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The effects of attachment and alliances within the family on student/teacher relationships and disruptive behavior

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THE EFFECTS OF ATTACHMENT AND ALLIANCES WITHIN THE FAMILY ON STUDENT/TEACHER RELATIONSHIPS AND DISRUPTIVE BEHAVIOR

By

Monika Mabe

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By

Monika Mabe
DEDICATION

This dissertation is dedicated to my mother for always being my biggest supporter both in my education and in all of life’s endeavors.
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I am eternally thankful to my mother and father for instilling the importance of education at an early age. I am grateful for the support of my parents throughout my childhood and for my mother’s continued support when I decided to continue my education in adulthood; my husband’s support throughout graduate school; and to my three girls for being patient when so often they knew that “mommy had work to do”. I would also like to thank Dr. Webster for spending endless hours working with me to insure I would accomplish the goals I had set for my education.
The Effects of Attachment and Alliances Within the Family on Student/Teacher Relationships and Disruptive Behavior

Abstract

By Monika Mabe

University of the Pacific
2019

This study focuses on the effect that attachment status and negative alliances within the family has on disruptive behavior ratings and on the closeness or conflict a child feels with their teacher and the teacher’s subsequent ratings of the severity of Oppositional Defiant Disorder. Structural equation modeling was used to determine the impact attachment status, alliances within the family, and disruptive behavior had on the closeness or conflict a teacher felt with their student and the subsequent ratings of the child’s oppositional behavior.

Negative alliance in the family was not a strong predictor of a child’s disruptive behavior or Oppositional behavior in the classroom. However, the closeness or conflict that a teacher feels with a student was a stronger predictor of a child’s negative behavior. This indicates that when the teacher feels more closeness to the child, the child’s behavior is rated as less disruptive, and as conflict increases, teachers rate the child’s behavior as more disruptive. This study provides further evidence that a child’s behavior is shaped by a multitude of factors throughout their childhood including their attachment with their caregiver in their first years of development, their experience with negative alliances in the family, and their relationship with their teacher.
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Chapter 1: Introduction

Children who display behavior problems in the classroom are arguably often a leading source of frustration for teachers and administrators. The aggressive, defiant, and abrasive behaviors of some children can impact the daily functioning of an entire classroom. Children with Oppositional Defiant Disorder or Conduct Disorder often display these undesirable behavioral characteristics. Unless they have been placed in a day treatment program, many children with these behavior characteristics remain in the general education setting, often without the behavioral and emotional supports that would improve their functioning.

Children with disruptive behaviors have been found to experience a lifetime of negative outcomes in a variety of domains. At an early age, children with aggressive or defiant behaviors often have negative social interactions with classmates and teachers (Bradshaw, Schaeffer, Petras & Ialongo, 2010). In turn, the negative interpersonal relationships can impact educational aspects of their life. Students with behavioral problems are more likely to struggle academically, therefore reducing the probability of graduating from high school and obtaining employment (Bradshaw et al., 2010). Multiple studies have found that children who display disruptive behaviors at an early age are also more likely to engage in risky behaviors. These children had a higher susceptibility for drug/alcohol abuse, sexually transmitted diseases, teenage pregnancy, mental health problems, overall poorer health, and financial instability (Moffitt & Caspi, 2001).

Research has shown that there is a multitude of factors that lead a child to display disruptive behaviors, and there are multiple pathways to the same behaviors (Sroufe et al, 2005). One pathway is through emotional and/or physical abuse, neglect, and parental rejection. There have been several extreme cases reported in the news over the years wherein
family members have formed alliances and rejected one of the child members. This child is locked away in a basement or closet, starved and treated differently from other family members. This child does not experience the world as the other members of the family do and lives a life of solitude and despair. While these are extreme cases, many children experience favoritism between their siblings. A mother may treat her children differently, depending on the development and individual needs of the child. However, differential treatment can become psychologically harmful to the child when the parent sends a message that one child is more loved and wanted than another. What a child deems to be “normal” behavior is shaped early in life. When a child experiences their primary caregivers as rejecting, this child forms an internal theory that they are unworthy (Bretherton, 1990). When a child can form a loving and supportive connection with their primary caregiver, the child develops an internal view of the self as worthy, competent and capable (Bretherton, Ridgeway, & Cassidy, 1990).

For many years, research has focused on the relationship between a mother and child, and how this relationship impacts a child’s psychological development. Bowlby (1969) hypothesized that an infant’s attachment behavioral system is organized around the quality of the caregiving received by the primary caregiver (which in most cases is the mother). As the infant develops more sophisticated cognitive processes, the multiple interactions with the primary caregiver begin to form a mental blueprint of the relationship. Infants who receive sensitive and responsive caregiving begin to develop expectations that their needs will be met and that they will be protected from harm. Infants whose needs are inconsistently met, or who are actively rebuffed by the mother, develop expectations that appropriate care will not be provided. Children who experience the primary caregiver as actively frightening (as in
abuse), or the mother is frightened herself (and thus unable to provide protection for the child), often develop a disorganized attachment relationship with their caregiver (Main and Hesse, 1991). Children with a disorganized attachment status often experience higher levels of behavioral problems than children with an organized attachment status (O’Connor, Collins, & Supplee, 2012).

The experiences a child has with their caregiver sets the foundation for their expectations of others and the world around them. When a child learns that their parent is a source of fear, rather than a source of comfort, they may begin to act in unpredictable manner, often displaying odd and inexplicable behaviors (Madigan, Moran, Schuengel, Pederson & Otten, 2007). Researchers such as Bowlby (1978) and Van IJzendoorn et al (1996;1999) have studied the attachment relationship and found connections between attachment and conduct problems. Greenberg and colleagues (1991; 1993; 2001) found significant relationships between insecure attachment and disruptive behavior disorders such as oppositional defiant disorder. He has proposed a model of how attachment may contribute to the development of maladaptive behavior through direct and indirect pathways (DeKlyen & Greenberg, 2016). For example, as a direct pathway, disruptive behavior exerts considerable power in the directing the attention of caregivers; thus, serving a proximity function. One indirect pathway is through the development of emotion regulation processes. The infant’s self-regulation capacities develop within, and evolve from, early interactions and external regulation provided by the primary caregiver. If the primary caregiver is unresponsive, or hostile to the infant, the neural organization of the brain will be biased towards over-reactivity, and the infant will experience difficulty with self-regulation. A third mechanism is through the internal working model of the self and others via social information processing. Insecure
attachment may result in the formation of social information processing models that are characterized by hostile attributions of others’ behavior and intentions. Finally, Greenberg and colleagues propose that attachment may influence motivational processes by promoting a generalized positive or negative social orientation. Other studies have found there to be a strong genetic component that contributes to the behavior associated with Conduct Disorder and Oppositional Defiant Disorder. In a study by Theule, Germain, Cheun, Hurl and Markel (2016), the researchers found that attachment, specifically insecure and disorganized attachment, was strongly correlated with children who had been diagnosed with Conduct Disorder. The family risk factors as well as the attachment status of a parent and child are essential details in determining the reasons behind a child’s disruptive behavior problems. The instability of their childhood, and the inability to form a positive mental representation of the world around them, leads children with a disorganized attachment to often act in a negative manner. The relationship with their caregiver can have implications for the subsequent behavior in the school system. It is often the children who display the most disruptive behaviors, who have had a tumultuous and unstable beginning of their life.

It is argued that the mental blueprint of the primary relationship with the caregiver forms the basis for subsequent relationships, including those of teachers (Hamre & Pianta, 2001). Understanding the pathway of a child’s development by focusing on the attachment relationship with their caregiver, can have implications for a child’s behavior during their early and late teenage years. In the early years of a child’s life, the child learns from their parent or caregiver how to regulate their emotions and in turn, how to react socially and emotionally. If a child does not receive proper care and nurturing from their caregiver, the child often reacts in a negative manner when encountered with social situations in which they
do not have the knowledge and experience to react appropriately. It is important for a teacher to understand how the first few years of a child’s life can impact the child’s behavior, thoughts, and actions when they enter school. How a teacher view’s a child is often indicative of how a child will perform in school. If the teacher views the child as problematic or a burden in their classroom, the child will often live up to these low expectations. If the teacher views the child as someone who she can positively influence, the child is more likely to work hard to please the teacher.

