THE REVISITATION OF THE PSYCHOSOCIAL ISSUE OF TRUST/MISTRUST IN NEW MOTHERS

DISSERTATION

Presented in Partial Fulfillment of the Requirements for the Degree Doctor of Philosophy in the Graduate School of The Ohio State University

By

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ABSTRACT

This study investigated parenting as a catalyst for adult development. It extends Erikson’s life-span theory based on a theoretical framework termed revisitation. The participants were volunteers: 11 mothers of infants and a comparison group of 11 mothers of older children (3- to 10-years old).

Three theoretical propositions were investigated:

1. The attention directed to a psychosocial developmental issue (saliency) is a construct different from and independent of the current belief system that is held about a psychosocial developmental issue (resolution).

2. Parents experience a high level of saliency of childhood psychosocial issues (revisitation).

3. Parents revisit the childhood issues that parallel the ascendant developmental issues of their children (parallelism).

This study focused on first-time mothers of infants and the psychosocial issue of trust/mistrust. Multiple instruments were used to measure saliency of psychosocial issues: (a) a narrative interview, (b) a self-report Q-sort, and (c) a Thematic Apperception Test (TAT).
Findings supported saliency and resolution as independent constructs. Descriptive data supported the existence of revisitation. Three childhood issues (trust, industry, and identity) were highly salient for new mothers. Support for parallelism was mixed: (a) descriptive evidence indicated trust/mistrust was of above average saliency for new mothers, (b) trust/mistrust was significantly more salient than other childhood issues in 14 of 16 comparisons, and (c) two of three saliency instruments indicated trust/mistrust as significantly more salient for mothers of infants than for mothers of older children.

Measurement issues of particular interest were as follows. Of the three measures used, the interview methodology provided the most support for the hypotheses. A coding scheme was developed that defined Erikson’s eight psychosocial issues in terms of adult lived experiences. Self-reported trust saliency as measured by the Q-sort changed for mothers of infants after participating in reflective activities. The effect of pairing reflective, qualitative measures with quantitative, self-report measures is discussed. In the triangulation of findings, the TAT was the most divergent. The impact of life events on saliencies that reside at an unconscious level is discussed.

Recommendations for future research and implications for family life practice in the area of transition to parenthood are included.
Dedicated to:

My daughters, Christine Marie and Margot Marie, who were profound teachers

Jean Illsley Clarke who first introduced me to the theoretical propositions of this study, inspired me to explore them, and demonstrated for me the elegance of transformative education

Patricia Iams whose willingness to trust her own intuition renewed my Spirit and opened new worlds to me

My husband, Ralph, who everyday of this project invited me to experience first-hand the joy and comfort of learning to put one's trust in another
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different program area eventually, I respect their work greatly and remain an ambassador for the critical role of their discipline in promoting family well being.

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Finally, I wish to acknowledge my LCA friends. I bring pieces of their wisdom to every project I undertake. I hope they can see themselves in various ways within this document. We have shared a long history of accomplishments together, both personally and professionally. It was those proud accomplishments that prepared me for this current endeavor. Thank you dear friends.
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CHAPTER 1

INTRODUCTION

Background of the Present Study

The basis of the present study was a theoretical construct termed “revisitation.”

The first assumption of a revisitation theoretical framework is that adults experience continued development throughout adulthood (Ambert, 1992; Cowan, 1988; Erikson, 1950/1963; Haan, Millsap, & Hartka, 1986; Hawkins, Christianson, & Sargent, 1993; Helson & Moane, 1987; Levinson, 1978, 1986; Loevinger, 1976; Lowenthal, Thurnher, & Chiriboga, 1975; Newman & Newman, 1988; Palkovitz, 1996; Snarey, Son, Kuehne, Hauser, & Vaillant, 1987; Stewart, Franz, & Layton, 1988; Whitbourne, Zaschlaf, Elliot, & Waterman, 1992; Vaillant & Milofsky, 1980). Although trait psychology has convincingly supported a stable adult personality based on the Big Five (neuroticism, extroversion, openness to experience, agreeableness, and conscientiousness), several scholars have chosen to define adult development in ways that go beyond trait psychology and in so doing have been able to show empirical support for change as well as stability (Haan et al., 1986; Helson, 1993; Whitbourne et al., 1992). Whitbourne et al. (1992) have concluded that research which has found stability rather than change has done so by measuring variables that are by definition
stable and by using instruments psychometrically refined for reliability. In contrast, they maintain that measures intended to be sensitive to change support lifelong change in personality.

The second assumption of a revisitation framework is that adults continue to confront childhood psychosocial issues throughout adulthood, which is an assumption based on an extension of Erikson’s life-span theory of human development and on theoretical principles explored in clinical (Benedek, 1959; James, 1995; Levin, 1988) and parent education literature (Clarke, 1978; Clarke & Dawson, 1998). Revisitation is the term used in this study to describe the psychosocial phenomenon of adults having the opportunity to rethink and reexperience prior developmental tasks in a way that can enable them to resolve the earlier crises of childhood stages in new, more sophisticated, better functioning ways (Antonucci & Mikus, 1988; Benedek, 1959; Clarke, 1978; Clarke & Dawson, 1998; Elson, 1984; Levin, 1988). It suggests that continued adult development can be explained not only in terms of Erikson’s three post-adolescent issues (intimacy, generativity, and integrity), but equally and significantly can be explained in terms of new confrontations with the childhood developmental issues of trust, autonomy, initiative, industry, and identity within adult contexts. Erikson describes revisiting work as not precluding the work of new stages in any way, but rather as overlaying current psychosocial crises. “The individual is also increasingly engaged in . . . reexperiencing those tensions that were inadequately integrated when they were focal; similarly engaged are those whose age-appropriate
integration was then, but is no longer, adequate” (Erikson, Erikson, & Kivnick, 1986, p. 39).

A revisitation framework suggests that the revisiting of Erikson’s childhood developmental issues is not random, but rather is triggered by life events. According to Erikson’s life-span theory, developmental tasks are first encountered at points of ascendancy, at sensitive periods that are times when all systems are both internally and externally receptive to change (Newman & Newman, 1999). Revisitation presumes that the revisiting of issues will also require this same systemic readiness and proposes that profound life experiences can create such a systemic readiness for development.

The present study proposed that parenting is one life experience that has the pervasive magnitude in a person’s life to create developmental readiness and, thus, act as a trigger to revisitation (Hawkins et al., 1993; Palkovitz, 1996). Parenting and psychosocial issues have been inseparably connected by most all developmental theorists, but this connection has been primarily unidirectional, focusing on the impact of parenting on the work of the child within each psychosocial stage. Very little has been theorized and even less researched about the impact of parenting on the parent from a developmental task perspective (Bernath & Feshbach, 1995; Heath, 1978; Newman & Newman, 1988; Palkovitz, 1996). This is a notable gap in the literature in view of the upsurge in bi-directional thinking about human functioning.

Furthermore, the present study suggested that parenting can trigger the revisiting process in predictable ways. The present study proposed that parents are likely to revisit the developmental tasks that are currently challenging the child whom
they are parenting (Benedek, 1970; Clarke, 1978; Clarke & Dawson, 1998; Levin, 1988). This pattern is termed parallelism. For example, parents of infants will likely be triggered into making new decisions about trusting themselves and others; parents of preschoolers will likely focus on thoughts, feelings, and behaviors regarding their own personal power; and parents of teenagers will likely struggle with their own sexuality or individuation.

Revisitation suggests that, as a result of revisiting earlier childhood tasks, there is a potential for resolutions of psychosocial issues to be made anew at a more sophisticated level, making such resolutions more functional and applicable to one’s adult life. In other words, the act of parenting may be creating sensitive periods or what Havighurst (1972) refers to as “teachable moments.” Through the process of revisitation, a prior developmental task can be approached with new skills and attributes enabling a more thorough, sophisticated accomplishment of the task than was previously possible (Antonucci & Mikus, 1988; Benedek, 1959; Clarke, 1978; Clarke & Dawson, 1998; Elson, 1984).

The Present Study

The literature supports two apparently separate constructs with regard to adult development: (a) adults continue to be challenged by new, adult developmental tasks throughout life (Ambert, 1992; Cowan, 1988; Erikson, 1950/1963; Haan et al., 1986; Hawkins et al., 1993; Helson & Moane, 1987; Levinson, 1978, 1986; Loevinger, 1976; Lowenthal et al., 1975; Newman & Newman, 1988; Palkovitz, 1996; Snarey et
al., 1987; Vaillant & Milofsky, 1980; Whitbourne et al., 1992) and (b) adults also continue to work on childhood developmental tasks throughout life (Erikson, 1950/1963; Newman & Newman, 1988; Snarey et al., 1987; Whitbourne et al., 1992). The present study investigated a possible relationship between these two premises by suggesting that the second premise (continued work on childhood tasks) is a mechanism for the first premise of continued development throughout adulthood.

Theorists have suggested that life experience is a developmental trigger (Newman & Newman 1999; Snarey et al., 1987; Whitbourne et al., 1992; Whitbourne & Tesh, 1985). Furthermore, parenting has been identified as a particular life experience that can be a catalyst for developmental change (Hawkins et al., 1993; Newman & Newman, 1988; Palkovitz, 1996; Snarey et al., 1987). This study suggested that life events, and parenting in particular, facilitate continued adult development through their capacity to act as triggers for the re-visitation of childhood developmental issues.

The purpose of this study was to explore the connection between adult development and parenting by defining and validating the revisiting of childhood psychosocial issues within the context of parenting. Although there is theory to support the concept of re-visitation in the literature, developmental theorists and researchers have given little attention to the empirical investigation of revisiting past childhood psychosocial issues and have not, heretofore, considered this process specifically within the context of parenting.
This study tested three propositions of a revisitation adult development theoretical framework:

1. The saliency of a psychosocial developmental issue (attention directed to the issue) is a construct independent of the resolution of an issue (a belief system about the issue).

2. Parents experience high levels of saliency of childhood psychosocial issues (revisitation).

3. Parents revisit the childhood issues that parallel the ascendant developmental issues of their children (parallelism).

In order to operationalize revisitation and parallelism, the present study focused on new mothers. The premise was that the intensely intimate and physical care of an infant would likely invite (perhaps demand) that a new mother revisit the psychosocial issue of trust/mistrust and be challenged (in an adult context) by developmental tasks that are similar to her infant’s developmental tasks. For example, a new mother would be challenged to (a) trust her assessment of her own needs as well as her baby’s needs, (b) be willing to ask for help, (c) believe that her needs and the needs of her baby will be met, (d) trust others, (e) expect that others will offer needed care, (f) accept care that is offered, (g) believe that she deserves care, (h) find joy in sensual, non-sexual contact and intimacy, (i) remain calm, relaxed, and easy going, and (j) be hopeful about her OKness and the OKness of the world around her.

This study investigated whether earlier childhood developmental issues were salient for mothers during their first six months of parenting. To test parallelism, this
The study investigated the relationship between parenting an infant and the saliency of the issue of trust/mistrust, which, according to Erikson, is the ascendant psychosocial issue of infants. The saliency levels of trust/mistrust were compared to the saliencies of the other four childhood issues for new mothers, and trust/mistrust saliency levels for new mothers were compared to trust saliency levels for mothers of older children.

The present study focused on mothers rather than both mothers and fathers, because at this beginning stage of research on revisitation the confounding effect of gender could best be controlled by using a homogeneous sample. The literature supports that men and women experience parenting differently (Cowan et al., 1985; Richman, 1989) and that, generally speaking, parental saliency is greater for mothers than for fathers (Cowan et al., 1985; Palkovitz, 1996). Because degree of investment and degree of influence can be assumed to be directly related (Hawkins et al., 1993; Palkovitz, 1996), it is logical to expect that evidence of the revisiting of childhood psychosocial crises via the parenting role would be more readily observable in mothers than in fathers.

It is recognized that the impact of parenting on the adult growth and development of fathers is equally important to that of mothers. Once the revisitation construct is more clearly characterized and valid measures determined, it is recommended that revisitation be studied with fathers.

This study represented the beginning of revisitation research. It required an investigation of both theory and measurement. Multiple measures were employed that included both qualitative and quantitative methodology. Three new researcher-
developed measurement tools were used: a quantitatve psychosocial resolution measure adapted to capture saliency rather than resolution; a semi-structured interview that included the construction of personal narratives by the respondents; and a psychosocial issue coding scheme used for scoring interview responses and Thematic Apperception Test imaginary stories. Investigations of the validity and reliability of these measurement tools are also part of this study.

Importance of the Present Study

Generally speaking, scholarly work on adult development has focused more on the substance and description of adult developmental stages or tasks than on the dynamics and mechanisms of development. The present study focused on defining and validating two processes (revisitation and parallelism) that are proposed as mechanisms and dynamics of development in early adulthood.

Although Erikson’s life-span theory of development has enjoyed widespread acceptance, there are notable gaps in the empirical study of his theory. A particularly neglected feature of Erikson’s theory has been his references to revisiting childhood developmental issues. Although revisitation is widely referenced in various forms by researchers and theorists, little empirical data has focused on this concept, and no studies have investigated this process specifically within the context of parenting. Two interrelated purposes of the present study were to define and validate the revisitation process and to develop instrumentation for further empirical study of Erikson’s life-span theory as it relates to adult development.
Although most all developmental theorists have inseparably connected parenting and psychosocial stages, this connection has been primarily unidirectional, focusing on the impact of parenting on the developmental work of the child. Very little has been theorized, and even less researched, about developmental reciprocity between parent and child (Bernath & Feshbach, 1995; Hawkins et al., 1993; Heath, 1978; Newman & Newman, 1988; Palkovitz, 1996). This is a notable gap in the literature in view of the upsurge in ecological, bi-directional thinking about human functioning. Bi-directional thinking assumes that if performance of the parenting role impacts a child’s development, a reciprocal impact on the parent’s development should be expected (Palkovitz, 1996). The present study specifically addressed the potential for adult development through the performance of the parenting role.

Thus, one value of this study was theoretical. Little is known empirically about the mechanisms of adult development. In particular, little is known about the relationship of adult development to the revisiting of childhood issues or to the role of parenting. Testing these relationships will expand theoretical knowledge and encourage research about mechanisms of adult development, especially within the context of parenting.

A second value of this study is practical. Although much is known and integrated into practice about the impact of the parenting role on the development of children and positive child outcomes, very little is known or integrated into practice about the impact of the performance of the parenting role on the parent (Newman & Newman, 1988). Role theory dictates that those adult roles that seem to be in vain or
to be without personal gain are the least likely to persist and become salient (Turner, 1978). Thus, understanding the reciprocity of parenting and its capacity for encouraging the development of both parent and child can encourage a greater investment by parents in the parenting role. Furthermore, such understanding can provide direction for family life professionals in designing more effective support and interventions for parents.

Assumptions of the Present Study

1. That adults experience a continual development throughout adulthood and that the nature of that development is consistent with Erikson’s eight psychosocial stages (trust/mistrust, autonomy/shame and doubt, initiative/guilt, industry/inferiority, identity/identity diffusion, intimacy/isolation, generativity/stagnation, and integrity/despair).

2. That adults revisit the issues of Erikson’s childhood stages (trust/mistrust, autonomy/shame and doubt, initiative/guilt, industry/inferiority, and identity/identity diffusion) and are capable of continued work on the resolution of those issues.

3. That life experience is a catalyst for continued development in adulthood.

4. That parenting is a life experience that is profound and pervasive enough in a person’s life to act as a catalyst for continued development in adulthood.
Hypotheses

Hypothesis One

The level of saliency of a psychosocial developmental issue will be unrelated to the level of resolution of the respective psychosocial developmental issue.

Hypothesis Two

For mothers of infants, the saliency of the psychosocial issue of trust/mistrust will be greater than the saliency of the other childhood psychosocial issues.

Hypothesis Three

The psychosocial issue of trust/mistrust will be more salient for mothers of infants than for mothers of older children.

Definition of Terms

Adult developmental issues: Erikson’s last three developmental issues, which he proposed were confronted and resolved during adulthood: intimacy/isolation, generativity/stagnation, and integrity/despair.

Childhood developmental issues: Erikson’s first five developmental issues, which he proposed were initially confronted and resolved during childhood: trust/mistrust, autonomy/shame and doubt, initiative/guilt, industry/inferiority, identity/identity diffusion.

Development: systematic and successive change over time.

Developmental stage/crisis/issue: The terms psychosocial stage, developmental crisis, and developmental issue are used interchangeably and refer to Erikson’s eight
psychosocial stages of trust/mistrust, autonomy/shame and doubt, initiative/guilt, 
industry/inferiority, identity/identity diffusion, intimacy/isolation, 
generativity/stagnation, and integrity/despair.

**Infants:** children ages birth to 6 months.

**Mistrust:** the negative aspects of the first psychosocial issue as described by 
Erikson and other human development scholars: lack of “social mutuality” (Erikson, 
1950/1963, p. 221); “. . . withdrawal into themselves . . . when at odds with 
themselves and with others . . . attempts to control by duress rather than by reciprocity 
. . . impressions of having been deprived, . . . divided, . . . abandoned” (Erikson, 1959, 
pp. 56-61); “If mistrust wins out over trust, . . . the adult, may be frustrated, 
withdrawn, suspicious, and lacking in self-confidence” (Miller, 1993, p. 162); 
“. . . doubt in one’s own lovableness . . . doubt about the trustworthiness of the 

**Older children:** children aged three- to ten-years-old.

**Personality:** a comprehensive, complex mixture of (a) personal, internal, 
psychological traits and (b) identity and self concepts that result in worldviews or ego 
qualities as defined by Erikson’s eight stages of human development (hope, will, 
purpose, competence, fidelity, love, care, and wisdom).

**Resolution of psychosocial issues:** a view of self and the world that 
incorporates a balance of both positive and negative forces related to a given crisis.

**Saliency of psychosocial issues:** the level of ascendency, importance, or 
attention that a developmental issue has for an individual.
Trust: the positive aspects of the first psychosocial issue as described by Erikson and other human development scholars: “. . . a reasonable trustfulness as far as others are concerned and a simple sense of trustworthiness as far as oneself is concerned. . . ‘to get,’ not in the sense of ‘go and get’ but in that of receiving and accepting what is given” (Erikson, 1959, pp. 56-8); “. . . a sense of trust, or confidence, that the world is good” (Berk, 1997, p. 17); “. . . the sense that there is some correspondence between your needs and your world” (Evans, 1967, p. 15); “. . . confidence that their needs will be met and that they are valued . . . capacity to delay gratification . . . trust their sensory systems in processing stimulation from the environment . . . integrating force that synthesizes emotions, cognitions, and actions under conditions of uncertainty . . . belief that things will work out well” (Newman & Newman, 1999, pp. 169-70).
CHAPTER 2

REVIEW OF LITERATURE

Introduction

Interest in the resiliency and continued development of adults was first sparked by the return of World War II veterans. The desire to believe that returning veterans could recover from post-war trauma and again become contributing members of society required an assumption that personality could change and continue to develop into adulthood. Based on this assumption, therapies developed; men did become functional again; and there was renewed interest in adult development (Moroney, 1989). Over the past 50 years, the adult development literature has attended to three areas: the central question as to whether adult personality does indeed continue to develop, the creation of models or theories of adult development, and the empirical study of both the substance and mechanisms of development in adults.

The present study narrows those areas of interest in the following ways. The present study assumes that adults do continue to develop. It uses Erikson’s life-span theory of development as a framework and assumes the substance of adult human development to be the resolution of Erikson’s psychosocial crises. The study
focuses on two specific developmental mechanisms: (a) life experience as a developmental catalyst with particular emphasis on the impact of parenting on adult development and (b) the continued revisiting of childhood developmental stages throughout adulthood.

Given these assumptions and foci, this review of literature will (a) summarize the stability versus change controversy in the adult development literature, (b) describe the tenets of Erikson’s life-span theory of development, (c) review empirical findings related to the mechanisms of Erikson’s theory, (d) summarize the findings related to the role of experience in adult development, (e) review the theoretical and empirical literature regarding the impact of parenting on adult development, and (f) review the theoretical and empirical literature regarding the revisitation of childhood stages in adulthood.

Stability Versus Change in Adult Personality

The literature has been mixed on the subject of stability vs. change in the adult personality. Support in the literature for stability emanates from trait psychology and centers around research conducted on the Big Five (neuroticism, extroversion, openness to experience, agreeableness, and conscientiousness). The Big Five are factorially-derived dispositions that are, by definition, factors that are enduring over time. Empirically, these five personality factors have been well documented as stable, especially past the age of 30 (McCrae & Costa, 1990).
Because the Big Five solidify in the period after age 30 and trait psychology defines adulthood as beginning at age 30 (McCrae & Costa, 1990), it is predictable that research using these variables will conclude that adult personality is stable. A tautology exists. Adulthood is defined as beginning at age 30; personality is defined in terms of stable traits that solidify by age 30; and when these dispositions are measured in adults, they evidence stability. Block (1971) goes so far as to suggest that from this perspective, when change does occur it is considered as a result of poor measurement or a poor choice of a variable. One could say that trait psychology has effectively defined what constitutes a stable adult personality, rather than having documented that adult personality is stable, especially if the definition of personality is expanded to include more than psychological traits.

