CHAPTER 7

EVALUATING AND DIAGNOSING

1.   INTRODUCTION

Hansen (1982: 318) believes that all psychologists have to be
thoroughly acquainted with diagnosis before they can move to the
terrain of therapy. In this connection, it has to be kept in mind that
all educative situations differ.

The functional educative activities of the educator and child are
predisposed by their ways of living as well as by the meanings these
participants in educating attribute to each other's activities.

It is obvious that educative activities underlying a particular,
specific educative event have to be identified so that the problem
area can be determined and underlying factors can be high lighted.
The results of the disharmonious dynamics of educating are seen in
a child's behavior or in the symptoms he manifests. Thus, it is
necessary to analyze the specific functional activities of the parents
and indicate the relation between them and the child's disconcerting
or unfavorable attribution of meanings.

> "Drawing together all the information about a client and his or
> her situation as a basis for decision making is an important
> part of educational and vocational counselling" (Hansen [in
> English], 1982: 318).

From the viewpoint of educational psychology the most important
aspect of the diagnoser's task is to determine the essentials of the
disharmonious dynamics of educating because they underlie the
child's attribution of unfavorable or inadequate meanings. Here, for
example, one thinks of feelings of anxiety, loneliness, or a lack of
security that manifest themselves as the child's emotional or
behavioral problems. If educative activities result in educative
experiences by a child that are tantamount to him attributing
inadequate or unfavorable meanings to them they figure forth again
in his inadequate or problematic behavior which indicates that the
effects of the adult's educative activities can be "read" in the child's
affective, cognitive and normative meanings which again filter into
his behaviors.

However, one should never lose sight of the fact that the role of the educator in educating (guiding) does not have a parallel coarse to the role of the child (self actualization). Thus, it is necessary to determine the role of the parents/educator and the child in educating if there is a search for factors contributing to the disharmonious dynamics of educating.

If a child is subjected to inadequate educating either this is the result of the educator's inadequate guidance or a consequence of his own inadequate participation in terms of inadequate self actualization and his distress will be manifested in his general behavior. This manifested behavior usually is pedagogically unacceptable and can appear as various symptoms as, for example, behavior or learning problems. Thus, it is necessary to evaluate in terms of pedagogic criteria the quality of educating as this figures forth in the child's personal becoming. It also is necessary to indicate the essentials of the dysfunctional educative activities to determine what meanings the child has attributed to them.

2.   DIAGNOSING

2.1   Introduction

"A diagnosis is not a sufficient classification but a necessary constituent of a personality description" (Rapaport [in English], 1968: 14). It is the educational psychologist's task to determine the inadequate meanings the child has attributed to the educative activities. These unfavorable meanings are explored by using educational and psychological media and also by conversing with the child's parents.   An educational or psychological test or medium is viewed only as an aid in exploring a child's personal becoming and for determining his achieved and achievable levels of becoming or development.

Holt (Rapaport, 1968: 11) emphasizes the fact that diagnosing should not be seen as labeling but rather as an attempt to analyze and describe individual personalities and as an aid in planning helping strategies. "The ultimate purpose of diagnosis is to facilitate understanding and individualized predictions about the behavior of uniquely organized persons" (Rapaport [in English], 1968: 18). "... information is collected to gain an understanding of a person in order to provide assistance" (Schertzer [in English], 1979: 6).

Information so acquired is of great importance for various persons who might be responsible for planning a child's future care, therapy and other administrative matters such as school placement.

2.2   The role of testing in diagnosis

"Psychological testing is an effort to obtain whole and systematic samples of certain types of verbal, perceptual and motor behavior in a frame of a standardized situation" (Cronbach [in English], 1970: 45).

It is important to note that psychological tests only can indicate a problem area. Thus, they only can serve as an indicator of the disharmonious dynamics of educating. The causative factors underlying the manifested disharmonious dynamics of educating still have to be determined.

Cronbach (1970: 22-24) lists the following four points as the most important considerations for implementing psychological tests in a diagnostic protocol:

* Measures of potentialities and characteristics can be acquire in this way. They can serve as a basis for predicting possible behavior at a later stage.
* Testing is used as a selection procedure of individuals for specific reasons, e.g., admission to a college or a particular occupation.
* Classifying as this might be necessary in selecting a particular helping strategy or assignment to groups for schools or other training situations.
* Tests can be used to evaluate the effectiveness of particular programs and methods.

