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## Exploring the Relationship Between Moral and Friendship Development in Male Educable Mentally Retarded Students and Regular Class Students

Shirley Phillips Gill

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EXPLORING THE RELATIONSHIP BETWEEN MORAL AND  
FRIENDSHIP DEVELOPMENT IN MALE EDUCABLE  
MENTALLY RETARDED STUDENTS AND  
REGULAR CLASS STUDENTS

An Abstract

Submitted

In Partial Fulfillment

of the Requirements for the Degree  
Specialist in Education

by

Shirley Phillips Gill

July 1980

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## ABSTRACT

The purposes of this study were 1) to compare the Moral and Friendship Development of regular class male students with that of age matched EMR male students, and 2) to compare the relationship between Moral and Friendship Development within each group.

The 30 male subjects, 15 from regular classes and 15 from EMR classes, were equally divided into three chronological age groups; 5-6, 7-8, and 9-10. The regular class subjects were attending the UNI lab school; EMR subjects were attending public schools in Fredricksburg, Charles City, Cedar Falls and Waterloo, Iowa.

Each subject was presented with three filmstrips and three subsequent standardized interviews. Two of the filmstrips and interviews were to elicit the subject's moral reasoning. One filmstrip and its subsequent interview was to elicit the subject's ideas about friendship. For regular class subjects the interviews took place in two sessions with approximately one week intervening between them. For EMR subjects both interviews took place in one session.

The children's interviews were tape-recorded and later transcribed for scoring purposes. The children's explanations of their moral judgments were scored according to Porter and Taylor's manual (1972), which is based on Kohlberg's stages of Moral Development (MMS scores). Chil-

dren's thinking and conceptions of friendship were scored according to Selman's (Note 3) Assessing Interpersonal Understanding: An Interview and Scoring Manual and converted to Average Issue Scores (AIS).

Findings of this study showed EMR subjects to lag behind regular class subjects in both Moral and Friendship Development. For regular class subjects, Moral and Friendship Development were shown to be highly correlated with CA and thus showed the stage-by-age developmental patterns as discussed by Kohlberg (1969) and Selman (Note 2). Moral and Friendship Development were also significantly correlated, which supports Selman's hypothesis of commensurate development and a common structure underlying the social developmental models.

For EMR subjects, only CA and Moral Development were significantly correlated. Thus, it appears that EMR subjects' moral maturity may develop in a like, stage-by-age developmental pattern, although slower, than regular class subjects. The lack of a significant relationship between CA and AIS scores can suggest that the EMR subjects do not develop according to Selman's conceptual stages of Friendship Development. In conjunction with the frequency distributions, this lack of significant correlation could also suggest that the instruments employed may not be differentiating between the EMR subjects in their Friendship Development. The frequency distribution of the MMS scores for EMR subjects suggests that the instruments used in the assessment of Moral Development also may not be differentiating between EMR

subjects. Another possibility is that the significant correlation between CA and MMS scores and not between CA and AIS scores suggests a difference in the social experiences and development of EMR subjects.

Caution in the interpretation of these findings is suggested as there were several sources of variation not completely controlled in this study, i.e. familiarity of the subjects with the experimental stimuli, the difficulty in the downward extension of interview probes from older to a younger level, the SES of the subjects, and the extent of prior socialization.

EXPLORING THE RELATIONSHIP BETWEEN MORAL AND  
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REGULAR CLASS STUDENTS

A Thesis  
Submitted  
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by  
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This Study by: Shirley Phillips Gill

Entitled: EXPLORING THE RELATIONSHIP BETWEEN MORAL AND FRIENDSHIP  
DEVELOPMENT IN MALE EDUCABLE MENTALLY RETARDED STUDENTS AND  
REGULAR CLASS STUDENTS

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## CHAPTER I

### THE PROBLEM

#### Introduction

Due to the controversy regarding the placement of children into special classes solely on the basis of I.Q. tests, many states, as a liability measure, now require the inclusion of an adaptive behavior measure in the psycho-educational evaluation (Huberty, 1980). Adaptive behavior is also included in the current definition for mental retardation, as defined by Grossman (1977):

Mental retardation refers to significantly sub-average general intellectual functioning existing concurrently with deficits in adaptive behavior, and manifested during the developmental period... Adaptive behavior is defined as the effectiveness or degree with which the individual meets the standards of personal independence and social responsibilities expected of his age and cultural group (p. 11).

Grossman (1977) states that these expectations of a child's adaptive behavior vary with age groups and that particular deficits will vary at different ages.

#### Adaptive Behavior

Potential deficiencies in the adaptive behavior of an infant or young child are denoted by a delay in the acquisition of developmental skills such as sensory-motor, communication, self-help, and socialization skills. To evaluate the adaptive behavior during childhood and early adolescence,

one should consider basic academic skills and their use, but also skills necessary to cope with the environment, including concepts of time and money, self-directed behaviors, social responsiveness, and interactive skills (Grossman, 1977, p. 13).

The evaluation and criterion for adaptive behavior is less objective and more difficult than for the intellectual aspects of the definition. Grossman states that most of the recommended scales for use with the retarded (AAMD Adaptive Behavior Scales, Vineland) have major limitations.

They were developed primarily on institutional populations and do not adequately embrace the broad range of behaviors characteristic of mildly retarded children and adults living in the community (p. 21).

The Manual on Terminology and Classification in Mental Retardation (Grossman, 1977) recommends that the examiner make use of a "combination of pertinent test data, clinical observation, and utilization of all available sources of information regarding the person's everyday behavior" (p. 21).

This author feels there are two major difficulties facing practitioners required to implement the AAMD guidelines. The first is that the definition of adaptive behavior is inconsistent between age groups, i.e. it is developmentally based for the younger child and academic skills based for older children and adolescents. The second difficulty is that tests referred to in the manual for the measurement of adaptive behavior were normed on institutionalized populations rather than on children attending EMR classes in public schools. Therefore, it seems wise to continue the research efforts aimed at determining the developmental stages or

sequences underlying progress in adaptive behavior and to broaden the conceptualization of adaptive behavior to include Moral Development, Friendship Development, Social Perspective Taking, and other similar ideas being actively researched in the human socialization process.

### Interpersonal Behavior of the Mentally Retarded

Researchers and educators bring to light the need for a better understanding of the mentally retarded child's interpersonal development. In a review of the literature, Affleck (1977) cites studies that illustrate:

the significance of appropriate interpersonal behavior for an overall educational, vocational, and social adjustment of the mentally retarded student, worker, and citizen (p. 85).

With evidence showing a significant relationship between mental and social age (such as Capabianco and Cole, 1960; Goulet and Barclay, 1963) there has been a tendency to attribute all of the atypical behavior or difference in social functioning of the retarded to their cognitive deficiency or mental age. Kleck (1975) criticizes stopping at this point and advocates a de-emphasis on general intelligence (I.Q.) "as a central marker in consideration of the social adequacy of retarded persons" (p. 182). He suggests the use of theories of cognitive development and social interaction to guide the evaluation and further research.

Robinson and Robinson (1965) refer to a plenitude of literature pertaining to the adjustment of the retarded that report characteristics associated with poor social adjustment, such as jealousy, overdependency, resistance and fail-

ure to follow orders; and a paucity of literature examining the processes through which such characteristics are developed in the maturing retarded child.

#### A Cognitive-Developmental Approach

Most research using the developmental approach in the study of the mentally retarded has been in the cognitive domain. In general the cognitive-developmental approach is more global and stresses a universal, invariant sequence of developmental stages that consist of qualitatively distinct thought patterns and processes that underlie the child's behavior. The child's expected behavioral change is predictable in terms of knowledge of his prior location in the stage sequence and of the intervening experiences stimulating or retarding movement to the next stage (Kohlberg, 1969).

In a paper presented to the annual convention of the APA in September of 1976, Selman (Note 1) discusses the need to study social behaviors or processes in relation to level as opposed to overly broad and general stages of developmental systems, such as Piaget's stages or Kohlberg's moral stages. In research Selman makes use of Redl's "geographic map analogy" for charting an individual's interpersonal development across the issues of domains of interpersonal development. In recent years there has been an elaboration of a number of related and sometimes overlapping developmental descriptive analysis of reasoning about a range of social and moral aspects of human relations. Selman states, "as Redl suggested, we are beginning to find in the real world neither

the absolute structured wholeness of thinking across all of reality, nor the other extreme of associationist situation specificity of reasoning level" (p. 2).

### Importance of the Study

Even though researchers and educators have stated a need for a better understanding of the interpersonal development of EMR children, there is a limited number of studies that have investigated an application of a developmental approach. Research has shown aspects of interpersonal behavior to be developmental. This author feels that use of the "cognitive-developmental" approach could be expanded and would best suit further exploration of the educable mentally retarded (EMR) child's social adaptive behavior and interpersonal development. A finer analysis of the developing processes in relation to stages across domains of development may also enhance educational planning for the EMR child.

### Statement of the Problem

The purpose of the present research was: 1) to explore the relationship between Friendship Development as stated by Selman and Moral Development as stated by Kohlberg, and 2) to compare the Friendship and Moral Development of the MDE child with that of the "normal" child.

### Hypothesis

1. There will be a positive correlation between Friendship Development and Moral Development with the normal population.



2. There will be a positive correlation between Friendship Development and Moral Development within the EMR population.

3. There will be a positive correlation between CA and Moral Development within the normal population.

4. There will be a positive correlation between CA and Moral Development within the EMR population.

5. There will be a positive correlation between CA and Friendship Development within the normal population.

6. There will be a positive correlation between CA and Friendship Development within the EMR population.

7. The EMR's Moral Development will lag behind that of the normal population.

8. The EMR's Friendship Development will lag behind that of the normal population.

#### Limitations of the Study

There are three areas of general concern regarding limitations of this study. One limiting factor is that the characters depicted in two out of the three filmstrips used to determine the level of Friendship and Moral Development were mainly female. This may have hampered identification with the story and ownership of the problem.

The size of the sample and lack of controlled variables are also limiting factors. The 30 subjects came from differing SES, size of community and size of family. Retarded children could be considered of both the cultural-familial and organically impaired types.

Also limiting was the interviewer's adherence to the standardized questionnaire in conjunction with the EMR child's low level of language and/or fluency. Further probing may have more clearly defined the child's developmental level.

### Definition of Terms

Cognitive-Developmental Approach. This label refers to a set of assumptions and research strategies common to a variety of specific theories of social and cognitive development. (see Kohlberg, 1969)

Cultural-Familially Retarded. This label refers to retarded children whose records show no evidence of organic impairment and whose retardation is assumed to be of cultural-familial origin.

Developmental Lag. Zigler (1969) distinguishes a "developmental" definition for cultural-familially retarded from a "difference" or "defect" view. This term refers to a slower rate of cognitive development through the same sequence stages, that does not reach as "high" a final level as characteristic of the individual of average intellect.

Friendship Development. Selman (1979) has identified five separate stages in a child's thinking about friendship. These develop in a relatively universal and orderly sequence of stages, each characterized by a distinct, formal structure of thought.

Mentally Retarded-Educable (EMR). The American Association of Mental Deficiency accepts the definition that

"mental retardation refers to significantly sub-average general intellectual functioning existing concurrently with deficits in adaptive behavior, and manifested during the developmental period" (Reynolds & Birch, 1977, p. 272). For this study, EMR refers to those children who are enrolled in a special educational program for the educable mentally retarded. Enrollment usually implies that the child had obtained an I.Q. score of 50 to 80 on an individually administered intelligence test.

Moral Development. Kohlberg has defined six developmental types of moral judgment or moral reasoning, which a child may use to explain or justify his actions. The types or stages of thought were grouped into three moral levels.

Role-Taking. Flavell (1968) defines role-taking as the child's developing ability to make inferences about another's perceptual or conceptual perspectives, to assess the other's "response capacities and tendencies in a given situation" (p. 1). Feffer defines role-taking as the capacity of the person to recognize and coordinate self and other perspectives in the context of interpersonal interaction.

Social Perspective-Taking. Selman (Note 3) defines this as "the developing conception of the structure of the relation between self and other(s)... Each level of perspective-taking represents a basic orientation to the social world, a way of organizing thinking about social relationships" (p. 6).

## CHAPTER II

### LITERATURE REVIEW

#### Theoretical Background

##### Cognitive Development of the Mentally Retarded

Much of the research that has been done regarding the mentally retarded child concerns cognitive development. Inhelder (1968) has studied the cognitive development of the mentally retarded child and its differentiation from normal development. The retarded individual progresses through the same sequence of early stages of cognitive development as does the individual of average intelligence, but the retarded individual does so at a slower rate. The essential difference between the retarded individual and the individual of average intellect appears to be a difference in the rate of cognitive development as well as in the ultimate or final level of cognition achieved. Zigler (1969) terms this difference as a "developmental lag."

In the book The Diagnosis of Reasoning in the Mentally Retarded Inhelder (1968) draws an analogy between mental retardation and psychiatric theory which distinguishes between two forms of children's "mental troubles."

In general psychiatric theory, mental troubles have been conceived of for some time as fixations at some early stage of development. We are making the same hypothesis for intellectual troubles; we see "hypo" troubles (retardations) as

simple arrestations; "para" troubles (states of disequilibrium), also fixations, we see as being due to difficulties in effecting the integrations which under normal conditions assure functional continuity from one level to the next.  
(p. 37)

Inhelder states that each diagnostic system must depend on its underlying idea of normal development. Her work has focused on diagnostic procedures and comparisons to establish differences and resemblances between a given trouble and the characteristics of a certain level of normal development.

Inhelder states that egocentrism, which normally structures the child's thought until he is 7 or 8 years old, is characteristic of the thinking of certain retardates.

This notion enables us to see children's thinking as unified and coherent, differing in nature and not only in degree from adult thought... incapable of formal thought, of deduction, and of synthesis; insensitive to contradictions; impermeable to experience; rarely conscious of its own processes... These characteristics can be seen as interdependent and complementary aspects, evidence of a sui generis structure of thought.  
(p. 62)

Zigler attempts to reincite a finer analysis of the individual's cognitive processing system. Other than reiteration of the retarded individual's cognitive deficits, Zigler (1973) discusses the quality and nature of the mentally retarded child's interactive process that effects his behavior. In his research Zigler has found that when matched by MA, retarded children perform less adequately than normal children on a variety of problem-solving tasks. This he accounts

as due partially to a higher incidence of certain experiences in the retarded child's socialization history that "gives rise to a motivational structure that interferes with optimal performance" (p. 14).

Zigler (1973) states that MA reflects factors other than cognitive ones, such as achievement and motivational factors, that, to some extent, are independent of the cognitive processes that the tests are thought to measure.

Although the two are correlated, cognitive stage maturity is a separate, differing factor from I.Q. Poverty in the stimulation of organized physical and social growth leads to retardation in stage development. However, some theorists believe that cognitive abilities involved in psychometric tests are not generally developmental. "I.Q. holds relatively constant across age while cognitive stage varies with age" (Selman, 1977, p. 282).