McCrae and Costa (1990) have identified that much of the quarrel over stability versus change is a war over words rather than facts. They point out that traits, identity, and the self are all concepts used to discuss personality, but they are not equivalent concepts. Traits are the salient part of identity and the enduring part of the self. Thus, traits are related to both identity and the self, but to include identity or the self as developmental concepts is to go beyond a trait definition of personality. Although McCrae and Costa are convinced of the stability thesis based on Big Five research, they concede that identity, taken as a whole, may be subject to change and that maturational personality changes may occur particularly if personality is defined in terms of values, concerns and interests.
McCrae and Costa (1990) do raise an objection to a model of adult
development that focuses on identity and self variables, however. They point out that
the many scholars who have taken a non-trait approach to adult development (e.g.,
Erikson, Levinson, Loevinger, & Vaillant) have differed on what they see as the
significant aspects of the developing adult. For example, Erikson focuses on
psychosocial crises, Levinson on life commitments, Loevinger on ego development,
and Vaillant on ego defenses. According to McCrae and Costa, this divergence
weakens the support for each scholar’s view of adult development. McCrae and Costa
would expect that, if there were validity to non-trait definitions of “what develops” in
the adult, the models produced by non-trait scholars should converge and evidence
more similarities than differences.

In defense of multiple models, however, Abeles (1987) identifies that three
basic premises of any life-span perspective are that development is multidimensional,
multidirectional, and multidetermined. Likewise, Vaillant and Milofsky (1980)
identify that human development is too plastic and discontinuous to converge into one
model. Thus, more than one model of adult development is likely to be substantiated
by empirical research with each adding legitimate and important understandings
regarding life-span development.

A second consideration in the conflicting findings regarding stability and
change centers on the instruments used to measure the selected personality variables
(Helson, 1993; Whitbourne et al., 1992). Instruments that are psychometrically
designed for stability are likely to support a static adult personality whereas those that
are designed to be sensitive to potential developmental change are likely to support
developmental change (Helson & Moane, 1987; Van Manen & Whitbourne, 1997;
Whitbourne et al., 1992). The Big Five traits have typically been measured by
instruments highly refined for statistical reliability, and they do demonstrate stability
as expected. In contrast, ego quality variables and self identity variables that have been
measured by instruments designed to be more sensitive to change have demonstrated
both age-related and environmentally related change (Haan et al., 1986; Helson &

In summary, the debate over adult personality as static versus subject to
developmental change may hinge on the selection of variables to be studied which, in
turn, is dictated by one’s definition of personality (McCrae & Costa, 1990).
Furthermore, there may be infinite ways to define the developing adult personality, for
humans are infinitely complex, especially when context is also considered. One such
complex, non-trait, change-oriented view of human development is Erikson’s life-span
theory, a theory that has had both intuitive and scholarly appeal for nearly 50 years
(McCrae & Costa, 1990; Vaillant & Milofsky, 1980; Van Manen & Whitbourne,
1997; Whitbourne et al., 1992).

The most significant empirical research of continued development during
adulthood that is based on an Eriksonian definition of personality is Whitbourne et
al.’s (1992) 22-year sequential study. Whitbourne et al. used the Eriksonian-based
Inventory of Psychosocial Development (IPD; Constantinople, 1969; Walasky,
Whitbourne, & Nehrke, 1983-1984; Waterman & Whitbourne, 1981) to study the
development of men and women from ages 20 to 42 in a sequential design using three
cohorts of college students. This was the first large-scale study of both men and
women that focused on early to middle adulthood and used a quantitative Eriksonian
measure. The authors found that consistent patterns of change did occur in the
resolution of Erikson’s developmental crises. The sequential design of the study
allowed for longitudinal, cross-sectional, and sequential analyses, which could
segregate maturational and environmental influences. The authors concluded that the
changes they observed could be attributed to both age and environmental factors.

Although not directly based in Eriksonian theory, two other studies support the
premise that change after the age of 30 can be expected. Haan et al. (1986) studied
both men and women longitudinally over a 50-year period using a Q-sort measure of
saliencies on six factors (self-confidence, assertiveness, cognitive commitment,
outgoingness, dependability, and warmth). They found that saliencies of these factors
did change over the life span. However, changes were more pronounced when
analyzing the entire life span than when analyzing adjacent time periods, which led the
authors to conclude that, overall, change in adults is gradual.

Helson and Moane (1987) also found normative personality change in an all-
female sample studied over three time periods from ages 20 to 43. Interestingly, in
terms of the ongoing debate about stability versus change, the authors also found
considerable rank-order stability in the personality variables studied. This finding
supports the supposition that both stability and change exist, depending on the
dimensions of personality being studied, the instruments used, and the nature of the analyses.

Although these studies support the assumption of the present study that adults do continue to develop in adulthood, it must be considered that any aggregation of evidence in either direction of the stability versus change debate is subject to the confusions of (a) comparing findings from different times of testing, (b) using differing samples or cohorts, and (c) measuring with different instruments (Helson & Moane, 1987; McCrae & Costa, 1990). The most tenable conclusion at this point in the early history of the study of adult development is that adults are both stable and changing, dependent upon the variables studied, the intervals studied, and the experiences of the subjects (Haan et al., 1986; Helson, 1993). Bee (1996) suggests that the stability versus change explanation may rest in McAdams’ (1995) levels of personality, which may be differentially susceptible to change. According to McAdams, dispositional traits are one level of personality and contextualized concerns (e.g., developmental tasks) and identity are two additional, independent levels. Two other generalizations that can help explain the mixed findings related to this question are that change is gradual and undramatic in adulthood making it an elusive phenomenon (McCrae & Costa, 1990) and that adult development is multidetermined making patterns difficult to identify (Abeles, 1987).
Erikson’s Life-Span Theory of Development

Erikson’s theory of the eight stages of man was the first elaborated, systematic developmental theory to cover the life span and was a primary catalyst for scientific interest in adult development (Levinson, 1986). Although no theory of adult development enjoys scholarly consensus, Erikson’s has been the most influential (McCrae & Costa, 1990; Vaillant & Milofsky, 1980; Van Manen & Whitbourne, 1997; Whitbourne et al., 1992).

Erikson’s (1950/1963) theory includes the description of distinct stages, which are periods when a unique problem preoccupies one’s orientation to life and engagement with others. He centers the eight stages around psychosocial crises which are conflicts or central developmental issues that individuals must resolve in order to meet their own needs, meet social demands, and become increasingly competent and satisfied individuals. The crises represent the intersection of an individual’s capacities and needs with the social expectations of one’s culture. Reciprocally, the further development of an individual’s capabilities is influenced by his/her responses to the demands of culture, which are imbedded in the crises (Newman & Newman, 1999).

Erikson proposed that the unique problems of childhood are resolutions of the crises of trust, autonomy, initiative, industry, and identity. According to Erikson’s theory, the needs and capacities of children successively center around these issues and cultures universally both demand competencies in these areas and support growth of ego strengths (hope, will, purpose, competence, and fidelity) related to these issues. Erikson proposed that the unique problems of adulthood are resolutions of the crises of
intimacy, generativity and ego integrity, and, as with childhood crises, adults reach
points at which their needs and capacities center around these issues and cultures
universally both demand competencies in these areas and support growth of ego
strengths (love, care, and wisdom) related to these issues. Furthermore, Erikson
suggests that progressive resolution of these crises has both individual and societal
evolutionary value, making for better individuals operating within a better society.

Mechanisms of Erikson’s Life-Span Theory of Development

Erikson proposed specific dynamics of development related to these eight
psychosocial crises. He proposed that the crises are epigenetic, forming a sequential,
loosely age-related, universal pattern of unfolding that is promoted by the convergence
of biological, psychological, and social factors. He proposed that the eight stages are
interrelated in that the successful resolution of each crisis is based upon the resolution
of each prior crisis. He suggested that childhood stages/tasks are continually revisited
throughout life. “The individual is also increasingly engaged in ... reexperiencing
those tensions that were inadequately integrated when they were focal; similarly
engaged are those whose age-appropriate integration was then, but is no longer
adequate” (Erikson et al., 1986, p. 39). Thus, Erikson proposed that one is never
finished growing up, and he knitted childhood to adulthood in an unending process of
progressive dependency of one stage upon another and the continual revisitation of
each stage from birth to death. The two dynamics of Erikson’s theory that are of
particular interest to the present study are the ascendancy of stages and interstage dependency.

**Ascendancy**

Contrary to a strict age-related progression through the developmental issues, empirical studies have supported an open-ended view of ascendancy within Erikson’s theory. Whitbourne et al. (1992) concluded that “issues can reach ascendancy at any time based on unique factors of biological, psychological or social trajectories” (p. 270). The authors’ conclusion was based on their findings that growth in the two age appropriate stages (intimacy and generativity) for their sample was not as strong as growth in stages that by age should have no longer been ascendant, which in an Eriksonian model are referred to as “off-diagonal stages.” Likewise, Vaillant and Milofsky (1980) found the highest Eriksonian stage achieved was independent of age. Only 30-40% of their two samples reached the age-appropriate stage of generativity by age 47, and 1 out of 6 men was still challenged by adolescent issues at age 47.

**Interstage Dependency**

Several studies have supported the concept of prior resolution of a developmental crisis leading to resolution of future crises. In Whitbourne et al.’s sequential, 22-year study of Erikson’s developmental stages, the authors found that all eight scales (each measuring resolution of one of Erikson’s eight stages) were positively correlated with each other, indicating an overall interdependency among resolutions of the stages. Other studies have found specific correlations. Vaillant and Milofsky (1980) found that failure to master adolescent issues predicted a lack of
generativity in adult men and that adult maturity was predicted by a childhood environment conducive to the positive resolution of trust, autonomy, and initiative. Vaillant and Vaillant (1981) found that prior resolution of the industry crisis predicted positive resolution of the generativity crisis, and Snarey et al. (1987) found a similar relationship in their large sample of fertile men, although this relationship was not found in their smaller subsample of infertile men.

Summary

Adult studies using Erikson’s model support the following Eriksonian dynamics: the existence of consistent patterns of personal readiness and social demand for competency; age variability in the ascendancy of stages/tasks rather than a universal, purely epigenetic unfolding; and the prerequisite positive resolution of prior psychosocial crises for positive resolution of future crises (Vaillant & Milofsky, 1980; Vaillant & Vaillant, 1981; Whitbourne et al., 1992).

Life Experience as a Developmental Catalyst

Consideration of life experience as a catalyst to human development is consistent with interactionist, ecological, evolutionary, and contextual perspectives. Many scholars have called for these approaches to development (Caspi, 1987; Featherman & Lerner, 1985; Haan et al., 1986; Helson, 1993; Newman & Newman, 1988; Palkovitz, 1996; Snarey et al., 1987; Van Manen & Whitbourne, 1997; Whitbourne et al., 1992). Haan et al. (1986) studied change in personality factors over a 50-year period, asking the question whether change occurred and whether such
change was self-generated or experience-related. The authors concluded that some aspects of personality were self-generated, whereas others were more reactive to experience. They suggested that inconsistency in personality is explained by a combination of factors: the variable studied, the interval studied, and the experience of the subjects. The authors found that, overall, the period of life most subject to changes was the transition from adolescence to early adulthood, a period which the authors noted was a period of profound role shifts in work and family. They also concluded that experience had a stronger impact on personality in adulthood than did self-generated development.

Haan et al.’s study (1986) and the present study differ in the definition of development. Haan et al. define development as self-generated change that is unidirectional, orderly, and consisting of the acquisition of more or better qualities that replace or improve deficiencies. By definition, then, development is polarized against experientially-directed change and experience-related change is excluded as an indicator of adult development. The present study, however, chooses a more comprehensive definition of development: systematic, successive change over time. This definition does not prescribe the catalyst of such change (maturation vs. experience), but rather defines development by the outcome (change vs. stability). Thus, experientially-directed change would be considered developmental, if it followed a systematic, successive pattern.

Despite these differences in the definition of development, Haan et al.’s (1986) study supports the premise that life experience can serve as a developmental catalyst.
Furthermore, Haan et al. support the need for the present study by identifying that some environmental influences may be irrelevant to human development, but others may either support or bend ontogenetic development. The present study seeks to explore what particular life experiences have an effect on personality and what aspects of personality are so affected.

Helson (1993) identified three categories of change to be assessed in an adult population: change in an entire sample, which is considered normative, change associated with different personality types, and change associated with roles and role trajectories. The latter is change related to life experience and was the subject of Helson and Moane’s (1987) research. They defined life experience as participation in life paths such as career or family pursuits, and they found that life change was attributable to participation in such life experiences. Women who pursued either career or family experienced more personality change than did those who did not undertake either of these life paths. Likewise, using a sequential design that allowed for analysis of both environmental and age effects, Whitbourne et al. (1992) concluded that environmental factors were a mechanism of change. In their study, they found that experiencing the social revolutions of the 60s, the self-indulgent climate of the 80s, and the general post-college realities of entering a workforce all impacted the timing and degree of resolution of Erikson’s crises. Furthermore, Whitbourne et al. found that the most movement related to childhood crises occurred during the age-interval of 20 to 31 years. Although not investigated by Whitbourne et al., this is a finding that reasonably could be related to the onset of the profound life experience of parenting.
Although life experience has been correlated to a variety of measures of adult development in the literature (Helson & Moane, 1987; Snarey et al., 1987; Van Manen & Whitbourne, 1997), little has been investigated regarding the dynamics of that relationship (Newman & Newman, 1988). The present study investigated the dynamics of life experience as a mechanism for development in adults.

Impact of Parenting on Adult Development

Researchers and theorists who support the concept of life experience as a developmental catalyst target work and family as pivotal domains (Newman & Newman, 1988; Palkovitz, 1996; Snarey et al., 1987). Scholars suggest that it is the new needs, capabilities, and expectations (Haan et al., 1986; Helson & Moane, 1987; Newman & Newman, 1988; Whitbourne et al., 1992) and new situations, role partners, and demands (Hawkins & Belsky, 1989) of life experiences that are responsible for encouraging development. In view of these criteria, this study focuses on parenting as a life experience that should be expected to be important to the continued development of adults. Turner’s (1978) theory of role merger suggests that roles requiring the most investment over an extended time will most likely merge with the person. Building on this theory, Hawkins et al. (1993) identified that parenting was a developmental force because of (a) the large amount of time that is invested in the role, (b) the intense emotion evoked by the role, and (c) the depth and permanent nature of the role.

The idea that parenting and development are inseparably connected has been well accepted by most theorists. Although the direction of much of that thinking has
been unidirectional, focusing on the impact of parenting on the work of the child within each stage, a few scholars have theorized about the impact of parenting on adult development. Over 40 years ago, Benedek (1959) suggested that the two processes of introjection and identification are primary to growth and development. She proposed that because parenthood utilized both of these processes, parenting could lead to a psychic structural change in the parent and new levels of maturity. More recently, Elson (1984) differentiated the developmental task of parenting from the process of parenting by defining the process of parenting as the transformation of the parent. She suggests that parents learn about themselves as part of the process of parenting and are able to repair deficits in earlier life resolutions or manage more effectively with the resolutions they have earlier attained.

Although very little has been theorized and even less researched about the impact of parenting on the parent from an adult development perspective (Bernath & Feshbach, 1995; Heath, 1978; Newman & Newman, 1988; Palkovitz, 1996), bi-directional thinking is common regarding many different aspects of human functioning. For example, family systems theory (Whitchurch & Constantine, 1993), theories of stress (Hill, 1949), theories of mother/infant relationship (Ainsworth, 1970; Thomas, Chess, & Birch, 1970), and theories of parenting style (Belsky & Isabella, 1988) all include bi-directionality of factors. The human organism is considered both a source of influence and a recipient of influence with regard to family functioning, the experiencing of stress, the establishment of attached relationships, and the performance of the parenting role. There is an intuitive logic that the same bi-
directionality exists with regard to attaining developmental competency. It is well accepted that a parent is a source of influence, a primary conduit of social demand, and a resource for a child’s accomplishment of developmental tasks. The principle of bi-directionality dictates that a parent would also be the recipient of influence as the parenting role demands and provides resources for the adult to accomplish adult developmental tasks. Such a bi-directional view is compatible with Bronfenbrenner’s (1979) position on mutuality and ecology: if one member of a dyad develops, the other is likely to do so also.

Revisiting Childhood Stages in Adulthood

Given Erikson’s hypothesis of interstage dependency regarding crisis resolution, continued work on the resolution of childhood stages would be a necessary prerequisite to maximum positive adult development. Erikson does allow for the existence of revisiting childhood stages but does not detail the process. The idea that childhood development leaves matters unresolved that need attention in adulthood has been accepted since Freud (Moroney, 1989). However, the dynamic of revisiting childhood stages remains a neglected, largely overlooked aspect of Erikson’s theory. Many adult development scholars reference the relevance of past childhood resolution to adult development but devote little attention to the mechanisms for such continued work on resolution (Antonucci & Mikus, 1988; Newman & Newman, 1999; Snarey et al., 1987; Vaillant & Milofsky, 1980; Whitbourne et al., 1992). For example, Erikson et al. (1986) refer to such a process using a host of terms such as refacing,
reintegration, reinvolve, resynthesis, and readaptation. All of these terms suggest the concepts of revisititation and the reconstruction of psychosocial resolutions.

Both Benedek (1959) and Elson (1984), who support the concept that parenting has an impact on adult development, describe the process of such impact in terms of revisititation. Benedek refers to the mother reliving the pleasure and pain of infancy, and Elson suggests that parents can use their adult maturity and understanding to transmute past childhood experiences. Likewise, Schwartz (1984) describes this process in terms of parental empathy. He suggests that parents can put themselves in the child’s place emotionally, not regressively, while remaining at a place of adult psychic organization.

Clinicians and psychoeducators have also proposed both the existence and the need for a revisiting process. Levin (1988) observed the revisiting phenomenon in self-help groups and termed it “recycling.” Levin maintains that most adults don’t totally resolve the psychosocial crises of childhood and that negative residual from early unintegrated, unresolved crises is powerful in an adult’s life. She suggests that (a) people develop programs of behavior at different ages based on the degree of resolution of psychosocial crises, (b) those programs can be faulty in aiding adult functioning, and (c) such programs may need to be reconstructed. The concept of earlier programming is central to the psychological theory of Transactional Analysis. According to James (1995), Eric Berne, known as the father of Transactional Analysis, likened people living life to persons sitting down to a player piano playing notes that have been previously programmed.
“Reparenting” is a term that has been used to describe a process of revisiting childhood stages. Although reparenting is often thought of as a regressive, therapeutic process that in essence turns back the clock (Moroney, 1989), James (1995) has defined reparenting as a forward-thinking process. James proposes that the rational, thinking part of an adult’s personality can become a new parent of sorts and thus rework old resolutions. Such a definition of reparenting likens it to Erikson’s concept of the ongoing revisiting of childhood crises and allows that a reconstruction of past resolutions can occur by letting the clock keep ticking forward and using new experiences and maturation to improve one’s potential for positively resolving past developmental issues.

Summary

Most adult development research has concentrated on the description of adult developmental tasks/stages/phases with less emphasis on the dynamics and mechanisms of adult development. Erikson’s psychosocial theory is one of the earliest and most well accepted theoretical frameworks for development as a life-span process. The Eriksonian dynamics most supported in the literature are the sequential nature of stages, the open-endedness of the ascendancy of stages, and the necessity of positive resolution of early stages for the positive resolution of later stages. Erikson’s theory also proposes the dynamic of an ongoing engagement with childhood stages. This aspect of his theory, however, is largely ignored, and little is known about how the childhood stages impact adult development. There is some evidence that life
experience is a catalyst to adult development, and parenting can be supported as such a
catalytic life experience. However, parenting and development have been researched
primarily from the perspective of how the parent impacts child development with little
having been investigated regarding the reciprocal impact parenting has on adult
development. This study investigated that reciprocity between parenting and the adult
development of mothers, with a particular focus on the relationship parenting has to
the revisiting of childhood developmental crises.
CHAPTER 3

METHODOLOGY

Introduction

This is a study of the revisitation of childhood psychosocial developmental issues within the context of parenting. This chapter describes the participants in the study, the instruments used, the procedures for collecting data, and the method of data analysis. The description of participants includes the relevance of the selection criteria to the theory of revisitation and the procedures used for recruitment of participants. The instrumentation section includes a description of the (a) coding scheme used to analyze the qualitative data, including an assessment of interrater agreement and (b) two reliability studies conducted for a researcher-adapted quantitative instrument.