2.3   Educational psychological testing

There usually is a correlation between the unacceptable behavior of a child (as symptoms) and the disharmonious dynamics of educating. Thus, it is necessary not only to determine the causative factors of the symptoms but also to analyze the deviant behavior in terms of the specific functional activities of the educator underlying it, the meaning the child attributes to these activities as well as the reasons underlying the educator's behavior. Consequently, the aim of educational psychological testing is determining the unfavorable

meanings the child attributes to the educative activities underlying the disharmonious dynamics of educating.

The first task the educational psychologist has in the diagnosis is to determine if the symptoms as manifested by the child indeed are an indication of educational or behavioral deviancy, i.e., if indeed there is a gap or retardation in a child's becoming adult. Thus, the educational psychologist has to determine the child's pedagogically achieved and achievable levels in terms of intellectual potentialities, affective, cognitive and normative meanings that he attributes to the educative contents, his physical development and more. If there is inadequate guidance of the child by the educator then the constituents of this guidance also have to be determined by being able to analyze them. It is necessary that an accountable choice of test materials be made from all of the available psychological and educational tests.

2.4   Choice of tests

To acquire meaningful results from a test situation it is necessary that appropriate and accountable selections of available tests be made.

> "Tests should be selected to measure the content areas that the counsellor is concerned with and, at the same time, contribute as much as possible to the client's growth and development" (Hansen [in English], 1982: 375).

It is necessary to take note of the following observation by Holt (Rapaport [in English], 1968: 33):

> "... (a) major source of variance in diagnostic testing is the talent and skill of the psychologist who does it."

An educational psychologist has to have a thorough knowledge of the longitudinal becoming of a child in order to determine if a particular symptom should be viewed as a manifestation of deviant behavior or if it can be viewed as appropriate behavior within a particular phase of becoming. Also, the characteristics of the specific behavior deviations and syndromes have to be known by him.

Pedagogic intuition is an intrinsic part of the talent and skill of an educational psychologist. Van Niekerk (1978: 36) defines intuition as the immediate and spontaneous apprehension of a matter as if by inspiration. This implies that an educational psychologist has to possess the necessary pedagogic knowledge as well as have a genuine love for the child and an interest in the educative situation he and his parents find themselves in to be able to make optimal and accountable use of pedagogic intuition. This pedagogic intuition can help him in his accountable choice of tests.

Various classifications of tests can be made such as standardized and non-standardized. In the case of standardized tests, the following are important (Hansen, 1982: 377):

* Standard procedures for administering the test are developed including specific instructions and time limits. The same procedure is followed irrespective of the tester or where the test is given.
* Scoring procedures and keys are provided which eliminate the possibility of mistakes in scoring the test. Personal judgments also are eliminated.
* Tables of norms are available for each test. These data make comparisons possible between individuals and groups.
* Manuals with technical test data such as validity and reliability coefficients are available for each test.

There also is a distinction between individual and group tests.

A test has to be selected so that the best reflection of a unique child's achieved and achievable levels of becoming adult can be acquired in terms of his own, unique meanings on affective, cognitive and normative levels. It is necessary to determine a unique child's attained and attainable level of becoming to be able to see if there is a gap between them which then can serve as an indication of an educative deviancy or deficiency.

Thus, it is necessary to keep in mind the following aspects when selecting tests for diagnosing a unique child's problems:

* Age: a basic knowledge of a child's progress through the longitudinal phases is necessary.
* Geographic information of the family's residence.
* The extent of the problem in terms of the symptoms manifested by the child.

* Educative activities that possibly can underlie the problem.

2.5 Selecting tests to determine the meanings attributed by a unique child

2.5.1 Cognitive dimension

Various intelligence tests are available such as the **Wechsler Intelligence Scale for Children-Revised** (The Psychological Corporation, New York), the **Junior** and the **Senior South African Individual Scale** (both published by the Human Science Research Council), **The Griffith's Mental Development Scales** (Association for Research in Infant and Child Development, Cardiff, England).

Also available are group tests such as the **South African Group Tests** published by the Human Science Research Council and non-verbal intelligence tests such as **The Culture Fair Intelligence Test** published by R. B. Cattell and K. S. Cattell, Institute of Personality and Ability Testing, U.S.A. and intelligence tests for handicapped persons such as the **Peabody Picture Vocabulary Test** published by The American Guidance Service, Inc., and the **South African Individual Scale for Blind** published by the Human Sciences Research Council.

