

## Assessing Adequacy of Child Caring: An Urban Scale

---

NORMAN A. POLANSKY  
MARY ANN CHALMERS  
ELIZABETH BUTTENWIESER  
DAVID WILLIAMS

*This report continues the development,  
refinement and applicability of basic  
instruments for assessing neglectfulness in  
child rearing, as published in CHILD  
WELFARE and elsewhere.*

The desirability of having a comprehensive, reasonably objective and valid index of how well a child is being cared for is apparent at many levels in child welfare. A protective services worker, wondering to what extent his concern about a home is justified, would appreciate a way to compare it with others. A judge, deciding whether a child is to be removed, takes heavily into consideration a notion of how far the youngster's mode of living falls below some standard: *faute de mieux*, the standard has been necessarily implicit. The researcher in child welfare, child development, family treatment and the like repeatedly needs a scale that summarizes the quality of the child's living environment, or that permits statements

---

*Norman A. Polansky, Ph.D., is Regents' Professor of Social Work, University of Georgia, Athens. Mary Ann Chalmers, M.S.W., is a doctoral student at the University of Pennsylvania, Philadelphia. Elizabeth Buttenwieser, M.S.S., is Social Worker, The Institute, Pennsylvania Hospital, Philadelphia. David Williams, M.S.W., is a doctoral student, Department of Psychological Counseling Services, University of Georgia. The research reported in this article was supported by Grant 90-C-442 from the Office of Child Development, Department of Health, Education and Welfare, to the University of Pennsylvania School of Social Work.*

about its change. Agency executives and others charged with planning communitywide programs for children have to take their average standards of living into account.

The authors encountered the need for a level of living scale during research on child neglect. Since neglect is a relative state, to make the concept operational, one has to develop a measurement. Our first Childhood Level of Living Scale (CLL) was designed to apply to a population of preschoolers from low income families in rural southern Appalachia. The CLL has become most widely known by being appended to a small book [2] on the treatment of neglect; however, a more complete report of its rationale, construct validity, and use in studying neglect is given by Polansky, Borgman and DeSaix in *Roots of Futility* [1]. Subsequent statistical refinement offered evidence of its high internal consistency, and "robustness" [3].

A question after the Appalachian research was whether its major findings would be applicable elsewhere, so a replication of the study was undertaken in a northern city, Philadelphia. It became necessary to design a new version of the CLL, suitable for an urban setting. This paper describes the selection of content for the new scale, its validity, reliability and beginning norms. The scale itself and instructions for its scoring are appended.

### **Development of the Scale**

As in the first version, each item in the scale consists of a simple statement likely to be descriptive of a single aspect of the child's living conditions, to be rated true or false by the research social worker who knows the family. It is hoped that a scale made up of such specific judgments will be less susceptible to biases than are more global ratings. Items for possible inclusion came from several sources: our own knowledge of low income households; the original scale; mothers from the neighborhood on the board of the group work agency where our field office was located.

For reasons of the great expense involved, pilot work was telescoped into the main study. The study involved comparing 46 low income, white families identified by an agency as neglectful, with 79 controls (i.e., not known to be neglectful) recruited, for example, by placing ads in neighborhood newspapers. The first

screening of CLL items occurred after about 50 cases had been accumulated. Items were dropped for a variety of reasons. Some seemed ambiguous about what concept they were measuring. Others were inadequately observable, so the worker felt no confidence in his/her rating. A few were age-linked—an item meant something different for a 4-year-old than for a 7-year-old, and the study included children across this span of ages. Several items had meaning only if there were a man in the house, but the research included a large proportion of fatherless households. Many items proved empirically nondiscriminatory—thus, all 50 families currently had water piped into the house and, in fact, hot water; none of these urban families started its fires with kerosene. Through this process, the item pool was winnowed down from the 220 or so used at the beginning of the study. Final selections were made by factor analyses. Each item retained had to meet the criteria suggested by the screening process described here; in addition, it had to form part of a cluster of sufficient demonstrated “weight” (i.e., Eigen value) to remain in the scale. Note, however, that the usefulness of an item in differentiating control homes from neglectful homes played no role in selection either of items or of factors.