Zigler advises others to consider motivation or emotional factors in the interpretation of their empirical findings. You cannot safely attribute a difference in performance on a dependent variable (such as I.Q.) if the populations differ on other factors which could reasonably affect, or have been demonstrated to affect, performance on the dependent measure. Other factors that should be considered in the interpretation of differences are:

the subjects' social milieus, child rearing practices to which they have been subjected, and the attitudes, motives and goals which these children bring to the experimental situation (Zigler, 1969, p. 547).

In essence, he is advocating research into the social development of the child.

### Social Development

As few researchers had used the cognitive-developmental approach to study the child's social development, the Harvard Judge Baker Social Reasoning Project was established in 1973, to study children's interpersonal development. The project's goals were:

to define qualitatively distinct stages in the child's concepts of various aspects of the social world and to focus on the form of the thinking and on universal patterns related to underlying cognitive structures rather than on affectivity of individual or group differences (Note 2, p. 11).

The focus of study has been social reasoning and judgement - how children's reasoning (structure) about social phenomena influences what they reason (content). The resulting stage models are: 1) the skeletal or underlying developing structure of Social Perspective-Taking, and 2) the developmental interpersonal conceptions in four domains. These domains are conceptions of: a) individuals, b) friendships, c) peer-group relations, and d) parent-child relations (Note 3).

A child's stage performance at any given time is as much a function of what he is reasoning about as his general cognitive capability... The particular context may lead to some variation in the rate of development of the domain reasoned about, but not to variation of the order of development (Note 4, p. 4).

From stage descriptions generated by research, it is assumed

that there are structural similarities across each of the developmental stages in the various domains of content. Empirical research has shown a logical relationship between stages of perspective-taking and the stages of interpersonal domains, between stages of perspective-taking and the stages of Moral Development.

Selman (Note 4) states that within the cognitive-developmental approach a basic distinction between stage of logical reasoning and of social development is that the latter involves the process of Social Perspective-Taking. This process, although viewed as more than a hypothetical construct, is observable and useful when it is operating in a social context.

Selman (1976b) credits the earlier influences of James Mark Baldwin (1906) and George Herbert Mead (1934) for the emphasis on social and ethical aspects of mental development.

Mead stressed that intelligence originates in the social experience of the child and that the developing human capability to differentiate and to view the self's attitude from the perspective of other(s) was the core element of social development (p. 158).

Theorists, such as Piaget (1950) and Kohlberg (1969), have used Baldwin's criteria to fit constructs into a developmental framework.

### Role-Taking

One of the key concepts in social development is that of role-taking. Current role-taking research has been influenced by two recent approaches to role-taking, Flavell's and Feffer's research based on Piagetian concepts of egocentrism and decentration. Selman and Byrne (1974) state that Feffer



"equate(s) social role-taking with the Piagetian concept of social decentering" (p. 803). The glossary in the Diagnosis of Reasoning in the Mentally Retarded (Inhelder, 1968) states:

Decentering makes possible the coordination of different viewpoints. As organization and coordination develop, it becomes possible to consider two relations, such as height and weight, at the same time rather than centering on one aspect only... an elimination of egocentrism (p. 32).

Flavell (1968) has studied the child's developing ability to make inferences about another's perceptual or conceptual perspectives. His study of visual and social role-taking was the initial systematic empirical investigation of this concept. The major aim of Flavell's research was to investigate the development of two social-cognitive behaviors:

- 1) the general ability and disposition to 'take the role' of another person in the cognitive sense, that is, to assess his response capacities and tendencies in a given situation; and
- 2) the more specific ability to use this understanding of the other person's role as a tool in communicating effectively with him (p. 1).

Flavell considers his work as preliminary to the age-developmental study of role-taking skill. He has distinguished two transitional steps in the development of role-taking ability:

- 1) the awareness that O can have cognitions, not only about objects external to S... but also regarding S himself..., 2) the S's recognition that O may not experience S as object, but also as subject (p. 53). Flavell states that the development of role-taking skills should allow new types of social activity that were once difficult or impossible for the individual.

Feffer (Note 5) describes the process of role-taking as a special social-cognitive scheme. This he defines as the capacity of the person to recognize and coordinate self and other perspectives in the context of interpersonal interaction. Feffer has developed a projective Role-Taking Task (RTT) to assess age related levels of the child's ability to decenter in social situations. RTT scores significantly correlate with WISC Vocabulary scores and with performance on certain Piagetian Tasks. Feffer and Gourevitch (1960) have delineated this ability into stage-like achievements.

Revisions of the RTT were made to lower extensions for usage of the RTT with mentally retarded subjects. The revisions made it suitable for subjects in the pilot study who ranged in MA from 4.0 to 14.2 years and in CA from 7.9 to 16 years. The test became meaningful for this population and was able to differentiate retarded subjects by their abilities in role-taking behavior, which includes: "a) level of shift, b) level of coordination, c) a composite index of overall performance which combines shift and coordination scores, and d) the highest RTT category evidenced in performance" (Note 5, p. 12).

In discussion of the project Feffer (1970) stated that role-taking development was found to be associated with increasing mental, rather than chronological age. He interpreted this as strengthening the validity of role-taking as a cognitive-developmental construct and as suggestive that differences in role-taking performance between retarded and

nonretarded children may be viewed in terms of Zigler's developmental lag hypothesis.

Affleck (1975a) made use of Feffer's RTT and a two-person game with 50 mentally retarded subjects attending a private residential school. The average CA was 12.96 years and the average WISC I.Q. was 66.58. The results of his study showed a significant association between social role-taking ability and interpersonal behavioral competence. Persons who used higher role-taking abilities were better able to develop a mutual strategy in the two-person game and thus, ensure maximum joint outcomes to win the game.

Affleck (1975b) also made use of Feffer's RTT and a Role-Playing Assessment Technique in a study to examine the relationship between social role-taking and the interpersonal problem-solving of retarded young adults. The 16 male subjects were moderately and mildly retarded clients at a sheltered workshop evaluation and training program. The average CA was 22.8 years and the average WAIS I.Q. was 66.5. Significant positive relationships between RTT and each of the Role-Playing Assessment Technique scores were evident. Scores on both of these measures were significantly related to I.Q. In a discussion of the results Affleck suggests that role-taking is particularly related to the tendency to recognize the other's feelings and intents during social encounters. Role-taking is also related to an appreciation of the nature of the conflict and the short and long-term consequences of the solution.

In continuation of Flavell's and Feffer's work, Selman refers to Role-Taking Ability as Social Perspective-Taking Ability. Selman's work is a continuation of Flavell's and Feffer's. He states that Flavell's research was only tangentially involved with the study of the child's ability to take or make inferences about another's perspectives (Note 6). Selman's structural aspects of role-taking is defined as the development of the understanding of the nature of the relation between the self's and others' perspectives.

The social informational content upon which this sequence of role-taking structures operate is the developing understanding of just what is a social being, i.e., another's capabilities, attributes, expectations, feelings, motives potential reactions, and social judgments. As one progresses through the stages of role-taking one has a more mature conception of the complexity of human relations (role-taking structure) and of the social thought processes and motivations of the minds of self and others (role-taking content) (p. 3).

Neither Flavell nor Feffer have made a direct and unified attempt to identify a sequence of qualitative vertical stages of this ability described in formal or structural terms. Selman states that the work of Piaget, Flavell and others elucidates the fact that this skill of social and cognitive de-centering blossoms into accuracy and becomes fully functional in middle-childhood. There are, however inaccurate, elementary roots of role-taking ability in the 3 or 4 year old. Selman (Note 7) has explored the early development of 4 to 6 year olds and has delineated four distinctive age related levels or role-taking ability, "the latter levels, naturally, being

more differentiated but not completely free of egocentric components" (p. 18). The levels of ability are all related to Selman's RTT, in which the subject is to guess another's response to questions regarding the arrangement of objects in a cardboard house. Briefly, the levels are as follows:

LEVEL A: Child may have a sense of other, but fails to distinguish between the thoughts and perceptions of other and self.

LEVEL B: Child's sense of self is distinguished from other, but he fails to see any commonality of thoughts between self and other.

LEVEL C: Child attributes his own ideas to other because he hypothetically puts himself in other's position but sees other as having interests similar to his own.

LEVEL D: Child is aware that other has perspectives based on his own reasoning which may or may not be similar to his own.

The results of this study show that "Level A declines over the age range of 4 to 6, Level B does so less quickly, Level C peaks at age 5 and then declines, and Level D appears (if at all) rarely before age 6.

Though research concerning role-taking has been related to other developmental theories, such as Moral Development, and Friendship Development discussed later in this paper, Selman feels that his construct of Social Perspective-Taking underlies the various developing processes and can synthesize the various models of social development. He states (Note 7):

Social Perspective-Taking research as with cognitive stages, seems to indicate a necessary, but not sufficient relation of social

role-taking to parallel moral judgment stages... Conceptually, role-taking stages are seen as intermediary between cognitive and moral stages... The child's cognitive stage indicates the general level of the child's ability to solve problems, his social perspective-taking stage, his level of ability to understand social relations friendship stage in particularly social problems, and his stage of moral judgment, the manner in which the child prescribes a resolution to social conflicts (p. 1).

### Friendship Development

Brenton (1975) discusses the need of individuals for friendship-- "for companionship, for emotional warmth, for the pleasurable sharing of interests, for a sense of belonging that helps connect them to their society," (p. 2) can be observed in a young screaming baby. This need is first met by his mother. As the child matures he forms relationships separate from his mother. The next step in his social development is parallel play that begins at about age 2. As he matures, he begins to interact with other children, whom he does not choose, but are near-by, such as in the neighborhood, Sunday school, or preschool. At about 7 or 8 years the child has a "best friend," with whom he fights, competes, shares, trusts, and expresses affection and empathy. Brenton states that not all children follow this developmental pattern. Some children develop slower or faster, possibly resulting from a difference in their temperaments. Brenton states that "Childhood friends are the first link in the chain of 'others' that lead children from their own family to whatever family they finally want to create or belong to" (p. 5).

Hartup (1975) takes a behavioral perspective to describe

mutual friendships as when children repeatedly approach each other, touch each other, manipulate each other, and give or take from each other. This conception of friendship is easily defineable with sociometric techniques based on observations of social interaction. However, Hartup discusses additional qualities that friendship entails for most people.

Friends evidence differentiated reactions to separation... mood changes and urgent requests to be allowed to visit one's friend... people apply special conceptual and linguistic categories to their friendships. Such concepts as "friend," "to like," and "enemy," ... (p. 11).

In discussing the language of friendship, Hartup (1975) states that "the origin of children's conceptions of friendships remain obscure" (p. 18). Empirical studies have mainly dealt with elementary school age children and adolescents because it is difficult to elicit young children's verbalizations about friendship. This gap in the research is unfortunate. As Hartup explains, there is a theoretical basis, particularly from Piaget, for one to expect changes in the language of friendship as the child matures.

For example, developmental changes should be produced by the increasing reciprocity involved in interpersonal relations and by the increasing ability to differentiate other persons from the environment (both phenomena being encompassed by the concept of decentration) (p. 19).

Hartup suggests that the language corresponding to cognitive developmental changes will also reflect changes in friendship occurring at different age levels. Various observational studies have revealed that the friendship of preschool chil-

dren differs from older children in its stability. Preschool children were found to interact with certain children more often than with other children. However, friendship choices were more stable for older children in the peer group. Best friend choices of preschool children were also found to differ in various situations, whereas the friendship choices of older children were more stable across a variety of situations.

Hartup (1975) states that paucity of data dealing with the development of children's ideas about friendship has neglected an understanding of the common processes and conceptions of friendship.

Unfortunately, not much is known about the origins of this conceptual system, and the relation between the use of social constructs and one's behavior toward one's friends remains obscure. Nevertheless, it is intuitively obvious that the individual's conceptions of friendship should have something to do with the formation, maintenance, and termination of friendship (p. 12).

These conceptions, or issues, were later incorporated into Selman's scale for the study of children's developmental conceptions of friendship.

Selman feels that his developmental model of friendship is able to characterize the various, yet similar, descriptive reviews of children's "friendship philosophy." He has provided a formal, detailed stage-by-issue descriptive model of children's reflective understanding of friendship (See appendix A). These stages were formed on the basis of social perspective-taking levels (structure) and developmental



aspects (content) in conceptions of friendship reported in the literature and found in Selman's pilot studies (Note 2).

Selman and Jaquette's study (1977) supports the hypothetical sequence of stages proposed by Selman. Variance has been noted in the developmental rate of this interpersonal awareness across socioeconomic strata, sex, in CA from 4.5 to 32 years, and in emotionally disturbed children.

When investigating the influence of SES upon interpersonal development, Selman found that working class children of approximately 7 years of age generally expressed lower levels of interpersonal awareness than middle-class peers until age 11. At this time their development matched that of the middle-class children. Selman suggests that this trend shows: 1) the influence of the preadolescent peer group across socio-economic boundaries, and 2) the responsiveness of interpersonal awareness to social experience.

An early spurt in social awareness among the young girls, ages 5.1 to 8.0, was noted. This spurt later appeared to be matched by the boys at preadolescence.

Children that may be considered to be emotionally disturbed have been the only special population group that Selman has discussed thoroughly in the literature. Selman, Jaquette, and Lavin (1977) compared the development of clinic children, having severe interpersonal difficulties, with public school children. Results showed that the special children, as a group, performed no less adequately on the tasks of Piagetian logico-physical reasoning than did their

public school peers. However, the control group performed at significantly higher levels on tasks that assess reasoning about friendship and peer-group relations. Even though emotionally disturbed children functioned at a lower level than matched peers, the sequential development of their reasoning appears to be the same. The clinic children were capable of expressing reasoning at high levels, comparable to their public school peers, but tended not to express their highest levels of reasoning consistently across all issues as did this control group.

In conjunction with referrals for clinic children that reported interpersonal problems, Selman interpreted these results to mean that children who lag far behind their peers in interpersonal awareness are very likely to have difficulty in relating to their peers, (Selman, Jaquette, Lavin, 1977).

To follow up this hypothesis, observations have been made of children's behavior in natural situations to investigate fluctuations in the reasoning of disturbed children. The theoretical question of stability was considered as well as the use children make of social conceptions. An issue-by-stage social cognitive map shows that the interview data and naturalistic observations present an inconsistency. The children's reasoning oscillated across varying real life conditions. One significant difference between "normal" and "disturbed" children who display age-appropriate capabilities in hypothetical reasoning may be the ability of the better

adjusted child to reason in real life settings at a level more consistent with their hypothetical reasoning. They may, more consistently, be able to use their best reasoning as a tool for coping with naturally occurring dilemmas. The disturbed child, in the face of a dilemma and resultant anxiety, may not be able to mobilize such tools at his most adequate level. Selman states:

the closer we get to the study of social reasoning-in-action, and to an understanding of conditions for stability or oscillation, the more sources of interference we may find between best capability and actual performance (Note 8, p. 3).

This line of research is being continued at the Harvard Judge Baker Reasoning Project with the examination of the behavioral and learning problem correlates of various patterns of reasoning within individual children (Selman, Jaquette, Lavin, 1977). Distinguished patterns have been found among children exhibiting neurotic symptoms, the so called "acting-out" child, and the child who is developmentally lagging or "retarded" in a cognitive sense. Project members are also exploring the use of the formal model and social-conceptual map of issues-by-stages in the analysis of interpersonal reasoning in natural settings.

