xGender Comparisons of Parental Involvement Motives, Leisure Activities, Childhood Depression and Family Relations

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Abstract

The focus of this study was to examine the potential gender differences and the motives of parent involvement and leisure and activities with their childrenx as well as potential gender differences in school aged children’s depression and relations with their parents. Ninety-two predominately Anglo families with school aged children participated in a study that was a combination of correlational and quasi-experimental research designs. The findings of this study suggest that mothers show higher levels of involvement motives compared with fathers and the boys show a higher level of depression compared to girls. The findings also suggest that parent leisure activities affected/impact child depression and relations with parents. Results are discussed in terms of how parent involvement and leisure activities impact their children’s levels of depression and perceived relations with parents.

*Keywords:* parent involvement motives, parent leisure activities, child depression, relations with parents

Gender Comparisons of Parental Involvement Motives, Leisure Activities, and Childhood Depression

Mental health is a serious concern in our country with depression being the most commonly diagnosed mental health disease. As many as 1 in 33 children may have depression with the number for adolescents even higher, but only one-third of children with mental health issues get the help they need (1National Alliance on mental illness, n.d.). Parent and adult involvement has been shown to play a factor in childhood behaviors and mental health (2McHale, Crouter, & Tucker, 2001; 3Wright, Parent, Forehand, Edwards, Conners-Burrow, & Long, 2013) and research has examined how parents can best help their children once they have been diagnosed with a mental illness (4Honey, Fraser, Llewellyn, Hazell & Clarke, 2013). However, further research still needs to be done to examine how parent motives for involvement in both mothers and fathers and their leisure activities may affect a child’s depression and how the child perceives their relationship with each of their parents. This study was designed to examine the relationships between parent involvement motives, leisure activities, child depression, and the child’s relationship with their parents.

Some of the main causes of depression in children are from conflict between the parents, maternal depression, and having parents that are divorced and continuously fighting (Heller, 2012). Heller discusses that for children, depression more often occurs in boys because when they act out sometimes the actual cause may go unnoticed therefore undiagnosed. There are several forms of depression, one of them being *dysthymia*, which is a more mild form of depression but last much longer than major depression and has some of the same symptoms. Dysthymia is more common in school age children, which makes this form of depression harder to diagnose and has longer lasting effects that may influence whether or not the person will have depression as an adult.

One way to combat depression in both children and adults may be through leisure activities. 5Iso-Ahola (1997) discussed the connection between leisure activities and health. Leisure affects health in two ways; the simple act of leisure for intrinsic reasons and the physical health benefits that come from leisure activities that include forms of exercise. For a person to obtain the health benefits leisure activities offer they first must be able to *discover* leisure. Some constraints to discovering leisure are living in a society that puts a higher value on a strong work ethic, lack of information, and attitudes governing leisure. Active leisure has been shown to improve cognitive function, self-esteem, self-concept, social relationships, and has been shown to reduce feelings of depression and anxiety. Some leisure activities, however, can have an adverse effect on health such as excessive television watching and drug use. For a person to be successful in leisure and experience the best health outcomes they need to be able to discover leisure and value the benefits. Then they need to be able to freely choose the leisure activity, be challenged both physically and mentally, and have a sense of determination and competence that can encouraged and reinforced through social interactions in an activity.

2McHale et al. (2001) examined links in the activities children chose to participate in during their free-time and their adjustment. McHale et al. examined the differing effects of adult supervised free-time activities versus unsupervised activities with peers and adjustment. They also investigated whether children that were better adjusted involved themselves in development enriching activities. The participants included 198 primarily Caucasian first born children in fourth and fifth grade and their parents from the northeast over a two year time period. The families varied in socioeconomic status with all the parents still married and all of the fathers and most of mothers having gainful employment. For this study, the researchers conducted yearly in home interviews with the parents and children to gather demographic information and individual perceptions of *personal qualities and family relationships.* Parents also reported on children’s conduct problems and children self-reported their depression symptoms.Subsequent phone interviews were also conducted to gather information from both children and parents regarding their daily free-time activities that took place outside of work and school. The results suggest free-time spent in adult supervised activities led to children that where better adjusted, however unsupervised solitary or peer activities led to children with adjustment problems.