2.5.2 Affective dimension

Tests that can be used here include the following:

Projective techniques such as the **Rotter Incomplete Sentences Test** which is obtainable from The Psychological Corporation, **Rorschach Inkblot Test** published by Hans Huber, Bern, Switzerland (Bohm, 1958), picture stories such as the **Thematic Apperception Test** (Murray), **Symonds Picture Story Test** published by Teachers College Press, Columbia University, New York, **Children's Apperception Test** (Bellak, 1982), **The Blacky Pictures** by G. Blum, published by the Psychological Corporation, **The Four Picture Test** (Van Lennep, 1948), **Draw-a-Person Test** (Buck, 1950), **Draw-a-Tree** and **Draw-a-House** Buck, 1950), the **Wartegg Test** (Kinget, 1954).

Also there are questionnaires such as **The Interpersonal Relationship Questionnaire** (1981) and the **High School**

Personality Questionnaire both published by the Human Science Research Council. Various types of evaluation scales have been developed. They can be used fruitfully to summarize observational findings. In many cases a teacher and parents can be asked to observe a child and complete such an observation scale.

2.5.3   Intentional directedness

Various tests can be used to determine a child's intentionality as this is manifested in the nuanced ways in which he actualizes his psychic life, e.g., the **Rorschach Inkblot Test** (Bohm, 1958: 13) and the **Alexander Performance Scale for Children** (Alexander, 1946).

2.6   Observation

Educational psychological observation differs from so-called clinical observation of the "patient" researched from behind a one-way mirror (Van Niekerk, 1982: 83). According to Beets (Van Niekerk, 1982: 83), pedagogic observation is an interpersonal encounter that includes a future dimension. What happens here has to be placed against the background of a personal past and future because both belong to the child being observed. Van Niekerk (1982: 82) describes pedagogic observation as the systematic and purposeful exploration of a child's situation and its pedagogic evaluation.

The educational psychologist has to take into account the following when he uses observation as an aid to better understand a child:

> * The observer must not be pre-judgmental;
> * each child finds himself in a unique life situation;
> * premature conclusions have to be avoided;
> * it is necessary that a good relationship be established;
> * this relationship implies a being-with after which, in agreement with Van den Berg (1953), there can be reference to a shared landscape.

According to Vedder (Van Niekerk, 1978: 33) the following also have to be taken into account: a child's outward appearance, his intelligence, his motor activity, his volitional and affective life, his character and his general conduct.

2.7   The conversation

2.7.1   Introduction

In very many cases the symptoms manifested in a child's behavior refer to inadequate educative activities of the educators (parents). If the disharmonious meanings attributed by a child to the educative activities are known it is possible to find connections between them and the educative activities executed by the parent. Thus it is possible to identify problem areas and concentrate on them during the conversation with the educators (parents). Depending on a child's age and the nature of the problem it might also be necessary to converse with the child.

2.7.2   The conversation with the parents

The aim of the conversation with the educators is to acquire a verbal report from them about the child's development and the relationships he has established since birth.

It is of the greatest importance that there is a good relationship between the interviewer and the parents conversed with. If all of the blame for the child's behavior is placed on the parents from the very beginning this will antagonize them. "The quality of the client-counsellor relationship and of the alliance as it manifests itself throughout the interaction appears to be a highly significant prognostic indicator of progress" (Aiken [in English], 1979: 204).

Since the ultimate aim of the educational psychologist is to neutralize the disharmonious educative activities that have lead to the attribution of disharmonious meanings and thus to the child's manifest symptoms, it is necessary to determine what educative activities underlie the child's symptoms, i.e., the disharmonious dynamics of educating and what serve to intensify them. Thus, it is necessary that a clear image be acquired of the education the child has participated in and which has lead to the gap in his becoming towards adulthood. In this conversation the converser has to concentrate on those educative activities that can be linked to the child's inadequate attribution of meaning.

To carry out a successful conversation the converser has to be very well prepared; in other words, he has to have knowledge of the inadequate meanings attributed by the child and he has to be cognizant of the possible connections there can be among these meanings and the particular educative activities of the parents.