**Purpose of the Study**

It is anticipated that a better understanding of this relationship may inform both theory as well as practice. For example, a family may present themselves as a healthy, happy and positively functioning family. Educators do not see the innerworkings of the family and how each child is treated and reacts within the family setting. The position of a child who experiences rejection in the form of an exclusive alliance in the family is important, as there can be implications for subsequent behavior in the classroom. In practice, it is important to have an understanding not only of the attachment status of the child, but also to understand how a teacher’s relationship with a student can positively or negative influence the disruptive behaviors of the child.

**Significance of the Study**

Much of the research on attachment theory has focused on the attachment status of a child at young age and the subsequent behaviors of the child as they develop. There has been limited research on attachment status pertaining to families who experience alliances in which a child is excluded or rejected. How one child experiences attachment with their parent or caregiver is not necessarily how their siblings experience a relationship with the same caregiver. It is
important to address alliances within the family to better understand children’s relationships with their teachers as well as the severity of disruptive behaviors that they may display.

**Research Questions**

**Research question #1.** Is parental rejection, as measured by Whole Family Alliances a mediating pathway between attachment status at 18 months old and disruptive behavior rating scores, when controlling for SES and Ethnicity?

**Research question #2.** Is Teacher Closeness and Teacher Conflict a significant mediating pathway between attachment status at 18 months old, whole family alliance, and disruptive behavior rating scores, when controlling for SES and Ethnicity?
Chapter 2: Literature Review

Attachment Theory; Disorganized Versus Organized

Throughout a child’s life, a parent should remain a safe haven for their child. According to Bowlby’s (1979) attachment theory, the early relationship and interactions a parent forms with their child, results in the development of an Internal Working Model (IWM). Since the IWM is based upon the child’s actual experiences with the parent, the child develops thoughts, beliefs and expectations about the care she will receive from the mother. If the child has received competent and responsive caregiving, she will develop beliefs that she is worthy of such care, and that others can be counted on to engage in mutually reciprocal relationships. When a parent does not provide sensitive and responsive care, the child often creates a negative internal model of the self in which the self is viewed as unworthy, and others as untrustworthy. Three types of organized patterns of behavior are identified in attachment theory: secure, avoidant, and ambivalent.

Infants and toddlers who have an organized attachment with a parent or caregiver can experience an array of responses and reactions from that adult. A child with a secure attachment will have a parent who understands their needs and responds in a sensitive and prompt manner. Based upon their early mental blueprint of this relationship, they will develop the confidence and ability to respond and react and engage with others in likewise reciprocally responsive manner. Infants with an avoidant attachment status may have a caregiver who is insensitive or rejecting. Many infants and children in this group may not show distress when their caregiver leaves the room and further do not greet her or show her attention when she returns (Lyons-Ruth, 1996). Children who experience insensitive or
inconsistent caregiving develop an insecure-resistant type of attachment (Benoit, 2004). Infants in the insecure and avoidant category do not use their parent or caregiver to manage stress and fear, but rather they manifest avoidance both physically and emotionally towards their parent (Tarabulsy, St-Laurent, Cyr, Pascuzzo, Bernier, Dubois-Comtois, 2008).

Disorganized attachment emerged as a category after studies using the Strange Situation found that some infants did not fit within the categories of organized attachment. These infants did not have any type of organized strategies to deal with stresses during the Strange Situation (Bakermans-Kranenburg, Van IJzendoorn & Juffer, 2005). The infant does not have any tools to deal with stress because their parent or caregiver has often been the source of fear and stress. Children with disorganized attachment often show apprehension or fear towards their parent. They tend to have higher externalizing behaviors, lower emotional regulation skills, and higher rates of disassociation during adolescence (Bakermans-Kranenburg, Van IJzendoorn & Juffer, 2005). A high rate of infants who were maltreated have been categorized as disorganized in multiple studies (Benoit, 2004). Furthermore, mothers who had unresolved loss or trauma according to the Adult Attachment Interview, had children with disproportionately higher rates of disorganized attachment (Carlson, 1998). There are lifelong implications for infants who experience disorganized attachment with their parent or caregiver during their early years of life. An adult’s attachment status and representation are considered to be a culmination of their life history as well as current life events (Sroufe, Egeland, Carlson & Collins, 2005). The quality of the mother-child relationship and subsequent attachment status can have lasting effects on the child’s cognitive development, emotional regulation, capacity for empathy and behavioral control (Malekpour, 2007). It is these aspects that often lead to disruptive behaviors both in the school and home. A child
whose information processing system is targeted towards defending against potential threat, versus academic learning, may not make use of the education system in a positive manner. Children and adults are continuously learning, however, a child who does not feel secure may not be able to learn what is wanted and intended to in the school setting if they are not having their psychological needs met. Poor academic achievement can then have negative implications for the rest of one’s life, leading to many struggles such as an increased likelihood of unemployment, living in poverty, and lack of healthcare. A child’s initial relationship with their caregiver influences their development both cognitively and emotionally, and effects their functioning both in childhood and into adulthood.

**Alliances Within the Family**

Parents usually treat children differently depending on the current developmental stage of the child (Boyle, Jenkins, Meunier & O’Connor, 2013). These differences are usually age appropriate and vary depending on the emotional, developmental and intellectual needs of each child. However, there are incidents where one child is favored so heavily over another that alliances begin to form within the family, which can lead to one child being ostracized. The majority of research in this area focuses on favoritism of a child by a parent, in which siblings are not treated the same. In this paper, alliances are being defined as an extreme form of favoritism where a parent disfavors one child to the extreme, such that this child is essentially rejected by the rest of the family.

The manner in which parents treat their children differently is known as differential parenting. The process of differential parenting involves varying levels of positivity or negativity that a child receives when compared to their sibling(s) (Boyle et. al, 2013). Differing factors such as health, employment, martial stress and the mental health of the
mother can also lead to differing relationships between a parent and a child (Boyle et. al 2013). Further, a parent who sees negative characteristics in their child that they also view as unacceptable or undesirable aspects of themselves, may disfavor this child more than siblings that do not display the same attributes (Brody, Copeland, Sutton, Richardson & Guyer, 1998).

Children within the same family can achieve differing (and in some cases maladaptive) life outcomes despite being raised and cared for by the same people. Within-family factors play an important role in the development of the child as well as their outcome as adolescents and adults. The parental differential treatment (PDT) of siblings is an important mechanism for describing and understanding the behavioral differences of siblings (Coldwell, Pike & Dunn, 2007). Further, it is not only the presence of parental differential treatment that is important, but how the child perceives themselves to be treated in comparison to their siblings. The effects of parental different treatment can have long lasting implications. The child is not only impacted as they develop, but there are long lasting effects that predict the relationship siblings and parents will have in their adult life (Boll, Ferring & Filipp, 2003). For example, a child who is disfavored by their parent in childhood is more likely to continue to be disfavored in adulthood. This individual commonly still views their family relationships as negative, and the disconnect between parent and child can instill a feeling of unworthiness and low sense of self-worth.