Participants

Selection

Criteria

Two groups of participants were selected for this study: mothers of infants and mothers of older children (ages 3-10). The selection criteria were as follows. Participants were women who were married, had some college education, had only one child (or one set of twins), and were employed for salary or wages less than 20
hours per week. These criteria were established to (a) maximize the theoretical conditions under which revisitation would most readily be observable and (b) to control variables that might confound the direct relationship between the parenting experience and revisitation of childhood psychosocial issues. It is recognized that the established criteria may have maximized the observability of the phenomenon being studied, but they also limited the generalizability of the findings to only women with similar characteristics.

**Gender**

Only mothers were selected for this study in order to maximize the potential for discovering evidence of revisitation. This study assumed that the parenting role influences the revisitation of childhood psychosocial issues by adults. Scholars support the expectation that increased saliency of a role will contribute to increased influence of a role (Antonucci & Mikus, 1988; Hawkins et al., 1993; Turner, 1978). Therefore, it was reasonable to expect that the more salient (and therefore influential) the parenting role, the more likely that revisitation would be evidenced.

The literature also supports that men and women experience parenting differently (Cowan et al., 1985; Richman, 1989). One way that parents evidence this difference is in the saliency of the parent role. Generally, greater saliency of the parental role is found in women (Cowan et al., 1985; Hawkins et al., 1993). Thus, it was reasonable to expect that the parenting role would be more salient for women than for men and that this greater saliency would also lead to greater potential for observing revisitation among mothers than among fathers.
Age of children

This study tested the proposition that revisitation of childhood psychosocial issues by parents parallels the psychosocial stage of the child being parented. Thus, this study was interested in the relationship between the psychosocial stage of the child and the revisitation data for the mother. According to the proposition of parallelism, participants would be expected to revisit a psychosocial issue based on the ascendant psychosocial stage of their child. Therefore, participants in the study needed to be identified according to the psychosocial stage that was most prominent for their child.

To establish comparative groups in which the child’s psychosocial stage and the mother’s expected issue of revisitation could be linked, this study narrowed its focus to the one psychosocial issue of trust/mistrust (according to Erikson, the psychosocial stage of infants) and selected one group of mothers whose children were likely to be confronting the childhood psychosocial issue of trust/mistrust and one group whose children were unlikely to be confronting the childhood psychosocial issue of trust/mistrust. Because psychosocial stages in children are highly age-related, the two groups were defined by the age of the children.

Infants no older than 6 months were considered likely to be confronting the psychosocial issue of trust/mistrust, so mothers of infants were selected as one group in the study. In contrast, mothers of older children were considered to have children who were unlikely to be confronting the psychosocial issue of trust/mistrust, so mothers of older children were selected as a comparative group in the study. Several
factors were controlled in the group of mothers with older children in order to reasonably expect that the children of this group of mothers would not be confronting the issue of trust/mistrust. First, the children of this group of mothers were at least three-years-old and therefore, theoretically, were old enough to be clearly beyond the initial psychosocial stage of trust/mistrust. Second, the children were no older than ten-years-old and therefore, theoretically, were not old enough to be in a puberty period during which they might again be confronted with trust/mistrust issues. Lastly, because school transitions can confront children with trust/mistrust issues as well, no mothers with children who were in the first year of preschool, kindergarten, or first grade were selected for this study.

Marital status

This study focused on the influence of life experience on the revisiting of childhood psychosocial issues by adults. Theoretically, revisitation can be triggered by any major life experience, including important relationship transitions. In order to control for the potential contribution of adult relationships in triggering revisitation of developmental issues, marital status was used as a selection criterion for study participants. By selecting married participants, the effects of adjustments to new marriages, dating relationships, or divorce were avoided as potential confounding triggers for the revisitation of childhood psychosocial issues. By eliminating transitions in couple relationships as potential triggers, parenting could be more reasonably considered the primary life experience trigger for participants at the time of the study.
Education

The criterion of “some college education” was used in an effort to maximize the potential for capturing evidence of revisitation. It was assumed that revealing the saliency of childhood psychosocial issues, especially through the projective and narrative methodology of this study, would require a high level of introspection and reflection. Furthermore, the measures used in this study depended highly on the ability of the participant to articulately express reflections and motivations. These abilities for introspection, reflection, and articulation were expected to be heightened in a better-educated group of participants.

Single children

This study hypothesized that the psychosocial issue that a parent would revisit would parallel the psychosocial developmental stage of the child being parented. By limiting this study to mothers of children of only one age (single children or twins), theoretically, the child’s age-related psychosocial stage was controlled. Only one age-related psychosocial stage was impacting each mother. Therefore, the parallelism between the child’s psychosocial stage and the parent’s revisitation of a given psychosocial issue could be associated.

Labor force participation

This study’s focus was the validation of the existence of revisitation within the context of parenting. Because parenting is by its nature a permeable role (Palkovitz, 1996) and is subject to overlap with other roles, it was important to maximize the influence of the parenting role while reducing the influence of other roles.
An assumption of a revisitation theoretical framework is that all profound life experiences are potentially a force in adult development via the mechanism of revisitation of childhood issues. Thus, parenting is only one of many potential triggers for revisitation and the consequent opportunity for adult development. Work experiences and identifications with the work role are also potential triggers for the revisitation of childhood psychosocial issues. Theoretically, when parents are in the workforce, evidence of revisitation could be accounted for by work experiences or parenting experiences or by a complex combination of the two. Limiting the impact of work roles on the participants in the present study was an effort to reduce the amount of permeability of the parenting role and more reasonably to be able to associate evidence of revisitation with the parenting role rather than with work roles.

It must be noted, however, that this minimal participation in the labor force also posed the following limitations for this study. First, for the mothers in this study, the loss of the role of worker may have in and of itself contributed to the saliency of specific psychosocial issues (including that of trust/mistrust). Second, the generalizability of the findings from this study must be limited to the subset of mothers who share this non-normative characteristic of minimal to no participation in the labor force. These limitations should be addressed in future studies.

Recruitment Procedure

Participants were recruited through schools, obstetrician’s offices, Lamaze classes, community parent support and service groups, newspaper and newsletter ads, and word-of-mouth referrals. The researcher initially placed phone calls to the above
resources asking for help in recruiting participants who met the study’s selection criteria. Following the initial solicitation phone call, if the resource person desired, a solicitation letter was sent with a flyer suitable for posting or distribution to potential participants. When distribution was anticipated, multiple copies of flyers were sent. In some cases, the researcher made general information presentations to classes and community groups about the study and the need for participants. No recruitment materials or presentations included information regarding the hypotheses of the study or the theory on which it was based.

When participants learned of the study from posted flyers, organizational newsletters, or researcher presentations, they initiated their own participation in the study by calling the researcher or signing a list that invited the researcher to call them. In the case of word-of-mouth referrals, the researcher called potential participants with no introduction other than the name of a common acquaintance that had referred them to the researcher.

After a phone conversation with the researcher about the nature and purpose of the study, if the potential participant was interested, she was sent a solicitation letter describing the study and the study’s meeting agendas. After sending the written information, the researcher made a follow-up phone call to the potential participant to answer questions and to schedule meeting times, if the person was interested in participating.

Forty-five percent of the mothers who participated in the study (n = 10) were recruited through personal, word-of-mouth referrals, 27% (n = 6) through parent
classes at a local hospital, 14% (n = 3) through community parent support or service
groups, 9% (n = 2) through a newspaper ad, and 5% (n = 1) through an obstetrician’s
office. Of the mothers of infants, 46% (n = 5) were recruited through parent classes at
a local hospital, 36% (n = 4) through personal, word-of-mouth referrals, 9% (n = 1)
through a community service group, and 9% (n = 1) through an obstetrician’s office.
Of the mothers of older children, 55% (n = 6) were recruited through personal, word-
of-mouth referrals, 18% (n = 2) through community parent support groups, 18% (n =
2) through a newspaper ad, and 9% (n = 1) through parent classes at a local hospital.

Five qualifying women declined participation; three cited personal reasons for
declining and two declined passively by not returning telephone calls to schedule
meeting times. Four decliners were mothers of older children and one was the mother
of an infant. Two additional mothers of infants who qualified were not included in the
study because their time availability was too limited. Appendix A includes the
solicitation materials used for this study.

Description of Participants

Twenty-two females volunteered to participate in this study, eleven mothers of
infants and eleven mothers of older children. Participants were paid no compensation.
All participants who began the study completed the study. Mothers from both groups,
mothers of infants and mothers of older children, met the selection criteria for the
study. All mothers (a) were married, (b) had at least some college education, and (c)
were employed for salary or wages less than twenty hours per week. At the time of
this study, 59% (n = 13) of the mothers were not employed for salary or wages; 41%
were employed for salary or wages less than 20 hours per week. Their self-reported work histories indicated that one mother was in college at the time she gave birth and all others were employed for salary or wages prior to becoming mothers.

Participants ranged in age from 24 to 47 (M = 32.8, SD = 5.6). Eighty-six percent (n = 19) of the participants identified their race as white or Caucasian; 5% (n = 1) as Anglo; 5% (n = 1) as Asian Indian; and 5% (n = 1) chose not to identify race. With the exception of the recent birth experiences of the mothers of infants, participants indicated that they had experienced no other major life change in the 12 months prior to the study.

The 11 mothers of infants ranged in age from 24 to 35 (M = 29.0, SD = 2.7). Each had one child ranging in age from 3- to 6-months-old (M = 4.4, SD = 1.0). Thirty-six percent (n = 4) of the infants were female; 64% (n = 7) were male.

Eighty-two percent (n = 9) of the mothers of infants were unemployed for salary or wages; 18% (n = 2) were employed for salary or wages less than 20 hours per week. All of the mothers of infants had been employed for salary or wages prior to the birth of their child. One had been out of the labor force for 18 months prior to the birth of her child; for all others, leaving the labor force coincided with their giving birth (approximately 3-6 months prior to this study).

The 11 mothers of older children ranged in age from 29 to 47 (M = 36.6; SD = 5.3). Each had one child, with the exception of one mother who had one set of twins. Children in this group ranged in age from 3- to 10-years-old (M = 5.4, SD = 2.4). Fifty-eight percent (n = 7) of these children were female; 42% (n = 5) were male.
Because a child’s grade transition in school was considered a life experience that theoretically could trigger changes in the developmental stage of the child and, thus, due to the theoretical construct of parallelism, could impact the revisititation of psychosocial childhood issues in mothers, none of the mothers in this study had children who were in the first year of preschool, kindergarten, or the first grade. Three of the older children were in elementary school; six were in preschool, and three were not attending preschool, although they were of preschool age.

Sixty-four percent (n = 7) of the mothers of older children were employed for salary or wages less than 20 hours per week; 36% (n = 4) were unemployed for salary or wages. Their self-reported work histories indicated that one mother was in college at the time of the birth of her child; all others were employed for salary or wages prior to becoming mothers. The four mothers of older children who were unemployed for salary or wages at the time of this study had not been in the labor force since the birth of their children.

**Group Comparisons**

**Age of mothers**

A two-tailed \( t \) test was conducted to determine whether there were statistically significant differences in the ages of mothers in the two comparative groups. As a group, mothers of infants were younger. The mean difference between the ages of the mothers of infants and the mothers of older children was statistically significant, \( t (20) = -4.24, p = .001 \) (\( M = 29.0 \), mothers of infants; \( M = 36.6 \), mothers of older children).
Parental saliency

Theorists support the expectation that increased saliency of a role will contribute to the increased influence of a role (Antonucci & Mikus, 1988; Hawkins et al., 1993; Turner, 1978). In this study it was assumed that the more salient the parenting role, the more likely that parenting would affect adult development. Thus, parental saliency was identified as a maximizing condition and therefore a potentially confounding variable in the comparisons of the two groups of interest. A measure of parental saliency was used to determine the equivalency of the two groups on this variable.

Cowan, Cowan, Coie, and Coie (1978) used the “Pie” as a graphic representation of the self and the important roles that one plays. In this study, Cowan et al.’s “Pie” was used to determine the degree of saliency of the parental role for each participant. Participants were asked to divide a 4” circle into the main roles that were important to them, not in terms of time spent, but in terms of overall importance or saliency to them. They were asked to label each section of their “Pie” to identify their various roles (e.g., mother, wife, nurse, and breadwinner). Participants provided their own labels. “Mother,” “parent,” and “bringing up a child” are examples of labels that were considered evidence of the salience of the parenting role. Appendix B includes the “Pie” as it was presented to the participants.

The size of the slice of the pie designated as the parenting role was measured in terms of degrees of the circle. Higher values indicated greater saliency of the parental role. A two-tailed t test revealed that the difference in the mean parental
saliency between the two groups as measured by Cowan et al.’s “Pie” was statistically nonsignificant, t (20) = 0.09, p = .93 (M = 140.5, mothers of infants; M = 138.6, mothers of older children).

**Psychosocial maturity**

The Modified Erikson Psychosocial Stage Inventory (MEPSI; Darling-Fisher & Leidy, 1988) was administered as a measure of the resolution of Erikson’s psychosocial issues. The MEPSI contains 80-items, 10 per stage/scale. Items are rated on a 5-point scale ("hardly ever true" to "almost always true"). See the instrumentation section for a complete description of the MEPSI.

Both the mothers-of-infants group and the mothers-of-older-children group averaged a high level of resolution across all developmental issues. Out of a maximum score of "5," the average mean resolution score for mothers of infants across all eight developmental issue subscales was 4.20, and for mothers of older children, 3.92.

In this study, high resolution for any given issue was defined as resolution greater than the average resolution across issues. Both groups were highly resolved on industry. Mothers of infants were also highly resolved on trust, identity, and ego integrity, which mothers of older children were not. Mothers of older children were highly resolved on intimacy, which mothers of infants were not.

Two-tailed t tests comparing mean subscale scores of the eight developmental issues by group indicated that the difference in maturity level between mothers of infants and mothers of older children on identity and ego integrity reached statistical significance, with mothers of infants being the more mature group. There were no
significant differences in the resolution scores of the two groups on the other six issues, including trust/mistrust, which is the issue most relevant to this study. Table 1 shows the psychosocial maturity level comparison of the two groups based on MEPSI mean resolution scores.

<table>
<thead>
<tr>
<th>MEPSI Mean Resolution Scores</th>
<th>Mothers-of-Infants Group</th>
<th>Mothers-of-Older Children Group</th>
<th>t*</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
<td>M</td>
</tr>
<tr>
<td>Developmental Issue</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trust</td>
<td>4.24</td>
<td>.46</td>
<td>3.90</td>
</tr>
<tr>
<td>Autonomy</td>
<td>4.03</td>
<td>.39</td>
<td>3.77</td>
</tr>
<tr>
<td>Initiative</td>
<td>4.16</td>
<td>.34</td>
<td>3.87</td>
</tr>
<tr>
<td>Industry</td>
<td>4.42</td>
<td>.49</td>
<td>4.28</td>
</tr>
<tr>
<td>Identity</td>
<td>4.25</td>
<td>.47</td>
<td>3.84</td>
</tr>
<tr>
<td>Intimacy</td>
<td>4.20</td>
<td>.42</td>
<td>4.03</td>
</tr>
<tr>
<td>Generativity</td>
<td>4.06</td>
<td>.47</td>
<td>3.84</td>
</tr>
<tr>
<td>Ego Integrity</td>
<td>4.25</td>
<td>.46</td>
<td>3.85</td>
</tr>
</tbody>
</table>

N = 22
*Two-tailed t tests were used.
*p < .05.

Table 1: Group comparison of psychosocial maturity by developmental issue.

Instrumentation

Introduction

Typically, measures of Erikson’s issues focus on the resolution of the issues. An issue resolution is defined as a view of self and the world that incorporates a balance of both positive and negative forces related to the issue in question. The
present study, however, was not concerned with the *resolution* of an issue per se, but rather with the process of revisiting an issue as an opportunity for reconstruction of a prior resolution. Thus, it was the *saliency* of a given issue that was of interest in this study. To gain a better understanding of the measurement of the *saliency* of psychosocial issues, multiple measures were employed. This permitted (a) a multi-dimensional approach to measurement and definition of variables and (b) the triangulation of data to inform the validity of results.

**Measures of Psychosocial Development-Saliency (MPD-S)**

The Measures of Psychosocial Development-Saliency (MPD-S) was administered as a self-assessment measure of the saliency of Erikson’s psychosocial issues. The MPD-S was an adapted version of the Measures of Psychosocial Development (MPD; Hawley, 1988). The MPD is composed of 56 positive and 56 negative words or phrases of attribution which represent the 8 Erikson stages of lifespan development (fourteen words or phrases per stage). For the MPD-S, only the 56 positive items (7 per stage) were used, and they were adapted to read as saliency items rather than attributional items.

In the original MPD, respondents are asked to indicate to what degree words or phrases are like them (using a 5-point Likert scale from “not at all” to “very much”). Thus, the responses indicate a degree of *resolution* of the eight psychosocial issues. In contrast, for the MPD-S, *saliency* is the measured variable, not resolution. Therefore, participants were specifically asked to disregard whether the phrases truly described them at this point in their life. Instead, they were asked to decide to what degree the
phrases were things that occupied their minds. Participants used a Q-sort methodology to indicate degree of saliency. Participants sorted the fifty-six items into seven hierarchical categories of “most salient” and “least salient” to indicate which items occupied their thinking and feeling the most at this point in their lives. The publisher of the MPD granted permission for this adaptation.

In order to more clearly prompt respondents to think about the saliency of the items rather than the degree to which they had acquired the attributes implied in the items, the items were adapted slightly. For example, items from the MPD such as “adventuresome” and “clear vision of what I want out of life” were reworded to say, “to be adventuresome” and “to have a clear vision of what you want out of life.” See Hawley (1988) for a full report of the MPD. Two MPD-S sample items from each subscale and the Q-sort directions are included in Appendix C.

Only the positive items from the MPD were adapted for the MPD-S in order to (a) control for a desirability bias and (b) keep the instrument as brief as possible. Brevity was necessary because the nursing mother participants could be away from their babies for only brief periods of time. Because the instructions for the MPD-S asked the participant to decide to what degree she thought about the implied attributes, it was assumed that the participant would be reluctant to categorize negative phrases as ones which were often on her mind. It is recognized that both the positive and negative aspects of developmental issues are important to Erikson’s definition of the psychosocial issues and their resolution (Hawley, 1988), but because saliency of a psychosocial issue is the variable being measured rather than resolution, tapping into
only the positive aspects of an issue was assumed to be sufficient to determine whether the dimensions of that issue were more in the participant’s thinking than were the dimensions of other issues.

The validity for the MPD-S was assumed to be the same as that for the original MPD, because the items were not substantially changed and, thus, were assumed to continue to validly represent Erikson’s constructs as verified in the development of the MPD. Content validity for the MPD was first established by using expert judge agreement for the selection of items. Construct validity was later established by correlating each measured variable with other variables that were theoretically similar (convergent validity) and dissimilar (discriminant validity). Convergent validity was strong; discriminant validity was moderate to strong (Hawley, 1988).

**MPD-S Reliability**

Because the MPD-S was designed specifically for this study and had not been used in any prior research, two test-retest reliability studies were conducted to assess the consistency with which participants sorted the items.

**Pre-study reliability assessment**

**Participants.** Twenty-six females volunteered to participate in an MPD-S test-retest reliability study prior to conducting the main study. Ninety-two percent (n = 24) of participants who began the reliability assessment completed the retest portion of the study. Completers’ ages ranged from 25 to 60 (M = 46.6, SD =10.3). Seventy-five percent (n =18) of the completers were parents with children ranging in age from 11 to 34. One participant was pregnant at the time of the study. The mean number of
children for those who were mothers was 2.4. Seventy-eight percent (n = 14) of the mothers had youngest children who were adults ranging in age from 20 to 34; 22% (n = 4) had youngest children who ranged in age from 11 to 19.

Data collection. Participants were tested either in group settings or in individual settings, based on the convenience needs of the participants. For those who were tested in group settings, participants were instructed not to interact with one another during the testing.

Participants sorted the 56 items into most and least salient categories a total of three times. The first and second sortings occurred consecutively in one session with the researcher present. The second sorting was a “decoy” sorting done to interrupt memory and, therefore, was not analyzed. Each participant did the third sorting at home and mailed the results to the researcher. Test-retest reliability was assessed based on the first and third sorting. In reporting reliability results, the first sorting is described as Time 1 or first test and the third sorting is described as Time 2 or retest.