To summarize, Selman (Note 2) states:

subjects generally do manifest an understanding of interpersonal concepts at very close to the same stage across all issues and domains. Also, with respect to universality, longitudinal comparisons of normal and emotionally disturbed samples... show that subject's understanding develops in the same patterns and sequences, albeit with a two to three year lag for the disturbed group.

And pertaining to invariant sequence, in neither group did two and five year longitudinal follow-ups show stage regression (p. 30).

This sequence of stages in normal development and knowledge, upon which to expand, concerning variances in development for special populations may be able to aid the understanding of an EMR child's adaptive behavior in his social environment.

#### Social Behavior of the EMR

A considerable amount of evidence indicates that retarded children, regardless of whether they are in special classes or in regular classes, tend to be isolated by their peers. They have few friends and, for the most part, are outside the mainstream of social life in their schools. Ingalls (1978) feels that the social isolation and rejection invariably are made worse by the experience of being labeled mentally retarded. Our culture puts considerable emphasis on being normal and anything that signifies that an individual is somehow different is going to interfere with that person's acceptance by others. This stigma tends to devalue the person and make him seem less worthy than other people.

Edgerton (1967) has observed that it is frequently the social incompetence of the mentally retarded which causes them to come to our attention in the first place. A primary problem of moderately and mildly retarded persons is their "chronic lack of basic social skills, social immaturity, insecurity, and ineptness in interpersonal relations and situations" (McDaniel, 1960, p. 5). Kleck (1975) discusses the importance of social skills to the successful integration of

the mentally retarded into society. He advocates lessening the emphasis on intellectual achievement and adverting "the primary foci of therapeutic efforts" to difficulties in social functioning.

In reviewing the literature, this author found no studies that employed the cognitive developmental approach to investigate the Friendship Development of EMR children.

### Moral Development

Somewhat related to role-taking and Friendship Development is Moral Development. Currently, in the literature, two models (Piaget's and Kohlberg's) are reported as the basis for investigation of Moral Development. Kohlberg's sequence of stages of Moral judgment (1969) is an elaboration of Piaget's (1932) cognitive-developmental approach to Moral Development.

Piaget's "two stage sequence involves a shift from heteronomous reasoning, in which adult rules are viewed as sacred and immutable, to autonomous reasoning, in which rules are viewed as human products" (Kurtines and Greif, 1974, p. 453). Piaget's method makes use of a pair of similar stories differing in one aspect. Rest (1976) summarizes:

One story depicts a boy who walks into the dining room, and accidentally knocks over a tray of cups hidden by the door, breaking fifteen cups. (Piaget, 1932, p. 122) The other story of the pair depicts a boy who is trying to ~~sneak~~ some jam out of the cupboard and knocks over and breaks one cup. The subject is asked first to judge which boy is naughtier, the one in the first story or the one in the second story, and then to explain his judgment and answer follow-up probe

questions, such as "If you were the daddy,  
which one would you punish most?  
(p. 199).

These procedures are designed to learn whether a child bases his moral judgment "on the amount of physical damage done (a purely objective notion of responsibility) or on the intentions of the actors (a subjective notion of responsibility)" (p. 199).

The data-gathering procedure of Piaget's method is more focused than Kohlberg's. The follow-up probe questions are designed to elicit information for a specific scoring decision.

In discussion of the use of Piaget's measures Kohlberg (1974) states that "Piaget himself does not consider that his moral judgment measures yield genuine stages, nor do they pair up with his logical stages in ways compatible with his current thinking about cognitive stages," (p. 142). In Stephen's Reply to Kohlberg (Stephens, 1974) she defends the use of Piagetian moral judgment stories. She states that Piaget's dilemma which requires consideration of intention of doer vs. the consequence of the act, contributes to the strength of the factor "which appeared to be representative of higher (logical) thought processes" (p. 145).

Kohlberg (1963) states that Piaget's (1932) work was the inspiration of the method and content of his interviews. Age trends toward choice in favor of human needs, such as might be expected from Piaget's theory, did not appear. However, the child's manner of defining the situational conflicts and the reasoning for his choices were developmentally meaning-

ful. From these responses six developmental types of value-orientation were defined and grouped into three moral levels. Kohlberg recognized that the child's moral thought processes are qualitatively different from the adult's and that an individual goes through stages in achieving moral maturity. These six moral stages or types of thought are as follows:

- I. Preconventional
  - Stage 1: The punishment and obedience orientation
  - Stage 2: The instrumental, relativist orientation.
- II. Conventional level
  - Stage 3: The interpersonal concordance or "good-boy--nice girl" orientation.
  - Stage 4: The "law and order" orientation.
- III. Postconventional, autonomous, or principled level
  - Stage 5: The social-contract, legalistic orientation.
  - Stage 6: The universal, ethical principle orientation. (Kohlberg, 1971, p. 164)

Kohlberg and Turiel (1971) have discussed a Premoral: Stage 0, in which the child,

Neither understands rules nor judges good or bad in terms of rules and authority. Good is what is pleasant or exciting, bad is what is painful or fearful. The child has no idea of obligation, should, or have to, even in terms of external authority, but is guided only by can do and want to do. (p. 421)

Kohlberg is presently researching on the other end of the scale. Kohlberg and Turiel suggest a Stage 7, indicating there may be a higher form of moral reasoning beyond the

accepted universal principles of justice and fairness.

Reviews report a range of 25 to 30 aspects of morality that are involved in children's moral thought. These aspects were apprehended as a dimension that could be defined according or corresponding to one of the six types of morality. Kohlberg (1963) presents six levels of the aspect of motivation, used to justify moral action, and these are:

1. Punishment by another.
2. Manipulation of goods, rewards by another.
3. Disapproval by others.
4. Censure-by legitimate authorities followed by guilt feelings.
5. Community respect and disrespect.
6. Self-condemnation (p. 14).

Kohlberg's six stages are more differentiated than Piaget's. His stories, a new method for the assessment of Moral Development, present a dilemma in which the subject must decide between two choices of action (determine...do) and then justify the decision.

One of Kohlberg's stories, as summarized by Rest (1976), depicts the dilemma of:

Heinz, a man whose wife is dying of cancer and needs a drug that the town druggist will sell only at an exorbitant price. Subjects are asked to tell whether it would be right for Heinz to steal the drug from the druggist, and to justify their answers. Subject's responses are then classified by trained judges according to whether the answer is oriented toward avoidance of punishment and deference to authority (Stage 1), toward prudent and purely self-centered concerns (Stage 2)... (p. 199).

Kohlberg's procedures are more open-ended and has led to the postulation of many new developmental characteristics of moral judgment. Subjects may discuss any of a number of



aspects. Thus, scoring is also more complicated in that a subject's response may be characterized in terms of the 25 or 30 aspects of the six stages. Often a subject's responses may not be decisive or clear enough to classify it. When the subject has not provided enough cues or his responses don't fit in with the scoring guides, Rest states that the scorer can only guess. The variety of aspects does not alter the individual's consistency in level of thought. Stages of thought are categorized by modal responses. Kohlberg discusses significant developmental differences between the age groups in the original sample of 72 boys. He interprets age trend findings as evidence that the first two types of thought decrease with age, the next two types increase until age 13 and then stabilize, and the last two types increase from age 16.

According to Kohlberg (1971) Moral Development is a universal process, differing from the learning of various "irrational" or "arbitrary" cultural rules and values. Kohlberg has studied middle and lower-class urban boys, and preliterate or semi-literate villagers in countries such as the United States, Great Britain, Taiwan, Mexico, Yucatan and Turkey. In discussing developmental trends for urban SES groups, he states that middle-class children move faster and farther through the same sequence as working-class children. Middle-class urban boys at age 13 use stage 3 most. Having found stages to be present in the thinking of children in other countries, Kohlberg (1968) concluded "we know that

this is not purely an American democratic construct" (p. 30).

Relationship with cognitive development or MA. Age trends indicate that the aspects of morality and six types of thought only attain meaning as the child gets older. This development requires "the extensive background of social experience and cognitive growth represented by the age factor" (Kohlberg, 1969, p. 385). The age order in use of aspects is not a simple matter of a greater MA required to learn the higher levels of thought. Moral Development results from the child's interaction with and awareness of the external social world. It is representative of the child's active processes of organizing his/her social world.

Piaget and Kohlberg theoretically view Moral Development and Cognitive Development as stage types of thought and feeling. They are developing schemata, representative of

successive forms of psychological equilibrium. The equilibrium of affective and interpersonal schemata, justice or fairness, involves many of the same basic structural features as the equilibrium of cognitive schemata logicality (Kohlberg and Gilligan, 1971, p. 1069).

Existing moral stages imply a basic cognitive-structure in normal development. Kohlberg states that cognitive maturity is necessary but not sufficient for moral maturity.

There is a parallelism between an individual's logical stage and his moral stage. A person whose logical stage is only concrete operational is limited to the preconventional moral stages, Stages 1 and 2. A person whose logical stage is only 'low' formal operational is limited to the conventional moral stages (Stages 3 and 4) (p. 32).

However, additional experience is needed before an individual's moral reasoning can reach his level of cognitive development. Kohlberg (1976) states that:

an absence of cognitive stimulation necessary for developing formal logical reasoning may be important in explaining ceilings on moral level. (However, stimulation) from social interaction and from moral decision-making, moral dialogue, and moral integration (p. 49).

is also needed. Thus, an individual may be at a higher logical stage than the parallel moral stage, but not at a higher moral stage than the parallel logical stage. Kohlberg and Gilligan state that chronologically older children should be at a higher level of moral maturity than younger subjects matched by level of cognitive development.

Kohlberg (1969) discusses the relation of I.Q. to Moral Development. Various studies report correlations of .30 to .50 between group I.Q. tests and moral judgment level at age 12. This indicates a cognitive influence in moral maturity, but that stages of Moral Development are not merely reflective of verbal intelligence applied to moral problems.

A curvilinear relation between I.Q. and moral maturity is found. In the below-average range, a linear correlation ( $r=.53$ ) is found between I.Q. and moral maturity, whereas no relationship ( $r=.16$ ) is found between the two measures in the above-average group. In other words, children below average in I.Q. are almost all below average in moral maturity. Children above average in I.Q. are equally likely to be low or high in moral maturity (Kohlberg, 1969, p. 391).

To illustrate, Kohlberg (1968) has presented a case study of a bright boy (I.Q. 120) who is a slow developer in moral

judgment. Kohlberg (1969) states that the correlation between I.Q. and moral maturity declines with age. "Moral judgment continues to develop until age 25, although only for half the middle-class population, whereas general intellectual maturity does not" (p. 391). More intelligent children attain formal operations earlier than less intelligent children. However, most eventually attain them. Children of lower intellectual ability tend to develop at a slower rate, but dependent upon social experience, may develop longer to attain the same level of moral maturity.

Development involves interaction. Stimulation from the child's social environment creates cognitive disequilibrium and enhances a reorganization of stages. The child understands, but does not use, lower levels of reasoning. He prefers the higher level, which is more adequate and more moral. He is cognitively attracted to the level above his own predominant level and may be in transition to the higher stage.

Kohlberg and Lieberman (1975) discuss two basic mechanisms necessary for the development of moral reasoning.

First, the child must feel some conflict or indecision over what is the right or moral action. Second, exposure to moral reasoning slightly more evolved than his own may facilitate development to the next stage (p. 712).

Hoffman and Saltzstein (1967) found an association between moral internalization and inductive discipline.

Kohlberg (1969) gives an example of this method, "pointing out to the child the consequences of his action to others and his own responsibility for it" (p. 400), and suggests

that it provides a form of "moral role-taking opportunities." This method of discipline is more preferable to parental rejection and physical punishment, which are negatively correlated with moral internalization and moral stage development measures.

The relationship with role-taking. Findings of Holstein's study, as summarized by Kohlberg (1969), indicates that the provision of role-taking opportunities in the family "is a powerful predictor of moral judgment at age 13" (p. 400). Holstein tape-recorded 52 middle-class suburban families (mother, father and child) in discussion of differences found in their responses to hypothetical dilemmas. Children of parents, who encouraged their child's participation in the discussion, performed at higher levels of moral maturity than children of non-encouraging parents. The amount of interaction between parents and child, such as play, discussion or affection, was also related to the child's moral maturity level.

Empirical findings support the hypothesis that peer-group participation is correlated with Moral Development. Peer-group isolates matched for social class and I.Q. with more popular classmates tended to be slower in Moral Development. Kohlberg attributes this difference to the opportunities available for role-taking, as the peer-group participation appears to be stimulating Moral Development.

Kohlberg (1969) suggests that the role-taking opportunities in institutional settings are less adequate, "so it is

not surprising to find institutionalized retardates more retarded in moral judgment development than control retardates living with their families" (p. 399).

In theory, the process of the developmental view of the social world (including the self) from the perspective of another has been considered a necessary, but not sufficient condition for a parallel level of moral reasoning. Kohlberg (1971) states that "all morally relevant rules and institutions are... interpreted through processes of role-taking directed by concern about both welfare and justice" (p. 190).

To investigate the relation of social perspective-taking to Moral Development, Selman (1971) interviewed middle-childhood, children of 8 to 10 years. He hypothesized that one develops the ability to understand reciprocal social perspective taking (role-taking ability) as a necessary condition for the development of higher levels of moral judgment. The three I.Q. groups ran high, the middle group I.Q. was 109-120; and the average MA was 10 years. The results showed an interaction occurring at the middle MA range between PPVT MA scores and the relationship between moral and role-taking development. As predicted, those who scored at the reciprocal role-taking level (three) scored at the conventional level of moral judgment, and those who scored at the nonreciprocal role-taking levels (one and two) scored at the preconventional moral-judgment level. In the low MA group, subjects scored low on both role-taking and moral judgment measures. Subjects in the upper MA levels scored high on both measures.

Selman notes the relationship between role-taking ability and moral judgment level over his three MA levels and suggests that level of MA influences early or late development of reciprocal role-taking skills.

The time period during which one chooses to examine the codevelopment of moral judgment and role-taking ability is critical. Kohlberg's data (1969) concludes that conventional moral judgment generally is attained by age 13. Flavell's data (1968) concludes that reciprocal role-taking is generally attained by age 11 or 12 years. It would be illogical to anticipate finding a close relationship between role-taking and moral judgment at any and all ages. By age 13 there is a ceiling effect in the relationship in that most subjects attain the higher level on both variables.

Selman (1971) discusses a follow-up study in which 10 subjects who had been categorized as low scorers on both RTTs and Moral Judgment Scale (MJS) were interviewed with the same instruments and procedures. Five subjects had reached the reciprocal level in RTT 1 and six subjects did so on RTT 2. Only two subjects obtained the conventional NJS level (two) and also the reciprocal score (three) on both RTT measures. No subject attained conventional moral judgment without reciprocal role-taking. Reciprocal role-taking, however, was attained by subjects without conventional moral judgments. Evidence shows that the speed of the developmental timetable of these two processes across subjects was not uniform within the one year.