While it is extremely important for parents to be involved in school age children’s lives, it is as equally important when a mental health condition is introduced. 4Honey et al. (2013) examined how adolescents and children perceive their parents’ strategies to influence them in regards to their mental health behavior and what factors influence these adolescents’ perceptions and responses. The researchers conducted interviews that were given to 26 children from the Sydney Metropolitan area with a large range of mental illnesses. The ages ranged from 15-24 with 9 males and 17 females. The researchers asked them first what they were experiencing when their illnesses first started and what they thought was helpful or unhelpful when their parents got involved. The findings of this study suggest that parents’ involvement in helping their children seek help when dealing with a mental illness does influence them positively. Whether it is by facilitative, persuasive, or controlling practices from the parents, the children mostly looked at their parents’ involvement as helping them no matter what.

6 Sinclair, Cole, Dukewich, Felton, Weitlauf, Maxwell, and Jacky (2012) examined the relationship between depression and targeted peer victimization (TPV). The researchers hypothesized that boys would experience a more physical victimization while girls would experience a more relational victimization. The researchers also tested for gender differences in both physical and relational strengths in victimization amongst children. The researchers conducted a one-year two-wave longitudinal study in central Tennessee of 626 students in grades three, four, five, and six (Time 1) and then 656 students in grades four, five, six, and seven (Time 2) one year later, with both of the groups being predominantly Caucasian. They assessed TPV using a self-report scale and a peer nomination measure. For the cognitive measures, they had the children take three different self-report questionnaires assessing the children’s developmentally appropriate domains, negative thoughts of themselves, and their views of themselves compared to the world and their future. The same procedure was then conducted exactly one year later. The findings of this study suggest that TPV increases negative thoughts and decreases positive thoughts in a year’s time. The results showed that relational victimization had a greater impact on depressive thoughts than physical victimization. The relation of TPV and positive and negative thoughts were stronger for boys rather than girls.

While the previous study examined peer relations, victimization, and how it relates to childhood depression child disruptive behavior may negatively affect social relations, including parents’ tolerance for such behavior. 3Wright et al. (2013) examined the role gender plays in tolerance levels that mothers and fathers show for children when they display disruptive behaviors. The researchers hypothesized that fathers would be less tolerant of children from both genders than mothers and also that the fathers would be more tolerant of male children than of female children when the children are displaying disruptive behaviors. The participants included 150 parents attending parenting classes and their 3-6 year-old at-risk children because of oppositional defiant behaviors. Families were from Vermont and Arkansas. The parents completed a demographic questionnaire, a measure in which parents ranked the intensity of their children’s disruptive behavior (i.e., oppositional defiant, inattentive behavior, and conduct problem behavior) and a subscale that measured whether parents identified the behaviors as a problem (which providing levels of parental tolerance). This study showed that fathers, but not mothers, are more tolerant of disruptive behaviors displayed by their sons than they are of their daughters.

The purpose of this study was to examine gender differences in the motives of parental involvement and leisure activities as well as the gender differences in school age childhood depression and children’s relations with their parents. This study was important to investigate how childhood depression symptoms may differ by gender and if their perception on their relationship with their parents may also differ for males and females. We also hypothesized that girls will report higher levels of depression than boys and that boys will report higher levels of perceptions of relations with their parents than girls. It is also important to document the different motives of involvement parents may have and whether fathers or mothers report different levels of involvement in leisure activities with their children. We hypothesized that mothers will report higher levels of involvement motives than fathers and that fathers will report higher levels of leisure activities than mothers. We also examined the associations between mothers’ and fathers’ leisure activity and involvement motives and children’s depression and perceived relations with their parents.

**Method**

**Overview**

The type of research design was a combination of correlational and quasi-experimental designs in order to compare between gender differences of parents and children and to examine associations between parent and child variables. The independent variables for this study were parent and child gender and the dependent variables were parent involvement motives, parent leisure activities, child depression, and child relations with parents. Parent involvement motives and leisure activities were also predictors for child depression and their perceived relations with their parents. Each variable used an ordinal level of measurement.