In the first sorting, respondents sorted the items as a self-assessment instrument, sorting items according to how much each item was currently on their minds. In the second sorting, immediately following the first sorting, participants selected a same-sex significant other and sorted the items with that person in mind. Participants were asked to sort the items according to how important they thought the items would be to their chosen person rather than to themselves.

The purpose of this second sorting was to interrupt the participants’ memories of the order selected in their own self-rating. A general criticism of the Q-sort method
is that reliability cannot be established or changes in saliency ascertained because of the retest memory factor. Block (1960) suggested this decoy sorting technique as a way to reduce the memory factor.

The third sorting was completed by participants at home. They were instructed to repeat the MPD-S as a self-assessment measure at home approximately two weeks after their first sorting. They were given written instructions to remind them of the process to use, which was exactly the same process that they had used two times with the guidance of the researcher. They were also given a results sheet on which to record their results. The results sheet was exactly the same as the one they had completed two times with the guidance of the researcher. Appendix C includes the MPD-S Directions and Results Sheet. The number of days between the first test and the retest (first and third sortings) ranged from 12 to 54 days ($M = 22.2$, $SD = 10.9$).

Data analysis. The scoring of the MPD-S was as follows. Five items were placed in the *most* salient category of the sorting and were given 7 points each; five items were placed in the *least* salient category of the sorting and were given 1 point each. Seven items were placed in the second *most* salient category of the sorting and were given 6 points each; seven items were placed in the second *least* salient category of the sorting and were given 2 points each. Ten items were placed in the third *most* salient category of the sorting and were given 5 points each; ten items were placed in the third *least* salient category of the sorting and were given 3 points each. Twelve items were placed in the middle or modal level of saliency and were given 4 points each. The numerical values of all items representing a given Eriksonian issue were
summed to derive a saliency score for each issue. Higher scores indicated a higher degree of saliency.

Reliability for the MPD-S was assessed by calculating a Pearson product-moment correlation coefficient for the Time 1 (first sorting) saliency scores and the Time 2 (third sorting) saliency scores for each issue subscale across participants.

**Results.** Test-retest Pearson product-moment correlations for the MPD-S scores for each subscale are shown in Table 2. All eight correlation coefficients reached statistical significance. All coefficients indicated positive, substantial to strong level relationships ranging from $r = .62, p < .001$ for initiative to $r = .90, p = .000$ for ego integrity. The trust coefficient, which is the subscale of particular interest in this study, was $r = .67, p < .001$. The mean $r$ across the eight subscales was .75.

**Discussion.** Test-retest reliability for the original MPD ($N = 108$), ranged from $r = .75$ (trust) to $r = .85$ (initiative) with a mean $r$ of .80. MPD-S reliability coefficients compared favorably especially considering that frequency and intensity of thought could reasonably be expected to be less stable than the level of attribution that is measured by the original MPD.
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<td>--</td>
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<td>.90***</td>
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</table>

N = 24
***p ≤ .001.

Table 2: Pre-study correlations between MPD-S time 1 raw scores and MPD-S time 2 raw scores by subscale.

**Within-study reliability assessment**

**Participants.** The twenty-two volunteer females who participated in the main study were asked to complete the MPD-S in both the first and third sessions in order to establish a test-retest condition and to assess the consistency with which participants sorted the items.
Data collection. All data collection was done in one-on-one meetings with the researcher. At the first meeting with the researcher, participants were asked to sort the fifty-six MPD-S items according to how much these concepts and ideas occupied their thoughts and feelings at this time in their lives. Participants sorted the 56 items into most and least salient categories using the procedure as described for the pre-study reliability assessment. Immediately after the first sorting, participants were asked to sort the same items according to how they thought a friend or loved one would sort them. In the last meeting with the researcher, participants were asked to sort the MPD-S items again according to the saliency of the concepts for themselves. Thus, the first and third sortings constituted a test-retest reliability assessment of the MPD-S instrument. The number of days between the first test and the retest ranged from 9 to 63 days (M = 22.6, SD = 12.1).

By the time of the first meeting with the researcher when participants completed the first MPD-S and the second decoy MPD-S, participants had received a very general description of the study in terms of its focus on how parenting was affecting their personal growth and development. They had not been exposed to Erikson’s eight developmental issues as the theoretical basis for the study. Participants had not yet been interviewed or taken part in the Thematic Apperception Test (TAT). By the time that participants completed the retest of the MPD-S in the third session of the study, they had been interviewed and had told their imaginary TAT stories. They had not, however, been exposed to the theoretical underpinnings of the study or any of the hypotheses of the study.
Data analysis. The scoring of the MPD-S was the same as described in the pre-study reliability assessment. A Pearson product-moment correlation coefficient was calculated for the Time 1 saliency scores and the Time 2 saliency scores for each issue subscale across participants.

Results. Test-retest Pearson product-moment correlations for the MPD-S scores for each subscale are shown in Table 3. All eight correlation coefficients reached statistical significance. All coefficients indicated positive, substantial to strong level relationships ranging from $r = .62$, $p < .002$ for initiative and industry to $r = .87$, $p = .000$ for generativity. The trust coefficient, which is the subscale of particular interest in this study, was $r = .77$, $p = .000$. The mean $r$ across the eight subscales was .75.

Discussion. The within study coefficients compared favorably to those for the pre-study assessment and compared favorably with those reported for the original MPD.
<table>
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<tr>
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<td>.72***</td>
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</tbody>
</table>

N = 22
\*\*p < .01. \*\*\*p < .001.

Table 3: Within-study correlations between MPD-S time 1 raw scores and MPD-S time 2 raw scores by subscale.

Experience of Parenting Interview (EPI)

A semi-structured interview was conducted to solicit the participants’ views of their own recent lived experience as mothers. The interview consisted of twenty open-ended core questions. The first seven questions reflected principles of Erikson’s life-
span developmental theory. The remaining 13 questions were based on a narrative
theory of personality (McAdams, 1999; McAdams, Diamond, de St. Aubin, &
Mansfield, 1997). In addition to these twenty questions, the researcher used additional
unscripted questions to follow-up and clarify topics that the respondents introduced.
See Appendix D for the core questions of the Experience of Parenting Interview.

Question 1 (What has this experience been like?) recognized that each person’s
lived experience was unique and that it was the respondent’s interpretation of the
experience that defined its potential for affecting the respondent’s development.
Questions 2-6 were based on the theoretical framework of Erikson’s life-span theory
of development. Erikson established that the complex intertwining of a person’s
changing needs, capacities, and social expectations created confrontation with
psychosocial issues. Questions 2-6 inquired about the participant’s needs, strengths,
weaknesses, external expectations, and resources during the current period of their
life. Use of resources was assumed to reflect psychosocial energy based on Erikson’s
theory that an individual uses environmental resources to balance the conflicts
inherent in a psychosocial issue. Question 7 (Have you changed during this period of
life?) reflected (a) Erikson’s premise that development is ongoing throughout the
lifespan and (b) the assumption of this study that parenting can be a force toward
developmental change.

Questions 8-18 of the EPI were adapted from the life-story interview used by
McAdams (1985, 1993) in which a respondent is asked to reflect on his/her life as
though it were a book and to consider each period of life as an individual chapter in
the book. Building on the work of Bruner (1990), who established that stories are the natural way that human beings make sense of their actions, McAdams (1996) maintains that a person’s life-story is a constructed identity. He views the life-story, not as simply a methodology to elicit psychosocial constructs, but as a psychosocial construct in and of itself (McAdams, 1999; McAdams et al., 1997). Other researchers have also supported the value of the narrative as a measure of the self (Bruner, 1997; Feldman, 1997; Kihlstrom & Klein, 1997; Peterson & Stewart, 1990; Stewart et al., 1988).

Questions 8 and 9 (title and summary of this chapter of life) encouraged the participant to consider the sum total of her experience and synthesize it into its most important aspects. Questions 10-15 reflected the issues that the participant had confronted in this period of her life in two ways. First, the participant selected and interpreted the most important or significant incidences in this period of her life by describing a high-point, a low-point, and a turning point. Second, she identified what had both challenged her and influenced her most during this period of her life. Questions 16 and 17 (descriptions of the next chapter in life) asked the participant to describe her expected future. The participant’s expected future was assumed to reflect current psychosocial issues, because, theoretically, one’s future is shaped by the result of the successful or unsuccessful resolution of current issues. Question 18 (theme of current chapter of life) was an opportunity for the participant to summarily reflect on her own narrative and synthesize it into its most important aspects.
Question 19 (What else should I know about you?) gave the participant a final opportunity to direct the conversation toward any topics that she felt were important in understanding the current period of her life. Question 20 (Any additional comments?) was a question asked as a follow-up question in the third and last session of the study. It gave the participant an opportunity to add to, clarify, or amend any part of the EPI interview, which was conducted in the second session of the study.

A coding scheme was developed to assess what psychosocial issues were most referenced in the participants’ responses to the 20 core questions. In order to assess the reliability of the EPI coding, both an independent coder and the researcher coded a sample of interviews. An agreement score was calculated for the two codings. See the coding section of this chapter for a full description of the coding scheme and results of the EPI interrater agreement assessment.

**Thematic Apperception Test (TAT)**

The Thematic Apperception Test (TAT; Murray, 1943) uses cards containing ambiguous pictures to solicit free association stories from respondents. According to Murray (1943), the purpose of the TAT is to reveal “dominant drives, emotions, sentiments, complexes and conflicts of a personality. Special value resides in its power to expose the underlying inhibited tendencies which the subject ... is not willing to admit, or can not admit because he is unconscious of them” (p. 1). Theoretically, this power is based upon a person’s natural psychological tendency to interpret ambiguous situations in terms of his/her own past experiences and current wants, needs, and motives. It is expected that a respondent will become so invested in the task of
creating an imaginary story that she will lose herself in the task, drop ego defenses, and uninhibitedly project her own drives, needs, wants, and motives into the story (Groth-Marnat, 1990; Murray, 1943). In order to reveal unconscious or partially unconscious material that potentially would not otherwise be revealed in an interview, two TAT (Murray, 1943) cards were used to prompt the mothers to tell imagined stories.

Although generally the TAT is administered using at least six cards (Groth-Marnat, 1990), because of time constraints, only two stories were solicited in this study. Half of the participants in this study were new mothers who could not be away from their babies for longer than two-hours at a time. Thus, task-time for this study was limited to three sessions, each lasting 2 hours or less. The need to complete multiple measures within this timeframe led to the decision to use a very brief version of the TAT. In a summary of articles indexed in Psychological Abstracts, Keiser and Prather (1990) reported other published research studies that have used as few as one or two TAT cards. However, McKay (1991) notes that the potential for establishing reliability is affected by the use of so few stories. Therefore, the brevity of the TAT should be considered a limitation of this study.

Both the reliability and validity of the TAT have been debated in the literature (Entwisle, 1972; Groth-Marnat, 1990; Keiser & Prather, 1990; Lundy, 1988; McAdams & Zeldow, 1993). Generally, when coding systems have been used, interrater reliability has been adequate (Entwisle, 1972; Groth-Marnat, 1990; McKay, 1991; Thomas & Dudek, 1985), and there is some evidence of respectable test-retest
reliability for variables such as affiliation and achievement motives (Lundy; 1988; McKay, 1991) and interpersonal affect (Thomas & Dudek, 1985). However, according to Groth-Marnat (1990), common methods for establishing reliability can be problematic for the TAT. For example, internal consistency can be particularly problematic because the cards are not comparable and by design (card pull) are likely to tap differing aspects of personality (Cramer, 1998).

Likewise, reports on construct validity have been varied. Some reports of criterion validity have been positive and some negative. Behavioral criteria particularly have produced negative results. Cramer (1998) suggests that one explanation for difficulty in establishing criterion validity is that different measures tap different levels of the personality (traits, motives/defenses, and life themes/identities). She suggests that it is unreasonable to expect that measures of these different levels will correlate highly.

Groth-Marnat (1990) concludes that despite the questions about reliability and validity, the TAT is a popular tool. Furthermore, Keiser and Prather (1990) suggest that the problems establishing the psychometric quality of the TAT may be because of the variety of adaptations of the instrument from study to study, making results ungeneralizable. For example, Lundy (1988) showed that administrative conditions (e.g., prior tasks and type of instruction) significantly affected validity. In summary, a noteworthy element in the poor performance of the TAT in reliability and validity studies is the “research itself, not the instrument” (Keiser & Prather, 1990, p. 801).
Despite the unclear psychometric qualities of the TAT, it was used in the present study based on (a) the accepted value of the instrument in the clinical literature, (b) the expectation that the variable of interest (saliency of the psychosocial issue of trust/mistrust) was likely to have unconscious elements, and (c) the theoretically sound expectation that the TAT has the potential to elicit unconscious material (Cramer, 1998; Murray, 1943; Plummer & Knudson-Martin, 1996).

Because only two cards were used in this study, it was not appropriate to calculate an internal reliability. However, interrater reliability was established by calculating an agreement score between the coding of a sample of stories by the researcher and the coding of the same stories by an independent coder. The same coding scheme was used for the TAT as was used for the EPI. See the coding section below for a full description of the coding scheme and results of the TAT interrater agreement assessment.

**Coding**

The researcher transcribed the EPI and the TAT stories verbatim from audiotapes. Coding was done from the typed transcripts. All EPIs were coded and then all TATs were coded. The researcher developed an Erikson psychosocial issue coding scheme based on definitional concepts for each issue and coded all EPIs and TATs for references to those definitional concepts. Because the coding scheme was previously untested, the researcher (and author of the coding scheme) was considered the expert coder, and only her scores were used for the data analysis in this study. However, in order to test the replicability and the clarity of the coding scheme, interrater agreement
was assessed. An independent coder coded a random sample of 8 EPIs and a random sample of 8 TATs. The interrater agreement procedure and results are described fully in the interrater agreement section below.

The unit of coding for the EPI was each of the 20 core questions. A core question coding unit included the response to the core question itself and the responses to all follow-up questions related to that core question. The maximum number of coding units per participant was 20, but the number of units actually coded for each participant ranged from 17 to 20, because some participants failed to respond to every question or responded with information that could not be coded. See the data analysis section of this chapter for a full explanation of the variance in number of core-question responses per participant. For the TAT, each story (two per participant) was a coding unit.

Each coding unit was coded for the presence or absence of references to each of Erikson’s eight developmental issues. The coding of the eight developmental issues was dichotomous. For each coding unit, each issue was rated yes, the issue was evidenced within the unit, or no, the issue was not evidenced within the unit. Thus, each coding unit received eight yes or no ratings, one for each developmental issue. The presence of references to a psychosocial issue was scored only once per coding unit regardless of how many references occurred or how many different dimensions of an issue were referenced.

For the EPI, only responses that referred to the current period in the individual’s life were coded. If a participant diverted to describing earlier periods, that
portion of the interview was not coded. For example, if a mother of an older child talked about what it was like for her to be the mother of an infant, that portion of her response was not coded. This coding procedure kept the focus of the coding on current life experience and helped maintain the contextual differences in the two groups of participants, which were based on each group’s current life experience as the mother of an infant or older child.

The coding scheme for the eight developmental issues was developed from descriptions of the issues discerned from several developmental scholars and practitioners (Berk, 1997; Clarke, 1978; Clarke & Dawson, 1998; Erikson, 1950/1963, 1959; Evans; 1967; Levin, 1988; Miller, 1993; Newman & Newman, 1999) and included those concepts which Hawley (1988) validated as related to Erikson’s stages as part of the development of the Measures of Psychosocial Development (MPD). For example, the following were the defining concepts for the psychosocial issue of trust/mistrust: (a) positive affective states of mind (e.g., calm, relaxed, easygoing, and joyful), (b) basic stimulation through human interaction or exploration of the environment, (c) getting personal needs met, which included assessing and identifying one’s own needs and belief that one deserves care, (d) the seeking or securing of help, which included accepting the need for help, accepting care offered, and being willing to ask for help, (e) belief in the goodness of life, including belief that one’s needs would be met, (f) trusting others, which included expecting that others would offer needed care, (g) trusting one’s intuition, and (h) hopefulness about one’s own OKness
and the OKness of the world. Appendix E describes the coding scheme of definitional concepts for all eight issues.

According to the coding scheme, references to the existence of, lack of existence of, and doubts or concerns about any of the above dimensions of trust/mistrust qualified as manifestation of the trust/mistrust developmental issue. For example, a participant’s discussion about having no hope would be considered a reference to a trust/mistrust dimension (the lack of existence of the hope dimension) and would require a positive rating that the trust/mistrust issue was present in the coding unit.

Because an independent coder was used for establishing interrater agreement, the confidentiality of the participants was protected by changing all real names in the interviews to fictitious names. The identities of the participants were not blind to the researcher, however, because she was also the interviewer and could easily recognize the participants via the content of the interview itself. Because the EPI was coded prior to the TAT stories, a separate set of fictitious identities was assigned to the TAT stories in order to minimize carryover interpretations from the EPI to the TAT stories. Although this procedure minimized recognition of respondent identities by the researcher, some identities were known because the researcher could remember elements of the TAT stories from their original telling and audiotaping.

The researcher coded in a two-step process. She did a complete coding of the interview or story. After at least one day elapsed, she did a second complete coding of the interview from a clean transcript. The researcher compared her two interpretations
of the interview or story and identified any discrepancies. She then analyzed her two different interpretations using the definitional concepts and selected the interpretation that, upon reflection, was the most tenable.

All coded EPI narrative excerpts were recorded and compiled into a list of context-specific examples of the dimensions of the eight issues as described in the coding scheme. These real-life manifestations of the eight developmental issues were then used as supplementary descriptors of the issue dimensions for the coding of the TAT stories.

**Interrater Agreement**

**Procedure**

An independent coder was trained to define Erikson’s eight psychosocial developmental issues according to the coding scheme. Training for the independent coder was limited to approximately 13 hours of instruction and consultation. In a three-hour introductory session, the researcher explained the coding procedure and defined the definitional concepts for each psychosocial issue. Over approximately a six-week span of time, five cases were used as practice cases. The independent coder coded the practice cases one at a time and met with the researcher following the completion of each case. The independent coder’s scores were compared to those of the researcher and all discrepancies were discussed. Post-case consultations totaled approximately 10 hours. After the five practice cases were completed and thoroughly discussed, the independent coder coded eight cases that had been randomly selected.
Four cases were mothers of infants; four were mothers of older children; and none were among the practice cases used for training the independent coder.

The independent coder was acquainted with the revisitation theoretical framework from past professional experience, but she had not been advised of the specific hypotheses of this study. The independent coder was blind to the identities of the participants, but the ages of the participants’ children were known, because that was easily revealed by the content of the interview itself.

After all EPI coding was completed, training began for the TAT coding. A two-hour initial training session was conducted to discuss the application of the coding scheme to imaginary stories and how that process might be alike or different from coding first-person dialogue about real life experiences. Nine cases were used as practice cases, and post-case consultations were held after each practice case was coded. Consultation time for the TAT coding totaled approximately 8 hours. After the nine practice cases were completed and thoroughly discussed, the independent coder coded eight cases that were randomly selected for the TAT interrater agreement assessment. Four of those cases were mothers of infants; four were mothers of older children; and none were among the practice cases used for training the independent coder. The TAT random sample was drawn separately from the sample used for assessing interrater agreement for the EPI. The independent coder was blind to both the identities of the participants and the ages of their children, because the content of the TAT stories did not include personal identifiers in any obvious way.
Interrater agreement for the EPI and TAT was assessed by calculating coding agreement scores. The researcher and the independent coder rated the presence or absence of references to each developmental issue in each EPI core question coding unit and in each TAT story. A point of agreement was defined as every time the researcher and independent coder recorded that evidence of a given issue was present (yes/yes) or was not present (no/no) in a coding unit. If one coder recorded that evidence of a given issue was present in a coding unit, but the other coder did not, that was considered a point of disagreement.

Although some agreement rating systems give credit for only an agreement regarding the presence of a condition (Winter, 1973), agreement credit in this study was given for both agreement that a condition did exist and agreement that a condition did not exist. The rationale for that decision is based on the complexity of the task and the theory upon which the study is based.

McAdams et al. (1997) identified that the complexity of a task may demand coding consideration of both the presence and the absence of a condition. Although the primary variable of interest in this study was Erikson’s psychosocial construct of trust/mistrust, the presence or absence of references to the other seven of Erikson’s psychosocial issues was also coded for each coding unit in the EPI and the TAT. This comprehensive coding of all issues for every coding unit gave the coding task a high level of complexity. For example, for the EPI, a coder could make as many as 160 separate judgements for one participant (8 issues per 20 core question coding units).
Under these complex conditions, the coding of absences is as informative as is the coding of presence.