The relationship between Moral Development and role-taking ability has been exposed in earlier developmental periods. Selman and Damon (1975) describe the logic of the relationship between their developing systems of conceptions of justice and of social perspective-taking in early childhood, 4 to 10 years.

Damon has designed a series of games and stories to investigate the development of young, (3 to 4 years) children's conceptions of justice. He proposes a model of stages, labeled to match Kohlberg's system, that describes this early development in more detail. The stages are summarized by Selman and Damon (1975) as:

Each justice stage consists of an organization of values, standards, and beliefs that enables the child to conceive of certain specified moral problems. At justice Stage 0, the problem is what the child wants, and how best to get it. At justice Stage 1, the problem is that others make demands, wield authority, and claim rights and that the self is obligated to recognize such claims. At justice Stage 2, the problem becomes the resolution of conflicting (although of the equally unjustifiable) interpretations of how to define the rights and claims of both self and others (p. 72).

Selman and Damon (1975) make use of interview protocols to analyze how a given level of justice conception implies a given level of social perspective-taking ability. They hypothesize that: 1) B substages represent means of resolving the common moral problems that are based on the child's conception of justice, and that 2) a justice conception level intimates the attainment of a new social perspective-taking level and its application to moral reasoning. Their work is



based on the following assertions:

1. That the child's reasoning about justice develops through a sequence of stages ordered, with each stage representing a progressive reorganization of the prior stage.
2. That each of these stages can be further broken down into two substages: an "emergent" (A) substage, which represents a reorganization of the child's conceptions of social and moral realities (norms, values, and customs), and a "consolidated" (B) substage, which represents a subsequent reorganization of the child's conception of justice.
3. That the necessary condition for the transition from the emergent to the consolidated form of each stage of justice reasoning is the application of a new level of social perspective-taking ability to the child's justice reasoning.

The structure of social perspective-taking is distinct and separate from Moral Development. Social perspective-taking stages are necessary, but not sufficient, to describe the structure of moral reasoning.

Selman and Damon (1975) state that theoretically it is possible for an individual to be retarded in Moral Development and advanced in stage of social perspective-taking ability. To illustrate, they refer to Hickey's research (1972) which "indicates that delinquents have social perspective-taking equivalent to their nondelinquent peers but that their level of moral reasoning is at significantly lower stages" (p. 72).

These revisions in procedures, instruments and scoring that have been made for the moral stage assessment of the young child illustrate a need for such revisions to make as-

essment procedures suitable for the EMR child.

Relationship with friendship development. Berg-Cross (1979) has explored the relationship between friendship and levels of moral reasoning. To investigate the possibility of similar levels in social reasoning as an attraction for college-age friendship foundation, Berg-Cross (1979) compared the moral maturity of male/male, female/male, and female/female friendship dyads. University students were defined as friends on the basis that they "a) purposely chose to meet socially at least two times a week, b) were not sexually intimate with each other, c) and mutually called each other very good friends" (p. 9).

Berg-Cross suggests that "formal operations individuals (late adolescents and adults) might be attracted to each other because of similar cognitive, moral, and social reasoning strategies" (p. 9). Peer interaction, as discussed earlier, enhances the advancement of Moral Development. Thus Berg-Cross reasons that friendships may not be randomly paired. Persons may not be able to relate to another when too large of a discrepancy in levels of reasoning exists. Berg-Cross studied the friendship of university students in same-sex and opposite-sex dyads. The data was easily obtained from the students and analyzed with the use of Rest's Defining Issues Test (1974). The results of the study indicated that the relation between male/female friends and level of moral reasoning was highly significant. The dyads of male/male and female/female friends did not show any signi-

fiance. Berg-Cross explains this in a discussion of what is known about these friendships. An attraction by similarity of social reasoning may not be evident in male friendships, since they have been characterized as activity based. They suggest reasoning may not be as important in female relationships, which are characterized by strong interpersonal concerns such as trust, support and sensitivity. However, Berg-Cross suggest that the results of their study suggest an important function of friendship for this age group.

The formation and consolidation of cognitive and philosophical belief systems so important to identity formation may rely heavily on these non-sexual male/female friendships (p. 10).

Relationship to the mentally retarded. In the literature the use of two different models of Moral Development, Kohlberg's and Piaget's, have been reported in the limited number of studies dealing with the mentally retarded.

Studies that have used Kohlberg's model to compare EMR and normal children have reported conflicting results regarding the interactional effect of MA and CA upon Moral Development.

Contrary to Kohlberg and Gilligan's (1971) contention as stated earlier, Taylor and Achenbach's (1975) findings showed that the performance in level of moral reasoning for cultural-familially retarded children and MA-matched non-retarded children did not differ, despite the fact that the retarded children were chronologically older than the non-retarded children. Subjects were matched by MA obtained on

the PPVT. Retarded subjects ranged in CA from 10.1 to 12.6 years and in MA from 6.7 to 9.3. Nonretarded subjects ranged in CA from 6.3 to 8 years and in MA from 6.7 to 9.4 years. The analysis of variance showed a significant increase with MA in moral judgment scores for both groups, but no effects approaching significance for I.Q., sex, or any interactions. I.Q. and CA differences between the groups had no significant effects.

Thus, moral judgment scores increased with cognitive development, as measured by the PPVT MA, for both retarded and nonretarded children, but I.Q. and CA differences between the groups had no significant effects. The primacy of MA was also revealed in its correlation of .44 ...with moral score compared to non-significant correlations of .23 and .02 between moral score and CA and I.Q., respectively. The correlation of moral score with MA was significantly greater than with I.Q. (Taylor and Achenbach, 1975, p. 47).

They state that the findings are in agreement with Zigler's (1969) developmental concept of cultural-familial retardation. Retarded and MA-matched nonretarded children performed on similar levels on Piagetian cognitive tasks and on moral judgments.

Kahn (1976) used different measures for MA, level of cognitive functioning and level of moral reasoning to test "the primacy of MA in cognitive and moral reasoning." He states that Taylor and Achenbach's findings (1975) should be replicable with various instruments if they are to be considered valid.

Subjects were 20 nonretarded, 20 mildly (cultural-

familial) retarded and 20 moderately retarded subjects matched by MA with use of the Slosson Intelligence Test. Mean I.Q.'s for the groups were 45, 66, and 101, respectively. Mean CAs for the groups were 6.11, 12.8, and 18.2, respectively.

Kahn used Porter and Taylor's Guide (1972), which is based on Kohlberg's procedures, to assess moral reasoning. Piagetian tasks, discussed by Inhelder (1968), were used to measure level of cognitive functioning.

Kahn reports a major flaw in the study. "I.Q. and CA were confounded with etiology. That is, the subjects with both the lowest I.Q.s and highest CAs had organic abnormalities, whereas the other two groups had no known organic abnormalities" (p. 212). In a one-way, fixed effects analysis of variance a significant difference was found among the moral maturity score means of the three I.Q. groups. This Kahn attributes to the difference between nonretarded and moderately retarded subjects' scores. The mean score for the mildly retarded fell between the other two groups, but was not significantly different.

In support of Kohlberg and Gilligan's (1971) viewpoint, results of Kahn's study showed a significantly higher correlation of moral maturity with Piagetian cognitive functioning than with MA. Kahn also reports that older subjects (moderately retarded) had lower moral maturity scores than younger subjects matched for MA. This appears to discount the importance of social experience, or CA, as a factor in

Moral Development. Kahn states that the use of MA for matching was responsible for this apparent contradiction. This is in agreement with Mahaney, Stephens and McLaughlin's (1972) findings that mildly retarded subjects achieved competence on many Piagetian cognitive tasks at a later MA than nonretarded subjects.

Kahn found that moderately retarded subjects were at lower levels of cognitive reasoning and moral maturity than MA-matched subjects, who were less retarded and nonretarded. Kahn (1976) states that "These findings indicate that MA does not, by itself, give an adequate description of the cognitive or social capabilities of moderately retarded persons" (p. 219). He suggests that for adequate educational programming other assessments of cognitive, social, and Moral Development are needed.

In a longitudinal study Mahaney and Stephens (1974) used Piagetian measures and model to assess the Moral Development of 75 nonretarded and 75 retarded subjects, as young as 6 years old. The purposes were: 1) to observe Moral Development characteristics of the adolescent period, and 2) to determine if moral judgment of retarded individuals developed in a manner comparable to nonretarded persons. Analysis of variance techniques were used to show developmental trends across three age groups in three phases (two year periods) of study.

In a discussion of Phase I and II findings Mahaney and Stephens state that the performance of retarded subjects im-

proved over time, except on measures regarding intent vs. consequences, one of Kohlberg's aspects of morality. The retarded subject's judgment scores on these tasks significantly regressed over time, which was found to be consistent with earlier performance results of the three age groups of retarded subjects and of the two younger groups of nonretarded subjects. Mahaney and Stephens note that this trend in the retarded subjects' development of judgment of intent vs. consequences displays "either continuing immaturity or regression" (p. 140).

Boehm (1967) and Gargiulo and Sulick (1978) investigated the effects of CA, I.Q. and sex on level of moral maturity with retarded individuals. They made use of four Piagetian moral dilemmas, two concerned with the evaluation of the seriousness of an act on the basis of its intent or its result, two with peer reciprocity as opposed to dependence on adults.

Boehm explored the development of two groups of mentally retarded students and compared the findings with the results of her prior studies with normal younger children and with Piaget's theories. The 67 mentally retarded subjects in Boehm's study were attending two public schools and an occupational training center for EMR in New York City. High school subjects ranged in CA from 16 to 19 years and in I.Q. from 56 to 69. The occupational group ranged in CA from 17 to 20 years and in I.Q. from 50 to 69.

There was a lack of significant differences shown in

moral maturity between the age, sex and I.Q. levels of the two groups of subjects. The results did not show the importance of CA and intellectual ability in moral maturity, as have studies with normal subjects. In explanation, Boehm reasons:

that the mental retardates may form a special class with their own unique characteristics ... (or) that after a certain point of development, social and emotional maturity are no longer closely related to chronological or mental age but may play an increasingly larger role in determining awareness or right and wrong (p. 102).

Boehm states that subjects' Moral Development appeared to go beyond what might be expected on the basis of their intellectual capacity alone. She feels that the lack of significant differences between the ratings of the high school and occupational groups, as compared to normal subjects, may reflect differences between the lives of retarded and nonretarded individuals. Boehm points out, that differences in experience may have been caused by the fact that normal, working-class children have shown an earlier independence from adults on questions of moral judgment than have middle-class children. She states that:

In much the same way, by the time an EMR has reached adolescence in a civilized society, his life experiences may serve to compensate to some degree for his low intellectual capacity (p. 103).

Gargiulo and Sulick (1978) interviewed 45 subjects in each of three I.Q. groupings (nonretarded, EMR, TMR). All subjects, predominantly white, lower class, were divided into



three age levels: 6-10, 11-13, and 14-16. Normal (nonretarded) and EMR students (I.Q. 50-80) were drawn from a rural school system. It was not reported from where the trainables (TMRs, I.Q. 25-50) came.

Responses to a predetermined set of questions for each of the stories were scored according to a scale developed by Boehm (1969). Garguilo and Sulick report the results of their study as showing a significant difference in stage of Moral Development between normal subjects, EMR subjects and TMR subjects and that moral judgment scores also increased with CA. They suggest that I.Q. is related to moral judgment, independent of CA, since moral judgment scores significantly differed for the three groups.

After consideration of the involved theories and the application of these in the study of retarded individuals, this author feels it is important to look more carefully at the past methods used. The revisions that have been made to extend usage of the instruments to other subjects provide information relevant to revisions of instruments for usage with EMR subjects.

### Methodological Considerations

#### Role-Taking

Under the rubric of Previous Theory and Research, Flavell (1968) reviews the earlier development of tasks to assess role-taking ability, beginning in 1923.

Some have dealt with subject's ability to predict O's cognitive responses, others with his perceptual responses, that is, how O 'views'

something in the literal-perceptual rather than figurative-intellectual sense. Some studies have been preoccupied with role-taking activity per se, while others have tried to work with accuracy criteria. And of the latter, some appear to have surmounted the more serious measurement problems while others manifestly have not (p. 29).

Studies in the literature vary in their definitions of role-taking and report a variety of methods used to assess a child's role-taking ability. Selman's research has been influenced by Feffer's and Flavell's recent approaches to the study of social role-taking.

In Feffer's (Note 5) Role-Taking Task (RTT) the subject is first asked to tell a story about an ambiguous TAT drawing. He is then asked to retell the story from the viewpoint of each of the characters in his story. The subject's de-centering level is measured in terms of the degree to which he/she is able to refocus upon the initial story. Theoretically, the coordination of the different perspectives is the conservation of a role relationship as the coordination of changes in height and circumference is the conservation of quantity (Feffer, 1970a).

In a final project report to the Bureau of Education for the Handicapped (Jan. 70) Feffer discusses the investigation of the role-taking performance of mentally retarded subjects. MA ranged from 4.0 to 11.0 years and CA ranged from 7.9 to 16.0 years. MA was considered as a rough index of cognitive level of development. Revisions of the RTT were made because of the limited attention span and comprehension of the mentally retarded subjects tested in the first sample. In a pilot

study (Progress report 11-19-68) 40 EMR subjects were tested with various stimulus materials, such as three dimensional cardboard figures or TAT cards, to find which elicited the most productive initial story and the greatest degree of differentiation between story characters. Instructions and procedures were varied to find which could best be understood by mentally retarded subjects over a range of cognitive maturity.

The revised RTT was then given to an additional sample of 50 EMR subjects. The role-taking performance of these subjects was scored in terms of the original Schnall and Feffer scoring criteria. New scoring categories were added in the scoring criteria at the lower role-taking levels. This increased differentiation between subjects within the 6 through 8 MA range and allowed scoring to reflect clearly differing role-taking performances, which prior had been given the same score. As described in Progress report 2-19-69, the revised stimulus material, procedures and scoring were incorporated into a working manual (Note 5).

In summary, revisions were made in Feffer's RTT to extend the lower level of the scale. Materials, procedures and scoring changes made the instrument suitable for EMR children as young as 7.9 years with an MA of 4.0 years.

For a downward extension of assessment procedures Selman designated the role-taking task (RTT 1) to examine the ability of young children (ages 4,5, and 6) to take another's

perspective. In doing so, he has considered Flavell's criteria for tasks and procedures. These are stated by Selman (Note 7) as follows:

- 1) to differentiate as well as possible between perceptual and conceptual role-taking while lending itself to a comparison of the two; 2) to convey unequivocally as possible to the child that he should engage in role-taking activity; 3) to repeat the task with different sets of materials to increase concept validity; 4) to be natural and game-like (as opposed to test-like), to represent a plausible and realistic role-taking experience for the child (p. 3).