**Externalizing Impact of Parental Disfavouritism**

Differential parenting can have negative repercussions for all individuals involved in the family. However, when a child is highly disfavored by a parent, there is an increase in behavioral problems (Boyle et al. 2013). Disfavored children often experience feelings of anger, shame, resentment and envy due to the differential treatment. These feelings can lead
to increased depression and low self-esteem (Brody et. al., 1998), and the child may begin to act out as a way to display their anger and frustration. According to Social Learning Theory, a child who experiences disfavouritism or is an outsider of an alliance within the family, will begin to respond and display behaviors in accordance with the parental social reward that the child receives (Brody, et. al., 1998). Bandura (1971) noted that children learn through vicarious, symbolic, and self-regulatory processes, all which contribute to a child’s actions. Children learn vicarious reinforcement by watching others’ behavior and actions and the consequences or reward that comes from such behavior. Mental processes such as symbolic learning can influence a child’s behavior by allowing the child to use mental representations to foresee probable consequences and be able to change their behavior accordingly (Bandura, 1971). Individuals also have a self-regulatory process in which they are able to partially control their behavior by understanding the potential consequences and altering their behavior accordingly (Bandura, 1971). Children learn from watching others, and change their behavior based on both external rewards and intrinsic reinforcement and rewards. External rewards may come in the form of praise from their parent, while intrinsic rewards include a sense of satisfaction, pride, and the feeling of accomplishment. A child who does not experience positive reinforcement by a parent will have lower rates for exhibiting positive behaviors, while a child who receives attention for negative behaviors may continue to display these behaviors in an effort to obtain attention, whether it is positive or negative. In one study, children who reported receiving more negative attention and less warm/enjoyment from their mother, were subsequently rated by their mothers as having higher levels of problematic behavior (Coldwell, Pike & Dunn, 2008). This suggests that children who are treated
negatively by their mother, when compared to their siblings, tend to display behaviors indicative with the manner in which they are being treated.

Within families, the sibling relationship can also be impacted by alliances and favoritism. Siblings who are shown favoritism of one child by their parents, are more likely to have conflict, be controlling and competitive. For example, Conger and Conger (1994) found a correlation between a mother’s hostility towards a specific child and that child’s negative and delinquent behaviors. The more negative behaviors a mother displays towards one sibling rather than other siblings, the more likely that sibling is to behave in negative manner, including aggressive, avoidant and unaffectionate behaviors towards their siblings (Brody et., al., 1998). The disfavored sibling will begin to form a negative IWM in which the child views the self as unworthy, and others as untrustworthy. A child with a negative IWM often has increased internalizing problems and externalizing problems (Hawkins & Haskett, 2014). Children who are disfavored by their parents often display an increase in negative behaviors which can lead to problems in the school setting.

**Behavioral Problems in the School Setting**

Studies have found that students with challenging behaviors such as emotional problems or aggressive tendencies can have a negative impact on a teacher’s ability to instruct the other students in the classroom. Children with behavior problems draw a teacher’s attention and energy towards their behavior, and away from the other students and instruction due to constant outbursts, disruptive behavior and breaking classroom rules (Zee, de Jong, Yoomen, 2016). Perhaps not surprisingly, due to socialization factors, research has found that boys, more so than girls, have the tendency to form relationships that are negative or have conflict with their teachers (Hamre, Pianta, Downer & Mashburn, 2007). According to
Greenberg’s (1993) model of the etiological contributors of aggressive behaviors, there are four factors which influence a child’s risk factors of negative behaviors; family stressors, discipline, child characteristics, and attachment relationships (Lyons-Ruth, 1996). If a parent experiences conduct problems in their own childhood, there is an increased likelihood that their offspring will also have the same conduct problems due to over-reactivity of the parent (Raudino, et. al, 2012). Studies have found a linkage between a parent’s conduct problems and their children’s, suggesting a hereditary component of the disorder (Raudino, et. al, 2012). However, there are multiple other confounding factors such as: SES, family conflict, parental adjustment including violence, alcohol and drug use, and exposure to physical and sexual abuse that contribute to the cycle of conduct problems. A parent who has experienced these confounding factors most likely will not have the proper tools to self-regulate their emotions and therefore often has more explosive and reactive reactions to their child’s behavior. This in turn can lead to an increase in the child’s unwanted and undesired negative behaviors.

When a student enters the classroom in preschool or kindergarten, the child’s behavior has already been shaped and molded to a large extent by the parenting they have received, their environment, and genetics. A teacher does not receive a child with a blank slate, but rather a child that may already have seen years of hardship, neglect, abuse, or violence. Teachers are then expected to teach a class of twenty plus students, without knowing how a child’s past has already set them on a trajectory to be successful or hampered in the educational setting. Children with behavior problems are also unique in that they may express both externalizing and internalizing problems that are associated with social maladjustment (Hajdukova, Hornby & Cushman, 2014). Social maladjustment includes behaviors that go
against social norms, and the desire and unwillingness to meet minimum standards and expectations. For example, most teens who are juvenile delinquents are considered to be social maladjusted.

A secure attachment with a parent or primary caregiver can be adaptive for children when they enter the school system. This secure attachment provides them with the capacity to explore the school environment, establish peer interaction, have high self-esteem, and form friendships. A child who enters the school system without the background of a secure attachment will be more likely to engage in aggressive and hostile behavior towards teachers and peers (Hamre & Pianta, 2001).

**Teacher-Student Relationships**

A positive teacher-student relationship is highly important for a child to develop in early education. This relationship is important for all students, but even more important for children who have academic and behavioral problems. A student who is already on a positive developmental trajectory may not be drastically influenced by a poor teaching and a negative relationship with their teacher. However, a student who is experiencing academic and behavioral problems may be heavily influenced by poor teaching and a negative student-teacher relationship, such that negative outcomes are worsened. A positive relationship with a teacher is imperative for all students, but is especially important for students who are struggling academically or behaviorally. This is the relationship that sets the foundation for success within the daily workings of the school environment (Hamre, Pianta, 2001). A teacher-student relationship is established not only on the characteristics of the child, but also on the characteristics of the teacher, the interactions between students and the teacher, and the educational setting (Hamre, et al., 2007).
The teacher-student relationship is formed from the beginning of the school experience. In a study by Hamre and Pianta (2008), they found that kindergarten teacher’s reports of children with behavior problems could predict the outcome of student’s grades, standardized test scores, and their work habits through the rest of elementary school. The importance of a positive teacher-student relationship is evident as this relationship is a stronger predictor of academic success than behavior alone (Hamre & Pianta, 2008). The teacher-student relationship may be especially difficult when it comes to children with disruptive behaviors as they are one of the primary challenges for teachers in the school setting (Myers, Pianta, n.d). The level of a student’s problematic behavior is the strongest predictor of the teacher-student relationship (Hamre, Pianta, Downer & Mashburn, 2007). A teacher who views a student as unmotivated, disruptive, or aggressive most commonly responds to this student in a negative and disconnected way (Myers & Pianta, n.d). The average student spends approximately 10,000 hours in the school setting. Therefore, a positive teacher-student relationship is especially important for children with behavior problems, but this is often a negative relationship due to the constant battle between the child and teacher. In contrast, students who have behavioral problems but who have a positive relationship with their teacher are less likely to be retained and are more well-liked by their peers (Myers, Pianta, n.d.).

Teachers have an important influence on the behavior of disruptive students. Students who reject their teacher often still want to be cared for and accepted by their teacher (Hajdukova, Hornby & Cushman, 2014). Further, students most often see their teacher from a different perspective than a parent or another adult. A teacher is an outside figure who holds a position of authority. Most students show their teacher respect, strive to impress, and want a
positive relationship with this individual. Studies have found that a positive student-teacher relationship can be a source of protective factors and can positively influence a student’s self-image and academic engagement (Hajdukova, Horby & Cushman, 2014). This fact highlights the importance for teachers to develop a positive relationship with their students, even when the student may reject them (Hajdukova, Hornby & Cushman, 2014). Students who reject their teachers are often the students who need the most attention. Teachers can reaffirm that the child is important and cared for by showing the child that they are not rejecting them and will continue to provide support, structure, and a positive environment despite the child’s negative behaviors.

