = -.348, p = .028) \) and alcohol abuse \( (r = -.362, p = .022) \). In summary, the participants’ perception of how their mother would have evaluated the quality of their relationship was a better predictor of the participants’ coping behavior and emotional adjustment than either the participants’ ratings of the relationship or the participants’ perception of how their father would have evaluated the quality of the relationship.

Discussion

The present study which explored the influence of parental expectations on the emotional development of young adults revealed several interesting findings. First, the level of discrepancy between participants’ self-perception of their ability and the expectations of both their mother and father had little to no ability to predict measures of participants’ emotional development. In fact, only 1 significant correlation emerged when studying the relationship between discrepancy scores and the adaptive and maladaptive BASC-2 dimension scores. The significant correlation may however, warrant further investigation. Given the increase in occurrences of ADHD in our society, the finding that when the expectations of participants’ mother were perceived as being higher than participants’ self-perception of their own ability level participants show more
symptoms of hyperactivity, could open new avenues for the treatment and management of symptoms associated with ADHD.

The second interesting finding was that although the discrepancy between parental expectations and participants’ self-perception of their ability had little to no ability to predict measures of participants’ emotional development, the perceived expectations of both mothers and fathers was able to predict important measures of participants’ emotional development. There were several areas of consistency when examining the influence of perceived expectations of mothers and fathers on the participants’ emotional development. For example, participants were more likely to develop a less health external locus of control, experience more social stress, and attention problems, and to engage in more sensation seeking when their mother and father were perceived to have low expectations. Participants were more likely to have positive relations with parents and healthy interpersonal relations when their mother and father were perceived to have high expectations.

There were also measures of participants’ emotional development that were better predicted on the basis of either the perceived expectations of their mother or father. For example, participants were more likely to experience feelings of atypicality and a sense of inadequacy when the perceived expectations of their mother were low. In contrast, participants were more likely to develop greater self reliance, and less likely to experience hyperactivity, when the perceived expectations of their father were high. Clearly, the perceived expectations of mother and father play a role in the emotional development of young adults and were able to predict both common and unique dimensions of the participants’ emotional development in the present study.
The third interesting finding pertains to the global ratings of the relationship between participants and their mother and father. Interestingly, participants who perceived their father and mother to have more positive perceptions of the relationship between themselves and the participant were less likely to experience problems with alcohol abuse. However, participants’ perceptions of the relationship between themselves and their parents were not a significant predictor of problems with alcohol abuse. This finding may be of some value to researchers investigating the role of family dynamics and the parent-child relationship in the development of alcohol abuse problems in young adults. Also, the global assessment of the relationship correlated with the BASC-2 relations with parents subscale from the viewpoint of the participant and the mother, but not the father. This could be an indication that answers on the BASC-2 dealing with parents are actually an assessment of only the relationship with the mother.

A fourth finding of interest from the present study was that none of the measures used to assess participants’ self-perceptions of their ability level, parental expectations, the discrepancy between parental expectations and participants’ self-perceptions of their ability level, and global ratings of the relationship between participants and their parents were significantly related to one of the more important adaptive dimensions of development (i.e. self-esteem) and 2 of the more common maladaptive dimensions of emotional development (i.e. anxiety; depression). From the results it would appear that the development of self-esteem or experiencing anxiety and depression result from additional factors beyond parental expectations within the environment of the child.

A fifth and final finding of interest from the present study was that 25 of participants (54.3%) indicated they had experienced a traumatic event during their lives which they felt they had difficulty coping with at the time. Not surprisingly, these participants who had experienced
a traumatic event were more likely to experience problems with anxiety ($r = .370, p = .012$) and somatization ($r = .329, p = .029$). These participants were, however, also more likely to develop greater self-reliance ($r = .301, p = .044$). This greater self-reliance may have had the effect of increasing the importance of participants’ self-perceptions of their ability level and minimizing the importance of parental expectations on participants’ emotional development. Based on this finding, the extent to which individuals’ level of self-reliance influences the extent to which their emotional development is influenced by the expectations of parents/primary caregivers in their lives requires additional research attention.