### Scoring

The scoring system for the original CLL was unsatisfactory. Since we were interested in pathology, we had arranged it so that a high score meant a “poor” home, but this is not the way most people think. The present scoring is simple and direct. Some items are regarded as assets, some as negatives concerning a home. An affirmation that a positive is true of the household yields a 1; a “no” answer, a zero. Similarly, judgment that a negative element is *not* true also yields a 1, while affirmation that a negative is true of the family is scored as zero, or “no credit.” The final scale contains 99 items, so 99 is the highest possible score. In the event that there is a scattering of items that cannot be judged because of insufficient information, a score can be converted into a proportion—the percentage of all credits received out of the total number of items rated. In that way, final scores can be made comparable across homes despite some missing information.

The final score contains two major segments. Part A—Physical Care deals with basic issues of food, clothing, shelter, safety, health care and the like. The 47 items in it are divided into five clusters. Part B—Emotional/Cognitive Care, containing 52 items under four cluster headings, has to do with providing growth experiences and emotional support. The final clusters in each half of the scale accounted for over 80% of the relevant variance in each.

The final samples contain 125 families; however, scores on 120 were available when these analyses were done. As noted, the families were all low income and white, and included a disproportionate number of families known to be neglectful. With these considerations in mind, the following preliminary standards are offered:

Severely Neglectful	0—47	to the 20th Percentile
Neglectful	48—62	to the 40th Percentile
Marginal Child Care	63—76	to the 50th Percentile
Acceptable Child Care	77—87	to the 80th Percentile
Good Child Care	80—99	to the 100th Percentile

The data fell into a bimodal distribution. From examination of the curve, families scoring 70 or above are in the higher group.

### Validity and Reliability\*

Items included have, of course, been screened to provide a series of internally consistent clusters. In addition, there are moderate to moderately high intercorrelations among all clusters in the scale. The correlation between the two Part scores, Physical Care and Cognitive/Emotional Care, was .8123; correlations of clusters with total score ranged from .6356 to .8820. So this aspect of reliability is satisfactory. Indeed, it bespeaks a sturdy scale, that is, one may condense it further by deleting items and still get comparable scores.

The sensitive type of contact involved with subjects in this research made it impossible to run an experimental test for interobserver reliability in applying the scale. We will be delighted if someone else undertakes this task. We did run analyses of

---

\*The authors are indebted to Dr. Sam Snyder and John Narcini for advice and help with the statistics.

variance among the scores of our three workers to see whether they were using the scale in such a way that there were no significant differences among them. The results showed only a scattering of significant differences, and each of these appeared related to variations in the kinds of case they had studied.

Interobserver reliability is also at stake in validating the scale against an external criterion, judgment of other professionals. The criterion used was whether or not the family had entered the study by referral as an identified neglectful home. It will be recalled that items included in the final CLL were chosen without regard for their ability to discriminate in this respect. Nevertheless, all cluster means differed between the neglect and control families by beyond .001. The point-biserial correlation between the CLL and the neglect/control variable was .7380. Incidentally, the father present/absent dimension also correlated with the scale, but to a far weaker extent. The point-biserial  $r$  was .2416 ( $P < .003$ ). Correlations are especially low for the Emotional/Cognitive Care clusters: three of four do not relate significantly to the father-presence variable at all. There are numerous correlations of other variables with the CLL supportive of its construct validity. Since these are also of substantive interest, we will report them in other papers. Meanwhile, our results are reassuring as to the reliability and validity of the CLL.