**Purpose of the Study**

Teachers have a unique relationship with their students. While children spend the majority of their waking hours as infants with their parents or caregivers, by the time a child is school-aged, the teacher is the individual spending a majority of the day with the child. How a teacher perceives a child, and therefore treats a child, plays a major role in the academic and social success of the child. However, each child who enters the teacher’s classroom has already been shaped and molded by their experiences during their first five years of life. The aim of this study is to investigate how children who experience a disorganized attachment with their caregiver, while their siblings were favored over them, can be impacted by their relationship with their teacher. The study will focus on the relationship with the teacher in elementary school and investigate if the teacher closeness of conflict played a role in severity of the child’s disruptive behavior rating scales as perceived by the teacher and caregiver.
Chapter 3: Methodology

Sample

The sample for this study was drawn from the National Institute of Child Health and Development (NICHD) Study of Early Child Care and Youth Development (SECCYD). In 1991, a longitudinal study was created to research children, their parents, family environment and the relationship between the child and parent. The primary purpose of the NICHD SECCYD was to determine how various aspects of care of a child related to their health, growth, social-emotional adjustment and their cognitive and linguistic development (NICHD Early Child Care Research Network, 2005). The NICHD study is comprised of four phases, beginning at birth and ending at age fifteen. The families were monitored for development both as a family and as individuals. The participants are from an ethnically and geographically diverse selection of ten states within the United States (Charlottesville, VA; Irvine, CA; Lawrence, KS; Little Rock, AR; Madison, WI; Morganton, NC; Philadelphia, PA; Seattle, WA; and Wellesly, MA). Participates were recruited from 24 hospitals surrounding Universities where data was being collected. Data was maintained by the National Institute of Health.

Data collection began in 1991 with Phase I. This phase lasted through 1994 and included data from children ages 0 to 3. Phase II included children ages four through first grade, covering years 1995 to 1999. Phase III included children second through sixth grade and covered 2000 through 2004. Phase IV includes children from seventh grade to age fifteen and covered years 2005 through 2007. The data collected though these phases include a total of 1,364 families. These families were representative of the ten states included in the study.
Data Collection

Data for this study was drawn from children in Phase I and Phase III. Data collection included detailed measures of children in both the home and school environment. Information from Phase I was primarily completed through face-to-face interviews when the children were 1, 6, 15, 24, 36, and 54 months of age. Children were also observed in the home, laboratory, and child care setting (if attending). Phase III also included information from the classroom setting, as reported by the child’s teacher through the use of questionnaires.

Instrumentation

Strange situation: At 15-months. The Strange Situation was developed by Mary Ainsworth to observe interactions between infants and their caregiver. In the NICHD SECC, a mother and child were videotaped in an unfamiliar playroom in a controlled laboratory setting. There were a series of three-minute episodes that were designed to increase the child’s stress level in order to activate the child’s attachment system. The first two episodes included the child and mother becoming familiar with the setting and playing with the toys in the room. In the third episode, an unfamiliar adult female enters the room and sits quietly for one minute. After one minute, she engages in conversation with the mother. At the end of the second minute, the female also attempts to engage with the child. After the third minute, the mother leaves the room and returns after a three-minute separation from her child. If the child is distressed during her return, the episode is ended. Otherwise, the mother stays in the room for three minutes and then leaves again for another three-minute separation from her child. If the stranger is not able to comfort the child, then the mother returns to the room prior to the end of the three-minute separation.
The videotaped episodes were watched by a trained coder. The coder rated the child’s reaction to their mother’s return according to four child behaviors: Proximity and contact seeking; Contact maintaining Resistance; and Avoidance. The child’s attachment status was then classified into one of three major classifications: Secure (Group B), insecure-avoidant (Group A), and insecure-resistant (Group C). Children in Group B used their mother as a secure base, and upon her return looked to her for comfort if they were distressed during the separation. These children displayed a desire to communicate and interact with their mother. Children in Group A showed a tendency to avoid their mother upon her return from the three-minute separation. These children were often not distressed during the separation period and their mother’s absence. Children in Group C were distressed during the separation period and display behaviors such as contact and proximity seeking while showing anger and contact resisting of their mother upon her return. Children who showed fear of their parent and displayed simultaneous behavior patterns, freezing, stilling, and apprehension of their parent were classified as “D” for disorganized/disoriented. A second rating of A, B or C was assigned to the child if their behavior also fit into one of these categories. If this not the case, a secondary classification of “U” was applied, meaning “unclassifiable in the traditional ABC system”.

Reliability was calculated based on randomly pairing parent-child dyads. Inter-rater reliability was used based on the four ABCD classifications and a consensus code was assigned. Inter-reliability was reported at 75.7% (Kappa = .58) (NICHD Early Childcare Research Network, 2005).

**Family alliance.** (Note: There was not reliability or validity data available) Data from the Whole Family Interaction instrument was used. This study was designed to assess family
behavior by an outside observer. Families were asked to complete various activities and games over a seven-day period in which individual and parent behavior was observed as well as sibling relationships and certain aspects of the child. This study was also attuned to alliances within the family. This data consisted of any alliance between mother, father, or siblings as noted by an outside observer. This study focused on the alliance between a mother and her child. A coding system was used with a 5-point scale which consisted of: not at all, minimally, moderately, mostly, and very characteristic. The mother and father were rated on: rejection and invalidation, sensitivity and support, and withdrawal. The child, during 5th grade, was rated on: Negative affect-externalizing, negative affect-internalizing, withdrawal, and positive affect. For this study, only the ratings made by the mother was used.

**Student-teacher relationship scale (Pianta, 1992).** The student-teacher relationship, as perceived and reported by the teacher, is a 15-item Likert-type scale based on Pianta’s 1994 study on student-teacher relationships. The questions were derived from a review of literature pertaining to teacher-child interactions as well as questions from the attachment Q-set and attachment theory.

For this study, Teacher Conflict With Child, and Teacher Closeness With Child were analyzed through the use of the Student-Teacher Relationship Scale during the child’s fifth grade year. Teacher Conflict With Child was computed by summing items that measure conflict between the child and teacher. The measured scores ranged from 7 to 33, with the possible range being 7 to 35. The higher scores revealed more conflict between the teacher and student. Teacher Closeness With Child was determined by summing items that measure closeness between the child and teacher. The measured scores ranged from 16 to 40, with the possible range being 8 to 40.
The reliability of the items used to create the variables had high internal reliability (Cronbach’s alpha= .90, .84, .87 respectively). The validity of the student-teacher relationship has been correlated with behavior at ranges .40 to .67 (NICHD Early Childcare Research Network, 2005).

**Disruptive behavior disorders rating scale.** Behaviors of the study child were evaluated by the child’s teacher as well as the child’s mother during the 5th grade year of the child. The Disruptive Behavior Disorders Rating Scale (NICHD Early Childcare Research Network, 2005) is a 26-item questionnaire based on the original 36 times of the Disruptive Behaviors Disorders Rating Scale, which was used determine a mother’s perception of her child’s behavior. The questionnaire is derived from items for Attention-Deficit/Hyperactivity Disorder and Oppositional Defiant Disorder as stated in the Diagnostic and Statistical Manual of Mental Disorders. The 26-item questionnaire was scored on a 4-point rating scale comprised of 0= not at all, 1= just a little, 2= pretty much, 3= all the time. For this study, the questionnaires from the child’s mother and from the child’s teacher were selected. The two variables were combined to form one Disruptive Behavior variable.

Two variables were analyzed from the Disruptive Behavior Disorders Rating Scale; The Disruptive Behavior Disorder Total Score and Oppositional Defiant Disorder Categorical Score. The Disruptive Behavior Disorder Total Score is the sum of questions that measure disruptive behavior by the child in 5th grade. This variable consisted of three measures including hyperactive-impulsive, inattentive, and oppositional defiant behaviors. For this study, only hyperactive-impulsive and inattentive were used for the Disruptive Behavior score. The higher scores indicated more hyperactive-impulsive and inattentive and behaviors. The possible range of scores was 1 to 78. The Oppositional Defiant Disorder Categorical
score was the sum of questions 2, 6, 7, 8, 13, 15, 17, and 24. The higher the score indicated an increased level of oppositional defiant behaviors. The range of scores was 0 to 8.

The reliability for The Disruptive Behavior Disorder Total Score was .94 for the mothers of fifth-grade children. The score was .96 for teachers of fifth-grade children. The reliability for Oppositional Defiant Disorder score was .86 for mothers of fifth-grade children and .93 for teachers of fifth-grade children.

**Statistical Analysis**

Data was drawn from the NICHD archival data set. From the four phases available, data from Phase I and Phase III were used for this study. Of the 1,364 original participants in the NICHD study, 366 participates were used in this study.