Selman's RTT 1 involves the use of a (5' by 5') cardboard house with three rooms; the choosing room, the watching room, and the secret room. The subject (S) is shown the rooms in the house and told that it is a special house for thinking and playing games. A window allows S in the watching room to view both of the other rooms. However, a child seated in the choosing room can see only into the watching room, since a wall obstructs his view of the secret room. Participants sit in the choosing room or the watching room first and the examiner takes the other seat. S is then asked a series of questions designed to assess his understanding of the different perspectives possible within the experimental situation. The first question is "Which one of us, you or me, can see into more rooms in this house: who can see into more rooms?" (Note 5, p. 5).

In the second part of the task the S's peers, acting as chooser (C), is brought into the testing situation and seated in the choosing room. S sits in the watching room. A

set of items is shown to both S and C and then placed about the house. One of the boys is out of C's view from the choosing room but not out of S's view from the watching room. Before C is asked to guess where the toys are placed, the examiner asks S to predict and explain C's guess.

Selman's use of Flavell's guidelines has resulted in a task that circumvents many of the problems found in dealing with younger children. Being physically involved with the use of interesting objects appears to maintain the child's interest and attention to the task. Also, the language ability necessary to perform the task doesn't appear to be at a level higher than the young child is able to comprehend or express.

#### Friendship Development

To assess children's levels of interpersonal awareness, Selman (1976a, 1976b) has used audio-visual filmstrips in which elementary school-aged children dramatized the socio-moral dilemmas and a semi-standard questionnaire. Children of 4 to 10 years have responded well to these filmstrips. Selman has also encouraged further informal probing of children's responses in order to obtain sufficient information to learn their highest level of interpersonal reasoning. These procedures have been used with a variety of individuals from 4.5 to 32 years of age, from various socio-economic groups, and with individuals of both sexes. Selman (1977) states that he has reported the analysis of sex differences to indicate the appropriateness of the interview

for both sexes.

Initially, to empirically test Selman's theoretical stage structure of Friendship Development, individual interviews on one friendship dilemma were administered. The sample consisted of "93 subjects, both male and female, aged 3 to 34, black and white, and of lower and middle class" (Note 2, p. 16). The subjects responses to probe questions, clarifications of meaning and application of conceptions to personal experiences were used to aid development of a detailed description of levels of conception for each issue. The interview transcript was analyzed for the highest level of perspective-taking found and then examined for how the individual actually conceptualized each issue in the friendship domain. With the regularity of concepts reported, the according level of social perspective-taking was analyzed to demarcate what was logically necessary for a subject to generate such a social conception. The underlying social perspective-taking stages were used to analyze and to organize the relatively more surface concepts of friendship into stages (Note 2).

This developing structure was found in children's meanings, that differed with age and were underlying similar responses to probe questions. For example, underlying the response "A good friend is someone who is close to you." a child's meaning at age 5 may be "That means He lives down the street." or at age 15 "That means that you share a lot of the same values."

In a paper presented at the Biennial Meeting of the Society for Research in Child Development, Selman (Note 12) poses that continued research should explore the use of reflective interviews to obtain a child's level of reasoning that corresponds to his level of functioning used in natural situations. He questions whether an individual reasons at one level across various situations, experiences and interactions.

### Moral Development

Kohlberg's original scale was a result of his doctoral dissertation. Kohlberg (1963) discusses his developmental analysis of moral judgment, which is based upon data obtained from 72 boys of three age groups; 10, 18, and 16. All subjects were comparable in I.Q. and living in Chicago suburban areas. They were divided into two SES levels, upper-middle class and lower to lower-middle class. Kohlberg presented subjects' with ten hypothetical moral dilemmas, and a subsequent series of questions to elicit the child's moral reasoning behind his decision. The dilemmas presented a choice of whether one should obey "legal-social rules or commands of authority" or should act in accordance with "the human needs or welfare of other individuals." (p. 12) Interview questions were open-ended and followed with further spontaneous probes; thus interview procedures were not standard.

Rest (1976) discusses the use of Kohlberg's free-response interview and a variety of other tasks and procedures

for collecting data regarding moral maturity. In giving spontaneous reactions to a story, various psychological processes are occurring within the individual. A child reports not all of his possible thoughts, but only a selection of these possibilities. His verbalizations may reveal much less than he is actually able to comprehend or appreciate. Also, the subject must interpret the problem and construct a solution. He must be able to recall and to identify the relevant features. He must be able to imagine the consequences of various courses of action and to integrate all of these considerations into a coherent justification of one course of action.

Thus, inconsistency has been found in the way individuals make moral judgments in different situations or testing sessions. It's difficult to know beforehand what factors in a story or test situation will make that story harder or easier for a given subject. Rest states that the discrepancy found between reasoning levels on two separate stories may be due to differences found in the explicitness of relevant story cues and in the child's familiarity with different depicted situations.

Lieberman (1971) states that the story partially determines the stage of the response. He found some stage responses to be more likely with some of Kohlberg's stories than with others. Thus, a single test situation cannot be assumed to represent the general moral judgment level of a subject. Whenever comparisons are made among subjects the same set of



test stimuli should be employed under standardized conditions. If stories, interview probe questions and/or test conditions vary, then differences in scores cannot be unambiguously attributed to developmental differences among subjects.

Other than unreliable assessment procedures, subjects themselves may fluctuate in their own reasoning level when responding to the same stimuli. An individual's responses may be inconsistent in levels of reasoning when he is in transition to the next higher stage of development.

In review of the literature using Kohlberg's procedures to assess Moral Development, Kurtines and Grief (1974) state that there were no reported estimates of temporal stability, a stability of scores across time. This neglect disallows the hypothesis that "scores reflect actual characteristics of the individual rather than random fluctuations resulting from the testing session" (p. 457).

Kurtines and Grief also cite several published studies to illustrate that "while Kohlberg's stages are moderately effective in discriminating between unsophisticated and sophisticated reasoning, there seems to be no evidence that each of the six stages by itself has discriminant validity or predictive utility" (p. 460). Kohlberg does not expect a level of reasoning to correspond to a level of moral conduct, even though he suggests a relationship between the two. "In order to justify six distinct stages, each stage should contribute to the prediction of nontest criteria, that is, all six stages should make better predictions than any subset of

stages" (Kurtines and Grief, 1974, p. 459). This does not yet seem to be the case.

For an assessment of the young child's Moral Development, Selman and Lieberman (1975) have revised instruments and procedures to provide a lower extension of the use of moral dilemmas. The moral dilemmas used to instill conflict in secondary students are often neither interesting nor relevant to primary graders. An oral or verbal presentation of the hypothetical dilemma is not appropriate for younger children who have difficulty grasping the details and social facts crucial to the construction and understanding of the dilemma. Therefore, more explicit, visual presentation of the dilemmas was needed to hold the attention of young children. Selman and Lieberman suggest that the use of audio-visual filmstrips make the moral reasoning task more manageable for young children of 4 to 10 years

1. They present dramatic stories which are involving to watch for children of this age,
2. They present a conflict between two or more moral values understood by children of this age.
3. They are open--children of this age disagree about what is right and have difficulty making up their minds.
4. Without giving 'right answers,' they present a range of levels of reasoning: below, at, and slightly above the level of most children in the class, which may help stimulate the child to make his own reasoning more adequate (p. 713).

In Selman and Lieberman's study the control group's pre- and post-testings (with a five week interval) were correlated to estimate the test-retest reliability of the interviews. "Filmstrip dilemmas designed by Kohlberg and Selman (Note 3)

correlation .67 and standard dilemmas correlated .62. These results were judged adequate given the small number of subjects (20) and the narrow range of possible scores" (p. 715). Since the filmstrip dilemmas were new instruments, not part of Kohlberg's standardized procedure, Selman and Lieberman (Note 8) felt it necessary to determine the degree to which both types of dilemmas reflected the stage of an individual subject. For the control group a correlation between the filmstrip dilemmas and the standard dilemmas was .500 on the pre-test and .575 on the post-test. For all groups the correlations were .473 on the pre-test and .593 on the post-test. These correlations between the filmstrips and Kohlberg's interview procedures appear to be weak. Possibly this was due to a difference in appropriateness of the assessment procedures and instruments that had been developed for different age groups. However, these appear to be the best procedures currently available for the young child.

#### Moral Development In Study of the Mentally Retarded

The literature reviewed for this study did not contain a methodology in which Selman's construct of Friendship Development was used with a sample of mentally retarded individuals. Consequently, the following discussion had to be limited to a consideration of the methodologies used by researchers concentrating on Moral Development.

To test the hypothesis that Culturally-familially retarded and MA-matched nonretarded children would be similar in their

levels of moral judgment, Taylor and Achenbach (1975) interviewed subjects with four of Kohlberg's dilemmas concerning the moral issues; promises, stealing, punishment, and value of life. I.Q.s and MAs on the PPVT were used to place subjects into groups for study and to match retarded and non-retarded children. The CA range of retarded children was 10 to 12 years and of nonretarded was 6 to 8 years. MA range of retarded subjects was for three MA levels: 5.4 to 7.0 years, 7.3 to 7.6 years, and 8.9 to 10.1 years. PPVT I.Q. scores ranged from 59 to 86 (mean=75) for the retarded and from 90 to 132 (mean=110.8) for the nonretarded subjects.

The subjects' moral judgment scores consisted of the average of his responses, that were weighted according to Kohlberg's rules in his moral judgment interview and scoring manual (unpublished manuscript, Harvard Graduate School of Education, 1972).

Cognitive development was equated with MA as measured by the PPVT, rather than by specific cognitive operations. In their discussion, it was stated that "in pairs matched for MA, those who passed each (Piagetian) cognitive task did not score higher on moral judgment than did those who failed the respective task," (p. 49). Could this result reflect a subject in transition and another who had established, through social experience, an equilibrium between his cognitive development and corresponding level of moral maturity? Some studies using Piaget's methods (similar to Kohlberg's), have reported differences in the mentally retarded's abilities

that may be reflected in their moral judgment scores.

The retarded subjects in Boehm's (1967) study had been placed in high school or occupational training programs by New York City's public school system. Boehm states that being placed in the high school implies "a higher achievement level in reading and arithmetic, a higher score on social and emotional maturity rating scales used by the Bureau, possibly better physical conditions, and a greater employment potential." (p. 96)

Boehm discussed a qualitative difference in the responses between the groups of mentally retarded subjects in the study. The occupational group spoke mostly in monosyllables and could rarely explain their reasons, except on the simplest level. The high school group were much more fluent, rather specific, and at times showed complex reasoning. Because of a lack of concentration Boehm found it necessary to repeat some stories to several members of the occupational group. She felt that the occupational group was more vulnerable to counter suggestions.

Gargiulo and Sulick (1978) in working with EMR and TMR subjects, found that a certain level of cognitive growth was necessary before the child was able to comprehend orally presented stories and questions, and thus successfully judge moral dilemmas. Therefore, it seems wise to use Selman's methods for younger children when determining the level of Moral Development of the mentally retarded.

### An Integration of Models

In a longitudinal study Selman (Note 6) interviewed 10 boys on ten socio-moral dilemmas beginning at age 10. The dilemmas, interpersonal and moral in nature, were designed by Kohlberg, Selman and Byrne and later dramatized in sound filmstrips (Note 10), then in four consecutive sessions with three year intervals. Each subject was assigned a role-taking stage which represented his highest level of role-taking consistent across the dilemmas. An examination of the changes in each subject's interview using the longitudinal data was a test for the invariant sequentiality of the role-taking stages. No subjects scored at a lower role-taking stage at a later time period. No subjects jumped two stages over the three year intervals.

To investigate the relationship between the development of perspective-taking ability and the development of moral reasoning, Selman and Damon (1975) analyzed the data from interviews with children from 4 to 10 years old. Sessions with the children had consisted of the presentation of two sound filmstrips depicting two types of social dilemmas and an interview with a series of probe questions. To study levels of perspective-taking, as they are applied to interpersonal relations, social dilemmas depicted in sound filmstrips (Note 10) were presented. "Each socio-interpersonal dilemma confronts the child with questions concerning his or her conception of persons (e.g., motivation, personality) and relationships (e.g., friendship, trust) between persons."

(p. 60). To study justice reasoning, Selman and Damon used sociomoral dilemmas (Note 11) concerning problems of either punitive or positive justice. "Punitive justice measures test for conceptions of transgression, rules, obligation, and punishment; positive justice measures test for concepts of how rewards and resources may be distributed fairly" (p. 62). Subjects are asked to judge what would be a good solution to the dilemma. His response is extensively probed in order to learn his moral reasoning.

Selman's (Note 6) work is a continuation of Feffer's and Flavell's. He states that Flavell's research was only tangentially involved with the study of the child's ability to take or make inferences about another's perspectives.

Selman's (Note 6) structural aspect of role-taking, is defined as:

the development of the understanding of the nature of the relation between the self's and others perspectives. The social informational content upon which this sequence of role-taking structures operate is the developing understanding of just what is a social being, i.e., another's capabilities, attributes, expectations, feelings, motives, potential reactions, and social judgments. As one progresses through the stages of role-taking one has a more mature conception of the complexity of human relations (role-taking structure) and of the social thought processes and motivations of the minds of self and others (role-taking content) (p. 3).

Neither Flavell's analysis, nor Feffer's have made a direct and unified attempt to identify a sequence of qualitative vertical stages of this ability described in formal or structural terms.

Selman (Note 12) has used the sound filmstrip dilemmas (Notes 10 & 11) and reflective syandardized interviews as stated in his manual (Note 3) to assess levels of perspective-taking found in the context of socio-moral and interpersonal (including friendship) dilemmas. The development of 48 boys from the grades 1,2,5, and 6 was examined with use of: 1) four interpersonal interviews for the domains, 2) two measures of perspective-taking--one adopted from Flavell (1968) and one developed by Selman and Byrne (1974), and 3) two logico-physical measures adopted from Piaget and Inhelder (1958).

The child's highest level of performance was scored and used for comparative analysis across the domains. Selman states that a generality of stage across tasks was shown by correlations among four interpersonal dilemmas, which range from .61 to .85. Also, only two of the 47 subjects' scores among the four tasks were at a greater distance than adjacent stages. Selman reports a significant correlation of interpersonal relationship stage to grade level and to perspective-taking level.

A cross tabulation of the highest level of performance across the developmental stages suggests that the highest level of perspective-taking as manifest in separate social context measures emerges at the same time or prior to the assumed structurally parallel level of interpersonal relationship conception (Selman, Note 13, p. 12).

Selman states that the data is evidence of the hypothetical necessary but not sufficient relation of stage of perspective-taking for structurally parallel interpersonal reasoning



stages. Also supporting was the fact that no subject had a higher performance on the interpersonal stage than on the parallel perspective-taking stage.

The following experimental sample was used to test the derived levels:

Selman and Byrne (1974) have constructed a series of four role-taking levels on the basis of: "a) Feffer and Flavell's analysis, b) the previous research of Selman (1971), and c) developmental principles of differentiation (distinguishing perspectives) and integration (relating perspectives)" (p. 804).