Furthermore, Erikson’s theory of development suggests that all of the eight psychosocial issues are present in varying degrees of saliency and with varying levels of resolution in adults. From this theoretical perspective, a person can be considered as having a reservoir of psychosocial energy that is finite and directed to these eight issues in varying proportions. Thus, the absence of evidence of an issue is theoretically important, because it indicates that this finite reservoir of psychosocial energy is proportionally directed away from the absent issues and toward the present issues.

A coding agreement score was calculated as follows for each of the eight psychosocial issues. Ratings from the researcher and independent coder were compared. The total number of agreements (yes/yes or no/no) for a given issue was divided by the total number of agreements that were possible for that issue across the sample of 8 participants. For example, for the TAT, the total number of agreements possible for any issue was 16 (2 stories for each of the 8 participants). If the two coders agreed on the presence or absence of references to a given issue in 12 of the stories, the agreement score was 75%.

**EPI interrater agreement scores**

Table 4 shows the interrater agreement scores for each of the eight developmental issues for the EPI. The agreement scores are based on 153 coding units for the random sample of 8 study participants. The interrater agreement score for
<table>
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<tr>
<th>Issue</th>
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<tr>
<td>Autonomy/Shame and Doubt</td>
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<td>Initiative/Guilt</td>
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<tr>
<td>Ego Integrity/Despair</td>
<td>.98</td>
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</tbody>
</table>

\( N = 153 \)

Table 4: EPI interrater agreement scores by developmental issue.

trust/mistrust (the issue of particular interest in this study) was .82. The average interrater agreement score for the EPI across the eight issues was also .82.

Because there were a large number of coding units per issue in the EPI (e.g., 18 to 20 per issue in this sample), coder disagreements could have a varying impact on actual saliency scores. For example, if for a given participant, Coder 1 disagreed with Coder 2 four times across twenty questions on a given issue, the coders would reach an 80% agreement level. If for two of those disagreements, Coder 1 said yes when Coder 2 said no, and for the two other disagreements the reverse occurred and Coder 1 said no when Coder 2 said yes, the actual saliency scores from the two coders would be identical. This is a condition of balanced disagreements, which results in a similar overall rating of the entire interview from the two coders. Because the goal of the coding was to summarize a participant’s saliency over a lengthy dialogue, this
balancing of impressions over the course of the entire interview is considered an appropriate measure of interrater agreement.

However, if for all four disagreements, Coder 1 said no and Coder 2 said yes, the saliency scores from the two coders would diverge. This is a condition of concentrated disagreement. Concentrated disagreements could be indicative of lack of clarity or specificity in the definitional concepts, a differential in coding expertise between the coders, or a coding bias.

To better understand the nature of the coding disagreements, correlations of the two coders’ EPI saliency scores were calculated. Table 5 shows the Pearson product-moment correlation coefficients for the two coders’ EPI saliency corrected scores by issue. Five of the eight correlation coefficients reached statistical significance (trust/mistrust, identity/identity diffusion, intimacy/isolation, generativity/stagnation, and ego integrity/despair) and indicated very strong, positive relationships ranging from $r = .97$, $p = .000$ for ego integrity/despair to $r = .74$, $p = .04$ for identity/identity diffusion. The correlation for trust/mistrust (the issue of particular interest in this study) was $r = .84$, $p = .009$. Industry/inferiority was substantially correlated but did not reach statistical significance. However, with only eight participants, there was little statistical power for reaching significance.

The low correlation for autonomy and the negative correlation for initiative warranted a closer examination of the data. Both autonomy and initiative evidenced a high incidence of concentrated disagreements. For example, for one interview, the independent coder identified autonomy evidence in 7 units, and the researcher in no
<table>
<thead>
<tr>
<th></th>
<th>Trust/ Mistrust Coder 1</th>
<th>Autonomy/ Shame and Doubt Coder 2</th>
<th>Initiative/ Guilt Coder 2</th>
<th>Industry/ Inferiority Coder 2</th>
<th>Identity/ Identity Diffusion Coder 2</th>
<th>Intimacy/ Isolation Coder 2</th>
<th>Generativity/ Stagnation Coder 2</th>
<th>Ego Integrity/ Despair Coder 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trust/ Mistrust Coder 2</td>
<td>.84**</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Autonomy/ Shame and Doubt Coder 1</td>
<td>--</td>
<td>.22</td>
<td>--</td>
<td>--</td>
<td>--</td>
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<td>--</td>
</tr>
<tr>
<td>Initiative/ Guilt Coder 1</td>
<td>--</td>
<td>--</td>
<td>-.68</td>
<td>--</td>
<td>--</td>
<td>--</td>
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<tr>
<td>Industry/ Inferiority Coder 1</td>
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<td>--</td>
<td>--</td>
<td>.62</td>
<td>--</td>
<td>--</td>
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<td>--</td>
</tr>
<tr>
<td>Identity/ Identity Diffusion Coder 1</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>.74*</td>
<td>--</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Intimacy/ Isolation Coder 1</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>94***</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Generativity/ Stagnation Coder 1</td>
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<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>.80*</td>
<td>--</td>
</tr>
<tr>
<td>Ego Integrity/ Despair Coder 1</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>.97***</td>
</tr>
</tbody>
</table>

N = 8  
*p < .05, **p = < .01, ***p ≤ .001.

Table 5: Correlations between coders’ EPI saliency corrected scores by psychosocial issue.
units. For initiative, a reverse concentration occurred with the researcher identifying
evidence in 7 units, and the independent coder in no units. The existence of these high
levels of concentrated disagreements in the coding of autonomy and initiative indicate
the need for refinement and clarity in the definitional concepts for these two subscales.
Coding bias could also be a factor in discrepancies and should be addressed in future
studies using the Erikson psychosocial issue coding scheme (e.g., by using multiple
coders who are blind to the study’s hypotheses and who have not been part of the data
collection and by using a group consensus process for resolving coding
disagreements).

**TAT interrater agreement scores**

Table 6 shows the interrater agreement scores for each of the eight
developmental issues for the TAT. The agreement scores are based on 16 stories told
by a random sample of 8 study participants (2 stories per participant). Trust/mistrust is
the psychosocial issue of most interest in this study. The interrater agreement score for
trust/mistrust was .88.

Generally, agreement scores were higher for the TAT (M = 88%) than for the
EPI (M = 82%). Explanations for such improvement were that (a) the TAT coding was
a less complex task, because it involved considerably less text and (b) the coders
benefited from the experience of having coded the EPI. All EPI scoring was
completed before beginning the TAT scoring, and examples from the EPI scoring
were used as additional training tools for the scoring of the TAT.
<table>
<thead>
<tr>
<th>Issue</th>
<th>Agreement Scores</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trust/Mistrust</td>
<td>.88</td>
</tr>
<tr>
<td>Autonomy/Shame and Doubt</td>
<td>.75</td>
</tr>
<tr>
<td>Initiative/Guilt</td>
<td>.94</td>
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<tr>
<td>Industry/Inferiority</td>
<td>.75</td>
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<tr>
<td>Identity/Identity Diffusion</td>
<td>.94</td>
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<tr>
<td>Intimacy/Isolation</td>
<td>.81</td>
</tr>
<tr>
<td>Generativity/Stagnation</td>
<td>1.00</td>
</tr>
<tr>
<td>Ego Integrity/Despair</td>
<td>1.00</td>
</tr>
</tbody>
</table>

*N = 16*

Table 6: TAT interrater agreement scores by developmental issue.

Correlations of the two coders’ TAT saliency scores were not calculated for two reasons. First, a narrow range of saliency scores per issue made correlations of scores for the TAT less meaningful than for the EPI. Second, correlations for trust/mistrust and ego integrity/despair could not be calculated, because for each of those issues, at least one coder’s set of scores had no variance.

**Summary**

Agreement scores for the EPI and the TAT were at acceptable levels considering the complexity of the task and the limited amount of training time for the independent coder. The agreement assessment provided evidence of consistency and
replicability of the coding scheme. For trust/mistrust, the issue of particular interest in this study, the agreement scores were 82% for the EPI and 88% for the TAT.

However, there is evidence that further development of the coding scheme is needed for autonomy and initiative. Thus, caution in interpreting autonomy and initiative is recommended until further refinement and study of those coding scheme subscales is done.

Differentiating and clarifying concept definitions for all issues and providing more training for coders would be expected to reduce instances of concentrated disagreements and improve the reliability of the coding scheme. To maintain as much consistency as possible in the use of the coding scheme, only the researcher’s coding (the more expert of the two coders) was used in the analysis for this study. The independent coder’s coding was used exclusively to investigate the properties and performance of the coding scheme.

**Modified Erikson Psychosocial Stage Inventory (MEPSI)**

The Modified Erikson Psychosocial Stage Inventory (MEPSI; Darling-Fisher & Leidy, 1988) was administered as a measure of the resolution of Erikson’s psychosocial issues. The MEPSI is a modified version of the Erikson Psychosocial Stage Inventory (Rosenthal, Gurney, & Moore, 1981) which measured the resolution of the first six Eriksonian psychosocial issues (trust/mistrust, autonomy/shame and doubt, initiative/guilt, industry/ inferiority, identity/identity diffusion, and intimacy/isolation). The modified instrument reduced the number of items per
stage/scale and added two additional scales to measure resolution of the last two Eriksonian psychosocial issues (generativity/stagnation and ego integrity/despair).

The MEPSI contains 80-items, 10 per stage/scale. Forty items represent the positive resolution of the issues and 40 items represent the negative resolution of the issues. Items are rated on a 5-point scale (“hardly ever true” to “almost always true”). Six experts validated the selection of items as representative of Erikson’s eight stages. Darling-Fisher and Leidy (1988) report further validation based on interitem correlations and correlations between age and age-appropriate scales. Examples of items indicating trust resolution are “Things and people usually turn out well for me” and “I trust people.” Examples of mistrust items are “I find that good things never last long” and “People try to take advantage of me.”

Darling-Fisher and Leidy (1988) reported alpha reliability coefficients ranging between .75 (generativity/stagnation) and .85 (industry/inferiority and identity/identity diffusion) for the eight stage subscales with an overall, global scale reliability of .97. The reliability for the trust/mistrust subscale was reported as .82. See Darling-Fisher and Leidy (1988) for a full report of the MEPSI.

Data Collection

Prior to the First Session

Prior to the first session, participants received a Consent Form and a Profile Questionnaire in the mail. Participants were asked to bring the Consent Form and
completed Profile Questionnaire to the first session. Appendix F includes the Profile Questionnaire. Appendix G includes the Consent Form.

First Session

The first session was a one-hour session conducted in either the participant’s or the researcher’s home. Out of a total of 22 first sessions, 59% (n = 13) were held in the homes of the participants; 41% (n = 9) were held in the home of the researcher.

When a session was conducted in a participant’s home, it was at a time when her child was not present or when someone else in the home was available to care for the child. Mothers of infants had been informed prior to their commitment to the study that they should have another caregiver available, although they would be able to breastfeed their infant during the session, if necessary. This did occur on a few occasions, but it was not the norm that the infants needed to nurse. Many times however, for some portion of the meeting time, an infant was crying in the background while the additional caregiver was attending to her/him. This produced a varying degree of noticeable stress for the participant. No participant asked to stop the session, however, and interruptions for the participant to confer with the caregiver were infrequent and brief when they did occur. The participants generally tried to ignore the crying and to acclimate themselves to allowing the other caregiver to soothe the child.

If the session was conducted in the researcher’s home, no children were present, and the researcher provided an environment in which neither she nor the participant was interrupted.
The first session included, in the order listed, (a) casual introductory conversation, (b) an opportunity for the participant to ask questions about participation in the study, (c) completion of the Consent Form, (d) completion or review of the Profile Questionnaire, (e) the first sorting for the MPD-S as a self-assessment measure, (f) the second sorting of the MPD-S as a decoy measure to interrupt memory, (g) if time remained, the drawing of Cowan et al.'s (1978) parental saliency pie chart, and (h) solicitation of new referrals for participation in the study.

Second Session

The second session was a two-hour session conducted 4 to 26 days ($M = 10.9$, $SD = 6.4$) after the first session. Out of the total of 22 second sessions, 82% ($n = 18$) were held in the homes of the participants, and 18% ($n = 4$) were held in the home of the researcher.

The second session included, in the order listed, (a) the drawing of Cowan et al.'s (1978) parental saliency pie chart, if the participant had not done this in the first session, (b) administration of the TAT, and (c) the Experience of Parenting Interview (EPI).

Thematic Apperception Test (TAT) Administration

For all but one participant, the TAT preceded the Experience of Parenting Interview. In one instance the researcher did not have the TAT cards with her at the second meeting and, therefore, that participant did the TAT at the beginning of the third session, having completed the interview previously at the second session. For a few participants the administration of the TAT followed the drawing of the parental...
saliency pie chart (Cowan et al., 1978) because time elapsed at the first session. All TAT stories were audiotaped.

The TAT consisted of the participants telling two imaginary stories stimulated by two TAT cards selected from Murray’s (1943) sets. The selected cards were 8GF, which pictures a “young woman sitting with her chin in her hand looking off into space” (Murray, 1943) and 12BG, which is a picture of a “rowboat drawn up on the bank of a woodland stream” (Murray, 1943). There are no human figures in the rowboat picture. The capital letters in the card identification refer to the suitable respondents for the pictures as designated by Murray. “GF” refers to suitability for younger and older females, and “BG” refers to suitability for young boys and girls.

These two pictures were selected for the following reasons. First, the likelihood of identification (and therefore projection) was considered. The person in card 8GF is a female of an age with which the respondents in the present study could potentially identify. Murray (1943) suggested that this age/sex similarity is likely to increase the potential for projection of the respondents’ wants, needs, and motives. Second, the tendency for a given picture to stimulate certain themes and contexts (card pull) was considered. Normatively, card 8GF has a very diverse card pull (Groth-Marnat, 1990) which should invite a full range of possible stories from respondents, and card 12BG is highly ambiguous which is also likely to invite a wide range of possible stories. For both pictures, there is no obvious card pull toward any particular emotion, and neither picture presupposes a context of parenting or interpersonal relationship. Finally, Murray’s (1943) distinction between the first and second sets of
cards was considered. The first set (numbers 1-10) is more likely to tap into the public behavior aspects of personality, whereas the second set (numbers 11-20) is more likely to tap into repressed, unconscious tendencies. A card from each set was selected.

Throughout the administration of the TAT, the researcher prompted the participant to be sure to include all of the elements listed in the directions and to either be more or less detailed in accordance with the five-minute-per-story expectation. The most common prompts that the researcher used were “What are the people thinking and feeling?” What led up to this happening?” and “How will the story end?”

**Experience of Parenting Interview (EPI) Administration**

The Experience of Parenting Interview consisted of 20 core questions. The first 19 questions were asked in the second session. Question 20 was a follow-up question asked in the third session. The EPI was audiotaped.

For one participant, the core question concerning what the participant thought was expected of her (Q.5) was inadvertently omitted in the interview. The researcher called that participant several days after the main interview and asked the missed question. The response was not audiotaped, but the researcher’s notes regarding the response were added to the transcript of the interview.

A verification procedure was conducted regarding the EPI. Several months after the data was collected each participant was sent in the mail a 2-4 page interview synopsis which was summarized from a verbatim transcript of the full interview. Participants were asked to respond to how well the synopsis fit what they remembered talking about and whether it was what they had intended to communicate. They were
invited to make additions, deletions, or elaborations to the interview by returning the synopsis with comments in a self-addressed, stamped envelope or by calling the researcher to discuss their comments. Seventy-eight percent (n = 17) of the participants responded; 71% (n = 12) by mail and 29% (n = 5) by phone. For those responding by phone the researcher took notes and added the comments to the participants’ data file. All who responded indicated agreement with the summary. Those who elaborated on the synopsis did not change the basic meaning of the original summary remarks.

Third Session

The third session was a two-hour session conducted 1 to 43 days (M = 11.7, SD = 9.9) after the second session. Out of a total of 22 third sessions, 77% (n = 17) were held in the homes of the participants, and 23% (n = 5) were held in the home of the researcher.

The third session included, in the order listed, (a) the retest administration of the MPD-S as a self-assessment, (b) the administration of the MEPSI, (c) the opportunity to add to, clarify, or amend any part of the EPI (Question 20), and (d) an Educational Debriefing Interview.

Measures of Psychosocial Development-Saliency (MPD-S) Administration

Participants were asked to separate the fifty-six MPD-S items into saliency categories using the same directions as were given in the first session self-assessment sorting and using the same step-by-step procedure as described earlier.
Modified Erikson Psychosocial Stage Inventory (MEPSI) Administration

Participants were asked to complete the MEPSI questionnaire. The researcher was present while the participants completed the inventory and directed the participants to ask questions, if necessary.

Follow-up Question (Q. 20) of the EPI

Participants were asked if they wished to add to, clarify, or amend any part of the EPI. For one participant this question was inadvertently forgotten. It was considered missing data in the analysis.

Educational Debriefing Administration.

Study respondents participated in an educational, interactive debriefing presentation in which the theory that underlies the present study was explained. Participants were invited to offer their reactions to the theoretical assumptions of the study and project their own understanding of how they may or may not be revisiting Erikson’s developmental issues. The debriefing was audiotaped. Data from the Debriefing were not analyzed for this study, but it served as an educational service to the participants in the study. They expressed enthusiastic interest in the concepts of the study and had considerable opinions about how their lived experience did and did not fit the construct of revisitation. They expressed appreciation of the relevance of the debriefing information to their own positive growth and development and the positive growth and development of their children. At the conclusion of the session the interviewer left educational materials with the participants for which they also expressed gratitude.
Data Analysis

Introduction

The analyses of data focused on (a) the psychosocial saliency profiles of the entire sample as a group and of the two subgroups, mothers of infants and mothers of older children and (b) the testing of the three hypotheses of the study. Although qualitative data was collected (EPI and TAT data), the decision was made to conduct a quantitative analysis of that data for the following reasons. Because the instruments employed in this study had not been used in prior research, a quantitative analysis was considered a useful way to learn about and compare the three instruments. In addition, this study's hypotheses required comparing Erikson's eight psychosocial issues specifically in "more" or "less" terms. These were considered quantitative questions. Table 7 summarizes the scoring of instruments and the relationship of each instrument to each of the hypothesis tests.
<table>
<thead>
<tr>
<th>Instrument</th>
<th>Scoring</th>
<th>Hypothesis Tested</th>
</tr>
</thead>
<tbody>
<tr>
<td>Measures of Psychological Development – Saliency (MPD-S; adapted from Measures of Psychosocial Development; Hawley, 1988)</td>
<td>Saliency raw scores were calculated for each developmental issue based on the degree of self-reported attention directed to the seven items (concepts) representing each issue.</td>
<td><strong>Hypothesis One:</strong> Saliency raw scores were correlated with MEPSI mean resolution scores using Pearson correlation coefficients. <strong>Hypothesis Two:</strong> For mothers of infants, the trust saliency raw score mean was compared to the average saliency across childhood issues and individually to the means of the other four childhood developmental issues. Paired-sample t tests were used to determine the statistical significance of differences between trust saliency and the saliency of the other childhood issues. <strong>Hypothesis Three:</strong> The trust raw score mean for mothers of infants was compared to the trust raw score mean for mothers of older children. Independent-sample t tests were used to determine the statistical significance of differences.</td>
</tr>
</tbody>
</table>

Table 7: Scoring and hypothesis testing. 

continued
Table 7: continued

| Experience of Parenting Interview (EPI) | Hypothesis One: Saliency raw scores were calculated for each developmental issue based on the number of core question coding units in which references to the concepts of a given issue were present.  
2. To account for a variance in number of coding units per participant, saliency corrected scores were calculated by dividing raw scores by the number of core question coding units coded for each individual. | Hypothesis Two: For mothers of infants, the trust/mistrust saliency corrected score mean was compared to the average saliency across childhood issues and individually to the means of the other four childhood developmental issues. Paired-sample t tests were used to determine the statistical significance of differences between trust/mistrust saliency and the saliency of the other childhood issues. | Hypothesis Three: The trust/mistrust saliency corrected score mean for mothers of infants was compared to the trust/mistrust saliency corrected score mean for mothers of older children. Independent-sample t tests were used to determine the statistical significance of differences. |

continued
Table 7: continued

| Thematic Apperception Test (TAT; Murray, 1943) | Saliency raw scores were calculated for each developmental issue based on the number of stories in which references to the concepts of a given issue were present. | Hypothesis One: Saliency raw scores were correlated with MEPSI mean resolution scores using Pearson correlation coefficients. Hypothesis Two: For mothers of infants, the trust/mistrust saliency raw score mean was compared to the average saliency across childhood issues and individually to the means of the other four childhood developmental issues. Paired-sample t tests were used to determine the statistical significance of differences between trust/mistrust saliency and the saliency of the other childhood issues. Hypothesis Three: The trust/mistrust saliency raw score mean for mothers of infants was compared to the trust/mistrust saliency raw score mean for mothers of older children. Independent-sample t tests were used to determine the statistical significance of differences. |

continued
Table 7: continued

| Modified Erikson Psychosocial Stage Inventory (MEPSI; Darling-Fisher & Leidy, 1988) | 1. Composite resolution scores were calculated for each developmental issue based on the degree of agreement given to the ten attitude statements representing each issue.  
2. Mean resolution scores were calculated by dividing the composite scores by the 10 items per subscale. | Hypothesis One: Using Pearson correlation coefficients, mean resolution scores were correlated with EPI saliency correlated scores, TAT saliency raw scores, and MPD-S raw scores. |

**Scoring**

**Measures of Psychosocial Development-Saliency (MPD-S)**

**Raw scores**

The MPD-S is a Q-sort instrument in which 56 items are sorted into seven categories of most to least saliency with prescribed numbers of items required to be placed in each category level in an approximately normal distribution pattern. The scoring of the MPD-S was as follows. The five items that were placed in the most salient category of the sorting were given 7 points each, and the five items placed in the least salient category of the sorting were given 1 point each. The seven items that were placed in the second most salient category of the sorting were given 6 points each, and the seven items placed in the second least salient category of the sorting were given 2 points each. The ten items that were placed in the third most salient category of the sorting were given 5 points each, and the ten items placed in the third...
least salient category of the sorting were given 3 points each. The twelve items placed in the middle or modal level of saliency were given 4 points each. Two hundred twenty-four points were available for distribution over the eight developmental issues.