Analysis of the sample data was completed using Analysis of Moment Structures (AMOS) software. AMOS is a leading statistical software package that allows researchers to conduct Structural Equation Modeling (SEM) and path analysis to show relationships between variables. In this study, path analysis was used to determine the effects of alliances within the family, teacher closeness, and teacher conflict on disruptive behavior disorder scores and oppositional defiant disorder categorical scores. The child’s attachment status at 18 months, ethnicity and Social Economic Status (SES) was controlled for as background variables. Child’s attachment status, ethnicity, and SES was also allowed to covary as the effects on attachment status, alliances within the family, teacher closeness with child, teacher conflict with child, disruptive behavior scores, and oppositional defiant disorder categorical scores were estimated. The independent variables included: child’s ethnicity, SES, and attachment status. The mediating variables were alliances within the family, disruptive behavior scores, and teacher closeness with child and teacher conflict with child. The dependent variable was
oppositional defiant disorder categorical scores. Paths were estimated between attachment status, disruptive behavior ratings, and teacher conflict and teacher closeness. Teacher Conflict With Child and Teacher Closeness With Child were allowed to covary and the effects of these variables on Disruptive Behavior Scores and Oppositional Defiant Disorder Categorical scores were estimated.

To determine whether attachment status moderated the effects of alliance within the family, paths from the independent variables to the dependent variables were individually constrained to be equal across groups. There were multiple fit indices used to determine the best and most appropriate model fit. Model fit was assessed with the comparative fit index (CFI). Tucker-Lewis index (TLI), and root mean-square error of approximation (RMSEA) that have values of .95 and above indicated good fit for the CFI and TLI, and where values of .05 or less indicated good model fit for the RMSEA.
Chapter 4: Results

Introduction

The following chapter discusses how the impact of attachment, alliances within the family, and student teacher relationships impact a child’s disruptive behavior and oppositional defiant behavior.

Structural Equation Modeling (SEM)

All variables were gathered from the NICHD study. Path analysis, a form of Structural Equation Modeling, was used to examine the relationships between variables including direct, indirect effects, and total effects. Data was analyzed using the AMOS software. Analysis involved examining the model fit statistics including: Chi-square, Comparative Fit Index (CFI). Tucker-Lewis Index (TLI), and the Root Mean Square Error of Approximation (RMSEA).

Descriptive Statistics

Participants. Participants for this study were comprised of children from the National Institute of Child Health and Human Development (NICHD) Study of Early Child Care and Youth Development (SECCYD), Phases I and III Participants were excluded from the study if they were missing data related to having an alliance within the family. After analyzing the descriptive statistics, the final sample of participants included 366 students.

Variables. Variables were examined and analyzed using SEM. The variables included: Socio-economic Status (control), Ethnicity of the child (control), Attachment Status (control), Total Alliance (independent), Teacher Closeness (dependent), Teacher Conflict (dependent), Oppositional Defiant Disorder score as rated by the child’s mother (dependent), Oppositional Defiant Disorder score as rated by the teacher (dependent), Disruptive Behavior
Score as rated by the mother (dependent), and Disruptive Behavior Score as rated by the teacher (dependent). Data was used from both Phase I and Phase III of the NICHD database. A composite variable was created to include within the alliance variable, including externalizing negative effect, internalizing negative effect, and withdrawal. A dummy variable was created to recode both Ethnicity and Attachment status. Ethnicity was coded into Caucasian as one group and all other ethnicities into a second group. Attachment status was coded into one group of: secure, insecure-avoidant, and insecure resistant. The second group included children who were classified with disorganized attachment. The means and standard deviations are summarized in table 1.

**Statistical Assumptions**

Prior to interpreting the statistical analysis, assumptions regarding moderation analysis need to be considered in order to insure validity of the results (Keith, 2006) and were examined using the SPSS software. The statistical assumptions include: linearity, homoscedacity, and normality of residuals (Keith, 2006).

The first assumption, linearity, is one of the most important assumptions as it can threaten the meaning of the parameters that are being estimated. To address the first assumption, the standardized residuals were examined through statistical analysis and a visual inspection of scatterplots. Using a scatterplot, each standardized residual was plotted against each independent variable and the unstandardized predicted value. Results indicated the standardized residuals were comprised of normally distributed errors and that the error variance was not a function of the independent variables (Keith, 2006). (See Appendix A).

The second assumption addresses the independence of errors. This assumption is a concern when a sample size is small (Keith, 2006). Due to the sample size of 891
participants, this assumption did not need to be directly tested. A sample size of 891 participants is considered to be a large sample population. Further, random selection was used in recruiting participants for the NICHD study, which aids in addressing selection threats. Participants were randomly selected from mothers who gave birth in specified hospitals during specified times.

The third assumption, homoscedacity, was analyzed by inspecting the scatterplot of the independent variable and residuals (from the first assumption). Keith recommends the regression line to remain consistent across all levels of the independent variables (Keith, 2006). Examination of the graphs indicate that homoscedacity does not appear to be a concern.

Table 1: Descriptive Statistics Summary

<table>
<thead>
<tr>
<th>Variable</th>
<th>Min</th>
<th>Max</th>
<th>Mean</th>
<th>Standard Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Income to Needs (SES)</td>
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<td>5001</td>
<td>2438.305</td>
<td>76951.617</td>
</tr>
<tr>
<td>Ethnicity</td>
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<td>1</td>
<td>.010</td>
<td>.396</td>
</tr>
<tr>
<td>Attachment Status</td>
<td>0</td>
<td>1</td>
<td>.013</td>
<td>.462</td>
</tr>
<tr>
<td>Total Alliance</td>
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<td>10.00</td>
<td>.064</td>
<td>1.933</td>
</tr>
<tr>
<td>Teacher Closeness</td>
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<td>40.00</td>
<td>.176</td>
<td>5.363</td>
</tr>
<tr>
<td>Teacher Conflict</td>
<td>7.00</td>
<td>35.00</td>
<td>11.436</td>
<td>5.743</td>
</tr>
<tr>
<td>Oppositional Disorder Rated by</td>
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<td>.636</td>
<td>1.342</td>
<td></td>
</tr>
<tr>
<td>child’s Mother</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Oppositional Disorder</td>
<td>8.00</td>
<td>.538</td>
<td>1.498</td>
<td></td>
</tr>
</tbody>
</table>
Path Models in Structural Equation Modeling

Once statistical assumptions were met, the data was analyzed through the use of path analysis. To determine whether attachment status moderates the effects of alliance within the family, paths from the independent variables to the dependent variables were individually constrained to be equal across groups. Direct and indirect effects of Attachment, Total Alliance, and Teacher Conflict and Teacher Closeness were studied through path analysis using SEM.

All Participants

The model tested the effects of Total Negative Alliances on teacher conflict, teacher closeness and Oppositional Defiant Disorder scores as reported by the child’s mother and teacher, while controlling for SES, ethnicity, and attachment status at 15 months. A moderator analysis was used, and paths were drawn from the background variables to family alliances and disruptive behavior ratings. Paths were drawn from Total Negative Alliances to Disruptive Behavior Ratings, teacher closeness, teacher conflict, and Oppositional Defiant Disorder ratings. Fit indices indicated that the model fit the data well (CFI = 1.00, TLI = .000, RMSEA = .190).
Results by Research Question

Research question #1. Is parental rejection, as measured by Negative Alliance a mediating pathway between attachment status at 18 months old and disruptive behavior rating scores and oppositional behavior, when controlling for SES and Ethnicity?