Aids such as questionnaires are available for the converser to facilitate his task (See appendices A and B). If the converser uses questionnaires it is important that he guard against the conversation falling into a formal question-answer session. The following aspects always have to be kept in mind:

* Empathic understanding of the client's situation is necessary.
* The other person's feelings must never be left out of consideration.
* The person's human dignity must never be violated.
* The importance of non-verbal communication should not be underestimated. Note facial expressions, body attitudes and tone of voice.

2.7.3   The conversation with the child

If the child can easily verbalize his problem, the educational psychologist can engage in a conversation with him. This conversation is carried out in a relationship of trust, understanding and the necessary authority. Such a conversation has to be handled with the greatest caution so that it does not lead to a fracturing of the relationship of trust. The child's human dignity always has to be respected. The emotional impact of a conversation about the disharmonious dynamics of educating in which the child participates must not be overlooked and he has to continually be certain of the support of the converser.

According to Van Niekerk (1982: 64) there are four basic ground forms for such a conversation:

* Dialogue (conversation)
Any topic can be discussed by means of language and by a careful observation of the degree of contextual integration of the child's communication it is possible to determine the meanings he has attributed to specific educative contents. The topics that touch the child also can be significant. It serves no purpose to ask him direct questions such as why he wets his bed.

* Play
According to Van Niekerk (1982: 65) a child is a playing being in the world and he displays the meanings he has attributed to himself and

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life contents through his play. Especially a younger child manifests his involvement in life contents through play.

* Assignment
Special assignments can be given to the child such as to write an essay or paragraph on a particular topic, e.g., his family. Various media such as projective tests also can be used.

* Example
An example from the everyday life environment of the child (an example from his experiential world) can be revealing for the diagnostician of the dynamics of educating in which the child has participated.

2.8   Family interactions

According to Langeveld (Van Niekerk, 1982: 2) a child only can become a person through education and thus he is dependent on it. This dependency of the child on adults necessitates that the diagnostician take into account the needs of these adults as well as those of the child while determining the disharmonious dynamics of educating. Observing the family in interaction is an indispensable aid for the educational psychologist in diagnosing the disharmonious dynamics of educating in the family because it is within these everyday family interactions that the dynamics of educating are actualized (see Landman, 1977).

The child and his family members are co-participants in this collective event to the extent that they are collectively responsible for the dynamic course of educating. Thus, the family is a constituent of a child's life reality and since diagnosing implies that the dynamics of educating within the family have to be explored, the actualization of the structures within the family have to be investigated by means of family diagnostic techniques. Family diagnosis, as such, occurs in practice in connection with family therapy.

Different approaches to family therapy are fully described in the recent literature. Hansen and L'Abate (1982) give an overview of the most important schools of family therapy. To the extent that family therapy is used as a diagnostic aid, the following aspects are of importance (Kotze, 1983: 119-123):

* Observation
The therapist (diagnostician) observes the verbal as well as non-verbal communication within the family.

* Family structure
The hierarchical organization within the family and the distance that is maintained by the various family members has to be determined. The educative and becoming periods in which the children find themselves in the family are of importance in determining the position of the family members with respect to each other.

During the diagnostic conversation with the family, the diagnostician can acquire a verbal report of the dynamics of the educating within the family as this manifests itself in their interactions.

3.   IMPLEMENTING MEDIA

3.1   Introduction

A variety of media are available for exploring a child's personal actualization in his educative situation. During the implementation of these media a gradual actualization of the various essentials of educating are usually of cardinal importance. In the following attention is given to the particular "types" of media that can be implemented.

3.2   Stating the problem and day program

The child's problem, as given by the parents as the reason for bringing him to the school psychologist, to a large extent directs the course of the investigation. From the statement of the problem and the day program (Appendix B), which also is filled out by the parents during this initial conversation, are set certain boundaries for the diagnostician within which his investigation or evaluation occurs. However, one cannot hold rigidly to such a pattern because the diagnostician gradually might discover that the parents (and he) are on the wrong track. Thus it is necessary that the diagnostician be flexible regarding the selection of media.

3.3   Performance media

All exploratory media can be viewed as performance media although specified performance media are designed with the aim of exploring the actualization of specific moments of the psychic life. A child's performance as a response to the invitation directed by the medium then is observed by the investigator. It is possible within a short period of time to bring to light different moments in a child's habitual personal actualization such as anxiety, calmness, uncertainty, self-confidence, spatial orientation, gross and fine motor movements, sidedness, etc.

