

Characteristics Associated With Parent–Teacher Concordance on Child Behavior Problem Ratings in Low-Income Preschoolers

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The authors have no conflicts of interest to disclose.

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Received for publication March 6, 2017; accepted October 22, 2017.

ABSTRACT

OBJECTIVE: Assessment of pediatric behavior problems often requires rating scales from multiple reporters in different settings (eg, home and school); however, concordance between reporters may be low. Pediatricians must reconcile differences to inform treatment. We sought to examine characteristics predicting parent–teacher concordance on ratings of preschoolers’ behavior problems.

METHODS: Data from 562 preschoolers were used from the Growing Healthy study, an obesity prevention trial in Head Start programs (2011–2015). Parents and teachers completed the Eyberg Child Behavior Inventory (ECBI)/Student Behavior Inventory (SBI) and the Social Competence and Behavior–Evaluation (SCBE). Outcome variables were: parent–teacher concordance (teacher minus parent score on each subscale of ECBI/SBI and SCBE); teacher reports problem behavior, parent does not (children rated in the top quintile of challenging behavior by teacher but not parent); and parent reports problem behavior, teacher does not (children rated in the top quintile of challenging behavior

by parent but not teacher). Multiple linear and logistic regression models were created for each subscale outcome, including the following covariates: child sex, child race/ethnicity, parent age, parent education, family structure, parent depressive symptoms, and parenting self-efficacy, and time of school year.

RESULTS: Lower concordance was associated with child female sex, and child black or Hispanic race/ethnicity; parent older age, lower education, more depressive symptoms, and greater self-efficacy; and beginning of school year.

CONCLUSIONS: Low parent–teacher concordance may reflect different perceptions of child behavior. Pediatricians could consider parent depressive symptoms, culture, and implicit bias when interpreting differences in behavior ratings by parents and teachers.

KEYWORDS: behavior ratings; concordance; parent; preschool; teacher

ACADEMIC PEDIATRICS 2017;■■:■■–■■

WHAT’S NEW

Parent–teacher concordance on child behavioral ratings was assessed in low-income preschoolers. Lower concordance was associated with the child being a girl, black, Hispanic, and other race; and with parents being older, with less education, more depressive symptoms, and greater self-efficacy.

PRESCHOOL CHILDREN WITH behavior problems often continue to experience significant behavior challenges in later life.¹ Children growing up in poverty are at greater risk for these difficulties as early as the preschool years.² Early recognition of atypical behavior is important to optimizing development, and pediatricians are often the first provid-

ers asked to evaluate these concerns.³ To evaluate behavior concerns, pediatricians often obtain behavior rating scales from reporters in two different settings—home and preschool⁴—according to clinical practice guidelines for the diagnosis of conditions such as attention-deficit/hyperactivity disorder.⁴ However, concordance between parents and teachers on these scales is often low⁵ to moderate.^{6,7} Therefore, pediatricians are often faced with conflicting parent and teacher reports about children’s behavior and must reconcile these differences. Understanding characteristics related to parent and teacher concordance would inform assessment and treatment.

The literature has identified various child, parent, and teacher characteristics contributing to parent–teacher concordance on preschoolers’ behaviors. The effect of child race/

ethnicity is variable, with some studies showing no differences and others showing less parent–teacher concordance among non-Hispanic black or Hispanic parents.^{8,9} Parent depression and stress are associated with higher parent ratings for problematic behaviors compared to teachers.^{7,9–11} Higher socioeconomic status is associated with better parent–teacher concordance in most studies,^{7,12} but not all.¹¹ Complicating evaluation is a prior study reporting that teacher ratings change across the course of the school year, with, surprisingly, less parent–teacher concordance in the social domain at the end of the school year compared to the beginning, suggesting that child behavior changes to differ more between school and home by the end of the school year.¹³

There are several gaps in the literature regarding parent–teacher concordance on reporting of preschoolers' behavior. The associations of parenting self-efficacy, parent education, and family structure with concordance have not been examined in low-income preschool populations. Though prior studies have examined concordance of preschooler behavior ratings,^{14,15} only one study has done so among low-income preschoolers.¹⁶ This is important to understand because there may be less parent–teacher concordance in this population, given the higher rates of depression and stress, which influence parent ratings on child behaviors.^{7,9–11} Additionally, 45% of children under 6 years of age in the United States are from low-income families, underscoring the importance of understanding parent–teacher concordance in this population.¹⁷ Interpretation of prior studies is also limited by small sample size,¹⁵ overrepresentation of children with problem behaviors,⁹ and parent–teacher comparisons using different scales,^{7,16} which may limit generalizability.