The model tested the effects of Attachment and Total Negative Alliances on Oppositional Defiant Disorder scores as reported by the child’s mother and teacher and Disruptive Behavior Scores as reported by the child’s mother and teacher while controlling for SES and ethnicity, and attachment status at 15 months. Results indicated that Attachment status at 18 months did not have a significant impact on Negative Alliances. For every standard deviation increase in Attachment, as measured by an increase in the Attachment score indicating a higher level of security, there was a non-significant decrease in Negative Alliance (β= -.017, ρ= .621). Additionally, results indicated that Negative Alliances was not a significant factor when addressing a child’s negative behavior in two out of four behavior ratings. Results indicated that Negative Alliances had a significant effect on Disruptive Behavior as rated by the child’s mother and teacher. For every standard deviation increase in Negative Alliance, there was an increase is Disruptive Behavior (β= .090, ρ= .009). Negative Alliances did not have a significant effect on ratings of the child’s oppositional behaviors. For every standard deviation increase in Negative Alliance, there was a non-significant decrease in Oppositional Defiant Disorder (β= -.039, ρ= .114). These results indicate that when a child experiences a negative alliance within the home, there is an increase in their disruptive behavior but not necessarily their Oppositional Defiant Disorder behaviors as rated by both the child’s mother and teacher.
Results indicated that Negative Alliance was not a significant mediating variable between Attachment and Disruptive Behavior ratings by both the child’s mother and teacher. Attachment status did not significantly influence Disruptive Behavior ratings by either the child’s mother or teacher. Also, attachment status was not a significant factor on the outcome of Negative Alliance.

Figure 1: Model for research question #1

**Research question #2.** Are Teacher Closeness and Teacher Conflict significant mediating pathways between attachment status at 18 months old and oppositional behavior when controlling for SES and Ethnicity? In addition, are Teacher Closeness and Teacher
Conflict significant mediating pathways between Negative Alliance and oppositional behavior when controlling for SES and Ethnicity?

The model tested the effects of Negative Alliances, Teacher Closeness, Teacher Conflict, and Disruptive Behavior Scores as reported by the child’s mother and teacher on oppositional behavior ratings while controlling for SES and ethnicity, and attachment status at 15 months. Results indicated that Attachment did not have a significant impact on Alliances within the family or on Teacher Conflict or Teacher Closeness. For every standard deviation increase in Attachment, there was a non-significant decrease in negative Alliance ($\beta=-.017$, $\rho=.621$). Attachment did not have a significant impact on Teacher Conflict or Teacher Closeness. For every standard deviation increase in Attachment, there was a non-significant increase in Teacher Conflict ($\beta=.038$, $\rho=.136$). For every standard deviation increase in Attachment, there was a non-significant decrease in Teacher Closeness ($\beta=-.013$, $\rho=.692$). Attachment did not have a significant impact on behavior ratings. For every standard deviation increase in Attachment, there was a non-significant decrease in Disruptive Behavior ($\beta=-.019$, $\rho=.568$). For every standard deviation increase in Attachment, there was a non-significant decrease in ODD behavior as rated by the child’s mother ($\beta=-.039$, $\rho=.114$).

These results indicate that a child’s attachment status did not significantly impact Family Alliance, Teacher Conflict, Teacher Closeness, Disruptive Behavior ratings or ODD ratings.

Results indicated that Negative Alliances had an effect on the ratings of the child’s oppositional behavior as well as the closeness, but not the conflict a teacher felt with the student they rated. For every standard deviation increase in Negative Alliance, there was a non-significant increase in Teacher Conflict ($\beta=.021$, $\rho=.428$). For every standard deviation increase in Negative Alliance, there was a significant decrease in Teacher Closeness ($\beta=-.017$, $\rho=.621$). For every standard deviation increase in Negative Alliance, there was a non-significant decrease in Teacher Conflict ($\beta=.038$, $\rho=.136$). For every standard deviation increase in Attachment, there was a non-significant increase in Teacher Conflict ($\beta=.038$, $\rho=.136$). For every standard deviation increase in Attachment, there was a non-significant decrease in Teacher Closeness ($\beta=-.013$, $\rho=.692$). Attachment did not have a significant impact on behavior ratings. For every standard deviation increase in Attachment, there was a non-significant decrease in Disruptive Behavior ($\beta=-.019$, $\rho=.568$). For every standard deviation increase in Attachment, there was a non-significant decrease in ODD behavior as rated by the child’s mother ($\beta=-.039$, $\rho=.114$).
Results indicated that a Negative Alliance significantly impacts the ratings a child receives for Disruptive Behavior but not ODD behavior. For every standard deviation increase in Negative Alliance, there was a significant increase Disruptive Behavior rated by the child’s mother ($\beta=.090, \rho=.009$). For every standard deviation increase in Negative Alliance, there was a non-significant increase in ODD ratings by the child’s mother ($\beta=.049, \rho=.058$).

Results indicated that Disruptive behavior had a significant impact on Teacher Closeness and Conflict. For every standard deviation increase in Disruptive Behavior, there was a significant increase in Teacher Conflict ($\beta=.609, \rho<.05$) and a significant decrease in Teacher Closeness ($\beta=-.147, \rho<.05$). Results indicated that Disruptive Behavior had a significant impact on ODD behavior. For every standard deviation increase in Disruptive Behavior there was a significant increase in ODD behavior ($\beta=.474, \rho<.05$).

Results indicated that Teacher Closeness did not have a significant impact on ODD behavior but Teacher Conflict significantly impacted ODD behavior. For every standard deviation increase in Teacher Closeness, there was a non-significant decrease in ODD behavior ($\beta=-.030, \rho=.246$). For every standard deviation increase in Teacher Conflict, there was a significant increase in ODD behavior ($\beta=.282, \rho<.05$).

The Sobel Test Statistic was used to determine significant mediation effects. Teacher Conflict was not a significant mediating path between Negative Alliance and ODD ratings (Sobel Test Statistic= .795, $\rho=.426$). Teacher Conflict was not a significant mediating path between Attachment and ODD ratings (Sobel Test Statistic= 1.464, $\rho=.143$). Teacher Conflict was found to be a significant mediating path between Disruptive Behavior and ODD ratings (Sobel Test Statistic= 7.229, $\rho<.01$). Teacher Closeness was found to be a non-
significant mediating path between Negative Alliance and ODD (Sobel Test Statistic = .941, \( \rho = .346 \)). Teacher Closeness was found to be a non-significant mediating path between Attachment and ODD ratings (Sobel Test Statistic = .368, \( \rho = .712 \)). Teacher Closeness was a non-significant mediating path between Disruptive Behavior ratings ODD ratings (Sobel Test Statistic = .974, \( \rho = .329 \)).

Figure 2: Model for research question # 2
Chapter 5: Discussion

Overall Findings

This study analyzed data from the NICHD longitudinal study to determine the effect that attachment status and negative alliances within the family had on disruptive behavior ratings and on the closeness or conflict a child feels with their teacher and the teacher’s subsequent ratings of the severity of Oppositional Defiant Disorder. The study used a single group where the direct and indirect effects on outcome variables were analyzed. SES, ethnicity of the child, and attachment status at eighteen months were used as control variables in this study.

The sample included male and female students in the fifth grade. It was hypothesized that a child who experiences a negative alliance may not feel the security they need and act out either for attention, or as a means of affect regulation. The results, however, indicated that a negative alliance in the family was not a strong predictor of a child’s disruptive behavior or Oppositional behavior in the classroom. In contrast, the closeness or conflict that a teacher feels with a student was a stronger predictor of a child’s negative behavior, such that when the teacher feels more closeness to the child, the child’s behavior is rated as less disruptive, and as conflict increases, teachers rate the child’s behavior as more disruptive. In this regard, this study echoes previous research (e.g., Hamre & Pianta, 2008) that has shown the importance of a strong connection, or a close relationship with a teachers and students as a buffering mechanism for disruptive behavior problems.
Findings by Research Question

Research question #1. Parental rejection, as measured by Alliances within the Family, was not a significant mediating pathway between attachment status at eighteen months and disruptive behavior while controlling for SES and ethnicity. While research has previously shown that a child’s attachment status can have an impact on their behavior, limited research has been conducted on how a child’s behavior is shaped when there is an alliance within the family. The results of this study indicated that the negative alliance a child experiences was not significantly impacted by their attachment status at eighteen months.