**Procedures**

**x** Prior to data collection, approval was obtained from the xInternal Review Board (IRB) along with parent consent and child assent. Trained research assistants recruited families from local communities and administered measures and interviews to parents and their children in their homes. Children provided oral and written responses to questions about parenting styles, their family relationships, self-concept, wellbeing, and family activities. The parents completed surveys separately from their spouses. Both the children and parents were allowed to stop or skip any items in the survey without penalty. Children and their parents were both provided breaks after interviews if needed and assessments were broken into two parts if the child displayed signs of fatigue (7Coyl-Shepherd & Hanlon, 2014).

**Participants**

The type of sampling was non-probability due to time and financial restraints. There were 36 male and 56 female children ranging from 7-13 with a mean age of 9.47 years (SD=1.39 and 92 mother and 92 father participants. ~~their two parents~~. ~~There were children with their age~~). The majority of participants were Anglo (64%) with the second highest recorded ethnicity being Hispanic (17%). Seventy-eight percent of fathers and 94% of mothers were their biological parents. Most of the parents reported having at least some college completed (Fathers = 29.2%, Mothers = 39.5%) but parent education levels varied from having completed less than high school (10%) to professional or graduate degrees (15%). The fathers reported work hours ranging from 0 to 80 hours per week with a mean of 39 hours (SD=16.55) and mothers work hours also ranged from 0 to 80 hours per week with a mean of 24 hours (SD=19.11).

**Materials**

This study included the Depression subscale of the *Behavior Assessment for Children, Second Edition* (BASC-2; 8Reynolds & Kamphaus, 2004). This 13-item measure assessed depression in children. Sample items include “I feel depressed”, and “I feel sad”. Items were answered on a Likert-type response format on a 1 (*never*) to 4 (*always*) scale. Higher scores represent higher levels of depression. The responses to each item were summed to provide depression levels in the children (alpha=.81√). This measure provided quantitative data about child depression.

The next subscale of the *BASC-2* used in the study was on children’s Relations with Parents (Reynolds & Kamphaus, 2004). This was a 9-item measure that assessed children’s perceived relationship with their parents. Sample items included “My mother and father help me if I ask them to”, and “My parents are easy to talk to”. Items were answered on a Likert-type response format on a 1 (*never*) to 4 (*alway*s) scale. Higher scores indicated that the children a more positive relation with their parents. The sum of these responses provided levels of positive relations with parents (alpha=.82√). This measure provided quantitative data on perceived child relations with parents.

Parent involvement motives were measured from the x*Parent Survey* (9Newland, Chen, & Coyl-Shepherd, 2013). This was a 6-item measure that assessed motives for parental involvement. Sample items include the phrase “I am motivated to read with my child…’to feel close with my child’ and ‘because it’s fun or enjoyable’”. Items were answered in a Likert-type response format on a 0 (*not at all*) to 4 (*very much*). Higher scores indicated higher motives for involvement with children. The sum of these responses provided levels of involvement motives for each parent (Fathers’ alpha=.76√, Mothers’ alpha=.84√). This measure provided quantitative data on involvement motives for both mothers and fathers.

The *Leisure Activities* subscalefrom the codebook measured parent activity time spent with their children (10 Cabrera, Shannon, Vogel, Tamis LeMonda, Ryan, Brooks Gunn, et al., 2004). This was a 15-item Likert-type response format from 1(*rarely*) to 5 (*4+ times a week*). Sample items include “Read together”, and “Play board games”. Higher scores from this measure indicated higher levels of activity time between parents and children per week. The responses to each item were summed to provide leisure activity levels between parents and children (Fathers’ alpha=.84√, Mothers’ alpha=.83√). This measure provided quantitative data on leisure activities.

Parents were also given a 14-item demographic survey. Sample items from the survey include child’s age, grade in school, and ethnicity. The survey also allows for parents to provide their age, their relationship with the child (biological parent, adopted parent, step-parent, etc.), and their level of education. This survey provided qualitative data about the families involved in the study.