3.4 Expressive and projective techniques

By making use of these techniques a clear indication can be found of the contents that figure prominently as components of a child's life of values regarding among others his parents, other family members, friends, teachers and himself. These media especially offer the possibility of exploring the unfavorable meaning constituents of the experiential world of a child restrained in his becoming because, as Lubbers (1971: 77) says, a child attributes his avoided feelings to the figures in the projective pictures.

3.5 Personality questionnaires

Various components of personality are incorporated into the questionnaires such as aloofness, intelligent, self-confidence, and more.

3.6 Intelligence media

Although the IQ score has much value in determining the pedagogic achievable level of a child, a qualitative analysis of intelligence is of great importance. How a child thinks and learns and, thus, how he arrives at a particular answer is important.

3.7 Scholastic tests

If a child already is in school the scores that he has obtained on tests and examinations can be studied to be able to evaluate whether a child's intelligence, as potentiality, is adequately actualized or not. An analysis of samples of his work in school subjects also can point to possible problem areas regarding deficient learning and deficient learning effects.

3.8   Historicity conversation

Obviously it is important to investigate the events to which a child attributed meanings in the past in order to acquire a better insight into his hierarchy of meanings and also to put the investigator in a position to gauge his momentary meanings in their essence. Consequently, it is necessary that the diagnostician talk with the child's parents (educators) and in some cases (especially depending on his age) also with him.

3.9   Summary

From the diagnosis done with the help of the above media it now seems that there are essentials of education that appear as more prominent, either in a favorable or unfavorable sense. These essentials of educating have a decisive effect on the child's meanings that result. In this regard, it can be indicated that educative activities that, e.g., figure prominently in the relationship of authority will lead to meaning outcomes by the child that also are related to realizing authority. Thus, there is a connection to be drawn between the type of meaning outcomes of a child and the types of essences of educating that figure prominently during the event of educating.

Behaviors that are characteristic of, e.g., insecurity, tenseness, anxiety, and more refer to the meanings attributed especially to trust during the course of educating. Thus it is possible to relate each behavior (and even "deviant" behaviors) with the functional actions of the educators.

An explication of a child's emotional, knowing and normative structures thus require disclosing their relations with the specific educative actions of the educators and the child. The effect of these activities on a child's affective, cognitive and normative meanings is that the relation between a child's meanings and his behaviors are preformed and initiated by the functional educative activities embraced by the dynamics of educating.

4.   THE DIAGNOSTIC REPORT

4.1   Introduction

As the diagnostic investigation is ended the educational psychologist has to present his findings in writing. This report has to be composed so that persons from other disciplines such as medicine, physical therapy, teaching and others with intervention or helping strategies can proceed if this seems to be necessary. All of the information at the educational psychologist's disposal regarding this specific child and the unique educating he has participated in have to be included in this report.

According to the compilers of the DSM III (p. 23), making use of five systems of assessment ensures that various related matters such as environmental influences and the highest level of functioning in the just ended year are not left out of consideration in evaluating and diagnosing the individual.

Since an educational psychologist never views a child apart from his educative situation, matters such as environmental influences and relationships with his family members always are viewed as an integral part of the diagnostic event. Also, the information that is an indication of the fifth system, namely the highest level of functioning, is implicitly built into the diagnostic investigation in so far as the pedagogically achievable* level is determined. Thus, it is not necessary for an educational psychologist to present the diagnostic report according to the five systems of assessment.

The various components of a diagnostic study can be discussed under the following headings in such a report.

4.2   Identifying particulars

Personal identification data such as date of birth, date of investigation and age at the time of the study, school and grade level, parents' names, address as well as source of referral can be noted here.

4.3   Statement of the problem

The reasons offered by the parents for meeting with the educational psychologist briefly are given.

_____

* If I understand the thought here, it seems that this point has to do with the level achieved. G.Y.

4.4 Summary person image

Here the following aspects can be discussed:

4.4.1 Relevant historicity data

Only those data relevant to the problem area are discussed here. This includes information about a child's physical development and possible traumatic and other events that could have had an influence on hiss becoming to date. Events concerning family members and that have influenced the child's education and interaction with the family members also are discussed here.