Bowlby (1969) hypothesized that an infant’s attachment behavioral system is shaped from the quality of caregiving they received. It can be hypothesized that a child who experiences a negative alliance may not have a secure attachment relationship with their caregiver. Within a family, if one child experiences rejection from the rest of the family, that child may develop an avoidant attachment; a form of insecure attachment. In extreme cases of rejection, there have been anecdotal reports of children not even receiving the basic necessities such as food, water, shelter, and love that the rest of their siblings experienced. Children with a disorganized attachment status (as might be expected with the aforementioned level of neglect and rejection) often experience higher levels of behavioral problems than children with an organized attachment status (O’Connor, Collins, & Supplee, 2012). An insecure attachment, that is, in part a function of a negative alliance within the family, may have a direct effect on disruptive behavior. Children with a disorganized attachment often experience their caregiver as a source of fear. A child who shows apprehension or fear of their caregiver in their early years may show higher externalizing behaviors and lower emotional regulation skills in later years (Bakermans-Kranenburg, Van IJzendoorn & Juffer,
2005). The mental representation of relationships that the child develops may reflect the child’s feelings of being unworthy of love and positive attention, as well as expecting others’ reactions and emotions to be negative: as the child has experienced with their caregiver. A child who displays high externalizing behaviors may be attempting to connect, even in a negative manner, with their caregiver. Engaging the caregiver through anger is an effective means of maintaining both physical and psychological proximity. According to Social Learning Theory, a child who experiences disfavouritism or is an outsider in a family alliance may begin to respond and display behaviors in accordance with the parental social reward that the child receives (Brody, et. al., 1998). Attention from a caregiver is a powerful reinforcer that shapes behavior for better or for worse. If maladaptive communication methods are successful in producing engagement and interaction (regardless of whether the interaction is negative), and interaction is the primary goal, then a reciprocal relationship of negative interactions is established and maintained. The results of this study indicated that an alliance within the family did significantly impact a child’s disruptive behavior in fifth grade but did not significantly impact the ODD ratings of the child. Several studies have indicated there is a possible genetic component to individuals with ODD (Burt, Krueger, McGue & Iacono, 2001; Martin, Levy, Pieka & Hay, 2006; Thule, et. al., 2016). Temperament is one of the mechanisms that has been linked to the development of Oppositional Defiant Disorder (Burgess et al, 2003). Children with reactive temperaments have more difficult with self-regulation and may require more external regulation from the primary caregiver. When external regulation is not forthcoming, the child’s regulatory systems develop corresponding maladaptive neural pathways that serve to perpetuate the cycle of negative behavior (Stringaris, Maugham, & Goodman, 2010). As such, future research should investigate the
potential interaction between negative alliances in the family, and temperament. It may also be that a negative alliance results in an increase in some disruptive behavior, but not behavior that rises to the level of oppositional defiant disorder, or that specific disruptive behaviors are present, but not the level of defiance associated with oppositional defiant disorder.

**Research question #2.** Teacher Closeness and Teacher Conflict was explored as a mediating pathway between attachment status and Oppositional behaviors while controlling for ethnicity and SES. It was hypothesized that a child who experiences an insecure attachment relationship with the primary caregiver, yet who forms a positive connection with their teacher may exhibit fewer oppositional behaviors compared to a child who did not form a close positive relationship with their teacher. When a child does not experience a secure attachment in the home, they are more likely to engage in hostile behaviors within the classroom (Hamre & Pianta, 2001). The results of the study indicated that neither Teacher Conflict nor Teacher Closeness was a significant mediating path between Attachment and Oppositional behavior. A student who experiences a disorganized attachment as a child may have expectations about relationships that do not match the expectations of others. For example, children with avoidant attachment strategies expect to be rejected or rebuffed; and may act in ways that signal that they do not care whether they are liked or not, or they may engage in preemptive rejection before they are rejected. Children with ambivalent attachment strategies have experienced caregiving that has been inconsistent; at times the parent responds, and at other times the parent does not, or responds in ways that are not characterized as sensitive (e.g., offering distracting techniques when the child requires comforting). As a result, these children have difficulty regulating their emotions and behavior in relationships and are easily overwhelmed. In the first years of development, a child forms
a blueprint or expectations of relationships. A child who develops a blueprint of rejection and fear based upon their experiences with the caregiver, may not form the ability to trust and connect with others. This may influence whether a child forms a positive, secure relationship with their teacher or if the child forms a negative relationship with their teacher. While teacher conflict and teacher closeness were not a mediating pathway between attachment and oppositional behavior, previous research has shown that there is a moderating path between these variables, such that positive teacher-student relationships are more important for students who exhibit disruptive behaviors that for children who do not (Hamre & Pianta, 2005).

The conflict or closeness a teacher feels with a student was also hypothesized to be a mediator between Negative Alliances and Oppositional Defiant Disorder ratings by the child’s mother and teacher. It was hypothesized that the negativity a child experiences in the home would generalize to the classroom. In this study, Teacher Closeness and Teacher Conflict were used as a mediating pathway between Negative Alliance and Oppositional behaviors while controlling for ethnicity, SES, and Attachment. The results indicated that Teacher Closeness and Teacher Conflict were a non-significant mediator between Negative Alliance and Oppositional behaviors.

The difference between Teacher Closeness and Teacher Conflict was significant. The closeness and positivity a student feels with their teacher has been found to be a stronger predictor of academic success than behavior alone (Hamre & Pianta, 2008). Children with disruptive behaviors are one of the primary challenges for teachers in the school setting (Myers, Pianta, n.d). This study indicated that teacher closeness and teacher conflict influenced the subsequent oppositional behavior ratings. A child who was deemed to have a
close relationship with their teacher was rated lower on disruptive behavior. A child who experienced conflict with their teacher was rated to have an increase in problematic behavior. It is noteworthy that a child who feels security and establishes a close positive relationship with their teacher, despite the negative alliance they experience in the home, can exhibit a decrease in oppositional behavior compared to a child who does not form the same close relationship with their teacher. The results of Teacher Conflict indicated that when a child and teacher do not have a positive relationship, the oppositional behavior the child displays is strongly impacted. A child who does not feel positively connected to their teacher may not be able to accept direction from the teacher that would improve their behavior, or, it may likewise be that the teacher may not be motivated to provide the kind of sensitive supports that the child may need to regulate and improve their behavior. A child who feels a positive connection with their teacher may be more willing to make behavioral improvements because they know positive behavior is what their teacher wants, and more importantly, they want to please the teacher. Children who expect to be rejected (avoidant), or who need to have constant interaction or proximity to the adult (ambivalent) may continue to behave in maladaptive ways because those needs outweigh the needs to engage in compliant behavior.

This study also found that children who experience a negative alliance had an increase in disruptive behaviors. When a teacher views a student as unmotivated, disruptive, or aggressive, the teacher may respond to the student in a similar manner as the child is acting or chose to spend less time with the child as their behavior is deemed undesirable. For example, the response of the teacher may indicate that the teacher feels rejection towards the student and does not want to form a positive relationship. The negativity the child experiences in the home and school environment can be a contributing factor to the display of disruptive
behavior in the classroom. When teachers have a close positive relationship with a student, the perception of the child’s negative behavior may be more forgiving, and/or interpreted as being more benign. Conversely, when teachers have a negative relationship with a student, the same disruptive or aversive behavior may be more negatively interpreted. Once a behavior is viewed more negatively, the teacher may respond to the child more negatively (e.g., harsh discipline), which in turn may result in increased negative behavior by the child in a vicious negative cycle (Patterson, 1982).

**Limitations**

There are several limitations in this study. The first limitation occurs because the data used in this study was comprised of archival data from the NICHD study. The participants in this current study were limited to the participants in used in the NICHD study. It is assumed that the NICHD study included an economically and ethnically diverse sample. However, this is an assumption as many of the states that participants of the NICHD study resided in are not an economically and ethnically diverse representation of the United States. The current study should additionally be interpreted with caution as the sample used is overwhelming Caucasian.

A second limitation occurs because there is a small portion of the population who experiences a negative alliance within the family. The NICHD-SECC consists of children and families that are in the low to moderate range of risk. The range of the disruptive behaviors present in the children in this data base may not have contained sufficient variance to be detected (measured) and explained by the variables explored in this study. A wider range of negative alliances in the data set may have allowed for the expected relationships to emerge. The limited number of cases of children who experience a negative alliance within
the family that were participants of the NICHD study may have also impacted the ability to detect significant differences. Of the 1364 families who participated in the Whole Family Alliance component of the NICHD study, 366 children were identified as having a negative relationship with their mother compared to the other children in the home.