**Results**

The focus of this study was to examine potential gender differences in mothers’ and fathers’ involvement motives and leisure activities with their children, as well as gender differences between male and female children’s depression and perceived relations with their parents. The study also examined the associations between parent involvement motives, parent leisure activities and child depression and child perceived relations with their parents. Paired samples t-tests were used to examine the parent variables and independent samples t-tests were used to examine the child variables. Correlation analyses were conducted to examine the associations between the parent variables and child variables. yes- accurately described

Fathers’ involvement mean score was M=16.82, SD=4.18√; mothers’ involvement mean score was M=18.13, SD=4.96√. Fathers’ leisure activities mean score was M=38.05, SD=10.51√; mothers’ leisure activities mean score was M=38.91, SD=10.07√. Boys’ depression mean score was M=48.54, SD=8.89√; girls’ depression mean score was M=45.12, SD=6.83√. Boys’ relation with parents mean score was M=49.97, SD=9.53√; girls’ relation with parents mean score was M=51.35, SD=8.94√ (see Table 1).

The paired samples t-test showed a significant mean difference between mothers’ and fathers’ involvement motives, t (92) = -1.89, p<.05, with mothers being higher. The paired samples t-test failed to show a significant mean difference between mothers’ and fathers’ leisure activities, t (92) = -0.62, p > .05. The t-test for independent samples showed a significant mean difference between boys’ and girls’ depression, t (92) = 2.01, p < .05. The t-test for independent samples failed to show significant difference between boys’ and girls’ relations with parents, t(92) = -0.69, p > .05 (see Table 1).

This study also examined associations between parent involvement motives, parent leisure activities with child depression and child perceived relations with their parents. There was a weak, negative statistically significant relationship between father involvement motives and child depression r (82) = -0.29, p < .05√. There was a weak, negative statistically significant relationship between father leisure activities and child depression r (73) = -0.21, p < .05√. There was a weak, negative statistically significant relationship between mother leisure activities and child depression r (69) = -0.27, p < .05√. There was a positive, moderate statistically significant correlation between mother involvement motives and child relations with parents r (84) = 0.46, p < .05. There was a positive, weak statistically significant correlation between mother leisure activities and child relations with parents r (72) = 0.28, p < .05√ (see Table 2).

**Discussion**

The focus of this study was to examine potential gender differences in mothers’ and fathers’ involvement motives and leisure activities with their children, as well as potential gender differences between male and female children’s depression and perceived relations with parents. The results of the t-test for parent involvement motives showed a higher mean score for mothers compared to fathers. The results of the t-test for leisure activities indicated no differences between mothers and fathers. The results of the t-test for child depression showed a high mean score for boys compared to girls. The results of the t-test for child relations with parents indicated no difference between boys and girls.

We hypothesized that girls would report a higher level of depression than boys; however, the results of the t-test for child depression indicated that boys have a higher mean score for depression. We also hypothesized that girls would report a higher level of perceptions of relations with their parents than boys; however, the results of the t-test indicated no significant mean difference. We hypothesized that fathers would report higher levels of leisure activities than mothers; however, the results of the t-test indicated no significant mean difference between mothers and fathers.

The correlation between mothers’ and fathers’ involvement motives as well as leisure activities with child depression were weak and negative, indicating that as parent involvement and leisure activities decreased, depression in the children increased. The correlation between mothers’ involvement motives and children’s perceived relations with parents were moderate and positive, indicating that as mothers were increasingly motivated to be involved, the child perceived relations with the mother would increase as well. The correlation between mothers’ leisure activities and child perceived relations with parents was/were weak and positive, indicating that as mother leisure activity increased so did child perceived relations with parents.

Similar to findings reported by McHale et al. (2001), we found that adults involved in their children’s leisure activities led to a positive correlation with child perceived relations with parents and it also showed the more involved parents are in their children’s leisure activities the less reported incidences of child depression. Also, finding reported by Wright et al. (2013) suggest that parent gender does play a role in parent relations with their children, which is similar to results of our study.