Selman and Byrne (1974) have focused on role-taking as it is used within the context of moral dilemmas similar to those developed by Kohlberg (1969), but modified to be more appropriate for young children. The 40 male and female subjects (ages 4,5,8, and 10) were presented with two sound filmstrip dilemmas (Kohlberg and Selman, Note 11). A subsequent interview with standard role-taking questions for each dilemma focused on the assessment of role-taking level. Scoring consisted of the highest level of role-taking ability evident in each of the interviews. Analysis indicated a significant relationship between role-taking level and age. No significant sex differences were found. Results of this study support the hypothesized developmental nature of social role-taking ability. Selman and Byrne state that,

The sequence of structures, which was constructed on the basis of past theory and research, was found to emerge empirically

in an age-related fashion. The age norms closely parallel those reported by Feffer for his system of levels (p. 806).

This research implies that role-taking structures can be identified within the context of moral dilemmas and other interpersonal contexts. Also implied is the similarity in form and sequence of role-taking development to other domains of interpersonal development.

The assessment was not of an individual's level of general functioning, thus the score was for the highest social role-taking stage clearly and consistently evidenced throughout the interviews. Selman (Note 6) states that the stage was scored on the basis of:

a) Subject's ability to differentiate perspectives and to understand the relativity of different perspectives (a structural aspect--differentiation), b) the subjects understanding of the relationship of the perspective of one person to the perspective of the other (a second structural aspect--integration), and c) the psychological content of the self of one person as considered by another. c) refers to the social perspective-taking content logically implied by the structure of a given stage (p. 12).

Selman hypothesizes that Social Perspective-Taking ability is the underlying structure of social development. This construct allows a synthesis of the various developmental models, such as Friendship Development and Moral Development, which this author has chosen for study.

### CHAPTER III

#### METHODOLOGY OF THE STUDY

The purpose of this research was to study the relationship between Moral and Friendship Development and to compare the development of EMR and nonretarded children.

#### Subjects

Participants were all white males of ages 5 to 10 years. The two groups of 15 regular class children and 15 EMR children were equally divided into three groups on the basis of CA. There were five EMR and regular class subjects in each of the following CA groups: 5-6, 7-8, and 9-10. Regular class children were chosen from kindergarten through sixth grade classes at Malcolm Price Lab School, University of Northern Iowa, Cedar Falls, Iowa. This school is located in a middle-class neighborhood in Cedar Falls, of the Cedar Falls-Waterloo metropolitan complex. Teachers chose subjects whom they felt to be average. Two criteria had to be met in order to be chosen: a) the student was judged average by the teacher, and b) the student had no known educational difficulties, such as LD, ED, or speech problems.

EMR subjects were found with the assistance of the school psychologist. Participants were selected on the basis of which child: 1) met the age criteria for the study, and 2) returned his signed parental permission note for participa-

tion. All subjects were in EMR classes as defined by the Rules and Regulations for Special Education Placement for the State of Iowa. Criteria for enrollment in the public school EMR programs requires that the child's I.Q. be between 50 and 80.

The 7 to 10 year old EMR children were taken from EMR classes located in Fredricksburg and Charles City, Iowa. No direct measure of SES was obtained on any subject. The teachers explained that the children tended to be of lower-middle class socioeconomic status and were bussed in from rural areas and small communities. The 5 and 6 year old EMR children were attending schools in Cedar Falls and Waterloo. The Cedar Falls-Waterloo metropolitan area is the third largest in the state.

### Instruments

Three color audio-visual filmstrips, designed for 4 to 10 year olds, were obtained from Guidance Associates, Inc. and used in interviews for the two domains of this study, Moral Development and Friendship Development.

For the Moral Development interview, the filmstrips (Selman & Kohlberg, Note 11) entitled The trouble with truth and You promised! from the series First Things: Values were presented. The program structure for this series has been developed by Dr. Lawrence Kohlberg and Dr. Robert Selman.

The following dilemma summaries are as stated in the filmstrip guide.

### Moral Dilemma--The trouble with truth

Patrick and six of his friends visit the local fishing area with Dave, their camp counselor. As a special treat, Dave has made arrangements with a lobster fisherman to take the children out in his boat for a ride.

When Dave and Captain Conner leave for a few minutes to check weather conditions at the Coast Guard Station, they put Patrick in charge; but before they go, Captain Conner explains his rules about the boat. NOBODY is to set foot on his boat unless he is present. He warns the children that if this important rule is broken, the whole trip is off, and no one will get a ride.

Tempted by gauges, levers, the steering wheel, and some fishing lines on the boat, three children climb aboard. However, the others eventually persuade them to get off before Dave and Captain Conner return.

The children ask Patrick what he intends to do about the kids who got on the boat. Will he tell or not? Patrick's decision is a complicated one because his desire to tell the truth conflicts with several other values strongly held by children Patrick's age. Concern about having and keeping friends, doing things that are fun such as going on a fishing trip, and being fair in regard to the children who stayed off the boat as they had been told, are issues that must be considered.

### Moral Dilemma--You promised!

Holly, the best tree-climber in the neighborhood, attempts to go all the way to the top of the tallest tree around. She makes it to the top but slips and falls on her way down. Holly's father witnesses the fall and rushes over to help. Fortunately, the fall hasn't really hurt Holly, but her father is concerned that another fall might be serious. So Holly promises that she will not climb any more trees until he says it's ok.

Later on that day, as Holly is bike riding with some friends, she sees a kitten up in a tree, afraid to come down. She and her friends stop to help the kitten's owner. The other children are unsuccessful in their

attempts to climb the tree and save the kitten, so Holly is faced with a problem: should she rescue the kitten, or should she keep her promise to her father? What is the right thing for her to do?

For the Friendship Development interview the filmstrip (Selman & Byrne, Note 10) entitled How would you feel? Part 2 from the series First Things: Social Reasoning was presented. The series is based on Robert Selman's and Diane Byrne's (1974) research on social perspective-taking.

#### Friendship Dilemma--How would you feel?

Two good friends, Becky and Kathy, are at school making plans for a Saturday afternoon puppet show at Becky's house. As they leave school, Becky notices that Jeanette, the new girl in their class, is following them. Kathy suggests that they ask Jeanette to walk home with them, but Becky is wary of Jeanette. She thinks Jeanette is a show-off who butts in on games and takes over, but Kathy thinks Jeanette is just trying to make friends. Becky says that if she were in a new school, she would wait and let others make friends with her.

Jeanette runs up to the girls and asks to join them. Kathy welcomes her. She asks Jeanette where she is from and how she likes the school. Becky remains quiet. Kathy says that they can all go sledding together. When Jeanette mentions that she has just gotten new ice skates, Kathy suggests that Becky can help Jeanette learn to skate. Becky says she can try.

Jeanette leaves the girls at her corner after inviting them to visit her sometime. Becky tells Kathy that she likes it better with just the two of them doing things together. They go on to Kathy's house to check over the puppets for Saturday's show. Becky cannot stay and play because she has to go with her mother to buy some new shoes.

Soon after Becky leaves, Kathy gets a phone call from Jeanette, who invites her to

the ice show on Saturday afternoon. Kathy says she will have to discuss it with her parents and then call back. In discussing her dilemma with her mother, she says that she would love to go to the ice show with Jeanette, but if she does, it would mean disappointing Becky. Her mother says it is a hard choice but leaves it up to Kathy to decide. The filmstrip ends when Kathy says she knows what she is going to do and goes to the phone.

In the filmstrip, elementary school-aged children dramatized different levels of reasoning as possible resolutions of the conflicts. The open-ended socio-moral dilemmas are considered to be typical situations in the lives of 4 to 10 year old children. These filmstrips along with standardized interviews comprised the stimuli of the study.

### Interviews

An interview followed each of the three filmstrips to elicit the child's thoughts about morality and friendship. The interviews to assess the subject's Moral Development consisted of a predetermined set of probe questions. These questions were based on the discussion guide found in the filmstrip manual (Selman & Kohlberg, Note 11) and revisions made by this author in collaboration with a teacher of young (5 to 7 years of age) EMR children. Each of the following probe questions was presented to all of the subjects. They are presented here for the convenience of the reader.

### Probing Questions For the trouble with truth

1. What should Patrick do?
2. Should those children who did not go on

the boat be treated the same as those who did? Why?

3. Why did Captain Conner ask the children not to go on the boat in the first place? Did he have a good reason?
4. Why is Captain Conner's rule a good one?
5. Was the Captain's rule fair to the children who did not go on the boat? Why?
6. Suppose Dave and Captain Conner ask Patrick if anyone got on the boat; what should he do then?
7. How do you think Patrick will feel if he lies?
8. What would you do if you were Patrick? Why?
9. How will Dave and Captain Conner feel if they ever find out Patrick didn't tell them the truth?
10. Which is worse, telling on your friends or not telling the counselor what happened? Why?

#### Probing Questions for You promised!

1. What should Holly do?
2. How will Shawn feel if he can't get his kitten down? Why?
3. Was it fair for Holly's father to ask her to promise never to climb trees? Why?
4. What would you do if you were Holly?
5. How will Holly feel if she breaks her promise to her father? How will her father feel?
6. Why did Holly's father ask her to promise not to climb trees in the first place? Did he have a good reason?
7. Suppose that Holly's father asks her if she broke her promise; what should Holly say? Why?
8. Do you think the father should punish Holly for what she did? Why? Why not?
9. Say you were the father. How much would you punish Holly? Why would you do that?



10. Which is worse, a son breaking a promise to his father, or a father breaking a promise to his son?

The following open-ended probe questions were used to assess the subject's Friendship Development. They are presented here as stated in Selman's standardized procedures (Note 2). General probe questions are followed by questions dealing with Selman's specific issues of friendship.

### Friendship Questionnaire

#### I. General Probe Questions

1. What do you think the problem is in this story?
2. What do you think Kathy will do, choose to be with her old friend Becky or go with the new girl Jeanette? Why? Which do you think is more important to be with, an old friend or make new friends? Why
3. Do you have a best friend? What kind of friendship do you have with that person? What makes that person your best friend?

#### II. Formation

- A. Motives--Why friends are important
  1. Why are friends important? Why does a person need a good friend?
- B. Mechanisms--How one goes about making friends.
  1. Is it easy or hard to make a good friend? Why? Why is it sometimes \_\_\_\_\_ (the opposite)?
- C. Ideal Friend--Qualities of persons that make a good friend.
  1. What kind of person makes a good friend?

#### III. Closeness/Intimacy--Different types of friendships and factors which make for close and affectionate friendships.

1. What kind of friendship do you think Kathy and Becky have? (Do you think it is a good or close friendship?) What is a really good

close friendship? Does it take something special to have a very good friendship? What kind of things do good friends know about each other?

2. What kinds of things can good friends talk about that other friends sometimes can't? What kinds of problems can they talk over?
3. What's the difference between the kind of friendship Becky and Kathy have and Kathy and Jeanette's friendship? Are there different kinds of friendship? What's the difference between a regular and best friendship?
4. Which is better to have (be with) one close friend or a group of regular friends? Why?

IV. Trust and Reciprocity--the value and nature of trust and reciprocity in a close friendship.

1. What kinds of things do good friends, like Becky and Kathy do for each other? Is it important to do things for each other for a good friendship? Why?
2. Do you think trust is important for a good friendship? Why?
3. What is trust anyway? Is it something more than just keeping secrets and paying back?

V. Jealousy--the nature of jealousy and its effects on friendship.

1. How do you think Becky feels about the new friendship? Do you think she might get jealous? What do you think she is jealous of?
2. What does it mean to be jealous in a friendship? How can jealousy hurt a friendship?

VI. Conflict Resolution--How arguments or conflicts are settled between good friends and the effect of arguments on friendships.

1. Can people be friends even if they are having arguments? How is that possible?
2. How should arguments or fighting be settled between good friends?
3. What kinds of things do good friends sometimes fight or argue about?

VII. Termination--How and why close friendships breakup.

1. What makes friendships break up? (What makes people not be friends anymore?)
2. What does a person lose when they lose a good friend?
3. Why is it that good friends sometimes grow apart? What does it mean to grow apart from a good friend?

### Procedure

Except for the length of time between the presentation of the second moral dilemma and the presentation of the friendship dilemma, the procedure described below was applied to all subjects. The significant differences in the procedure were that regular class subjects received the two moral dilemmas on one day with the friendship dilemma presented on a separate day about one week later, while the EMR class subjects received both moral and friendship dilemmas on the same day. This difference was dictated by the physical distance separating the examiner and the EMR class subjects (45-50 miles) and the daily schedule of the EMR classes.

The following procedures involved each individual subject's Moral Development and Friendship Development. While establishing rapport and escorting each subject down the hall to a quiet room, the examiner informed him that he would be viewing filmstrips in which there were male and female characters. As an informal check on the subject's familiarity with the dilemma situations, the examiner asked pertinent questions. Before presentation of the first moral dilemma, You promised!, the examiner asked each subject if he liked to climb trees. After the filmstrip presentation, the examiner

presented the subject with a standardized interview to elicit the subject's moral reasoning as it applied to the resolution of the dilemma. Subject responses to all interviews were tape-recorded and later transcribed for scoring processes. Before presentation of the second filmstrip, The trouble with truth, and its subsequent interview, the examiner asked the subject if he had ever been in a boat.

At this point procedures differed somewhat for the normal and EMR groups. Normal subjects were interviewed in two separate (20-25 minutes) sessions with approximately one week intervening between the sessions. Individual interviews with EMR subjects took place in a single (25-45 minutes). This was more convenient, because of: 1) the geographic distance of the various EMR programs away (45 miles to Charles City, 46 miles to Fredricksburg), and 2) a restricted school day schedule for the EMR subjects with integration into regular classes and meetings with other school personnel, such as the speech clinician.

In the second session, for both groups, the examiner presented the friendship dilemma and followed with Selman's (Note 3) standardized interview to elicit the subject's interpersonal reasoning and conceptions of friendship as applied to the resolution of the dilemma.

### Scoring

Two separate scoring systems were used for Moral and Friendship Development. The assessment of Moral Development, a child's particular judgments as solutions to the dilemmas

were not scored, but the reasoning he gave in support of his judgments was classified into stages of thought. The transcripts for the moral dilemmas were scored by this author according to Porter and Taylor's (1972) scoring guide and the stage descriptions discussed by Kohlberg and Turiel (1971). Porter and Taylor state that their guide is a simplified version of Kohlberg's scoring system, which has never been published and is constantly being revised. They describe the basic scoring procedures that have not changed. These procedures, as follows, were used to assign scores to the transcripts of this study.

First read the story and the answers given by the students. Next, read through the stages outlined with the answers given by the student in mind, decide at what stage the answers are. The stage assigned to the pupil for each story may be pure or mixed, as follows:

- Stage 3 - pure stage 3.
- Stage 3(2) - mostly stage 3, some stage 2.
- Stage 2(3) - mostly stage 2 with some stage 3.
- Stage 3? - likely stage 3, but not sure.  
(Porter & Taylor, 1972)

Using the above procedure, all stories answered were assigned a score. After scoring each story for a given student, a Moral Maturity Score for that student was arrived at in the following way:

1. List the final score for each story.
2. Assign a weight of 3 to a pure score for a mixed score. Assign a weight of 2 to the major stage and 1 to the minor stage.
3. Add up the totals for each stage and convert to percentages.