## CHILDHOOD LEVEL OF LIVING SCALE

### Items and Scoring

#### *Part A—Physical Care*

		<i>Key to Scoring</i>	
		<i>Yes</i>	<i>No</i>
I. General Positive Child Care. Eigen value 19.54, 53.2% of variance.			
1.	Mother plans at least one meal consisting of two courses.	1	
2.	Mother uses good judgment about leaving child alone in the house.	1	
3.	Mother plans for variety in foods.	1	
4.	Mother sometimes leaves child to insufficiently older sibling.		1

		<i>Key to Scoring</i>	
		<i>Yes</i>	<i>No</i>
	5. Mother plans meals with courses that go together.	1	
	6. The child receives at least 9 hours of sleep most nights.	1	
	7. Child is offered food at fixed time each day.	1	
	8. Bedtime for the child is set by the parents for about the same time each night.	1	
	9. Mother has evidenced lack of awareness of child's possible dental needs.		1
	10. Mother expresses concern about feeding child a balanced diet.	1	
	11. Mother enforces rules about going into the street.	1	
	12. Child has been taught own address.	1	
	13. Child is taught to swim or mother believes child should be taught to swim.	1	
	14. Mother will never leave child alone in the house.	1	
	15. Mother uses thermometer with child.	1	
II.	State of Repair of House. Eigen value 3.83, 10.4% of variance.		
	16. Storm sashes or equivalent are present.	1	
	17. Windows are caulked or sealed against drafts.	1	
	18. Doors are weatherproofed.	1	
	19. House is dilapidated.		1
	20. There are window screens in good repair in most windows.	1	
	21. Wood floors are cracked and splintered.		1
	22. There are screen doors properly mounted.	1	
	23. There is an operating electric sweeper.	1	
	24. Floor covering presents tripping hazard.		1
	25. Living room doubles as a bedroom.		1
III.	Negligence (Reciprocal Meaning). Eigen value 3.36, 9.2 of variance.		
	26. There are food scraps on the floor and furniture.		1
	27. Child 5 years or older sleeps in room with parents.		1
	28. At least one of the children sleeps in the same bed as parents.		1
	29. Mother plans special meals for special occasions.	1	

