

Agreement between parents and adolescents on emotional and behavioral problems

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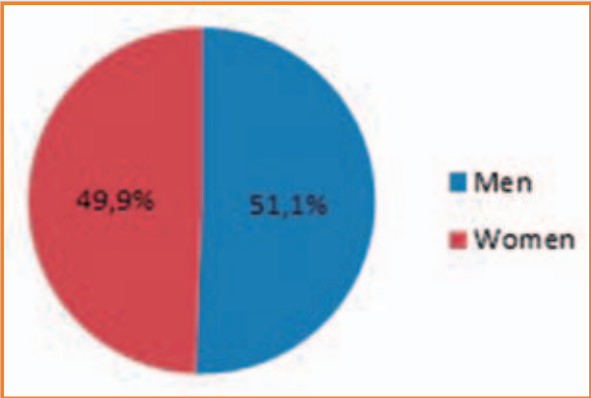
Aims

Adolescence is a critical developmental period for emotional and behavioral problems¹. The Youth Self-Report (YSR) and the Child Behavior Checklist (CBCL) are valid and reliable measures of emotional and behavioral problems experienced by youth². However, prior studies indicate only low to moderate agreement between these assessments. The main aim of this study is to assess differences between 45 parent-reported and 45 adolescent-reported Child Behavioral Checklist/Youth Self-Report (CBCL/YSR) scores.

Method

A retrospective study with 45 adolescents (11-18 years old; M= 13.78, SD=1.86; 51.1% men) and their respective parents whose first psychology appointment at CSMIJ Ciutat Vella occurred between January and December 2015. They had to complete CBCL and YSR. The CBCL Parent Report Form was designed to assess emotional and behavioral problems of sons and daughters with ages ranging from 4 to 18 while YSR was designed to measure self-reported ratings of emotional and behavioral problems to be used for ages 11 and up. We calculated Intraclass Coefficient Correlation Absolut Agreement (ICCa) in order to assess the difference in scores of YSR/CBCL problem frequency. In order to obtain a measure of agreement without considering systematic differences we also calculated the Intraclass Coefficient Correlation Consistency (ICCc). CBCL/YSR correlations were conducted across various scales: syndrome, total, internalizing, and externalizing.

Adolescents gender (N=45)



Results

In examining the difference in scores of YSR/CBCL syndrome scales, findings identified a low to high ICCa. Lower ICCa was found in the Withdrawn/Depressed syndrome scale whereas cases of higher ICCa were found in attention and social problem syndrome scales. The rest of syndrome scales obtained a moderate ICCa. Total, internalizing and externalizing scales obtained a moderate ICCa. ICCc values are similar to that obtained with ICCa. However, it must be underscored that the increase of 0.10 of ICCc in Withdrawn/Depressed syndrome scale made it so that a low ICCa changed into a moderate ICCc.

Table 1. Differences between means of the CBCL and YSR scores

	CBCL		YSR		Differences between means	
	Mean	SD	Mean	SD	t	p
Anxious/Depressed	64.96	10.32	61.71	9.65	0.48	0.01
Withdrawn/Depressed	63.24	9.27	56.18	7.06	0.37	0.01
Somatic Complaints	63.16	11.91	59.20	8.00	0.70	0.00
Social Problems	59.84	9.65	57.00	8.67	0.78	0.00
Thought Problems	60.87	8.81	57.00	9.38	-0.29	0.05
Attention Problems	63.69	11.19	91.98	10.74	0.75	0.00
Rule Breaking Behavior	61.73	7.71	59.00	8.98	0.62	0.00
Aggressive Behavior	61.62	9.86	60.02	9.32	0.64	0.00
Internalizing problems	66.02	9.30	59.73	9.55	0.61	0.00
Externalizing problems	61.47	10.11	58.71	11.00	0.71	0.00
Total Problems	65.40	8.92	60.76	9.41	0.70	0.00

Table 2. Agreement between parents and adolescents on CBCL/YSR scales

	Intraclass Correlation Coefficient	
	Absolut Agreement ICCa (IC 95%)	Consistency ICCc (IC 95%)
Anxious/Depressed	0.46 (0.21 to 0.66)	0.48 (0.22 to 0.68)
Withdrawn/Depressed	0.26 (-0.03 to 0.52)	0.36 (0.07 to 0.59)
Somatic Complaints	0.61 (0.35 to 0.77)	0.65 (0.44 to 0.79)
Social Problems	0.74 (0.54 to 0.86)	0.78 (0.63 to 0.87)
Thought Problems	0.49 (0.22 to 0.69)	0.53 (0.28 to 0.71)
Attention Problems	0.74 (0.58 to 0.85)	0.74 (0.58 to 0.85)
Rule Breaking Behavior	0.59 (0.35 to 0.75)	0.61 (0.39 to 0.77)
Aggressive Behavior	0.64 (0.42 to 0.78)	0.64 (0.42 to 0.78)
Internalizing problems	0.50 (0.11 to 0.73)	0.61 (0.39 to 0.77)
Externalizing problems	0.69 (0.49 to 0.82)	0.70 (0.52 to 0.83)
Total Problems	0.63 (0.28 to 0.80)	0.70 (0.52 to 0.82)

Conclusions

Our study revealed a low to high ICCa between parents and adolescents. Greater parent–adolescent agreement was found in attention and social problem syndromes and lower parent–adolescent agreement was found in withdrawn/depressed syndrome scales. Information from both parents and adolescents is needed to obtain a comprehensive assessment of emotional and behavioral problems among adolescents.

Bibliography

¹Robinson, M., Kendall, G.E., Jacoby, P., Hands, B., Beilin, L.J., Silburn, S.R., Zubrick, S.R. & Oddy, W.H. (2011). Lifestyle and Demographic Correlates of Poor Mental Health in Early Adolescence. Journal of Paediatrics and Child Health, 47: 54–61.
²Achenbach, T. M., & Rescorla, L.A. (2001). Manual for the ASEBA school-age: Forms and Profiles. Burlington, VT: University of Vermont, Research Center for Children, Youth and Families.