On the MPD-S, each developmental issue is represented by 7 items. The numerical values (derived from the sorting) of the seven items representing each Eriksonian issue were summed to give a saliency raw score for each issue. Higher scores indicated a higher degree of saliency. For any given issue, a maximum score of 47 would be achieved if all seven items for an issue were placed in the highest levels of saliency. A minimum score of 9 would be achieved if all seven items for an issue were placed in the lowest levels of saliency.

**Experience of Parenting Interview (EPI)**

**Raw scores**

Using verbatim transcripts taken from audiotapes of the Experience of Parenting Interview (EPI), the researcher coded each EPI coding unit (core question response and all follow-up questions relevant to the core question) for the presence or absence of references to Erikson’s eight psychosocial developmental issues. Thus, each unit within the interview (a maximum of 20 core questions per interview) was given eight separate codes, one for each psychosocial issue. See the coding section of this chapter for a full discussion of the coding scheme.

Each coding unit was given a score of “2” if at least one reference to a given developmental issue did exist and a score of “1” if reference to a given developmental issue did not exist. In order to control for the effect of longer responses, evidence of an
issue was scored only once per core question coding unit regardless of how many references occurred or how many different dimensions of a given issue were referenced.

For each issue, the coding unit scores ("1" or "2") were summed to derive a saliency raw score per issue for each individual. The maximum saliency raw score for any given issue ranged from 34 to 40, depending on the number of units coded. There were several sources of variance in the number of questions coded per participant. Question 20 (Any additional comments?) was not coded for 14 participants: 13 participants had no additional comments on this question, and the question was inadvertently omitted in one interview. Question 19 (What else should I know about you?) was not coded for 5 participants: 1 participant responded exclusively with information from a prior time in her life, and, therefore, that question was not coded; and 4 participants said there was nothing else they wished to add to the interview. Question 14 (positive influence) was not coded for 1 participant, and Question 15 (negative influence) was not coded for 2 participants: 1 participant responded to both influence questions by identifying specific influential persons but offered no explanations that could be coded, and 1 participant said that she had no response for the negative influence question.

**Corrected scores**

Because there was variance in the number of units coded for each individual, raw scores were corrected by averaging an issue's saliency raw score for each participant over the number of units coded for that participant. Thus, saliency scores
could be compared across individuals. The possible range of saliency corrected scores was between 1 and 2 per issue. A “1” indicated that no references to the given issue existed in any coding unit; a “2” indicated that at least one reference to the given issue existed in every coding unit. A higher saliency corrected score indicated that the individual’s interview included more units that referenced the concepts of the given developmental issue and, therefore, that the individual evidenced greater saliency of the given issue.

**Thematic Apperception Test (TAT)**

**Raw scores**

Using verbatim transcripts taken from audiotapes of the Thematic Apperception Test (TAT), the researcher coded each story for the presence or absence of references to Erikson’s eight psychosocial developmental issues. Thus, each story was given eight separate codes, one for each psychosocial issue. See the coding section of this chapter for a full discussion of the coding scheme.

Each TAT story was given a score of “2” if at least one reference to a given developmental issue did exist and a score of “1” if reference to a given developmental issue did not exist. In order to control for the effect of longer stories, evidence of an issue was scored only once per story regardless of how many references occurred or how many different dimensions of a given issue were referenced. The maximum saliency raw score for any given issue was 4, which indicated that both stories included at least one reference to the given developmental issue. The minimum
saliency raw score for any given issue was 2, which indicated that neither story included a reference to the given developmental issue.

**Corrected scores**

No corrected scores were calculated for the TAT, because there was no need to correct for variances in number of responses.

**Modified Erikson Psychosocial Stage Inventory (MEPSI)**

**Raw scores**

The Modified Erikson Psychosocial Stage Inventory (MEPSI) consisted of 10 items (5 positive and 5 negative) for each of Erikson’s eight psychosocial stages. For each item, the participant self-reported a score of 1 to 5, with “5” representing “most always true” about the participant and “1” representing “hardly ever true” about the participant. A composite score was calculated for each psychosocial issue by summing the scores of the 10 items representing each issue. The five negative items within each scale were reverse scored before summing.

**Mean scores**

A mean resolution score for each issue was calculated by averaging the composite score over the 10 items per scale. Mean resolution scores ranged between 1 and 5, with five representing the higher degree of positive resolution.

**High Saliency Decision Rule**

Group profile analysis required determining which issues were highly salient. An issue was considered highly salient for a group if the saliency group mean for the issue was greater than the group’s average saliency across developmental issues.
Group means were averaged across all eight developmental issues, across the five childhood issues, and across the three adult issues.

**Hypothesis Testing**

**Hypothesis One:** The level of saliency of a psychosocial developmental issue will be unrelated to the level of resolution of the respective psychosocial developmental issue.

Hypothesis One was tested by calculating Pearson product-moment correlation coefficients for the mean resolution scores for each issue as measured by the MEPSI and each issue’s saliency score as measured by the MPD-S, EPI, and TAT. Support for the hypothesis required non-significant correlations indicating that levels of saliency and levels of resolution are statistically unrelated and, therefore, that saliency and resolution could be considered as separate constructs.

**Hypothesis Two:** For mothers of infants, the saliency of the psychosocial issue of trust/mistrust will be greater than the saliency of the other childhood psychosocial issues.

Hypothesis Two was tested by comparing the trust/mistrust saliency group mean for mothers of infants to their (a) average saliency level across the childhood psychosocial issues and (b) group means of the other four childhood psychosocial issues. Comparisons were made based on the saliency scores on the MPD-S, EPI, and TAT. Paired-sample $t$ tests were calculated to determine the statistical significance of differences between trust/mistrust saliency and the saliency of each of the other childhood psychosocial issues. $T$ tests were one-tailed because the hypothesis was directional. The following conditions within the mothers-of-infants group were considered as support for the hypothesis: (a) using descriptive statistics, the
trust/mistrust mean was greater than the average saliency across childhood developmental issues, (b) where the trust/mistrust mean was greater than the mean of other childhood issues, t tests indicated that trust/mistrust was significantly higher than other childhood issues, and (c) where the means of other childhood issues were greater than the trust/mistrust mean, t tests indicated that other childhood issues were not significantly higher than trust/mistrust.

Hypothesis Three: The psychosocial issue of trust/mistrust will be more salient for mothers of infants than for mothers of older children

Hypothesis Three was tested by comparing the trust/mistrust saliency mean score of the mothers-of-infants group and the mothers-of-older-children group. Independent-sample t tests were calculated to determine the statistical significance of differences. Comparisons were made based on the saliency scores on the MPD-S, EPI, and TAT. T tests were one-tailed because the hypothesis was directional. Support for the hypothesis required that the mothers-of-infants group have a statistically significant higher trust/mistrust saliency mean score than the mothers-of-older-children group.

Limitations

1. Because the participant groups in this study were homogeneous as to gender, number of children, marital status, education, and involvement in the labor force, results cannot be generalized to individuals with different characteristics.

2. This study was limited to only mothers. The role that parenting plays in the adult growth and development of fathers is considered equally important. Therefore,
future research should study the impact of revisitation on fathers as well as mothers.

3. This study focused on the relationship between parenting an infant and heightened attention to the psychosocial issue of trust for mothers. It did not address the larger context of the family system (e.g., spousal relationships). It is reasonable to expect that trust issues also may reverberate or be triggered for mothers via other family system relationships. Future research should begin to include more aspects of the family system in the study of revisitation.

4. The effect of age was not controlled in this study. There was a significant difference in the mean age of the two comparison groups. It is possible that age (in addition to or instead of the parenting experience) contributed to the results of this study. Future research should investigate the role that age may play in revisitation.

5. This study was limited to women who were either unemployed or minimally employed for salary or wages. The loss of the worker role was particularly new (within the prior six months) for the majority of those in the mothers-of-infants group. This loss of role may have made a unique contribution to the findings. Future research should investigate the impact of such on the revisitation of trust.

6. This study focused on parenting as a profound life experience capable of triggering adult growth and development. Other life experiences (e.g., marriage, divorce, death of a family member, or labor force participation) are considered equally viable as developmental triggers and should be included as other contexts for future research on revisitation.
7. This study did not address questions regarding how revisitation might affect the resolution of Eriksonian issues. Future longitudinal research should address such questions.

8. The self-assessment instrumentation used in this study was subject to the biases of self-report measures.

9. The use of only two TAT cards in this study raised validity questions that can only be addressed through replication and additional validity investigation.

10. Only a limited amount of time was available for training an independent coder to use the Erikson psychosocial issue coding scheme employed in this study. Amount of training is likely to have impacted the level of interrater agreement attained. This study provided rich, real-life descriptions of the manifestations of Erikson’s psychosocial issues in adults that can be built upon in future research. Continued differentiation and clarification of the definitional concepts of the psychosocial issues based on those descriptions can be expected to enhance future training for coders and the consequent level of interrater agreement that can be attained.

11. Inferential statistics were used despite a small sample with unique characteristics. It was hoped that such a rigorous statistical examination would further the understanding of the theoretical relationships of the constructs tested and of the properties of the instrumentation used. However, inferences from this study must be made cautiously. Generalizability of the findings should be limited to only those with similar characteristics to those of the study participants.
12. An alpha level of .05 was employed for all inferential statistics. In some instances multiple tests were conducted, which would suggest using a Bonferroni adjustment. The Bonferroni test was not employed for the following reasons. First, the power available for the inferential tests in this study was minimal with the number of cases being either “8” or “11,” depending on the test being conducted. Second, this study introduced new instrumentation, measured a variable not measured before in this context, and tested hypotheses never before tested. Too stringent of a statistical test would unnecessarily limit information that could be used in designing future research on the constructs of revisititation and parallelism.
CHAPTER 4

RESULTS

Introduction

This study focuses on evidence that adults revisit childhood psychosocial issues within the context of parenting. It tests the following propositions: (a) the saliency (directed attention) and the resolution (development of a belief system) of psychosocial developmental issues are statistically independent and (b) parents direct attention to (revisit) the ascendant psychosocial issue of the child they are parenting (parallelism). The first section of this chapter reports results relevant to adults revisiting childhood psychosocial issues within the context of parenting. The second section reports the results of hypothesis tests regarding (a) the independence of saliency and resolution and (b) the existence of parallelism.

Results are based on data from three saliency measures (MPD-S, EPI, and TAT) and one resolution measure (MEPSI). The MPD-S was administered twice in this study in order to collect test-retest reliability data for the instrument. Results from the MPD-S retest included a significant response shift related to the hypotheses of the main study. Therefore, both first-test and retest data are reported. Retesting conditions must be kept in mind, however, in interpreting retest data.
By the time participants were retested on the MPD-S they had already completed the EPI and the TAT. The EPI, in particular, was an instrument designed to raise the participant’s awareness of her life experiences and to encourage deep reflection about life experience. Thus, it is reasonable to expect that antecedent testing impacted MPD-S retest results. Recognizing the limitations of retest data, first-test and retest results are reported separately throughout this chapter.

Revisitation

Introduction

A purpose of this study was to listen to the lived experiences of mothers to see if revisitation was occurring and whether new mothers attend particularly to the psychosocial issue of trust/mistrust. Each of the three saliency instruments had the potential to capture evidence of the psychosocial issues in a different way. In order to introduce the data from the three instruments and exemplify the uniqueness of each instrument’s measurement, this revisitation section begins with descriptions of data from each instrument. Although all eight developmental issues were measured, the issue of trust/mistrust is used in the examples because it is the issue of most interest in this study.

Following the narrative descriptions of trust/mistrust evidence, descriptive statistics are used to report group profiles for each instrument. Group profiles include (a) mean scores and standard deviations for each developmental issue, (b) the average level of saliency across all issues, across the five childhood issues (trust, autonomy, initiative, industry, and identity), and across the three adult issues (intimacy,
generativity, and ego integrity), and (c) identification of the issues which were of high saliency based on average levels of saliency. Three groups are described: the whole group of 22 participants, the subgroup of mothers of infants (n = 11), and the subgroup of mothers of older children (n = 11).

Following the group profiles for all three saliency instruments (MPD-S, EPI, and TAT), additional EPI data analyses are reported that inform the potential effect of the EPI on the results of the MPD-S retest. Lastly, although the MEPSI measured resolution rather than saliency and did not inform questions related to revisitation, per se, in the interest of reporting comprehensive profiles of the groups and because MEPSI scores were used for hypothesis tests, MEPSI profiles were also included in this section.

**Trust/Mistrust Saliency as Measured by Each Instrument**

**Measures of Psychosocial Development-Saliency (MPD-S)**

The MPD-S is a self-report Q-sort instrument, which includes 56 items that represent the positive aspects of Erikson’s eight psychosocial issues. Participants were asked to recognize what ideas and thoughts were most on their minds during the current period of their lives. The MPD-S was external to the participants in that it required a response to items they did not produce themselves, but was internal to the participants in that it was a self-assessment. The MPD-S is likely to tap easily accessible, cognitive material. Using the MPD-S, participants evidenced high saliency of trust by placing items such as “to be calm, relaxed, easy going,” “to be optimistic, hopeful” and “to trust your basic instincts” in the high saliency categories of the
Q-sort.

Experience of Parenting Interview (EPI)

The EPI is a semi-structured interview that invites participants to reflect on their needs, resources, and social expectations and to create a narrative of the current “chapter” of their lives. The participants’ responses to the interview questions were coded using a coding scheme of definitional concepts associated with each Eriksonian psychosocial issue. Examples of definitional concepts for trust/mistrust were “meeting one’s personal needs,” “experiencing happiness, joy, calmness,” and “being hopeful.” In contrast to the MPD-S, the EPI was internal to the participant in that the participant produced the material to be assessed (although prompted by interviewer questions), but was external to the participant in that responses were assessed by the researcher. The EPI also differs from the MPD-S in that, because of its reflective nature, it is likely to tap material at a lower level of consciousness and include more emotional material than the MPD-S.

The following are examples of EPI participant dialogue that were coded as evidence that the participant was confronting trust issues. Getting one’s needs met was a definitional concept of trust. One mother responded to the question as to what she needed the most in this period of her life as, “Give me a break to breathe.” Another mom, responding to the same question about her needs, spoke of her husband’s role.

Through this whole thing, he’s been so wonderful. Like when I say, “I really need you to do this for me” or “I really need you to do that” or “I
need to hear this from you” or “I need to hear that from you” or “Could you do this?” or “Could you do that?” he’s always, “Sure.”

She went on,

I guess what I’m trying to say is when I was younger, I didn’t feel comfortable saying what I need. I was more like “I can do it,” but I’m realizing as I go on in life that that’s really silly. God puts people in your path so you can rely on them, so I, especially now, I’m just so grateful, and I just accept it. It’s hard. I think it’s harder for me, because I tend to be a giver. I like to give, give, give and help other people, but when I’m the one that needs help, I’m like “I can do it.” (laughs) Not so with this situation.

Another mom described a low point in this “chapter” of her life by talking about her husband working out of town, something she described as hardly noticeable to her before their new baby arrived.

It’s the loss of one of my main supporters, not being physically right there for, to be there for me. He’s there on the phone. I can call. I can page him. I can get a hold of him if I need to, but I guess that one of my, with this whole new thing that’s going on all of a sudden, it’s like my, one of my life supporters is gone.

Another mom spoke of her needs being met at a visceral level and described a deep sense of calmness.
A lot of times that I would just sit there, and I would be holding him, and I would fall asleep because we would get so cozy. (laughs) Yeah. I think a lot of times I think he comforts me as much as I do him. If I’m holding him, it’s just peace there.

Hopefulness or the lack thereof is another definitional concept of trust. One mom said in describing a high point in this “chapter,” “They’ve just been things for us that says, you know what, we really are going to make this. This is gonna work out. Just when you think it’s gonna not work out it always does.”

**Thematic Apperception Test (TAT)**

The TAT is a projective instrument designed to tap unconscious needs and motivations through the telling of imaginary stories. The participants’ stories were coded using the same coding scheme of definitional concepts that was used for the EPI. The TAT was internal to the participant in that the participant produced the material to be assessed (more so than the EPI, because the picture prompts were ambiguous), but was external to the participant (as was the EPI) in that responses were assessed by the researcher.

The following are examples from TAT stories that were coded as evidence that the participant was projecting trust issues. One picture used in this study was of a contemplative woman; the other was of a boat pulled up on shore. One mom described the contemplative woman as, “Sometimes she just thinks about her own needs and misses maybe some things like reading or painting or just taking a walk and that kind of stuff.” Another mom described the woman as, “… looks pretty content to me, not
upset at all, just happy ... She looks relaxed.” A third mom set the scene for her story about the woman in the period of the Great Depression and described the woman as “confident” saying, “She’s got some help, some money comin in.” She concluded the story by describing the woman and the woman’s friend as feeling “pretty content considering how rotten things are (laughs).”

Responding to the picture of the boat, one mother described the boat as “... just waiting ... it’s just sort of maybe abandoned there.” Another mom talked about how the characters in her story “don’t think that that boat is real safe. (giggles)” A third mother told a story of two little boys in a magical place. The story included imagery related to attachment concepts. The little boys “... ran off to explore ... not thinking, ‘I need to get home to my mother’ ... They haven’t got to the point where they’re afraid they can’t go back.” A fourth mom told a story of a little boy getting in trouble rowing the boat down the stream.

He got a little lost, and he got scared ... He was cold and wet and scared ... He didn’t know how he was gonna get home ... and came his mom and dad to the rescue ... and life was grand.

Group Profiles

Measures of Psychosocial Development-Saliency (MPD-S) Raw Scores (First Test)

Whole group average levels of saliency

The MPD-S divides 224 points among the eight psychosocial issues. Thus, by design of the instrument, 28.00 points was the average level of saliency across all developmental issues. The average level of saliency across the five childhood issues
for the whole group was 27.06, and across the three adult issues, 29.56, indicating that these 22 participants self-reported that they gave more thought and attention to adult issues than to childhood issues.

**Whole group high saliency**

Across all eight issues, industry, identity, intimacy, generativity, and ego integrity were above the average saliency of 28 points. Of the childhood issues, trust, industry, and identity were above the average childhood saliency of 27.06, and generativity was above the average adult saliency of 29.56. Table 8 shows the group means on the first MPD-S for the whole group by psychosocial issue.

<table>
<thead>
<tr>
<th>Developmental Issues</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trust</td>
<td>27.95</td>
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</tr>
<tr>
<td>Autonomy</td>
<td>25.45</td>
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<tr>
<td>Grand Mean Saliency – Adult Issues</td>
<td>29.56</td>
<td>1.21</td>
</tr>
</tbody>
</table>

*N = 22*

Table 8: MPD-S (first test) raw score means for the whole group by psychosocial issue.
Mothers-of-infants average levels of saliency

For mothers of infants, the average level of saliency across all developmental issues was 28.00 by design of the instrument. The average level of saliency across the five childhood issues for mothers of infants was 26.75, and across the three adult issues, 30.09, indicating that mothers of infants self-reported that they gave more thought and attention to adult issues than to childhood issues.

Mothers-of-infants high saliency

Across all eight issues, trust, industry, identity, intimacy, and generativity were above the average saliency of 28 points. The childhood issues of trust, industry, and identity were above the average childhood saliency of 26.75, and generativity was above the average adult saliency of 30.09. Table 9 shows the group means on the first MPD-S for mothers of infants by psychosocial issue.