4. In addition to assigning a student a major stage, Kohlberg assigns a Moral Maturity Score. This score is based on a system of stage weighting, assigning stage 1 a weight of 1, stage 2 a weight of 2, and so on. The weight of each stage shown by a student is multiplied by the percentage of his scores at this stage. Accordingly Moral Maturity Scores range from 100 (all stage 1) to 600 (all stage 6).

Friendship Development Score was derived using Selman's manual (Note 2) of Conceptions of Friendship. These following procedures briefly summarize how to assign scores to subject's verbal responses to interview questions.

Each issue-concept, defined as a standardized question and its follow-up probes and responses, is first assigned an issue number.

Second, issue-concepts which produced scoreable utterances are given a single stage score according to the highest reliable stage identified by comparing it with the descriptions offered in the manual. Third, each issue with one or more reliably scored issue-concepts is assigned either a pure stage, when 75% or more of the issue-concepts were at a particular level, or a major/minor stage score. Fourth, the pure and major/minor issue scores are averaged together into an average issue score, computed to the nearest hundredths of a stage (e.g., 2.35).

The following rules and clarifications should be used in scoring subject's responses to Close Friendships interviews. An overview of the scoring instructions is given below.

1. Read interview to evaluate subject's overall level of thinking.
2. Reread interview to assign issues to scoreable issue-concepts.
3. Assign stage scores to scorable issue-concepts used.
4. Scoring clarifications are provided in the manual.
5. Transfer issue-concept scores to appropriate issue on scoring sheet.
6. Compute a pure or major/minor stage score for each issue.

7. Issue scoring clarifications are provided in the manual.
8. Compute an Average Issue Score for all issues with pure or major/minor score.

The procedures developed by both Kohlberg and Selman yield several types of scores, e.g. Highest Score, Global Score, Moral Maturity Score, and Average Issue Score. All these possibilities were computed for this study, but it was decided to report only the MMS and the AIS because they were the closer to continuous measurements.

#### Scoring Check

To enhance accuracy in the scoring of subject's responses to the Moral Development interview, the following steps were taken. Initially, the author met with two UNI professors who have had experience with Kohlberg's scoring procedures. Two protocols were independently scored and then discussed among the group to reconcile differences in scoring. Later, three more protocols were independently scored by group members. These scores were compared with a third UNI professor, whose doctoral dissertation was an application of Kohlberg's theories, and any major differences remaining were discussed with her.

## CHAPTER IV

### RESULTS

The basic data for this study consisted of the Moral Maturity Score, the Average Issue Score, and the Chronological Age for each subject for both the Regular and the EMR students. The subject's CA is expressed as whole months. These data are arrayed in Table 1 and the frequency distributions of the MMS and the AIS scores are displayed further in Table 2.

It should be noted that within the Regular Class subjects four of the five lowest scores were obtained by the youngest children. This was not equally true of the EMR subjects, especially for the AIS data. In the AIS data, 2 of the 6 lowest scores were from the five oldest children and the other 4 were from the five youngest. Perusal of the frequency distributions leads one to focus particularly on the AIS data for the EMR subjects as needing careful interpretation.

To test the correlational research hypotheses of this study the MMS, AIS, and CA scores were intercorrelated within each group and the results arrayed in Table 3. To test the null hypothesis that the value of the relationship of the correlation coefficients are equal to zero, two-tailed t-tests were applied (Ferguson, 1971, p. 169). For this



study it was decided to report as statistically significant results with probability values as large as .10. The results showed a positive correlation in the EMR group between CA and MMS, significant at the .10 level. In the Regular Class group the results showed positive correlations between all three variables significant at the .01 level. To test the difference in correlations between the Regular and EMR groups, a two-tailed significance test procedure (Ferguson, 1971, pp. 170-171) was applied and yielded the results shown in Table 4. The probability levels for the three tests ranged from .10 to .16.

To test the developmental lag hypothesis for this study, the Moral and Friendship Development scores were subjected to t-tests for independent samples and the results are arrayed in Table 5. There was no significant difference between the two groups for chronological age, as was expected. There were significant differences found between the two groups on both the Moral Development Level and the Friendship Development Level.

Table 1  
Basic Data For Comparisons

| <u>EMR Class Placed</u> |     |     |      | <u>Reg. Class Placed</u> |     |     |      |
|-------------------------|-----|-----|------|--------------------------|-----|-----|------|
| Sub.                    | CA  | MMS | AIS  | Sub.                     | CA  | MMS | AIS  |
| 1                       | 71  | 33  | .17  | 16                       | 65  | 100 | .44  |
| 2                       | 76  | 100 | .00  | 17                       | 66  | 100 | .50  |
| 3                       | 82  | 0   | .00  | 18                       | 63  | 100 | .00  |
| 4                       | 81  | 100 | .00  | 19                       | 66  | 100 | .00  |
| 5                       | 70  | 80  | .00  | 20                       | 82  | 167 | .42  |
| 6                       | 103 | 120 | .17  | 21                       | 101 | 140 | .33  |
| 7                       | 89  | 100 | .40  | 22                       | 102 | 220 | 1.00 |
| 8                       | 105 | 120 | .56  | 23                       | 101 | 167 | 1.60 |
| 9                       | 103 | 100 | .22  | 24                       | 90  | 150 | 2.00 |
| 10                      | 102 | 100 | .06  | 25                       | 86  | 167 | 1.00 |
| 11                      | 115 | 100 | .12  | 26                       | 112 | 120 | 1.11 |
| 12                      | 123 | 100 | .00  | 27                       | 128 | 220 | 1.67 |
| 13                      | 130 | 100 | 1.16 | 28                       | 122 | 260 | 2.72 |
| 14                      | 117 | 100 | .08  | 29                       | 127 | 200 | 2.00 |
| 15                      | 117 | 100 | .00  | 30                       | 128 | 267 | 1.50 |

S = Subject  
 CA = Chronological Age in Whole Months  
 MMS = Moral Maturity Score (Moral Development)  
 AIS = Average Issue Score (Friendship Development)

Table 2  
Frequency Distributions

| <u>EMR Class Placed</u> |       |      |       | <u>Req. Class Placed</u> |       |      |       |
|-------------------------|-------|------|-------|--------------------------|-------|------|-------|
| MMS                     | Freq. | AIS  | Freq. | MMS                      | Freq. | AIS  | Freq. |
| 0                       | 1     | 0    | 6     | 100                      | 4     | 0    | 2     |
| 33                      | 1     | .06  | 1     | 120                      | 1     | .33  | 1     |
| 80                      | 1     | .08  | 1     | 140                      | 1     | .42  | 1     |
| 100                     | 10    | .12  | 1     | 150                      | 1     | .44  | 1     |
| 120                     | 2     | .17  | 2     | 167                      | 3     | .50  | 1     |
|                         |       | .22  | 1     | 200                      | 1     | 1.00 | 2     |
|                         |       | .40  | 1     | 220                      | 2     | 1.11 | 1     |
|                         |       | .56  | 1     | 260                      | 1     | 1.50 | 1     |
|                         |       | 1.16 | 1     | 267                      | 1     | 1.61 | 1     |
|                         |       |      |       |                          |       | 1.67 | 1     |
|                         |       |      |       |                          |       | 2.00 | 2     |
|                         |       |      |       |                          |       | 2.72 | 1     |

MMS = Moral Maturity Score  
 AIS = Average Issue Score  
 Freq. = Frequency

Table 3

## Within Sample Correlation Results

| EMR Class Placement |       |     | Reg. Class Placement |       |       |
|---------------------|-------|-----|----------------------|-------|-------|
|                     | CA    | MMS |                      | CA    | MMS   |
| MMS                 | 0.50* |     | MMS                  | .83** |       |
| AIS                 | 0.42  | .23 | AIS                  | .77** | .73** |

\*Significant at the .10 level (Two-Tailed Test)

\*\*Significant at the .01 level (Two-Tailed Test)

Table 4

## Z-Test Results for Between Sample Correlations

|     | CA           | MMS          |
|-----|--------------|--------------|
| MMS | 1.56 (p=.12) |              |
| AIS | 1.40 (p=.16) | 1.79 (p=.10) |

Table entries are the obtained Z values for the differences between correlations.

Table 5

## Means, Variability, and t-Test Results

| Source | EMR Class |           | Reg. Class |           | t    | Prob. |
|--------|-----------|-----------|------------|-----------|------|-------|
|        | Mean      | Std. Dev. | Mean       | Std. Dev. |      |       |
| CA     | 98.93     | 19.61     | 95.93      | 24.21     | -.37 | >.25  |
| MMS    | 90.20     | 31.90     | 165.20     | 57.62     | 4.41 | <.01  |
| AIS    | 0.20      | 0.31      | 1.09       | 0.81      | 3.95 | <.01  |

N= 15 for all groups

## CHAPTER V

### DISCUSSION AND SUMMARY

In this chapter the reader will find a discussion of the theoretical implications, methodological considerations, limitations of the study, and considerations for further research. The discussion is organized under two major headings, i.e. Theoretical Considerations and Methodological Considerations. Under each major heading, the reader will find limitations and considerations for further research appropriate to the discussion of the major ideas being presented. A summary of the entire study is found as the last section of the chapter. The discussion starts with the theoretical implications.

#### Theoretical Considerations

The writings of Selman (1976) and Kohlberg (1969) imply that the conceptions of both friendship and moral maturity tend to develop in a chronological stage-by-age pattern. The performance of the regular class placed subjects in this study essentially agrees with the stage-by-age hypothesis. However, any underlying dimension of MMS and AIS may not be normally distributed. For the regular class placed subjects, the MMS frequency distribution approximates a rectangular distribution. For the same subjects, the AIS distribution is best described as rectangular. So, if Selman (1976) is cor-

rect that a single dimension, like Social Perspective-Taking, underlies both Moral and Friendship Development, it must be suggested that Social Perspective-Taking would have a nearly equal frequency distribution across ages. This author would feel much more comfortable about such a conclusion had the frequency distributions of the EMR placed subjects been shaped similarly to those from regular class placed subjects.

For the EMR subjects, the MMS scores can best be described as a negatively skewed, normal distribution. However, the AIS scores can best be described as a positively skewed J-shape. If one assumes that the friendship task was too difficult for the EMR subjects, it would be possible to argue that a better scaling technique would have yielded a better dispersion of scores, and that the underlying dimension of AIS is normally distributed. Such actual and assumed distributions would then lead one to infer that any dimension underlying Moral and Friendship Development would be normally distributed. Obviously normal and rectangular distributions are not the same. The resolution of the distribution of a potential underlying dimension for both Moral and Friendship Development cannot be obtained from the data in this study. It is intriguing, however, to consider the possibility that EMR subjects develop differently in kind, as well as in quantity, from regular class placed subjects.

Returning to the consideration of stage-by-age relationships for both Friendship and Moral Development, the data from the EMR placed subjects is contradictory. There was a

significant correlation found between age and MMS, which supports Kohlberg, but no significant correlation between age and AIS, which contradicts Selman. Further, the lack of a significant correlation between AIS and MMS for EMR placed subjects also contradicts Selman's hypothesis of a single underlying dimension for both Moral and Friendship Development. This author feels she must conclude that the hypothesized stage-by-age relationship for Friendship Development in EMR placed subjects was not supported. She also feels that the support found for moral maturity must be cautiously presented because of the low magnitude (.50) of the correlation and because of the chance relationship only between MMS and AIS for EMR placed subjects.

The difference in significance of correlation in the EMR subjects' MMS and AIS scores with CA may also reflect a difference in social experiences. Mentally retarded individuals have been isolated by their peers. This isolation and/or rejection may be caused by the EMR subject's lower level of social development and likely has a partial effect in his maintenance of a lower functioning level.

It is possible to argue that the socialization process for the EMR subjects may be different than that for normally developing children. The EMR child may stay closer to home, interact less with peers and have less role-taking experiences with playmates to enhance the movement to a more advanced stage of Friendship Development (One-way assistance). Most of the EMR subjects in this study were from rural areas,

possibly causing the availability of playmates to be more restricted to siblings and to peers at school and Sunday school. The EMR child may have learned to be more dependent on adults for socialization and to play alone. With less involvement with other peers and a greater dependence upon parents, the type of child-rearing practices and opportunities for role-taking experiences within the family may have greater impact on the EMR child than on a 'normal' child. To the extent the above conditions would hold, the obtained lower AIS than MMS for EMR subjects would be predictable. Such a set of conditions might be a productive base for further research.

Selman's work (1976b, 1977) with emotionally disturbed children may give insight for the discrepancies found between EMR placed and regular placed subjects. Selman and his colleagues found that emotionally disturbed children have a tendency to inconsistently express higher stages of development. In kind, similar procedures used in this study may have led to lower AIS scores for EMR subjects because the scores may not have been based on a sufficient sample of the child's verbalizations and possibly did not reflect his highest level of thinking about friendship.

As hypothesized in this study, the EMR subjects lagged behind regular class subjects in both Moral and Friendship Development. This was shown by a significant difference between the two groups for both the AIS means and the MMS means. Also, the frequency distributions showed the EMR subjects scored at lower levels of reasoning about both Friendship and



Moral Development than did the regular class subjects. This may reflect a difference in cognitive-development which has been discussed as necessary but not sufficient for development in the social domains (Kohlberg, 1971; Selman, 1976).

As discussed by Inhelder (1968), concepts of arrestation and/or fixation could partially explain the between groups differences. The egocentric thought characteristics of mentally retarded individuals may have effected an insensitivity to contradictions in social experience and an arrestion in stage development. Such a thought pattern is not considered to be equally likely for normally developing children past age 7 years.

The between group differences in scores, as discussed by Zigler (1969), may also be explained by a motivation variable. A difference in the children's motivational structure, stemming from past experiences, may have led the regular class subjects to offer more verbalization and to be more competitively engaged in the task than was the case for EMR subjects. While Zigler's position cannot be definitively supported from the data in this study, the author did observe differences in the quantity and quality of the responses from the two groups that could have been interpreted as differences in task involvement, or as a desire to do better. Possibly a further study could benefit from manipulating either a competition or a differential level of reinforcement variable.

#### Methodological Considerations

The instruments used in this study appeared to have been

suitable for the regular class placed subjects. However, the EMR placed subjects may have found them too difficult. Prior to the study, the author, herself a certified EMR teacher, and an EMR teacher in Cedar Falls revised the interview questions in an effort to make them comprehensible to EMR level subjects as well as to regular class placed subjects. However, 10 of 15 of the EMR placed subjects received the same Moral Development score (pure stage 1) and 6 of 15 received the same Friendship Development score, the lowest AIS possible. Future studies, then, would have to either revise the interviews or devise new methods to elicit the EMR subjects thinking in order to produce a better dispersion of scores. It is difficult to know beforehand which factors in a story or test situation will make the story harder or easier for a given subject.