Limitations

To interpret the results of the study within a proper context, it is important to note several important limitations to the present study that may influence the generalizability of the results. First, the sample size was relatively small, due in part to funding and time limitations. Clearly, a larger sample of college students would be more representative of the population of young adults and would provide a stronger test of the research questions examined.

Second, the sample consisted primarily of college students from intact, two-parent households. In fact, 98% ($n = 45$) of the participants listed their mother and 78% ($n = 36$) of the participants listed their father as a primary caregiver. A more diverse sample of participants, representing a wider range of family experiences (e.g. single parent homes; secondary family members as primary caregivers; adoptive parents; siblings as primary caregivers) is needed to determine whether the results generalize beyond the present study and would provide a more comprehensive test of the research questions examined.

A third limitation of the study was the manner in which the expectations of parents/
primary caregivers were assessed. Specifically, the participants were instructed to reflect back to the time they were in high school and to provide their perceptions of the expectations of them held by each primary caregiver in their life. This methodology, however, makes an assumption that participants’ perceptions of the expectations of parental/primary caregivers are an accurate reflection of parents/primary caregivers’ true expectations. A more valid manner of assessment would have been to have participants’ parents/primary caregivers accompany participants to the lab and provide their own assessment of expectations they held during the time the participant was in high school. However, while this may be a more accurate way of assessing parental/caregiver expectations, it is unclear whether this would be a better predictor of adjustment and maladjustment. It may be that the young adults’ perceptions affect their development more than the actual level of expectations. This is another area that requires more research.

The fourth, and perhaps most serious limitation of the present study, was the limited variability in participant ratings across the measurement instruments used in the present study. Specifically, the study was limited by: (a) the consistently high self-perception of ability scores of participants and (b) the limited amount of variability in the discrepancy between participants’ self-perception of their ability level and their parental/primary caregivers’ expectations of them.

With respect to participants’ self-perception of ability scores, the average self-perception score for participants was 118.96. Since total self-perception of ability scores were computed across 30 scale items, and the range of possible values for participants’ self-perception of ability scores could range from 30 to 150, participants were providing consistently high self-perceptions of their ability averaging a rating of 4 out of 5 points on every item on the self-perception scale. Given that participants provided such high self-perceptions of their ability, it made it difficult to
find parents/primary caregivers that had expectations that were significantly higher than the participants’ self-perception of their ability. This in turn, limited the ability of the present study to examine the influence of a broad range of parental expectations (i.e. both higher and lower than participants’ self-perception of ability) on the emotional development of young adults.

The limited amount of variability in the amount of discrepancy between participants’ self-perception of their ability level and their parental/primary caregivers’ expectations of them also limited the ability of the present study to adequately examine the research questions of interest. While discrepancy scores could potentially range from -120 (i.e. parental expectations higher than participants’ self-perceptions) to +120 (i.e. parental expectations lower than the participants’ self-perceptions), the actual discrepancy scores obtained in the present study fell within a very narrow range. Specifically, comparing participants’ self-perceptions to the perceived expectations of their mother, discrepancy scores from -19 to +26 were obtained ($M_{\text{discrepancy}} = -.61$). When participants’ self-perceptions were compared to the perceived expectations of their father, discrepancy scores from -13 to +19 were obtained ($M_{\text{discrepancy}} = 1.05$). Given the narrow range of discrepancy scores, the present study did not provide an adequate opportunity to examine a broad range of parental expectations (i.e. both higher and lower than participants’ self-perception of ability) on the emotional development of young adults.

*Directions for Future Research*

Based on the results and limitations associated with the present study, future research on the influence of parental/primary caregiver expectations on the emotional development of young adults should attempt to: (a) use larger samples of participants representing a more diverse range of family experiences (b) investigate whether results of parental expectations research generalize
from college student samples to non-college student samples (e.g. individuals from different SES levels; individuals from different cultures with diverse parenting practices and family systems; individuals from different clinical populations) (c) have participants’ parents/primary caregivers provide their own assessment of the expectations they have for their children rather than using children’s perceptions of their parents’/primary caregivers’ expectations (d) collect data from a sample of participants who provide a wide range of scores with respect to their self-perceptions of their ability level and who have grown up with parents with a diverse set of expectations about their children and (e) continue to study the influence of parental expectations on non-academic domains of development (e.g. emotional, social, and psychological development).

