IDEAS FOR TAPE CODING

- * Quantified scores (how many times vs. yes/no) should be a function of the total amount of time in a particular category.
- I. Index Child
 - A. How many positive/negative things mentioned about child could be combined into some overall affect-t-ward-child score
 - B. Diagnosis mentioned/not mentioned
 - C. Ratio of amount of time describing child: amount of time describing problem
- II. Effects of Child on Individual Respondent
 - A. Effect on daily life
 - 1. Change/no change
 - a. positive/negative change
 - b. change function of child/change function of problem
 - B. Effect on work
 - 1. Change/no change
 - a. positive/negative change
 - b. change function of child/function of problem
 - C. Effect on relationship with friends, neighbors
 - 1. Change/no change
 - a. positive/negative
 - b. change function of child/function of problem
 - 2. Support/no support from friends (rating scale?)
 - D. Effect on relationship with spouse
 - 1. Change/no change
 - a. positive/negative
 - b. function of child/function of problem
 - E. Effect on relationship with other children
 - 1. Change/no change
 - a. positive/negative
 - b. function of child/function of problem
 - F. Effect on mood
 - 1. Positive/negative/no effect
 - G. Financial stress: yes/no
 - H. Amount of time for self: less/more/same
 - I. Initial feelings
 - .a. disbelief, denial
 - b. anger
 - c. grief, mourning
 - d. spouse supportive/not supportive (rating scale?)

XBXBXBBBBB

- e. change over time
 - yes/no
 - 2. improve/worsen
- J. Quality of support available
 - a. initially (rating scale)
 - b. now (rating scale)
- K. Changed as person
 - a. yes/no
 - b. ways:
 - 1. tolerant, patient
 - 2. self-confident
 - 3. understanding of handicapped
 - 4. other (specify)

- L. Family similar/different than other families
 - 1. Similar/different
 - 2. Differences: good/bad
- M. How treat child
 - 1. compared to other children: same/different
 - 2. Changed parenting as result of child's problem: yes/no
- N. Effect on physical health
 - 1. yes/no
 - a. better/worse
- 0. "C"'s needs more than you can meet: yes/no
- III. Respondent's Perception of "C"'s Effect on Other Family Members
 - A. Sibling reaction/relationship
 - 1. positive/negative (rating?)
 - B. Sibling problems
 - 1. behavior 0 frequency
 - 2. school 0 frequency
 - 3. psychosomatic 0 frequency
 - 4. psychological (mood, personality, phobias) 0 frequency
 - C. Spouse reaction/relation
 - positive/negative (rating)
 - 2. caretaking/no caretaking
 - 3. special time/no special time
 - 4. special treatment/no special treatment
 - 5. primary caretaker: mother/father/both
 - D. Other relatives/friends reaction
 - 1. positive/negative (rating) attitude to child
 - 2. supportive/nonsupportive (morally, tangibly, financially) (rating)
 - 3. Regular/irregular contact with child
 - 1. # times contact: weekly, montly, yearly or less
- IV. Coping Resources and Responses
 - A. Sources of stress number who mention
 - 1. Diagnosis
 - 2. Attitude of spouse
 - 3. Attitude of other family members
 - 4. Attitude of strangers (society)
 - 5. "C"'s future
 - 6. Effect on other children/family
 - 7. Inability to protect child from ridicule
 - 8. Child's physical appearance/limitations
 - 8. Child's mental limitations
 - 10. Changing parental ** expectations
 - 11. Other (specify)
 - B. Coping strategies number who mention
 - 1. Positive thinking
 - 2. Cognitive avoidance
 - 3. Day-by-day
 - 4. Acceptance/ letting go of expectations
 - 5. Faith
 - 6. Information-seeking; becoming expert
 - 7. Social/political/educational involvement
 - 8. Communication with spouse
 - 9. Communication with others; asking for help

- 10. Talking to parents with similar problems
- 11. Exercise, physical activity
- 12. Other (specify)
- C. Most difficult thing about child
 - 1. child's future
 - 2. ambiguity of prognosis
 - 3. child's health problems
 - 4. secondary behavior problems
 - 5. relationship with child
 - 6. other (specify)
- D. Coping with most difficult thing
 - 1. See list in B
- E. Most important source of support
 - 1. faith
 - 2. Spouse
 - 3. Self
 - 4. Family/friends
 - 5. Professional personnel
 - 6. Child
 - 7. Combination
 - 8. Other (specify)
- F. Perceived severity of stress of child
 - 1. Worst/best thing happened (rating scale)
- G. Developmentally delayed child: Unique coping skills yes/no
 - 1. Skills mentioned

(list; also look at skills mentioned to be good parent of child)

