



Relations of Change in Condition Severity and School Self-Concept to Change in Achievement-Related Behavior in Children With Asthma or Epilepsy

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The purpose of this study was to examine, in children with either asthma or epilepsy, the relation of gender, change in condition severity, and change in school self-concept to change in teachers' ratings of academic-related behavior. Children with asthma ($n = 110$) and children with epilepsy ($n = 117$) were assessed at two times, 4 years apart, with the Adaptive Functioning section of the Teacher Report Form (TRF) of the Child Behavior Checklist and the School Self-Concept subscale of the Piers-Harris Self-Concept Scale for Children. Overall, children with asthma improved more than the children with epilepsy. Change in condition severity was significantly related to Academic Performance for children with epilepsy, with those having high severity at both times doing less well. For the children with asthma, change in condition severity was related to changes in Academic Performance, Happy, Learning, and Total Adaptive Functioning. School Self-Concept was related to changes in Working Hard, Happy, Behaving Appropriately, Learning, and Total Adaptive Functioning only for children with epilepsy. With the exception of children with high-severity epilepsy over time, the majority of the children were near the population mean in achievement-related behavior at follow-up. © 2000 Society for the Study of School Psychology. Published by Elsevier Science Ltd

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Chronic illness in children presents challenges in physical, social, and personal spheres. As a group, children with chronic illness may be more susceptible to school problems than their healthy peers (Thompson & Gustafson, 1996). Within the group of children with chronic conditions, however, some are more at risk for school problems than others. In a review of achievement and asthma, Bender (1995) concluded that, for the vast majority of children with asthma, there is no evidence of significant educational problems. Howe, Feinstein, Reiss, Molock, and Berger (1993) found children with chronic neurological conditions more likely to experience academic problems than those whose conditions did not have a neurological basis. Other researchers have found children with epilepsy to have more

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difficulty in academic achievement than would be predicted by their intellectual ability (e.g., Seidenberg & Berent, 1992; Sturniolo & Galletti, 1994).

There are two general approaches to studying academic achievement in children with chronic illness: (a) across two or more illnesses, or (b) within specific illnesses. By comparing both across and within chronic illness groups, it becomes possible to identify subgroups of children who are at increased risk for academic problems (Nassau & Drotar, 1997). In addition, studying children over time helps to identify factors that contribute to change in academic achievement. In the present study, the authors compared changes in academic performance and adaptive functioning across and within samples of children with epilepsy and children with asthma over a 4-year period.

Prior studies have examined academic achievement across chronic conditions. Guerin (1979) compared teachers' ratings in children with 19 different health conditions and found that students with epilepsy and those taking medications for hyperactivity had the most academic difficulty. Fowler, Johnson, and Atkinson (1985) studied 270 children with 1 of 11 different chronic conditions. Those with epilepsy, sickle-cell disease, or spina bifida showed the most difficulty with academic achievement. The children with epilepsy were at the 39th percentile, as compared to the state median of the 63rd percentile. Feeman and Hagen (1990) found that children with epilepsy had significantly lower achievement in reading and mathematics than either their healthy siblings or an unrelated healthy comparison sample. Other well-designed studies have found that children with epilepsy tend to have more academic problems than children with other chronic conditions (e.g., Rutter, Tizard, & Whitmore, 1970).

Studies of achievement within epilepsy samples yield inconsistent results. Seidenberg et al. (1986) found that children with epilepsy did worse in arithmetic and spelling, and performed best in word recognition. Older age, earlier age at onset, and greater total lifetime seizure frequency were associated with different areas of academic achievement. Sturniolo and Galletti (1994) found that 61% of children with idiopathic epilepsy showed less progress in almost all academic subjects than would be indicated by their IQ. Williams et al. (1996) obtained school-administered achievement test data and parent ratings of behavior in 84 children diagnosed with controlled or uncontrolled complex partial or absence seizures. Seizure type was not related to achievement or the parents' ratings, but poor seizure control was significantly related to lower reading achievement, more attention problems, and more social withdrawal. Mitchell, Chavez, Lee, and Guzman (1991) found that seizure variables of severity, duration, and treatment with antiepilepsy medication were not significantly related to academic achievement. Boys with epilepsy often do less well in school than girls (e.g., Austin, Huberty, Huster, & Dunn, 1998; Fowler, et al., 1985;

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