The primary aim of our study was to test the hypothesis that characteristics associated with lower socioeconomic status—younger parent age, lower parent education, more parent depressive symptoms, and lower parenting self-efficacy—are associated with lower parent–teacher concordance on preschooler behavior ratings. On the basis of clinical observations that teachers gain familiarity with students as the year progresses, we also hypothesized that ratings completed at the end of the school year compared to the beginning have greater parent–teacher concordance, contrary to previous literature showing less parent–teacher concordance at the end of the school year.¹³

METHODS

STUDY DESIGN

Participants were drawn from the Growing Healthy study,¹⁸ a cluster-randomized community-based obesity prevention intervention trial in urban and rural Michigan Head Start programs occurring during 4 academic years between fall 2011 and spring 2015, with 6 classrooms participating each academic year. Data were collected before the Growing Healthy study interventions in fall (September–October) and after intervention in the spring (April–May). As shown in the Figure, there were 697 students enrolled onto the Growing Healthy study, with 562 participants included in this analysis who had both parent and teacher behavior ratings in the fall before the intervention. The sample of 562 partici-

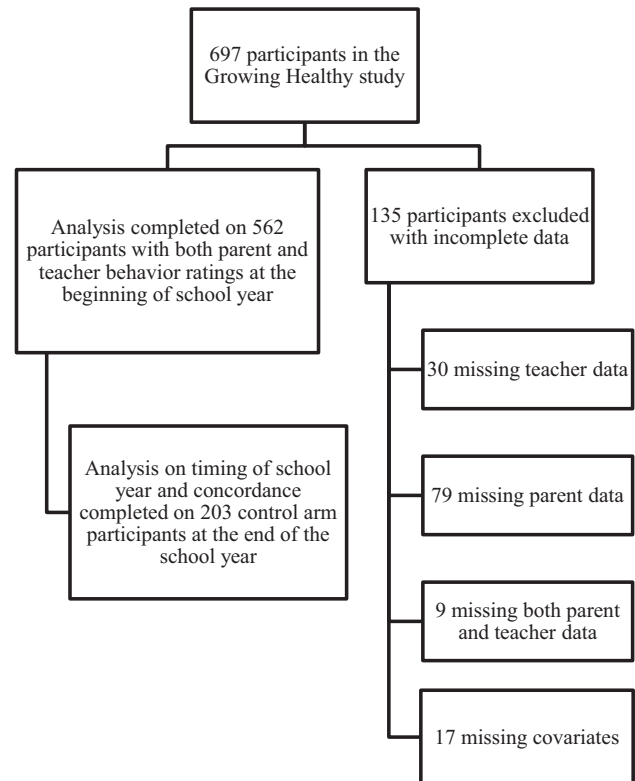


Figure. STROBE chart for participants excluded from study.

pants included in this analysis did not differ from the 135 participants not included with regard to child age, sex, and race/ethnicity. Because the intervention occurred during the school year and may change parent and teacher report of child behavior ratings, data were only used from the 203 control-arm participants in the spring to assess the association between time of school year and concordance. Exclusion criteria were significant medical problems or developmental disabilities, foster care, or lack of fluency in English. Families received \$150 for participating in data collection. This study was approved by the institutional review boards of the University of Michigan and Michigan State University. Families provided written informed consent.

MEASURES

OUTCOME MEASURE: CONCORDANCE BETWEEN PARENT AND TEACHER BEHAVIOR RATINGS

Parents completed the Eyberg Child Behavior Inventory (ECBI), a 36-item scale measuring disruptive behavior problems in children.¹⁹ Teachers completed the corresponding 38-item Student Behavior Inventory (SBI).¹⁹ Items are answered on a 7-point Likert scale (1 = never, 7 = always). The sum of these items generates the intensity score, which reflects the total frequency of each behavior (alpha = 0.93 for parent, 0.97 for teacher). Respondents also circle “yes” or “no” to report whether the behavior is a problem. The sum of items answered “yes” generates the problem score which reflects the total number of problematic behaviors (alpha = 0.91 for parent, 0.96 for teacher). T scores for age and sex with a mean of 50 and a standard deviation (SD)

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