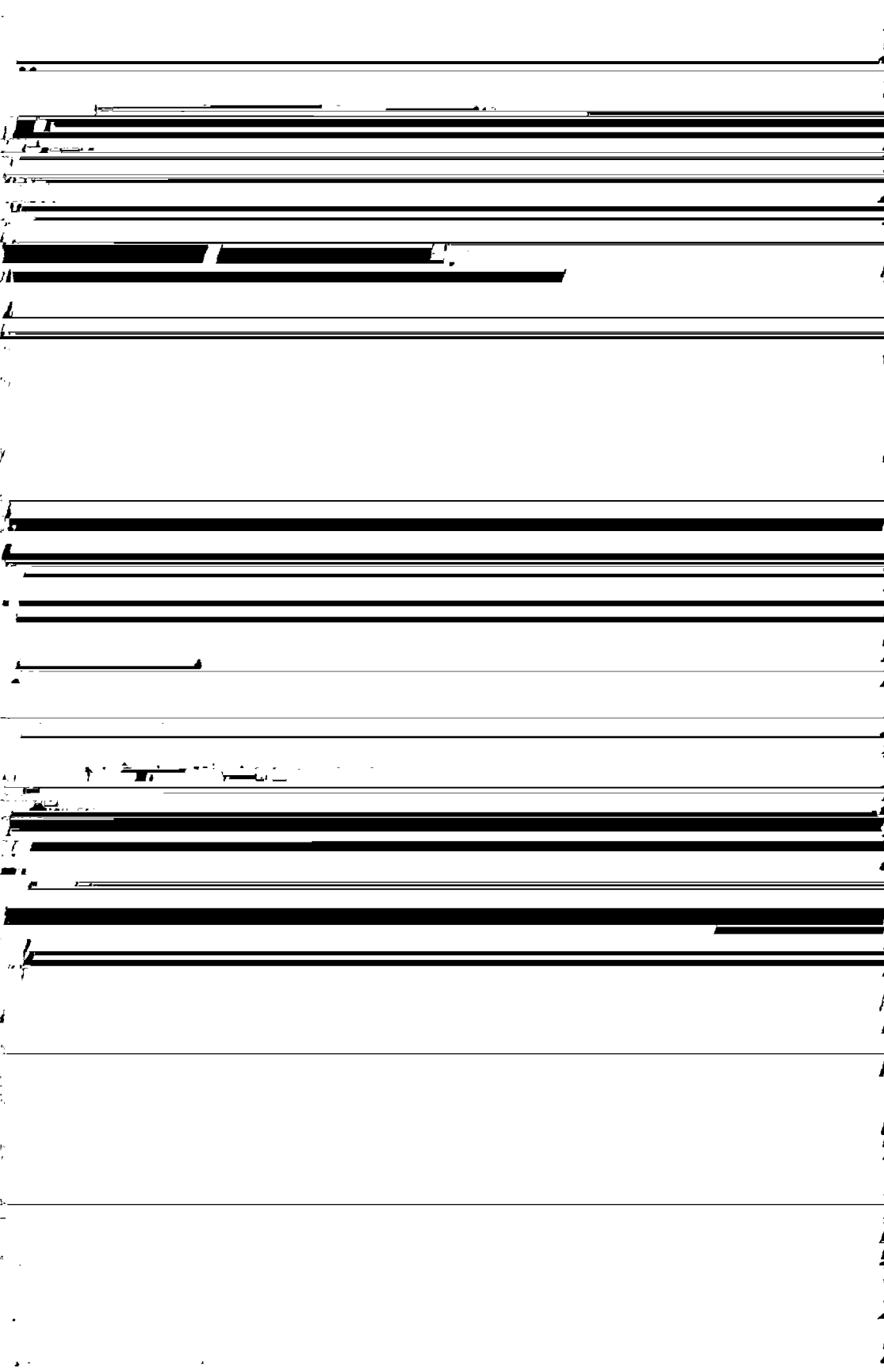
		<i>Key to Scoring</i>	
		<i>Yes</i>	<i>No</i>
	30. Windows have been cracked or broken over a month without repair.		1
	31. Clothing usually appears to be hand-me-downs.		1
	32. Buttons and snaps of child's clothing are frequently missing and not replaced.		1
IV.	Quality of Household Maintenance. Eigen value 2.81, 7.7% of variance.		
	33. There are dirty dishes and utensils in rooms other than the kitchen.		1
	34. There are leaky faucets.		1
	35. The roof (or ceiling) leaks.		1
	36. The floors of the house appear to be swept each day.	1	
	37. Bathroom seems to be cleaned regularly.	1	
	38. Mother takes precautions in the storage of medicine.	1	
	39. Mattresses are in obviously poor condition.		1
	40. Repairs one usually makes oneself are left undone.		1
V.	Quality of Health Care and Grooming. Eigen value 2.02, 5.5% of variance.		
	41. Mother has encouraged child to wash hands before meals.	1	
	42. Ears are usually clean.	1	
	43. Mother mentions she makes effort to get child to eat foods not preferred because they are important to child's nutrition.	1	
	44. Poisonous or dangerous sprays and cleaning fluids are stored out of child's reach.	1	
	45. Mother has encouraged child to wash hands after using toilet.	1	
	46. Mother cautions child to be careful of flaking paint.	1	
	47. It is obvious that mother has given attention to child's grooming at home.	1	