While there were several limitations in the present study which bring into question the generalizability of its results, the study did illuminate areas for further study including: (a) the influence of parental expectations on hyperactivity and alcohol abuse in young adults and (b) the influence of self-reliance on the extent to which children’s emotional development is influenced by the expectations of parents/primary caregivers. Future research may also benefit from the use of qualitative research methodologies to expand our understanding of the influence of parental expectations on the development of young adults. Given the important role parents and primary caregivers play in the lives of children, researchers will undoubtedly continue to explore the parent-child relationship and the influence of this relationship on the development of children.
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References (cont.)

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Appendix A

Anonymous Survey Consent

You are invited to participate in a research project entitled “The Influence of College Student Perceptions of Parental (or Primary Caregiver) Expectations on Coping Behavior & Adjustment in Early Adulthood.” The present research study is being conducted by Christopher LeGrow, Ph.D. and Jessica Smith from Marshall University (Department of Psychology). This research is being conducted to fulfill the Masters Thesis requirement for Jessica Smith’s Masters Degree program in Psychology.

The present research study will require you to: (a) complete a survey designed to assess family, demographic, and life event information, (b) complete a 31 item Self-Perception Survey that will require you to consider yourself as you were in high school and evaluate yourself on a variety of personal characteristics and your relationship with your parents (or primary caregivers) during your high school years, (c) complete a 31 item Parental/Primary Caregiver Perception Survey that will require you to respond to the same 31 items contained on the Self-Perception Survey based on how you feel your parents or primary caregivers would have responded to the items when you were in high school. Finally, you will be asked to complete the 185 item BASC-2 Instrument. The BASC-2 is designed to assess 12 dimensions of coping behavior and adjustment in college students age 18-25. After completing the study, you will be debriefed and will have all questions and concerns about the study addressed at such time.

It is anticipated that you will be able to complete the study within 1 hour. Your replies will be anonymous, so please do not put your name anywhere on the surveys. There are no known risks involved with this research study. Participation is completely voluntary and there will be no penalty if you choose to not participate in this study or to withdraw. If you choose not to participate in the study you may either return the blank survey or you may discard it. You may choose to not answer any question by simply leaving it blank. Returning the survey to the co-investigator who is conducting your research session indicates your consent for use of the answers you supply. If you have any questions about the study or in the event of a research related injury, you may contact Christopher W. LeGrow, Ph.D. at 304-696-2780 or via email at legrow@marshall.edu

If you have any questions concerning your rights as a research participant you may contact the Marshall University Office of Research Integrity at (304) 696-7320.

By completing this survey and returning it you are also confirming that you are 18 years of age or older.

Please keep this page for your records.
Appendix B

Demographic Information

Please **DO NOT** write your name or any identifying information anywhere on this form.

**Age:** _____ years

**Gender:** _____ Male _____ Female

Circle the people(s) you considered your primary caregiver(s) prior to coming to college:

- Mother
- Father
- Step-mother
- Step-father
- Grandmother
- Grandfather
- Brother(s)
- Sister(s)
- Aunt
- Uncle
- Cousin
- Other (specify): ________________

Were you adopted? _____ Yes _____ No

Are you an only child? _____ Yes _____ No

If no, how many brothers did you have? _____ How many sisters? ____

If you had brothers or sisters, what was your position in the birth order?

- _____ Oldest child
- _____ Middle child
- _____ Youngest Child
- _____ Other (specify) ________________

Have you experienced any events in your life with which you feel you had trouble coping (e.g. illness, death of family or friends, etc.)? Provide a general description of the events. **DO NOT** include specific information that would make you or others associated with the event identifiable.