<table>
<thead>
<tr>
<th>Developmental Issues</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trust</td>
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</tr>
<tr>
<td>Autonomy</td>
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<td>29.82</td>
<td>3.57</td>
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<td>Generativity</td>
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<tr>
<td>Grand Mean Saliency – Adult Issues</td>
<td>30.09</td>
<td>2.24</td>
</tr>
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n = 11

Table 9: MPD-S (first test) raw score means for the mothers-of-infants group by psychosocial issue.
Mothers-of-older-children average levels of saliency

For mothers of older children, the average level of saliency across all developmental issues was 28.00 by design of the instrument. The average level of saliency across the five childhood issues for mothers of older children was 27.38, and across the three adult issues, 29.03, indicating that mothers of older children self-reported that they gave more thought and attention to adult issues than to childhood issues.

Mothers-of-older-children high saliency

Across all eight issues, autonomy, industry, identity, intimacy, generativity, and ego integrity were above the average saliency of 28 points. Of the childhood issues, autonomy, industry, and identity were above the average childhood saliency of 27.38; trust, the issue of particular interest in this study, was not above the average childhood saliency for mothers of older children, although it was for mothers of infants. Of the adult issues, generativity and ego integrity were above the average adult saliency of 29.03 for mothers of older children. Table 10 shows the group means on the first MPD-S for mothers of older children by psychosocial issue.

Measures of Psychosocial Development-Saliency (MPD-S) Raw Scores (Retest)

Whole group average levels of saliency

The average level of saliency across all developmental issues was 28.00 by design of the instrument. On the retest, the average level of saliency across the five childhood issues for the whole group was 26.83, and across the three adult issues,
<table>
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<tr>
<td>Grand Mean Saliency – Adult Issues</td>
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<td>.43</td>
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</table>

\[ n = 11 \]

Table 10: MPD-S (first test) raw score means for the mothers-of-older-children group by psychosocial issue.

29.95, indicating that these 22 participants for the second time self-reported that they gave more thought and attention to adult issues than to childhood issues.

**Whole group high saliency**

Across all eight issues, trust, industry, identity, intimacy, generativity, and ego integrity were above the average saliency of 28 points. Of the childhood issues trust, industry, and identity were above the average childhood saliency of 26.83, and generativity was above the average adult saliency of 29.95. Table 11 shows the group means on the MPD-S retest for the whole group by psychosocial issue.

**Mothers-of-infants average levels of saliency**

The average level of saliency across all developmental issues was 28.00 by design of the instrument. The average level of saliency across the five childhood issues for mothers of infants was 26.20, and across the three adult issues, 31.00,
<table>
<thead>
<tr>
<th>Developmental Issues</th>
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<th>SD</th>
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<tr>
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<td>1.50</td>
</tr>
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N = 22

Table 11: MPD-S (retest) raw score means for the whole group by psychosocial issue.

indicating that mothers of infants again self-reported that they gave more thought and attention to adult issues than to childhood issues.

**Mothers-of-infants high saliency**

Across all eight issues, trust, identity, intimacy, generativity, and ego integrity were above the average saliency of 28 points. Of the childhood issues, trust, industry, and identity were above the average childhood saliency of 26.20, and of the adult issues, intimacy and generativity were above the average adult saliency of 31.00. Table 12 shows the group means on the MPD-S retest for mothers of infants by psychosocial issue.

**Mothers-of-older-children average levels of saliency**

The average level of saliency across all developmental issues was 28.00 by design of the instrument. The average level of saliency across the five childhood
<table>
<thead>
<tr>
<th>Developmental Issues</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trust</td>
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n = 11

Table 12: MPD-S (retest) raw score means for the mothers-of-infants group by psychosocial issue.

issues for mothers of older children was 27.45, and across the three adult issues, 28.91, indicating that mothers of older children again self-reported that they gave more thought and attention to adult issues than to childhood issues.

Mothers-of-older-children high saliency

Across all eight issues, autonomy, industry, identity, generativity, and ego integrity were above the average saliency of 28 points. Of the childhood issues, autonomy, industry, and identity were above the average childhood saliency of 27.45, and of the adult issues, generativity was above the average adult saliency of 28.91. As with the first MPD-S, for mothers of older children, trust was not above the average childhood saliency, although it was for mothers of infants. Table 13 shows the group means on the MPD-S retest for mothers of older children by psychosocial issue.
<table>
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<th>Developmental Issues</th>
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<td>Grand Mean Saliency – Adult Issues</td>
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</table>

\( n = 11 \)

Table 13: MPD-S (retest) raw score means for the mothers-of-older-children group by psychosocial issue.

Comparison of Group Profiles from the MPD-S First Test and Retest

Introduction

The purpose of the MPD-S retesting was to establish reliability data for the MPD-S instrument. Unexpectedly, for the mothers of infants, there was a significant change in the saliency level of trust/mistrust from the first test to the retest.

Trust/mistrust was the only issue that changed significantly, and trust/mistrust changed significantly only for mothers of infants. Because this change was significant and specifically related to the developmental issue and subgroup of most interest in this study, both the MPD-S data from the first test and the retest were used for analyzing the existence of revisitation, the independence of saliency and resolution, and the existence of parallelism. The following are descriptions of the differences between the first test and the retest. Differences are reported by group: the whole group, mothers of infants, and mothers of older children.
Whole group

On both the first test and the retest these 22 participants indicated more attention toward the adult issues than the childhood issues, but the difference in attention between childhood and adult issues widened based on retest scores. The average saliency across the childhood issues was lower on the retest ($M = 27.06$, first test; $M = 26.83$, retest), and the average saliency across the adult issues was higher on the retest ($M = 29.56$, first test; $M = 29.95$, retest).

Across eight developmental issues, the one change in high saliency was the addition of trust as of above average saliency on the retest. The other five issues that were of high saliency based on the first test (industry, identity, intimacy, generativity, and ego integrity) remained highly salient on the retest. When comparing the saliency of childhood issues to the average childhood saliency and the saliency of adult issues to the average adult saliency, there were no changes in the issues that were highly salient from the first test to the retest.

Two-tailed, paired-sample t tests for the whole group indicated no significant differences between issue means on the first test compared to the retest.

Table 14 shows the comparison of developmental issues based on the first-test and retest MPD-S scores for the whole group.

Mothers-of-infants group

On both the first test and the retest, mothers of infants indicated more attention toward the adult issues than the childhood issues, but the difference in attention between childhood and adult issues widened based on retest scores. The average
<table>
<thead>
<tr>
<th>Developmental Issue</th>
<th>MPD-S First Test</th>
<th>MPD-S Retest</th>
<th>t&lt;sup&gt;*&lt;/sup&gt;</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
<td>M</td>
</tr>
<tr>
<td>Trust</td>
<td>27.95</td>
<td>5.34</td>
<td>29.36</td>
</tr>
<tr>
<td>Autonomy</td>
<td>25.45</td>
<td>8.82</td>
<td>24.23</td>
</tr>
<tr>
<td>Initiative</td>
<td>22.23</td>
<td>3.69</td>
<td>22.27</td>
</tr>
<tr>
<td>Industry</td>
<td>28.95</td>
<td>4.98</td>
<td>28.32</td>
</tr>
<tr>
<td>Identity</td>
<td>30.73</td>
<td>4.11</td>
<td>29.95</td>
</tr>
<tr>
<td>Intimacy</td>
<td>29.18</td>
<td>3.98</td>
<td>29.45</td>
</tr>
<tr>
<td>Generativity</td>
<td>30.91</td>
<td>6.85</td>
<td>31.64</td>
</tr>
<tr>
<td>Ego Integrity</td>
<td>28.59</td>
<td>5.04</td>
<td>28.77</td>
</tr>
</tbody>
</table>

N = 22

*Two-tailed t tests were used.

Table 14: Whole group MPD-S first-test and retest means by developmental issue.

Saliency across the childhood issues was lower on the retest (M = 26.75, first test; M = 26.20, retest), and the average saliency across the adult issues was higher on the retest (M = 30.09, first test; M = 31.00, retest).

Across eight developmental issues, there were two changes in high saliency: industry was no longer highly salient based on the retest, and ego integrity was an additional issue of high saliency on the retest. The other four issues that were of high saliency based on the first test (trust, identity, intimacy, and generativity) remained highly salient on the retest. When comparing the saliency of childhood issues to the average childhood saliency, there were no changes in high saliency from the first test to the retest. When comparing the saliency of adult issues to the average adult
saliency, intimacy was added as a highly salient issue. Generativity, which was highly salient on the first test, remained highly salient on the retest.

Two-tailed, paired-sample $t$ tests for the mothers-of-infants group indicated trust was significantly higher on the retest than on the first test, $t(10) = -3.65$, $p = .004$ ($M = 30.00$, first test; $M = 33.18$, retest). Because both the EPI and the TAT were administered in between the MPD-S first test and retest, priming effects were examined related to this MPD-S retest response shift. The results of that examination are reported following the group profile reports for the EPI and TAT. Table 15 shows the comparison of developmental issues based on the first-test and retest MPD-S scores for the mothers-of-infants group.

<table>
<thead>
<tr>
<th>Developmental Issue</th>
<th>MPD-S First Test</th>
<th>MPD-S Retest</th>
<th>$t^*$</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$M$</td>
<td>$SD$</td>
<td>$M$</td>
</tr>
<tr>
<td>Trust</td>
<td>30.00</td>
<td>5.87</td>
<td>33.18</td>
</tr>
<tr>
<td>Autonomy</td>
<td>22.64</td>
<td>4.25</td>
<td>20.18</td>
</tr>
<tr>
<td>Initiative</td>
<td>22.00</td>
<td>4.15</td>
<td>20.45</td>
</tr>
<tr>
<td>Industry</td>
<td>28.64</td>
<td>5.56</td>
<td>27.18</td>
</tr>
<tr>
<td>Identity</td>
<td>30.45</td>
<td>4.80</td>
<td>30.00</td>
</tr>
<tr>
<td>Intimacy</td>
<td>29.82</td>
<td>3.57</td>
<td>31.55</td>
</tr>
<tr>
<td>Generativity</td>
<td>32.45</td>
<td>5.61</td>
<td>32.27</td>
</tr>
<tr>
<td>Ego Integrity</td>
<td>28.00</td>
<td>5.12</td>
<td>29.18</td>
</tr>
</tbody>
</table>

$n = 11$
*Two-tailed $t$ tests were used.
**$p < .01$.

Table 15: The mothers-of-infants group MPD-S first-test and retest means by developmental issue.
Mothers-of-older-children group

On both the MPD-S first test and retest, mothers of older children indicated more attention toward the adult issues than the childhood issues but the difference in attention between childhood and adult issues narrowed based on retest scores. The average saliency across the childhood issues was higher on the retest (M = 27.38, first test; M = 27.45, retest), and the average saliency across the adult issues was lower on the retest (M = 29.03, first test; M = 28.91, retest), but the emphasis remained on the adult issues.

Across eight developmental issues the one change in high saliency was that intimacy was no longer highly salient as measured by the retest. The other five issues that were of high saliency based on the first test (autonomy, industry, identity, generativity, and ego integrity) remained highly salient on the retest. When comparing the saliency of childhood issues to the average childhood saliency, there were no changes in high saliency from the first test to the retest. When comparing the saliency of adult issues to the average adult saliency, ego integrity was no longer highly salient as measured by the retest. Generativity, which was highly salient on the first test, remained highly salient on the retest.

Two-tailed, paired-sample t tests for the mothers-of-older-children group indicated no significant differences between issue means on the first test compared to the retest. Table 16 shows the comparison of developmental issues based on the first-test and retest MPD-S scores for the mothers-of-older-children group.
<table>
<thead>
<tr>
<th>Developmental Issue</th>
<th>MPD-S First Test</th>
<th></th>
<th>MPD-S Retest</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
<td>M</td>
<td>SD</td>
<td>t</td>
</tr>
<tr>
<td>Trust</td>
<td>25.91</td>
<td>4.04</td>
<td>25.55</td>
<td>3.56</td>
<td>.29</td>
</tr>
<tr>
<td>Autonomy</td>
<td>28.27</td>
<td>11.31</td>
<td>28.27</td>
<td>9.52</td>
<td>.00</td>
</tr>
<tr>
<td>Initiative</td>
<td>22.45</td>
<td>3.36</td>
<td>24.09</td>
<td>5.63</td>
<td>-1.06</td>
</tr>
<tr>
<td>Industry</td>
<td>29.27</td>
<td>4.59</td>
<td>29.45</td>
<td>5.41</td>
<td>-.11</td>
</tr>
<tr>
<td>Identity</td>
<td>31.00</td>
<td>3.49</td>
<td>29.91</td>
<td>4.76</td>
<td>1.11</td>
</tr>
<tr>
<td>Intimacy</td>
<td>28.55</td>
<td>4.44</td>
<td>27.36</td>
<td>4.91</td>
<td>1.37</td>
</tr>
<tr>
<td>Generativity</td>
<td>29.36</td>
<td>7.85</td>
<td>31.00</td>
<td>5.97</td>
<td>-1.41</td>
</tr>
<tr>
<td>Ego Integrity</td>
<td>29.18</td>
<td>5.14</td>
<td>28.36</td>
<td>9.03</td>
<td>.39</td>
</tr>
</tbody>
</table>

n = 11

*Two-tailed t tests were used.

Table 16: The mothers-of-older-children group MPD-S first-test and retest means by developmental issue.

Experience of Parenting Interview (EPI) Corrected Scores

Whole group average levels of saliency

For the whole group, on a scale of 1 to 2, the average level of saliency across all developmental issues was 1.40, which indicates that, on average, participants made reference to any given issue in 40 percent of the response coding units. The average level of saliency across the five childhood issues was 1.43 and across the three adult issues, 1.35, indicating that these 22 participants were more likely to reference the childhood issues than the adult issues in their interviews.

Whole group high saliency

Trust, autonomy, industry, and generativity were above the average saliency across all eight developmental issues. Of the five childhood issues, trust and industry
were above the average childhood saliency of 1.43, and of the three adult issues, generativity was above the average adult saliency of 1.35. Table 17 shows the group means on the EPI for the whole group by psychosocial issue.

<table>
<thead>
<tr>
<th>Developmental Issues</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trust</td>
<td>1.65</td>
<td>.14</td>
</tr>
<tr>
<td>Autonomy</td>
<td>1.43</td>
<td>.16</td>
</tr>
<tr>
<td>Initiative</td>
<td>1.11</td>
<td>.10</td>
</tr>
<tr>
<td>Industry</td>
<td>1.58</td>
<td>.13</td>
</tr>
<tr>
<td>Identity</td>
<td>1.37</td>
<td>.19</td>
</tr>
<tr>
<td>Intimacy</td>
<td>1.31</td>
<td>.19</td>
</tr>
<tr>
<td>Generativity</td>
<td>1.72</td>
<td>.09</td>
</tr>
<tr>
<td>Ego Integrity</td>
<td>1.01</td>
<td>.03</td>
</tr>
<tr>
<td>Grand Mean Saliency – All Issues</td>
<td>1.40</td>
<td>.25</td>
</tr>
<tr>
<td>Grand Mean Saliency – Childhood Issues</td>
<td>1.43</td>
<td>.21</td>
</tr>
<tr>
<td>Grand Mean Saliency – Adult Issues</td>
<td>1.35</td>
<td>.36</td>
</tr>
</tbody>
</table>

\( N = 22 \)

Table 17: EPI saliency corrected score means for the whole group by psychosocial issue.

Mothers-of-infants average levels of saliency

For mothers of infants, the average level of saliency across all developmental issues was 1.42; across the childhood issues, 1.45 and across the adult issues, 1.37. Mothers of infants were more likely to reference the childhood issues than the adult issues in their interviews.

Mothers-of-infants high saliency

Trust, autonomy, industry, and generativity were above the average saliency across all eight developmental issues. Of the childhood issues, trust and industry were
above the average childhood saliency of 1.45. Of the three adult issues, intimacy and
generativity were above the average adult saliency of 1.37. Table 18 shows the group
means on the EPI for the mothers-of-infants group by psychosocial issue.

<table>
<thead>
<tr>
<th>Developmental Issues</th>
<th>Means</th>
<th>Std. Dev.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trust</td>
<td>1.71</td>
<td>.08</td>
</tr>
<tr>
<td>Autonomy</td>
<td>1.44</td>
<td>.18</td>
</tr>
<tr>
<td>Initiative</td>
<td>1.11</td>
<td>.12</td>
</tr>
<tr>
<td>Industry</td>
<td>1.62</td>
<td>.12</td>
</tr>
<tr>
<td>Identity</td>
<td>1.37</td>
<td>.15</td>
</tr>
<tr>
<td>Intimacy</td>
<td>1.38</td>
<td>.20</td>
</tr>
<tr>
<td>Generativity</td>
<td>1.74</td>
<td>.08</td>
</tr>
<tr>
<td>Ego Integrity</td>
<td>1.00</td>
<td>.02</td>
</tr>
<tr>
<td>Grand Mean Saliency – All Issues</td>
<td>1.42</td>
<td>.27</td>
</tr>
<tr>
<td>Grand Mean Saliency – Childhood Issues</td>
<td>1.45</td>
<td>.23</td>
</tr>
<tr>
<td>Grand Mean Saliency – Adult Issues</td>
<td>1.37</td>
<td>.37</td>
</tr>
</tbody>
</table>

n = 11

Table 18: EPI saliency corrected score means for the mothers-of-infants group by psychosocial issue.

**Mothers-of-older-children average levels of saliency**

For mothers of older children, the average level of saliency across all
developmental issues was 1.37; across the childhood issues, 1.41 and across the adult
issues, 1.31. Mothers of older children were more likely to reference the childhood
issues than the adult issues in their interviews.

**Mothers-of-older-children high saliency**

Across eight issues, trust, autonomy, industry, identity, and generativity were
above the average saliency of 1.37; trust, autonomy, and industry were above the
average childhood saliency of 1.41; and generativity was above the average adult saliency of 1.31. Table 19 shows the group means on the EPI for the mothers-of-older-children group by psychosocial issue.

<table>
<thead>
<tr>
<th>Developmental Issues</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trust</td>
<td>1.58</td>
<td>.14</td>
</tr>
<tr>
<td>Autonomy</td>
<td>1.43</td>
<td>.15</td>
</tr>
<tr>
<td>Initiative</td>
<td>1.12</td>
<td>.09</td>
</tr>
<tr>
<td>Industry</td>
<td>1.54</td>
<td>.14</td>
</tr>
<tr>
<td>Identity</td>
<td>1.38</td>
<td>.23</td>
</tr>
<tr>
<td>Intimacy</td>
<td>1.24</td>
<td>.16</td>
</tr>
<tr>
<td>Generativity</td>
<td>1.69</td>
<td>.10</td>
</tr>
<tr>
<td>Ego Integrity</td>
<td>1.01</td>
<td>.03</td>
</tr>
<tr>
<td>Grand Mean Saliency - All Issues</td>
<td>1.37</td>
<td>.24</td>
</tr>
<tr>
<td>Grand Mean Saliency - Childhood Issues</td>
<td>1.41</td>
<td>.18</td>
</tr>
<tr>
<td>Grand Mean Saliency - Adult Issues</td>
<td>1.31</td>
<td>.35</td>
</tr>
</tbody>
</table>

n = 11

Table 19: EPI saliency corrected score means for the mothers-of-older-children group by psychosocial issue.

**Thematic Apperception Test (TAT) Raw Scores**

**Whole group average levels of saliency**

For the whole group, on a scale of 2 to 4, the average level of saliency across all developmental issues was 3.02, which indicates that, on average, participants made reference to any given issue in approximately one out of two of the TAT stories. The average level of saliency across the five childhood issues was 3.07 and across the three adult issues, 2.94, indicating that these 22 participants were more likely to reference the childhood issues than the adult issues in their TAT stories.
Whole group high saliency

Across all eight developmental issues, trust, industry, intimacy, and generativity were above the average saliency of 3.02; trust and industry were above the average childhood saliency of 3.07; and of the adult issues, intimacy and generativity were above the average adult saliency of 2.94. Table 20 shows the group means on the TAT for the whole group by psychosocial issue.