A third limitation of this study might be related to the point in time that the data was analyzed; specifically fifth grade. By the fifth grade, a child may have well-established negative relationships in the educational setting, and there may be other mediating variables, not investigated in this study, that exert greater influence (for example, temperament).

A fourth limitation may be the dichotomous clustering of the attachment variable into Disorganized versus all others. This clustering may have served to mask important differences between secure and insecure, but organized categories of attachment as compared to insecure-disorganized attachment.

A final limitation deals with secretiveness of negative alliances in the family. Alliances are normed to be negative. If an alliance was occurring, the child and/or family may experience a desire to keep this negative aspect a secret. In the NICHD study, Alliances within the family were examined by trained individuals who observed the family. It could be speculated that when individuals or families knew they were being observed their behavior was more positive than when they were not being observed. To test a true negative alliance within the family, observations would need to be done when the family was not aware that they were being observed and given the opportunity to shape their behavior for the study. Alternately, it may be that the families involved in the study were higher functioning and simply didn’t have many negative alliances, and that the disruptive behaviors exhibited were not at a clinical, or even sub-clinical level.
Implications and Further Research

This study provided further evidence that a child’s behavior is shaped by a multitude of factors throughout their childhood including their attachment with their caregiver in their first years of development, their experience with negative alliances in the family, and their relationship with their teacher. A child who experiences an insecure attachment relationship with their primary caregiver may, through the mechanism of the internal working model, develop expectations about the nature of relationships and their role in them that are maladaptive in settings outside of the family. For example, a child who has experienced the rejection or rebuff of their needs or communications, may experience anger and other negative emotions that interfere with affect regulation and may result in the display of disruptive behavior as a means to regulate emotions and even control their environment. In some families, this behavior may result in the child being further rejected to the extent that an alliance is formed in the family against them. The pain of this rejection may further impede affect regulation and extend to settings outside the home, such as school and community; where their disruptive behavior results in more rejection from others and solidifies the negative view of self and others in a vicious cycle that is self-perpetuating. To decrease disruptive behaviors in the school environment, Positive Behavioral Interventions and Support (PBIS) and Social Emotional Learning (SEL) have been shown to be effective tools for students. PBIS uses a three-tiered framework and can provide school-side intervention, small group intervention, or individual intervention. For a student who displays behavioral problems, all three tiers can prove effective at reducing negative behavior and promoting positive behavior. Within the school-wide setting, school rules can be posted, classroom expectations can be discussed and reinforced. Reinforcement may need to be provided at a
frequent rate in order for a child to develop expectations that a reinforcement will be forthcoming. A child who displays disruptive behaviors could benefit from small group support where they are able to discuss their feelings, emotions, and develop new strategies with peers through shaping of approximate behaviors and modeling. Methods such as the Check-in/Check-out process provides a student with daily, scheduled, positive feedback. Check-in/Check-out allows a teacher to communicate expectations with a student in the morning during “check-in” and then provide follow up with the student at the end of the day or a specified time during “check-out”. This process provides an extra form of communication as well as creates a pathway for positive interaction between a student and teacher (Jolivette, Swoszowski & Ennis, 2013). A student who displays disruptive behaviors may benefit from creating interventions that provide not only a support system within the school environment but also engages the child to learn effective tools to understand their emotions, feelings, and provides education and reinforcement for accessing new strategies.

Positive teacher-student relationships have been shown to be a powerful moderator for disruptive behaviors in children. A positive teacher-student relationship can foster relationships with not only teachers, but also peers. A child who feels a positive relationship with their teacher may feel more secure, competent, and make greater academic gains. This in turn may generalize such that the child can interact more positively with peers (Hamre & Pianta, 2006). Further, positive relationships can not only foster academic and social competence but can repair areas of the brain that suffer due to maltreatment (Cook, et. al., 2018). To foster this positive connection, interventions within the classroom for the teacher and student can be implemented. A school-level approach could include education for teachers on the potential function of disruptive behaviors, typical reactions to this behavior,
and strategies to respond in ways that will help to contain and improve the child’s behavior. The climate of a school can impact the way that both teachers and students feel about spending time at school. A school where emotional and social positivity are emphasized can lead to an increase in the children’s self-confidence, teacher’s beliefs in themselves that they are effective teachers, and can in turn create an atmosphere that fosters cordiality in student-teacher relationships (Hamre & Pianta, 2006). A positive student-teacher relationship can further be fostered by educating both teachers and students about social and emotional development. Programs designed to help students identify and label their feelings, reflect on their feelings, and understand social interactions, can generate ideas and solutions to understand the function of behavior and learn alternatives (Hamre & Pianta, 2006). A student who learns to understand and accept their emotions and feelings, in combination with learning positive affect regulation strategies, may reduce behaviors that others find aversive.

Interventions such as the Establish-Maintain-Restore Approach (EMR) have been shown to be effective methods in increasing a student’s sense of belonging within the school environment and provides a method to engage teachers to have healthy interactions with students. This intervention provides teachers with a guide of rational practices to implement with students. Through professional development, teachers are provided with relationship-focused practices, such as the 5x5 method which encourages a teacher to pick five students each day and engage in dialog about a topic that is of interest to them individually. Relationship-focused practices are designed to improve their relationships with students. An increase in positive student-teacher relationships were shown to have a decrease in a student’s disruptive behaviors and an increase in academic engagement (Cook, et. al., 2018).
Results from this study indicated that a negative alliance does not have an effect on a child’s disruptive behaviors. Previous research has shown that a child’s attachment status does impact their behavior. It can be speculated that a child who experiences an alliance against them within their family may not have a secure attachment with their caregiver. A child who experiences a disorganized attachment may be more likely to act out in a negative manner. This child may also reject a teacher or behave in a disruptive manner that would push a teacher to reject them. It is important that a teacher understands the reason behind a child’s behavior. The early development and attachment a child experiences can have life-long implications for both externalizing behaviors and relationships with others. Further research is needed to examine varying levels of negative alliances within the family and how family relationships can impact the child. For example, the negative alliance may need to be at a severe level in order for the impact to be manifested at a clinical or even subclinical level. Temperamental variables may be implicated, or may interact with attachment such that only children with a reactive attachment and an insecure attachment are at risk for the negative effects of an alliance in the family. Negative family relationships can affect the child throughout their life. A child who feels a sense of security within their family is likely to maintain a positive connection with their family as they age. This family unit can be a source of support and security. However, a child who faces a negative alliance within their family at an early age loses the source of security from those around them throughout important developmental stages of childhood. This study found that a negative alliance impacted the child’s disruptive behavior. A child who was treated negatively within their family structure had an increase in disruptive behaviors. When studying families, it is important to understand that not all children within the family are treated the same. How a child is treated, whether
negatively or positively within the family structure, has implications for the child’s future relationships as well as behavior. A child who reacts to a caregiver with anger, may induce a negative response from the caregiver, which in turn can increase the disruptive behaviors of the child. These reactions can create a coercive cycle until one participant capitulates to the other in order to stop the interaction (Smith et al., 2014). If a caregiver frequently capitulates to the child’s disruptive behaviors, this may increase the child’s negative behaviors. How the child acts within the family, may transfer to how the child acts with other individuals outside of the home. These early family relationships have long-lasting implications for the child. How the child behaves within their classroom and the ability and willingness to form positive relationships with teachers and adults often stems from the early experiences of attachment, reaction, and behavior of their caregiver. While this study indicated that a negative alliance within the family did not impact a student’s closeness or conflict with their teacher, the early relationships a child forms can have a lasting impact on their ability to form relationships throughout life.
References


Doi:10.1111/cdev.12066


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APPENDIX A: STANDARDIZED RESIDUALS SCATTERPLOTS

[Scatterplot images showing correlations between variables.

1. DBD(MOM/ALTCG) vs Total DBD Score @G5

2. DBD(MOM/ALTCG) vs Opps/Inhl Disordr CatScr @G5]