___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
Appendix C

Self-Perception Survey

When completing this survey, please consider yourself as you were in high school and then use the rating scale provided below when responding to items #1-30

1 = Never
2 = Occasionally
3 = Sometimes
4 = Often
5 = Always

01. I consider myself to be a good student in school
02. I take personal responsibility for solving my own problems
03. I often need help to achieve my goals
04. I obey the rules my parents/caregivers have established for me
05. I enjoy school
06. I am a responsible and dependable person
07. I could get better grades in school if I worked harder
08. I am popular and have many friends
09. I complain about things rather than taking the actions necessary to resolve issues in my life
10. My friends are a positive influence in my life
11. I am an intelligent person
12. I make good decisions and choices about things that will affect my life
13. I am an athletic person and excel in sports-related activities
14. I have realistic expectations about my future educational/employment goals
15. I am viewed as a leader by my peers
16. I am an honest person
17. I am respectful to authority figures in my life
18. I seek out challenges and set goals that will challenge me
19. I avoid situations in which my friends and/or peers are engaged in dangerous and/or illegal behaviors
20. I listen to advice concerning issues that affect my life that are offered to me by my parents/caregivers
Appendix C (cont.)

Self-Perception Survey (cont.)

21. I am the type of person that could be counted on in the event of an emergency  
22. My parent(s)/caregiver(s) is/are proud of my “character” and the type of person that I have become  
23. My parent(s)/caregiver(s) brag to others about my achievements  
24. My parent(s)/caregiver(s) are proud to tell others that I am their child  
25. If give a 100% effort to the tasks I attempt and the challenges I face in my life  
26. My parent(s)/caregiver(s) worry about my future  
27. I am a caring person who has compassion and empathy for others in need  
28. I am going to be a positive, contributing member of society  
29. My parent(s)/caregiver(s) have to remind me to do my chores and take care of my personal responsibilities in our home  
30. My parent(s)/caregiver(s) can count on me to tell them when I am in trouble and/or have done something that they would not approve of  

Using the rating scale provided below, how would you best describe your relationship with your parent(s)/caregiver(s)?

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<thead>
<tr>
<th>1</th>
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<tr>
<td>No/Extremely Poor Relationship</td>
<td>Neutral (+ and -) Relationship</td>
<td>Perfect Relationship</td>
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Appendix D

Parental/Primary Caregiver Expectations Survey

When completing this survey, please respond to the items based on how your parents (or primary caregivers) would have responded to the items when you were in high school using the rating scale provided below when responding to items #1-30

1 = Never
2 = Occasionally
3 = Sometimes
4 = Often
5 = Always

01. I/We consider my/our child to be a good student in school

02. My/Our child takes personal responsibility for solving his/her own problems

03. My/Our child often needs help to achieve his/her goals

04. My/Our child obeys the rules I/we have established for him/her

05. My/Our child enjoys school

06. My/Our child is a responsible and dependable person

07. My/Our child could get better grades in school if he/she worked harder

08. My/Our child is popular and has many friends

09. My/Our child complains about things rather than taking the actions necessary to resolve issues in his/her life

10. My/Our child’s friends are a positive influence in his/her life

11. My/Our child is an intelligent person

12. My/Our child makes good decisions and choices about things that will affect his/her life

13. My/Our child is an athletic person and excels in sports-related activities

14. My/Our child has realistic expectations about his/her future educational/employment goals

15. My/Our child is viewed as a leader by his/her peers

16. My/Our child is an honest person

17. My/Our child is respectful to authority figures in his/her life

18. My/Our child seeks out challenges and sets goals that will challenge him/her

19. My/Our child avoids situations in which his/her friends and/or peers are engaged in dangerous and/or illegal behaviors
Appendix D (cont.)
Parental/Primary Caregiver Expectations Survey

20. My/Our child listens to advice I/we offer to him/her concerning issues that affect his/her life
   ______

21. My/Our child is the type of person that could be counted on in the event of an emergency
   ______

22. I/We am/are proud of my/our child’s “character” and the type of person that he/she has become
   ______

23. I brag to others about my child’s achievements
   ______

24. I am proud to tell others who my child is
   ______

25. My/Our child gives a 100% effort to the tasks he/she attempts and the challenges he/she face in his/her life
   ______

26. I/We worry about my/our child’s future
   ______

27. My/Our child is a caring person who has compassion and empathy for others in need
   ______

28. My/Our child will be a positive, contributing member of society
   ______

29. I/We have to remind my/our child to do his/her chores and take care of his/her personal responsibilities in our home
   ______

30. I/We can count on my/our child to tell me/us when he/she is in trouble and/or has done something that I/we would not approve of
   ______

Using the rating scale provided below, how would you best describe your relationship with your child?

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