4.4.2 Cognitive structure

An image of the child's cognitive structure as well as the course of his learning are conveyed here.

4.4.3 Affective and normative structure

An image of the affective and normative structures of a child is conveyed as completely as possible in terms of the meanings he has attributed on an affective and normative level to the contents of educating and to the persons involved in educating him.

4.4.4 Disharmonious structures of educating and the dysfunctional activities underlying them

The problem areas and educational structures that can be viewed as the most important constituents of these problem areas are explained here. The functional activities carried out by the participants in these unique dynamics of educating and which specifically underlie or maintain the disharmonious dynamics of educating are discussed here.

4.5 Recommendations

Discussed here are recommendations in terms of strategies of providing help to eliminate or neutralize the disharmonious dynamics of educating. Recommendations are made for further study, e.g., medical, physical therapy, etc. Administrative

arrangements such as school placement also are discussed under this heading.

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APPENDIX A

HISTORICITY QUESTIONNAIRE

I. IDENTIFICATION DATA

Name: _____

Birth date: _____

Date of investigation: _____

Grade: _____

School:
_____

Religious denomination: _____

Father: Initials and surname: _____

             Age: _____

             Vocation: _____

Mother: Initials and surname: _____

             Age: _____

             Vocation: _____

Marital status: _____

Number of children: _____

Other house occupants: _____

Parents' address: _____

_____

Telephone number: _____

Other children in the family:

	Name	Age	Grade
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

II. STATEMENT OF THE PROBLEM

_____

_____

_____

_____

First manifestation of the problem:

_____

_____

Measures already taken to correct the problem:

_____

_____

Has the matter already been discussed with the child?

_____

When?

_____

_____

In what way?_____

_____

Was the problem ever discussed with the child in front of others (children or adults)?

_____

_____

III.   CORPOREALITY AND SPEECH (IF RELEVANT)

Pregnancy: Planned? _____
          Problems? _____

Birth: Problems? _____
          Weight of baby _____

Feeding: _____

_____

Physical milestones (sitting, crawling, walking)

_____

_____

Left or right sided:_____

(Hands, feet, eyes)_____

_____

Any physical defects:_____

_____

Illnesses the child has had or still has: _____

_____

Illnesses in the family:_____

_____

Misfortunes:_____
Physical appearance:_____
Physical form (shape): _____
Physical movement: _____
Physical proportions: _____

When did the child begin to talk?
_____

Any speech abnormalities?

_____

IV.   PEDAGOGIC SITUATION

1.   Father-child relationship (as viewed by the father)
How did the father feel about the arrival of the new baby (and the
pregnancy of the mother?)

_____

_____

Father-child contact as baby:
_____

_____

Father-child contact as toddler:_____

_____

How often do the father and child now have contact?

_____

_____

What does the contact include?

_____

_____

What do father and child talk about?

_____

_____

Where and when do they converse?

_____

_____

How does the father feel about his child?

_____

_____

What does the child do that appears clever to the father?

_____

_____

What does the child do that is unacceptable to the father?

_____

_____

How does the father view the mother-child relationship?

_____

_____

2. Mother-child relationship (as viewed by the mother)

How did the mother feel about her pregnancy?

_____

_____

How did the mother feel about the baby?

_____

_____

How did the mother feel about caring for the baby?

_____

_____

Were there any feeding problems?

_____

_____

What does the mother-toddler contact include?

_____

_____

How often do the mother and child now have contact?

_____

_____

What does the contact include?

_____

_____

What do mother and child talk about?

_____

_____

Where and when do they talk?

_____

_____

What does the child do, that appears clever to the mother?

_____

What behaviors of the child are unacceptable to the mother?

_____

_____

How does the mother view the father-child relationship?

_____

_____

3. Marital relationship (according to the father)

_____

_____

Marital relationship (according to the mother)

_____

_____

How did the arrival of the children influence the marital relationship?

_____

_____

How did the arrival of this child influence the marital relationship?

_____

_____

4.   Child-others

What is the child's relationship to his brothers and sisters?

_____

_____

What is the child's relationship to himself?

_____

_____

Does he have friends?

_____

_____

What are his relationships with his friends?

_____

_____

When does he have contact with his friends?

_____

_____

Who takes the lead in his peer group?