One of the strengths of our study is that it included both mothers and fathers because previous studies primarily focus on the mother. Another one of our strengths would be that we used a mixed methodology approach with measures that have been previously established for reliability and validity. A limitation of the study is that the participants were predominately Anglo which is not representative of the general population. Another limitation of the study is that it was not longitudinal study; we did not follow the participants to observe if the results changed over time.

The results of these findings suggest that the more a parent is involved in their child’s life, the child will have better relations with their parents and show fewer signs of depression. It is important to educate parents of school aged children on the significance of their involvement in their children’s lives and how it can have a positive influence on the child in many aspects; including their perceived relations with parents and their levels of depression. well described!

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good job on these!

*Appendix*

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Table 1

*Descriptive Statistics, Alphas, and t-tests for Parent Involvement Motives, Leisure Activities, Child Depression, and Child Relations with Parents*

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Variables | α | M | Mdn | Mode | SD | t | Sig. |
| Father Involvement Motives | .76 | 16.82 | 17 | 15 | 4.18 | -1.89\* | .03 |
| Mother Involvement Motives | .84 | 18.13 | 19 | 24 | 4.96 |  |  |
| Father Leisure Activities | .84 | 38.05 | 37.5 | 36 | 10.51 | -.62 | .27 |
| Mother Leisure Activities | .83 | 38.91 | 37 | 36 | 10.07 |  |  |
| Boy Depression | .81 | 48.54 | 45 | 43 | 8.89 | 2.01\* | 0.02 |
| Girl Depression | .81 | 45.12 | 45 | 43 | 6.83 |  |  |
| Boy Relations with Parents | .82 | 49.97 | 52 | 62 | 9.53 | -.69 | 0.25 |
| Girl Relations with Parents | .82 | 51.35 | 52 | 62 | 8.94 |  |  |

*Note*. \*p < .05; Mothers=92; Fathers=92; Child Girl=56; Child Boy=36

Table 2

*Correlations Between Parent Involvement Motives, Leisure Activities, Child Depression, and Child Relations with Parents*

|  |  |  |
| --- | --- | --- |
| Variables | Child Depression | Child Relations with Parents |
| Father Involvement Motives | -.29\*\* | .09 |
| Mother Involvement Motives | -.15 | .46\*\* |
| Father Leisure Activities | -.21\* | .07 |
| Mother Leisure activities | -.27\*\* | .28\*\* |

*Note*. \*p < .05, \*\*p < .01; Mothers =92; Fathers=92; Child Girl=56; Child Boy =36

Excellent work, only minor errors. Well-written, concise, clear, logical, you both have demonstrated excellent scientific writing skills!