**Part B—Emotional/Cognitive Care**

VI. Encouraging Competence. Eigen value 17.94, 49.4% of variance (of Part B).

	<i>Key to Scoring</i>	
	<i>Yes</i>	<i>No</i>
48. Planned overnight vacation trip has been taken by family.	1	
49. Child has been taken by parents to see some well known historical or cultural building.	1	
50. Child has been taken by parents to see a spectator sport.	1	
51. Mother mentions that in the last year she has: taught the child something about nature; told the child a story; read a story to the child.	1	
52. Family has taken child downtown.	1	
53. Child has been taken by parents to see various animals.	1	
54. Child has been taken by parents to a carnival.	1	
55. Mother is tuned into child's indirect emotional signals.	1	
56. Mother mentions that she has played games with the child.	1	
57. Mother mentions use of TV to teach child.	1	
58. Child has been taken by parents to a parade.	1	
59. A prayer is said before some meals.	1	
60. Mother comforts the child when he is upset.	1	
61. There are magazines available.	1	
62. The family owns a camera.	1	
63. The child says prayers at bedtime.	1	
64. Child has been taken to children's movie.	1	
65. Mother mentions that she answers child's questions about how things work.	1	
66. Child has been taken by parents to the firehouse.	1	
67. Child has been taken fishing.	1	
VII. Inconsistency of Discipline and Coldness (Reciprocal Meaning). Eigen value 7.36, 20.3% of variance.		
68. Mother seems not to follow through on rewards.		1
69. Mother mentions that she cannot get child to mind.		1
70. Child is often ignored when he tries to tell mother something.		1
71. The child is often pushed aside when he shows need for love.		1
72. Mother seems not to follow through on threatened punishments.		1

		<i>Key to Scoring</i>	
		<i>Yes</i>	<i>No</i>
	73. Spanking is sometimes with an object.		1
	74. Mother threatens punishment by imagined or real fright object.		1
	75. Very frequently no action is taken when discipline is indicated.		1
	76. Mother frequently screams at child.		1
	77. Mother is made uncomfortable by child's demonstration of affection.		1
	78. Mother complains a lot about life.		1
	79. Mother mandates child's play according to sex (i.e. girls may play only with dolls).		1
	80. Child is never allowed to make a mess.		1
	81. Dolls are available to the child for play.	1	
<b>VIII. Encouraging Superego Development. Eigen value 2.62, 7.2% of variance.</b>			
	82. Mother expresses to the child her concern for child's safety if there is a real danger.	1	
	83. There is a designated area for play.	1	
	84. Parents guard language in front of children.	1	
	85. Child is immediately spanked for running into the street.	1	
	86. Mother mentions child asks questions showing curiosity about how things work.	1	
	87. Child is taught to be respectful of adults.	1	
	88. Mother puts child to bed.	1	
	89. Mother mentions that she limits child's TV watching.	1	
	90. Child is encouraged to care for own toys.	1	
	91. Child is taught to respect property of others.	1	
	92. Mother expresses pride in daughter's femininity or son's masculinity.	1	
	93. Mother is able to show physical affection to child comfortably.	1	
	94. There are books for adults in the house.	1	
	95. An effort is made to provide choices for the child.	1	
<b>IX. Material Giving. Eigen value 2.24, 6.2% of variance.</b>			
	96. Crayons are made available to the child.	1	
	97. A play shovel is available to the child.	1	
	98. Child is sometimes rewarded for good behavior with a treat.	1	
	99. The child has a book of his own.	1	



2. Polansky, N.A.; DeSaix, C. and Sharlin, S.A. Child Neglect: Understanding and Reaching the Parent. New York: Child Welfare League of America, 1972.
3. Polansky, N.A., and Pollane, L. "Measuring Adequacy of Child Caring: Further Developments." Child Welfare, LIV, 5 (May 1975).

---

*(Address requests for a reprint to Dr. Norman A. Polansky, School of Social Work, University of Georgia, Athens, GA 30602.)*

# PRIMARY PREVENTION

in Children's Mental Health

1978 SYMPOSIUM

**September 21 - 22, 1978**

Holiday Inn, Downtown Toronto

*SPONSORED by*

**THISTLETOWN REGIONAL CENTRE**

and

The Canadian Mental Health Association

GUEST SPEAKERS

**GERALD CAPLAN, M.D.**

**GEORGE W. ALBEE, PH. D.**

**ANDREW L. SELIG, PH. D.**

**NAOMI RAE-GRANT, M.D.**



For more information write to  
PRIMARY PREVENTION 1978  
Thistle town Regional Centre  
51 Panorama Court, Rexdale  
Toronto, Ontario. M9V 4L8

Copyright of *Child Welfare* is the property of Child Welfare League of America and its content may not be copied or emailed to multiple sites or posted to a listserv without the copyright holder's express written permission. However, users may print, download, or email articles for individual use.