_____

_____

Is the child independent (with respect to his level of becoming)?
Give examples

_____

_____

5. What is the parents' role in the child's cognitive becoming? (Library, TV, excursions, questions, magazines)

_____

_____

How does the child attribute his own meaning to matters that touch the family (e.g., religion, activities of other family members)?

_____

_____

Matters outside of the family (cultural matters, TV, etc.)?

_____

_____

6. What is the parents' role in the child's normative development?

Role of religion in the family life

_____

_____

What educational aims do the parents strive for?

_____

_____

How does the child identify with the norms presented to him by his parents?

_____

_____

What is the quality of the parents' exemplification [of norms]?

_____

_____

7.   Child-school

How does the child experience the school?

_____

_____

Child-other children

_____

_____

Child-teacher relationship

_____

_____

Child-learning material relationship

_____

_____

INFORMATION REGARDING RELEVANT MACROSTRUCTURES

APPENDIX B

DAY PROGRAM OF

_____

By asking these questions, we want to get an image of a typical week day in your family. Take an ordinary week day as your focus and please answer the questions as completely as possible. If there are aspects of your day not covered by the questions, you can discuss them on the last page. The questions and your answers to them are not an indication of the quality of your educating your child. There are no "right" or "wrong" answers.

Only answer those questions that apply to you.

1. How does your child awaken each weekday morning?

_____

_____

2. What is your child's immediate behavior?

_____

_____

3. Does he get up easily and quickly? If not discuss.

_____

_____

4. Where and with whom does your child enjoy breakfast?

_____

_____

5. What is talked about during breakfast?

_____

_____

6. Are there any activities practiced in the morning in your house? (Describe)

_____

_____

7. Does your child need to be scolded in the morning? Explain.

_____

_____

QUESTIONS 8 - 10 NEED TO BE ANSWERED IF YOUR CHILD DOES NOT YET ATTEND SCHOOL

8. If your child attends a pre-school, nursery school or play group (skip what is not applicable):

   (a) Who cares for him/her there?

   _____

   (b) How late in the morning?

   _____

   (c) How is your child greeted?

   _____

   (d) Who takes and picks your child up?

   _____

(e) How is your child greeted when he is picked up?

_____

(f) Describe the time between the child's returning home and the father's (and/or mother's) coming home. (What does the child do, talk about, etc.)

_____

_____

9. If the mother cares for the child herself at home, give a brief description of:

(a) the morning (activities; what is talked about, about what and how often is the child scolded, with whom and what does your child play, etc.)

_____

_____

(b) the afternoon

_____

_____

10. If your child is cared for during the day by another person (e.g., a servant):

(a) Who cares for the child?

_____

(b) Where is your child cared for?

_____

(c) Briefly describe the course of your child's day in the care of the person involved (activities; what they talk about, etc.)

_____

_____

QUESTIONS 11 - 20 MUST BE COMPLETED IF YOUR CHILD ALREADY IS IN SCHOOL

11. Why is your child in school?

_____

12. Is your child greeted in the morning if he/she goes to school?

_____

      If so, how and by whom?

      _____

      _____

13. Does your child come directly home after school? _____

14. Does he go to an after-school center? _____

15. Does he go to another place? Specify

_____

16. If your child comes home, by whom and how is he received?

_____

_____

17. Who offers your child lunch?

_____

18. After school activities

    (a) Does your child participate? _____

    (b) How does he/she get to and from activities?

    _____

19. If your child is home in the afternoon, who does the afternoon progress?

    _____

    _____

20. Homework

    (a) When does your child do his homework?

    _____

    _____

    (b) Where does he do his homework?

    _____

    _____

    (c) How is he supervised or how is the homework checked?

    _____

    _____

    (d) How is the checking done?

    _____

    _____

21. How late does the father come home (and if the mother works full time, both)?

_____

_____

22. Describe the time between arriving home and having dinner.

_____

_____

23. How late do you usually have dinner, where is it served and how does the meal progress?

_____

_____

24. How late does you child go to sleep?

_____

25. Briefly describe the events between eating dinner and your child's bedtime.

_____

_____

_____

26. Does your child fall asleep easily? _____

27. How does bedtime progress?

_____

_____

28. Any other matters you consider to be important

_____

_____

_____

29. How do Saturday and Sunday progress?

_____

_____

30. Is there any difference in the manner in which your child goes to school on Monday morning and any other morning?

_____

_____

Completed by _____