**Research Paper Grading Rubric (135 pts)**

|  |  |  |
| --- | --- | --- |
|  | **Writing Mechanics -1/2 pt for each error** | **24/25 pts** |
|  | Semantics, Spelling, grammar, concise, clear, wording, past tense, punctuation, organization – |  |
|  | **APA formatting and Technical Writing -1 pt for each error** | **25/29 pts** |
|  | TITLE PAGE |  |
|  | The words “Running head with a colon” are in the header box, left justified |  |
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|  | 1/3 of the way down the page a full paper title is centered in title capitals. Title accurately describes the study. |  |
|  | Author’s full name is centered |  |
|  | Affiliation (California State University, Chico) is centered |  |
|  | Each of these is separated by a double space and in correct order |  |
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|  | ABSTRACT |  |
|  | The header appears on this and every other page, without the words “Running head:” The page number is right justified and sequential |  |
|  | The word “Abstract” is centered at the top of the page, not bold |  |
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|  |  |  |
|  | INTRODUCTION begins on page 3 without the heading “Introduction” |  |
|  | Full paper title is centered at the top of the page (not bold) |  |
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|  | METHOD begins where the Introduction ends, no page break |  |
|  | The word “Method” is centered and bold |  |
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|  | REFERENCES begins on a new page after the Discussion |  |
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|  | Each line is double spaced |  |
|  | Are all citations done with hanging indent format? |  |
|  | Is the list alphabetized by the last name of the first author? |  |
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|  | Are the authors listed by last name and then first (and possibly  middle) initials- no first names should be used? |  |
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|  | Punctuation: correct use of periods, commas, colons and spaces | **-1** |
|  | Order/Organization of information, missing information |  |
|  | Page break at the end of the References |  |
|  |  |  |
|  | APPENDIX TABLE OF CONTENTS begins on a new page |  |
|  | The word “Appendix” is centered at the top of the page |  |
|  | The words “Table of Contents” are centered below “Appendix” |  |
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|  | The words “Subject” appear on the left and “Page(s)” on right |  |
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|  | The list is numbered with page numbers listed correctly |  |
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|  | 2. Table 2 appears on its own page |  |
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|  | Statistics are clearly labeled |  |
|  | Variables are clearly labeled |  |
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|  | 1” margins all sides |  |
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|  | Each paragraph contains more than 2 sentences |  |
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|  | Spacing between headers or paragraphs: More than DS |  |
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|  | TECHNICAL WRITING ERRORS |  |
|  | Causal Statements or overgeneralizing |  |
|  | Objectivity (avoided emotionally laden words or phrases) |  |
|  | Note Informal wording (teen, baby, kids) or phrases “Like” “Looking at” |  |
|  | Accuracy of statements |  |
|  | Clarity of statements |  |
|  | Organization of content is logical |  |
|  |  |  |
|  | **ABSTRACT** | **7/8 pts** |
|  | Does not exceed 150 words |  |
|  | Study Rationale (Problem statement), key constructs identified |  |
|  | Summarize study effectively: design, data collection methods, participants | **-1** |
|  | Main findings summarized |  |
|  | Implications of study findings |  |
|  | Keywords that identify the topic (key variables) of the study |  |
|  |  |  |
|  | **INTRODUCTION** | **12/12 pts** |
|  | Opening paragraph- statement of problem that identifies the reason for your study (at least 1 citation). This problem is clearly linked to your study. |  |
|  | Adequate summary of each resource: 3 pts x 6 sources  Clear and logical transitions, organization of paragraph content |  |
|  | Concludes with paragraph that identifies: |  |
|  | The purpose of your study – identifies 2 variables broadly |  |
|  | Brief rationale |  |
|  | 4 directional research hypotheses (2 for parent gender differences,  2 for child gender differences |  |
|  | 1 research questions about the associations among the parent and child variables? |  |
|  | Technical Writing Aspects of Introduction |  |
|  | Length of introduction (about 5-6 pages) |  |
|  | Make sure to use all 6 references |  |
|  | Organization, the order of sources was logical. Appropriate transitions were used to connect the sources together and create cohesion. |  |
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|  | **METHOD** | **24.5/27 pts** |
|  | *1.* **Overview:**summarizes the goals of the research |  |
|  | a. Identify type of research design |  |
|  | b. provide a reason for using this type of research design |  |