- H. Advice to other families
 - 1. oppnness
 - 2. Information-seeking
 - 3. One day-at-time
 - 4. Other parents
 - 5. Other X (specify)
- V. Meaning/Significance
 - A. Meaning/purpose: yes/no
 - BW. Improvement in societal attitudes: yes/no
 - C. "C"'s future
 - 1. normal
 - 2. independent living arrange/ some work skills
 - 3. married
 - 4. at home
 - 5. institutionalized
 - 6. other (specify)
- VI. Communication about "C"
 - A. Frequency (rating)
 - B. Initiates: mother/father/both
 - C. What discussed (list of topics; frequency)
 - D. Agree with spouse: yes/no
 - 1. severity of problem
 - 2. treatment/intervention
 - 3. other (specify)
 - E. Openness with spouse (rating)

INTERVIEW RATING SHEET

As compared to other subjects you have interviewed, how well do you think this respondent is coping with his/her child's situation?

l 2 Not Coping Very Well

3 4 Coping Moderately Well 5 Coping Very Well

6 Don't know

In your best judgment, to what extent has the index child's condition interrupted normal family function?

l 2 Not At All 3 A Moderate Amount A Great Deal

Don't know

As compared to other subjects you have interviewed, how much stress do you think this respondent is experiencing currently?

l Almost No Stress

3 A Moderate Amount 4 5 A Great Deal

Don't know

In your opinion, what is this respondent's greatest strength in coping with the index child's condition?

In your opinion, what is this respondent's greatest difficulty or problem in coping with the index child's condition?

How open is R in expressing his/her feelings?

2

Not At All Open

3 Moderately Open 4

4

Very Open

How nervous or anxious did R appear to be?

l 2 Not At All Nervous

3 Moderately Nervous

Very Nervous

Please list, in order of their sources of support for R.	importance, the three most	significant
1.		
3.		
Please rate the overall qualit	y of support which R receiv	res.
1 2 Very Little, Inadequate Quality	3 About Average	4 5 Unusually Strong, Supportive
Please evaluate R's marital re	lationship.	
1 2 Very Poor	3 4 About Average	5 6 Unusually Positive NA
What kind of relationship does	R appear to have with the	index child?
l 2 Very Poor	3 About Average	5 Unusually Positive

INTERVIEW SUMMARY SHEET

Important demographic family characteristics:

What kind of relationship does the respondent appear to have with the index child? (close/distant, conflicted, affectionate, any special features)

What has been the effect of the index child's problems on R (daily life, work/school, social relationships, relationships with other children)? Any ways R changed as a result of index child's problems?; any mood, physical problems?

What is R's relationship with spouse like? (close/distant, conflicted, supportive, any special features)

Did R appear to go through a mourning process? (If so, was it a smooth progression, any blockages; were there stages of mourning in evidence?) How have R's initial feelings changed over time?

What are the sources and the nature of support R receives?

What has been the reaction of others to index child? (Family/friends, strangers, any particularly supportive, unsupportive instances); i.e., what is the nature of the family's contact with the outside world?

What are R's coping strategies (cogniting the situation in general; and for dealing the situation in general; and for dealing the situation in general;	ve, behavioral, affective) for dealing wit ng with specific stressors?	:h
	÷	
Does R see any meaning, significance, or	r purpose in R's handicap? If so, what?	
What are R's hopes or fears about the f	uture?	
Say something about the quality of commented feelings; nonverbal interaction; openne	unication in this family (expression of ss)	
. 19.		
Interesting Remarks or Comments of Note	<u>:</u>	
Tape footage number:	Quotation	

TAPE CODING

Resp	oondent #:		
1.	Daily Life:	19.	
2.	Work:		communication within the family?
3.	Friends, neighbors:		1 2 3 4 5 6 7
4.	Spouse:	20.	Sources of stress (list): 1.
5.	Children:		2. 3.
6.	Emotional changes:		4. 5.
7.	Physical Health:	21.	Coping strategies (list)
8.	Financial stress:		1. 2.
9.	Changed as person:		3. 4.
10.	Family similar/different:		5.
11.	Needs more than can handle:	22.	(1200).
12.	Relative contact with child:		1. 2.
13.	Meaning:		3.
14.	Societal attitudes:	23.	(2250).
15.	How well is respondent coping?		1. 2.
	1 2 3 4 5 6 7	0.4	3.
16.	To what extent has family developed new skills?	24.	1.
	1 2 3 4 5 6 7		2. 3.
17.	Rate overall quality of emotional support:	25.	R's unique skills/personal qualities (list):
	1 2 3 4 5 6 7		1. 2. 3.
18.	To what extent does R communicate openly with others about child?		4. 5.

5

1 2 3 4