In order to develop assessment materials that require activity for which the EMR child is cognitively capable, the researcher should consider the EMR child's lower level of various mental processes. In this study there was no control on I.Q. or Cognitive Development which may account for apparent differences in the subject's performance. It is possible (e.g. Boehm, 1967) that an individually administered I.Q. test or an assessment of (Piagetian) Cognitive Development could reveal differences among the subjects that are contributing to the difference between the groups' AIS and MMS scores. Most EMR subjects seemed more distractible or tangential when responding to the more abstract reasoning task

of the interview questions. Few or pertinent subject responses were elicited from questions that appeared to be more abstract (such as "What is jealousy?" and "What does it mean to grow apart?"). Instead of shifting to the next question, one young EMR subject e.g. continued to perseverate on probe questions that focused on the first moral dilemma (You promised!) throughout the second interview. Thus, the second interview was unscorable.

In comparison of moral and friendship instruments, the moral dilemmas seemed to illustrate more concrete situations and may possibly have been more in line with the EMR child's experiences. Several EMR and younger regular class subjects seemed to verbalize fewer ideas about friendship than about moral judgments. This may have been due to the seemingly more abstract nature of friendship and/or to the possibility of more limited social experiences of young and EMR children. Further research may consider downward extension in scoring criteria that could further differentiate this lower level of friendship noted in the EMR subjects.

A child's number and type of social experiences may differ with his particular locale, such as rural or urban, and thus, partially account for the variance shown in the dependent variables. The child's locale and SES were not fully controlled in this study. However, it seems necessary in future research to control these variables, which have been shown to influence the social development of 'normal' children. Also, it seems likely that the etiology of the retarded-

tion would influence this development and thus, should also be controlled in future studies.

Also, there was a difference in the assessment procedures for Moral and Friendship Development that seems to have interacted with the EMR subjects' attention span. The moral maturity interviews were divided into two parts, whereas verbalizations about friendship were all in response to one longer interview. The younger EMR children had difficulty attending and sitting through the entire session.

In an attempt to circumvent a bias in scoring due to the use of a single dilemma and interview, as Rest (1974) discusses, two moral dilemmas and subsequent interviews were employed. This did not appear to be sufficient, as young and EMR subjects' gave very little information beyond a simple answer to probe questions and in response to "why" questions. In scoring the examiner was practically left to guess in certain instances with very few scoreable responses.

Initially, this author did not deem it necessary to have two filmstrips for the assessment of Friendship Development because Selman's interview procedure contains many more probes than Kohlberg's procedures. However, this author now concludes that the friendship filmstrip and interview which Selman (1976) considered relevant for the young child, are not suitable for EMR subjects. The addition of more dilemmas and a larger number of standardized interview probe questions could resolve this dilemma, but may also add to other problems, such as the short attention span.

Future researchers may wish to consider a more substantial check on the familiarity of subjects with the situations depicted in the two moral dilemmas. In a surface check for this study no significant differences were found between subjects in their reported interests in climbing trees or riding in a boat. Therefore, it was felt that the effects of the story line upon resultant scores was minimal.

In this study the production of scoreable responses may have been more limited, since the examiner did not spontaneously ask further probe questions. In consideration of Rest's (1974) discussion of the procedures in the assessment of Moral Development that cause variances to be produced by a nonstandardized interview, the examiner opted not to deviate from the predetermined set of probe questions for Moral and Friendship Development interviews. This standardization of interview procedures hampered the examiner's attempt to elicit further verbalizations from the children and thus disallowed a more complete sample of the subjects level of reasoning in 1) the revelation of the child's meaning highest level of reasoning, 2) a clarification of the child's meaning, and 3) an application of the concepts to his own personal experience. The effects of this may be significant upon scoring, since, as Rest reports, the child's verbalizations may reveal much less than he was actually able to comprehend or to appreciate.

Other than the variance in scores likely to be caused by instruments, procedures, subjects' cognitive abilities, and

scoring, the subject may show variance within himself. The subject may fluctuate in his own reasoning level when he is in a transition to the next higher stage of development. This transition may not be evident in the limited sample of the child's reasoning given in the experimental situation, but it could affect either his Friendship or Moral Developmental stage score, or both.

### Summary

The purposes of this study were 1) to compare the Moral and Friendship Development of regular class male students with that of age matched EMR male students, and 2) to compare the relationship between Moral and Friendship Development within each group.

The 30 male subjects, 15 from regular classes and 15 from EMR classes, were equally divided into three chronological age groups: 5-6, 7-8, and 9-10. The regular class subjects were attending the UNI lab school; EMR subjects were attending public schools in Fredricksburg, Charles City, Cedar Falls and Waterloo, Iowa.

Each subject was presented with three filmstrips and three subsequent standardized interviews. Two of the filmstrips and interviews were to elicit the subject's moral reasoning. One filmstrip and its subsequent interview was to elicit the subject's ideas about friendship. For regular class subjects the interviews took place in two sessions with approximately one week intervening between them. For EMR subjects both interviews took place in one session. This

arrangement was more suitable for the examiner and the school, because of 1) the distance to the towns where the special classes were located and 2) the busy schedule of the EMR child's school day.

The children's interviews were tape-recorded and later transcribed for scoring purposes. The children's explanations of their moral judgments were scored according to Porter and Taylor's manual (1972), which is based on Kohlberg's stages of Moral Development (MMS scores). Children's thinking and conceptions of friendship were scored according to Selman's (Note 3) Assessing Interpersonal Understanding: An Interview and Scoring Manual and converted to Average Issue Scores (AIS).

Findings of this study showed EMR students to lag behind regular class subjects in both Moral and Friendship Development. For regular class subjects, Moral and Friendship Development were shown to be highly correlated with CA and thus showed the stage-by-age developmental patterns as discussed by Kohlberg (1969) and Selman (Note 2). Moral and Friendship Development were also significantly correlated, which supports Selman's hypothesis of commensurate development and a common structure underlying the social developmental models.

For EMR subjects, only CA and Moral Development were significantly correlated. Thus, it appears that EMR subjects' moral maturity may develop in a like, stage-by-age developmental pattern, although slower, than regular class subjects. The lack of a significant relationship between CA and AIS

scores can suggest that the EMR subjects do not develop according to Selman's conceptual stages of Friendship Development. In conjunction with the frequency distributions, this lack of a significant correlation could also suggest that the instruments employed may not be differentiating between the EMR subjects in their Friendship Development. The frequency distribution of the MMS scores for EMR subjects suggests that the instruments used in the assessment of Moral Development also may not be differentiating between EMR subjects. Another possibility is that the significant correlation between CA and MMS scores and not between CA and AIS scores suggests a difference in the social experiences and development for EMR subjects.

Caution in the interpretation of these findings is suggested as there were several sources of variation not completely controlled in this study, i.e. familiarity of the subjects with the experimental stimuli, the difficulty in the downward extension of interview probes from older to a younger level, the SES of the subjects, and the extent of prior socialization.



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## APPENDIX A

### DEFINITIONS OF FRIENDSHIP STAGES

Definitions as found in Selman (Note 3)



## APPENDIX A

CONCEPTIONS OF CLOSE DYADIC FRIENDSHIPS

Stage 0 - Momentary physicalistic playmates. Dyadic friendship relations are based on thinking which focuses upon propinquity and proximity (i.e., physicalistic parameters) to the exclusion of others. A close friend is someone who lives close by and with whom the self happens to be playing with at the moment. Friendship is more accurately playmateship. Issues such as jealousy or the intrusion of a third party into a play situation are constructed by the child at Stage 0 as specific fights over specific toys or space rather than as fights which involve personal feelings.

Stage 1 - One-way assistance. Friendship conceptions at Stage 1 are one-way in the sense that a friend is seen as important because he or she performs specific activities which the self wants done or accomplished. In other words, one person's attitude is unreflectively set up as a standard, and the friends' actions must match the standard thus formulated. A close friend is someone with more than Stage 0 demographic credentials (e.g., lives close by). A close friend is someone who one knows better than other friends, in terms of one-way knowledge of other's likes and dislikes.

Stage 2 - Fairweather cooperation. The advance of Stage 2 friendships over the previous stages is based on the new awareness of interpersonal perspectives as reciprocal. The two-way nature of friendships is exemplified by concerns for coordinating and approximating through adjustment by both self and other, the specific likes and dislikes of self and other, rather than matching one person's actions to the other's fixed standard of expectation. The limitation of this level is the discontinuity of these reciprocal expectations. Friendship at Stage 2 is fairweather--specific arguments are seen as severing the relationship although both parties may still have affection for one another "inside." The coordination of attitudes at the moment defines the relation. No underlying continuity exists which maintains the relation and allows for a conception of the relationship during the period of conflict or adjustment.

Stage 3 - Intimate and mutually shared relationships. At stage 3 there is the awareness of both a continuity of relation and affective bonding between close friends. The importance of friendship does not rest only upon the fact that the self is bored or lonely as at previous stages; at Stage 3,

friendships are seen as a basic means of developing mutual intimacy and mutual support. Friends share personal problems; the occurrence of conflicts between friends does not mean the suspension of the relation itself, because the underlying continuity between the partners transcends specific and minor foul weather incidents. The limitation of Stage 3 arises from the overemphasis of the two person clique, and the possessiveness that arises out of the realization that close relations are difficult to form and to maintain in that they take constant effort.

Stage 4 - Autonomous interdependent friendships. The interdependence which characterizes Stage 4 is a sense that a friendship continues to grow and be transformed through each partner's ability to synthesize feelings of independence and dependence. Independence means that each person accepts the other's need to establish relations with others and to grow through such experiences. Dependence reflects the awareness that friends must rely on each other for psychological support, to draw strength from each other, and to gain a sense of self-identification through identification with other as a significant person whose relation to the self is qualitatively distinct from less meaningful relations.

## APPENDIX B

### DEFINITION OF MORAL STAGES

Definitions as found in Kohlberg (1971)

## APPENDIX B

## Definition of Moral Stages

## I. Preconventional level

At this level the child is responsive to cultural rules and labels of good and bad, right or wrong, but interprets these labels in terms of either the physical or the hedonistic consequences of action (punishment, reward, exchange of favors), or in terms of the physical power of those who enunciate the rules and labels. The level is divided into the following two stages.

Stage 1: The punishment and obedience orientation. The physical consequences of action determine its goodness or badness regardless of the human meaning or value of these consequences. Avoidance of punishment and unquestioning deference to power are valued in their own right, not in terms of respect for an underlying moral order supported by punishment and authority (the latter being stage 4).

Stage 2: The instrumental, relativist orientation. Right action consists of that which instrumentally satisfies one's own needs and occasionally the needs of others. Human relations are viewed in terms like those of the market place. Elements of fairness, of reciprocity, and of equal sharing are present, but they are always interpreted in a physical pragmatic way. Reciprocity is a matter of "you scratch my back and I'll scratch yours," not of loyalty, gratitude, or justice.

## II. Conventional level

At this level, maintaining the expectations of the individual's family, group, or nation is perceived as valuable in its own right, regardless of immediate and obvious consequences. The attitude is not only one of conformity to personal expectations and social order, but of loyalty to it, of actively maintaining, supporting, and justifying the order, and of identifying with the persons or group involved in it. At this level, there are the following two stages:

Stage 3: The interpersonal concordance or "good boy--nice girl" orientation. Good behavior is that which pleases or helps others and is approved by them. There is much conformity to stereotypical images of what is majority or

"natural" behavior. Behavior is frequently judged by intention-- "he means well" becomes important for the first time. One earns approval by being "nice."

Stage 4: The "law and order" orientation. There is orientation toward authority, fixed rules, and the maintenance of the social order. Right behavior consists of doing one's duty, showing respect for authority, and maintaining the given social order for it's own sake.

### III. Postconventional, autonomous, or principled level

At this level, there is a clear effort to define moral values and principles which have validity and application apart from the authority of the group or persons holding these principles, and apart from the individual's own identification with these groups. This level again has two stages:

Stage 5: The social-contract, legalistic orientation, generally with utilitarian over-tones. Right action tends to be defined in terms of general individual rights, and standards which have been critically examined and agreed upon by the whole society. There is a clear awareness of the relativism of personal values and opinions and a corresponding emphasis upon procedural rules for reaching consensus. Aside from what is constitutionally and democratically agreed upon, the right is a matter of personal "values" and opinions." The result is an emphasis upon the "legal point of view," but with an emphasis upon the possibility of changing law in terms of rational considerations of social utility (rather than freezing it in terms of stage 4 "law and order.") Outside the legal realm, free agreement and contract is the binding element of obligation. This is the "official" morality of the American government and constitution.

Stage 6: The universal, ethical principle orientation. Right is defined by the decision of conscience in accord with self-chosen ethical principles appealing to logical comprehensiveness, universality, and consistency. These principles are abstract and ethical (the Golden Rule, the categorical imperative); they are not concrete moral rules like the Ten Commandments. At heart, these are universal principles of justice, of the reciprocity and equality of human rights, and of respect for the dignity of human beings as individual persons.

## APPENDIX C

### DEFINITIONS OF SOCIAL PERSPECTIVE-TAKING STAGES

Definitions as found in Selman (Note 3)

## APPENDIX C

SOCIAL PERSPECTIVE-TAKING (relation between  
perspectives of self and other(s))

Stage 0 - Egocentric or undifferentiated perspectives. Although the child can recognize the reality of subjective perspectives (e.g., thoughts and feelings) within the self and within other, because he does not clearly distinguish his own perspective from that of other, he does not recognize that another may interpret similarly perceived social experiences or courses of action differently from the way he/she does. Similarly, there is still some confusion between the subjective (or psychological) and objective (or physical) aspects of the social world, for example, between feelings and overt acts, or between intentional and unintentional acts.

Stage 1 - Subjective or differentiated perspectives. The child understands that even under similarly perceived social circumstances the self and other's perspective may be either the same or different from each others'. Similarly, the child realizes that the self and other may view similarly perceived actions as reflections of disparate or distinct individual reasons or motives. Of particular importance, the child at Stage 1 is newly concerned with the uniqueness of the covert, psychological life of each person.

Stage 2 - Self-reflective or reciprocal perspectives. The child is able to reflect on his own thoughts and feelings from another's perspective--to put himself in the other's shoes and to see the self as a subject to other. This new awareness of the relation between self and other's perspective also allows the child to consider his own conceptions and evaluations of other's thoughts and actions. In other words, the child is able to take a second-person perspective which leads to an awareness of a new form of reciprocity, a reciprocity of thoughts and feelings (I know that he likes me; he knows that I like him) rather than a reciprocity of action (he does for me--I do for him).

Stage 3 - Third person or mutual perspectives. The subject at Stage 3, aware of the infinite regress potential of the chaining of reciprocal perspectives, moves to a qualitatively new level of awareness, the awareness of person's ability to abstractly step outside of an interpersonal interaction and coordinate simultaneously the perspectives of each party in the interaction. This ability to take the third-person perspective leads to the awareness of the mutuality of human

perspectives and hence of the self-other relationship.

Stage 4 - Societal or in-depth perspectives. The subject conceptualizes subjective perspectives of persons toward one another (mutuality) to exist not only on the plane of common expectations or awareness, but also simultaneously at multi-dimensional or deeper levels of communication. For example, perspectives between two persons can be shared at the level of superficial information, at the level of common interests, or at the level of deeper and un verbalized feelings. Also, perspectives among persons are seen as forming a network or system. These perspectives become generalized--e.g., into the concept of society's perspective, or the legal or moral point of view.