|  | c. Are the IVs (Grouping Variables) and DVs listed for the Experimental Hypotheses? |  |
|  | e. Identify the level of measurement for each variable. |  |
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|  |  |  |
|  | *2.* **Procedures** |  |
|  | a. Institutional Review Board approval obtained | -.50 |
|  | b. The procedures that will be used to recruit participants  (E.g., District, Principals, Teachers) |  |
|  | c. Identify the general geographic region |  |
|  | d. How data collection will occur (methods used?, on whom, where, when, how) |  |
|  | e. Relevant components of ethical research? |  |
|  | f. Informed consent or assent (when, how, where)  Parent consent / Child assent if applicable |  |
|  |  |  |
|  | *3.* **Participants** |  |
|  | a. Specific sampling technique (Probability–Nonprobability) |  |
|  | Total number of participating families. |  |
|  | b. Child Gender: boys n = \_\_\_\_\_\_, Girls n= \_\_\_\_\_\_\_\_ and %s  Parent Gender: fathers n = \_\_\_\_\_\_\_\_\_ mothers n = \_\_\_\_\_\_ and %s | -1 |
|  | c. Fathers’, Mothers’, Children’s Ethnicity %s |  |
|  | d. Fathers’ and Mothers’ Relation to the Child %s |  |
|  | e. Fathers’ and Mothers’ Education Levels %s |  |
|  | f. Age: ranges and mean ages for fathers, mothers, children |  |
|  | g. Fathers’ and Mothers’ work hours: ranges and mean hours per week |  |
|  | *4.* **Measures/Materials** |  |
|  | 1. Overview an overview of what each instrument measures. 2. Provided sample items for both variables |  |
|  | c. Citation for existing measures, italicized, capitalized measure titles | **-1** |
|  | d. Number of items for each measure |  |
|  | e. Identified specific response formats (e.g., Likert, Checklist) for each |  |
|  | If fixed, identifies anchors) 1 (*disagree) to 5 (agree)* |  |
|  | f. How instrument is scored (if relevant) |  |
|  | g. Indicators of reliability for construct measures (Cronbach alphas) |  |
|  | h. Cronbach alphas were correct |  |
|  | i. Type of data provided by these measures (qualitative, quantitative) |  |
|  | j. Demographic measures were adequately described |  |
|  |  |  |
|  | **RESULTS** | **12/12 pts** |
|  | 1. Briefly restate the study focus / purpose |  |
|  | 2. Described the type of statistical tests used |  |
|  | 3. Descriptive statistics (Means and SDs) are reported for mother and father variables and child variables. |  |
|  | Descriptive statistics are accurate |  |
|  | Indicate the table in which the results of the descriptive analyses can be found (e.g., See Table 1) |  |
|  | 4a. The specific directional hypotheses are restated for the **parent t tests** and the results are reported indicating which tests were statistically significant and which showed no differences. |  |
|  | 4b. Write the statistical phrases for each t-test; indicate statistical significance (e.g., t(df) = 0.57, p < 0.02) |  |
|  | 5a. The specific directional hypotheses are restated for the **child t tests** and the results are reported indicating which tests were statistically significant and which showed no differences. |  |
|  | 5b. Write the statistical phrases for each t-test; indicate statistical  significance (e.g., t(df) = 0.57, p < 0.02) |  |
|  | 6a. Restate the correlational research question. |  |
|  | 6b. The statistically significant correlational results, including the statistical phrases are accurate  (e.g., There was a moderate, positive relationship between mothers’ caregiving and child self-esteem, r(df) = 0.52, p < 0.05 |  |
|  | Indicate the table in which the results of the correlational analyses can be found (e.g., See Table 2) |  |
|  | **DISCUSSION** | **15/15 pts** |
|  | 1. Summary of findings from inferential test  State in words NOT statistical phrases |  |
|  | 2. Were the hypotheses confirmed/supported or Not? |  |
|  | 3. Was a comparison made with the findings from this study to research results described in your literature review? |  |
|  | 4. Two strengths of the study’s methodology?  And the reasons why these are strengths |  |
|  | 5. Two limitations of the study methodology?  And reasons why these are limitations |  |
|  | 6. Conclusions/implications are described? Discussion of practical application included (e.g., parent education, professional training or in-service, school curriculum, intervention or prevention program? |  |
|  |  |  |
|  | **APPENDIX** | **7/7 pts** |
|  | 1. Appendix Title and Table of Contents, page #s show correct pages |  |
|  | 2. For Table 1 are the following variables listed with their numeric values  Cronbach’s Alphas, Means, Medians, Modes, SDs, t test values, probabilities (Sig.)  *Note.* \* p < .05, \*\* p < .01 and sample sizes |  |
|  | For Table 2 are all the parent and child variables listed along the left column and numbered along the top row?  *Note.* \* p < .05, \*\* p < .01 and sample sizes |  |
|  | **Subtotal for Sections of the paper (59% of grade)** | **77/81 pts** |
|  | **APA formatting and Technical Writing (22%)** | **24/29 pts** |
|  | **Writing (19%)** | **24/25 pts** |
|  | **Total Points Earned** | **125.5/135 pts** |
|  |  |  |
| 100% | Partner ratings for Caroline’s percentage grade of total points earned | **125.5** |
| 100% | Partner ratings for Katie’s percentage grade of total points earned | **125.5** |