<table>
<thead>
<tr>
<th>Developmental Issues</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trust</td>
<td>3.82</td>
<td>.50</td>
</tr>
<tr>
<td>Autonomy</td>
<td>2.82</td>
<td>.85</td>
</tr>
<tr>
<td>Initiative</td>
<td>2.59</td>
<td>.73</td>
</tr>
<tr>
<td>Industry</td>
<td>3.23</td>
<td>.69</td>
</tr>
<tr>
<td>Identity</td>
<td>2.91</td>
<td>.61</td>
</tr>
<tr>
<td>Intimacy</td>
<td>3.18</td>
<td>.80</td>
</tr>
<tr>
<td>Generativity</td>
<td>3.41</td>
<td>.67</td>
</tr>
<tr>
<td>Ego Integrity</td>
<td>2.23</td>
<td>.53</td>
</tr>
<tr>
<td>Grand Mean Saliency – All Issues</td>
<td>3.02</td>
<td>.50</td>
</tr>
<tr>
<td>Grand Mean Saliency – Childhood Issues</td>
<td>3.07</td>
<td>.48</td>
</tr>
<tr>
<td>Grand Mean Saliency – Adult Issues</td>
<td>2.94</td>
<td>.63</td>
</tr>
</tbody>
</table>

N = 22

Table 20: TAT saliency raw score means for the whole group by psychosocial issue.

Mothers-of-infants average levels of saliency

For mothers of infants, the average level of saliency across all developmental issues was 3.07; across the childhood issues, 3.11 and across the adult issues, 3.0. Mothers of infants were more likely to reference the childhood issues than the adult issues in their TAT stories.
Mothers-of-infants high saliency

Trust, industry, intimacy, and generativity were above the average saliency across all eight developmental issues; trust and industry were above the average childhood saliency of 3.11 (an identical finding as that on the EPI); and of the three adult issues, intimacy and generativity were above the average adult saliency of 3.00 (an identical finding as that on the EPI). Table 21 shows the group means on the TAT for the mothers-of-infants group by psychosocial issue.

<table>
<thead>
<tr>
<th>Developmental Issues</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trust</td>
<td>3.91</td>
<td>.30</td>
</tr>
<tr>
<td>Autonomy</td>
<td>3.00</td>
<td>.89</td>
</tr>
<tr>
<td>Initiative</td>
<td>2.64</td>
<td>.67</td>
</tr>
<tr>
<td>Industry</td>
<td>3.27</td>
<td>.79</td>
</tr>
<tr>
<td>Identity</td>
<td>2.73</td>
<td>.47</td>
</tr>
<tr>
<td>Intimacy</td>
<td>3.36</td>
<td>.67</td>
</tr>
<tr>
<td>Generativity</td>
<td>3.45</td>
<td>.69</td>
</tr>
<tr>
<td>Ego Integrity</td>
<td>2.18</td>
<td>.40</td>
</tr>
<tr>
<td>Grand Mean Saliency – All Issues</td>
<td>3.07</td>
<td>.54</td>
</tr>
<tr>
<td>Grand Mean Saliency – Childhood Issues</td>
<td>3.11</td>
<td>.51</td>
</tr>
<tr>
<td>Grand Mean Saliency – Adult Issues</td>
<td>3.00</td>
<td>.71</td>
</tr>
</tbody>
</table>

n = 11

Table 21: TAT saliency raw score means for the mothers-of-infants group by psychosocial issue.

Mothers-of-older-children average levels of saliency

For mothers of older children, the average level of saliency across all developmental issues was 2.98; across the childhood issues, 3.04 and across the adult
issues, 2.88. Mothers of older children were more likely to reference the childhood issues than the adult issues in their TAT stories.

**Mothers-of-older-children high saliency**

Across eight issues, trust, industry, identity, intimacy, and generativity were above the average saliency of 2.98; of the childhood issues, trust, industry, and identity were above the average childhood saliency of 3.04; and of the adult issues, intimacy and generativity were above the average adult saliency of 2.88. Table 22 shows the group means on the TAT for the mothers-of-older-children group by psychosocial issue.

<table>
<thead>
<tr>
<th>Developmental Issues</th>
<th>Means</th>
<th>Std. Dev.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trust</td>
<td>3.73</td>
<td>.65</td>
</tr>
<tr>
<td>Autonomy</td>
<td>2.64</td>
<td>.81</td>
</tr>
<tr>
<td>Initiative</td>
<td>2.55</td>
<td>.82</td>
</tr>
<tr>
<td>Industry</td>
<td>3.18</td>
<td>.60</td>
</tr>
<tr>
<td>Identity</td>
<td>3.09</td>
<td>.70</td>
</tr>
<tr>
<td>Intimacy</td>
<td>3.00</td>
<td>.89</td>
</tr>
<tr>
<td>Generativity</td>
<td>3.36</td>
<td>.67</td>
</tr>
<tr>
<td>Ego Integrity</td>
<td>2.27</td>
<td>.65</td>
</tr>
<tr>
<td>Grand Mean Saliency – All Issues</td>
<td>2.98</td>
<td>.47</td>
</tr>
<tr>
<td>Grand Mean Saliency – Childhood Issues</td>
<td>3.04</td>
<td>.47</td>
</tr>
<tr>
<td>Grand Mean Saliency – Adult Issues</td>
<td>2.88</td>
<td>.56</td>
</tr>
</tbody>
</table>

n = 11

Table 22: TAT saliency raw score means for the mothers-of-older-children group by psychosocial issue.
Mothers-of-Infants MPD-S Retest Response Shift

The EPI and the TAT were administered in between the MPD-S first test and the retest. Because the MPD-S retest evidenced a statistically significant response shift in trust saliency for the mothers of infants, two follow-up analyses of the EPI were done to investigate the priming of the mothers of infants toward trust saliency. First, the language used in the EPI was analyzed as it might relate to sensitization to the psychosocial issue of trust. Second, the volume of follow-up questions for mothers of infants and mothers of older children was analyzed as an indicator as to whether one group had more opportunity for reflection than did the other group.

The assumption was made that if key words from the MPD-S items were used in the EPI, the participant might be sensitized to select those items as most on their minds when they sorted the MPD-S items following the EPI. (There was an average of 11.7 days between the EPI and the MPD-S retest.)

To investigate whether priming occurred more with mothers of infants than with mothers of older children (to explain why only the mother-of-infant trust saliency increased significantly), a word usage analysis was done. Nine key words were extracted from the MPD-S trust items. The key words were trust, hope, calm, relaxed, easy-going, optimistic, instinct, generosity, and trustworthy. Forms of each word were also included in the analysis (e.g., trust and trusting or optimistic and optimism).

All interviews were searched for the key words to determine the frequency and the context of the usage of those words by subgroup. Three contexts of the word usages were analyzed: the interviewer’s use of the words, the interviewee’s use of the
words in response to a core question, and the interviewee’s use of the words in response to a follow-up question.

Interviews of mothers of infants included 13,251 text units (lines of text); 143 of those text units included trust key words. Twenty-seven of those 143 usages were part of the wording of the core questions or core-question clarifications. For example, one of the trust keywords was “hope,” and hope was a word used in two core questions: one asked about hopes and dreams for a future chapter in the interviewee’s life and the other about a negative future that the interviewee hoped would not occur. Because the core questions were standard across both subgroups of interviewees, those 27 word usages were excluded from further analysis. Thus, 116 unique usages (.9% of the total text units) appeared in the interviews of mothers of infants. Of those 116 usages, 7 (6.0%) were by the interviewer; 53 (45.7%) were by the interviewee in response to a core question; and 56 (48.3%) were by the interviewee in response to a follow-up question.

Interviews of mothers of older children included 10,653 text units; 94 of those text units included trust key words; 26 of those 94 usages were part of the wording of the core questions or core-question clarifications and were, therefore, eliminated from the analysis. Thus, 68 unique usages (.6% of the total text units) appeared in the interviews of mothers of older children. Of those 68 usages, 5 (7.4%) were by the interviewer; 23 (33.8%) were by the interviewee in response to a core question; and 40 (58.8%) were by the interviewee in response to a follow-up question.
Conclusions from this word usage analysis were: (a) the interviewer used the key words more often with mothers of older children than with mothers of infants, (b) the incidence of trust word usage by the interviewee in response to core questions was greater in the mothers-of-infants group than in the mothers-of-older-children group, and (c) the incidence of trust word usage in response to follow-up questions was greater in the mothers-of-older-children group than in the mothers-of-infants group.

A second analysis was done related to the number of follow-up questions asked by the interviewer. A two-tailed, independent samples $t$ test indicated that the overall length (number of text lines) of the interviews differed significantly between the two groups, $t(20) = 2.83, p = .01$ ($M = 1194.91$, mothers of infants; $M = 967.45$, mothers of older children). Because longer interviews, even without sensitizing language from the interviewer, may provide more opportunity for natural interviewee sensitization and be a contamination when comparing the two groups, an analysis was done to determine whether the interviewer prompted longer interviews from the mothers of infants by asking more follow-up questions. A one-tailed, independent samples $t$ test indicated that there was no significant difference in the number of follow-up questions asked of the two groups, $t(20) = 1.61, p = .06$ ($M = 62.00$, mothers of infants; $M = 50.09$, mothers of older children).

**Modified Erikson Psychosocial Stage Inventory (MEPSI) Mean Resolution Scores**

**Whole group average levels of resolution**

For the whole group, on a scale of 1 to 5, the average level of resolution across all developmental issues was 4.06, which indicated these 22 women self-reported a
generally high level of psychosocial maturity. The average level of resolution across the five childhood issues was 4.08 and across the three adult issues, 4.04, indicating that these 22 participants self-reported slightly greater resolution of the five childhood issues than of the adult issues.

**Whole group high resolution**

Trust, industry, and intimacy were above the average resolution across all eight developmental issues; of the five childhood issues, industry was above the average childhood resolution of 4.08; and of the three adult issues, intimacy and ego integrity were above the average adult resolution of 4.04. Table 23 shows the group means on the MEPSI for the whole group by psychosocial issue.

<table>
<thead>
<tr>
<th>Developmental Issues</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trust</td>
<td>4.07</td>
<td>.53</td>
</tr>
<tr>
<td>Autonomy</td>
<td>3.90</td>
<td>.47</td>
</tr>
<tr>
<td>Initiative</td>
<td>4.02</td>
<td>.41</td>
</tr>
<tr>
<td>Industry</td>
<td>4.35</td>
<td>.43</td>
</tr>
<tr>
<td>Identity</td>
<td>4.04</td>
<td>.46</td>
</tr>
<tr>
<td>Intimacy</td>
<td>4.11</td>
<td>.47</td>
</tr>
<tr>
<td>Generativity</td>
<td>3.95</td>
<td>.49</td>
</tr>
<tr>
<td>Ego Integrity</td>
<td>4.05</td>
<td>.47</td>
</tr>
<tr>
<td>Grand Mean Resolution – All Issues</td>
<td>4.06</td>
<td>.13</td>
</tr>
<tr>
<td>Grand Mean Resolution – Childhood Issues</td>
<td>4.08</td>
<td>.17</td>
</tr>
<tr>
<td>Grand Mean Resolution – Adult Issues</td>
<td>4.04</td>
<td>.08</td>
</tr>
</tbody>
</table>

N = 22

Table 23: MEPSI average mean resolution scores for the whole group by psychosocial issue.
Mothers-of-infants average levels of resolution

For the mothers-of-infants group, the average level of resolution across all developmental issues was 4.20. The average level of resolution across the five childhood issues was 4.22 and across the three adult issues, 4.17, indicating that mothers of infants self-reported slightly greater resolution of the five childhood issues than of the adult issues.

Mothers-of-infants high resolution

Trust, industry, identity, and ego integrity were above the average resolution across all eight developmental issues; of the five childhood issues, trust, industry, and identity were above the average childhood resolution of 4.22; and of the adult issues, intimacy and ego integrity were above the average adult resolution of 4.17. Table 24 shows the group means on the MEPSI for the mothers-of-infants group by psychosocial issue.

Mothers-of-older-children average levels of resolution

For the mothers-of-older-children group, the average level of resolution across all developmental issues was 3.92. The average level of resolution across the five childhood issues was 3.93 and across the three adult issues, 3.91, indicating that mothers of older children self-reported slightly greater resolution of the five childhood issues than of the adult issues.
<table>
<thead>
<tr>
<th>Developmental issues</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trust</td>
<td>4.24</td>
<td>.46</td>
</tr>
<tr>
<td>Autonomy</td>
<td>4.03</td>
<td>.38</td>
</tr>
<tr>
<td>Initiative</td>
<td>4.16</td>
<td>.34</td>
</tr>
<tr>
<td>Industry</td>
<td>4.42</td>
<td>.49</td>
</tr>
<tr>
<td>Identity</td>
<td>4.25</td>
<td>.47</td>
</tr>
<tr>
<td>Intimacy</td>
<td>4.20</td>
<td>.42</td>
</tr>
<tr>
<td>Generativity</td>
<td>4.06</td>
<td>.47</td>
</tr>
<tr>
<td>Ego Integrity</td>
<td>4.25</td>
<td>.46</td>
</tr>
<tr>
<td>Grand Mean Resolution – All Issues</td>
<td>4.20</td>
<td>.12</td>
</tr>
<tr>
<td>Grand Mean Resolution – Childhood Issues</td>
<td>4.22</td>
<td>.14</td>
</tr>
<tr>
<td>Grand Mean Resolution – Adult Issues</td>
<td>4.17</td>
<td>.10</td>
</tr>
</tbody>
</table>

N = 22

Table 24: MEPSI average mean resolution scores for the mothers-of-infants group by psychosocial issue.

Mothers-of-older-children high resolution

Industry and intimacy were above the average resolution across all eight developmental issues; of the five childhood issues, industry was above the average childhood resolution of 3.93; and of the adult issues, intimacy was above the average adult resolution of 3.91. Table 25 shows the group means on the MEPSI for the mothers-of-older-children group by psychosocial issue.

Hypothesis Tests

Introduction

Three constructs were of interest in this study: revisitation as a psychosocial phenomenon, the independence of the saliency and the resolution of psychosocial issues, and parallelism as a characteristic of revisitation. The existence or non-
<table>
<thead>
<tr>
<th>Developmental Issues</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trust</td>
<td>3.90</td>
<td>.56</td>
</tr>
<tr>
<td>Autonomy</td>
<td>3.77</td>
<td>.52</td>
</tr>
<tr>
<td>Initiative</td>
<td>3.87</td>
<td>.44</td>
</tr>
<tr>
<td>Industry</td>
<td>4.28</td>
<td>.37</td>
</tr>
<tr>
<td>Identity</td>
<td>3.84</td>
<td>.36</td>
</tr>
<tr>
<td>Intimacy</td>
<td>4.03</td>
<td>.53</td>
</tr>
<tr>
<td>Generativity</td>
<td>3.84</td>
<td>.51</td>
</tr>
<tr>
<td>Ego Integrity</td>
<td>3.85</td>
<td>.41</td>
</tr>
<tr>
<td>Grand Mean Resolution – All Issues</td>
<td>3.92</td>
<td>.16</td>
</tr>
<tr>
<td>Grand Mean Resolution – Childhood Issues</td>
<td>3.93</td>
<td>.20</td>
</tr>
<tr>
<td>Grand Mean Resolution – Adult Issues</td>
<td>3.91</td>
<td>.11</td>
</tr>
</tbody>
</table>

n = 11

Table 25: MEPSI average mean resolution scores for the mothers-of-older-children group by psychosocial issue.

The existence of revisitation as a psychosocial phenomenon was informed by the descriptive data in the group profiles reported previously. The independence of the saliency (directed attention) and the resolution (development of a belief system) of psychosocial developmental issues and the existence or non-existence of parallelism (parents revisiting the ascendant psychosocial issue of the child they are parenting) were informed by the tests of the three hypotheses of this study.

Inferential statistics were employed for testing hypotheses. However, inferences from this study must be made cautiously, because the participants were a small sample with unique characteristics. It was hoped that such a rigorous statistical examination would further the understanding of the theoretical relationships of the constructs tested and of the properties of the instrumentation used.
Four separate tests were conducted for each of the three hypotheses using data from the MPD-S first test, MPD-S retest, EPI, and TAT. Each instrument's results are reported separately followed by summaries that synthesize the results across instruments. As discussed earlier, both MPD-S first-test and retest data were used for hypothesis testing. Recognizing the limitations of retest data, in cases where results differed between the MPD-S first test and retest, a summary is provided exclusive of MPD-S retest data and is followed by the results from the retest that provide additional information regarding the hypothesis.

**Hypothesis One: The level of saliency of a psychosocial developmental issue will be unrelated to the level of resolution of the respective psychosocial developmental issue**

Hypothesis One was tested using Pearson correlation coefficients to indicate the degree of association between the saliency scores of each psychosocial issue as measured by the MPD-S, EPI, and TAT and the resolution scores of the respective psychosocial issue as measured by the MEPSI. Support for the hypothesis required non-significant correlations.

**Correlations of MPD-S Scores (First Test) and MEPSI Resolution Scores**

Correlations between the MPD-S raw scores (first test) and MEPSI mean resolution scores ranged from .02 to -.36 with autonomy reaching the moderate level of \( r = -.36 \); all other coefficients were low to negligible. None reached statistical significance. Table 26 shows the correlations between MPD-S first-test scores and MEPSI resolution mean scores by developmental issue.
<table>
<thead>
<tr>
<th></th>
<th>Trust</th>
<th>Autonomy</th>
<th>Initiative</th>
<th>Industry</th>
<th>Identity</th>
<th>Intimacy</th>
<th>Generativity</th>
<th>Ego Integrity</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MEPSI Resolution</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
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<td>--</td>
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<td>--</td>
<td>--</td>
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</tr>
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<td>Initiative</td>
<td>--</td>
<td>--</td>
<td>.14</td>
<td>--</td>
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<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Industry</td>
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<td>.02</td>
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</tr>
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<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>-.07</td>
<td>--</td>
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<td>--</td>
<td>--</td>
<td>--</td>
<td>.21</td>
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</tr>
<tr>
<td>Ego Integrity</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>.06</td>
</tr>
</tbody>
</table>

N = 22

Table 26: Correlations between MPD-S scores (first test) and MEPSI resolution scores by psychosocial issue.

**Correlations of MPD-S Scores (Retest) and MEPSI Resolution Scores**

The significance of saliency and resolution correlations did not change on the MPD-S retest. Autonomy again reached a moderate level; all other coefficients were low to negligible. None reached statistical significance. Table 27 shows the correlations between MPD-S retest scores and MEPSI resolution mean scores by developmental issue.
<table>
<thead>
<tr>
<th>MEPSI RESOLUTION</th>
<th>Trust</th>
<th>Autonomy</th>
<th>Initiative</th>
<th>Industry</th>
<th>Identity</th>
<th>Intimacy</th>
<th>Generativity</th>
<th>Ego Integrity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trust</td>
<td></td>
<td></td>
<td></td>
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<td>.20</td>
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</tr>
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<td>Autonomy</td>
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<td></td>
<td></td>
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<td>-.41</td>
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</tr>
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<td>Initiative</td>
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<td></td>
</tr>
<tr>
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<td>.07</td>
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<td></td>
</tr>
<tr>
<td>Identity</td>
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<td></td>
<td></td>
<td></td>
<td>-.13</td>
<td></td>
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<tr>
<td>Intimacy</td>
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</tr>
<tr>
<td>Generativity</td>
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<td>Ego Integrity</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>.20</td>
</tr>
</tbody>
</table>

N = 22

Table 27: Correlations between MPD-S (retest) scores and MEPSI resolution scores by psychosocial issue.

Correlations of EPI Saliency and MEPSI Resolution Scores

EPI saliency corrected score correlations with the MEPSI mean resolution scores were all low to negligible, ranging from -.02 to .29. None reached statistical significance. Table 28 shows the correlations between EPI saliency corrected scores and MEPSI resolution mean scores by developmental issue.
<table>
<thead>
<tr>
<th></th>
<th>Trust</th>
<th>Autonomy</th>
<th>Initiative</th>
<th>Industry</th>
<th>Identity</th>
<th>Intimacy</th>
<th>Generativity</th>
<th>Integrity</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MEPSI Resolution</strong></td>
<td></td>
<td></td>
<td></td>
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</tr>
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<td>--</td>
</tr>
<tr>
<td>Autonomy</td>
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<td>Initiative</td>
<td>--</td>
<td>--</td>
<td>-.02</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Industry</td>
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<td>--</td>
<td>--</td>
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<td>--</td>
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<td>--</td>
<td>.04</td>
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<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Intimacy</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>-.07</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Generativity</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>.29</td>
<td>--</td>
</tr>
<tr>
<td>Ego Integrity</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>-.07</td>
</tr>
</tbody>
</table>

N = 22

Table 28: Correlations between EPI saliency scores and MEPSI resolution scores by psychosocial issue.

**Correlations of TAT Saliency and MEPSI Resolution Scores**

Correlations between TAT saliency raw scores and MEPSI mean resolution scores ranged from -.04 to .46. Higher generativity/stagnation saliency as measured by the TAT was associated with higher resolution of generativity/stagnation as measured by MEPSI at a statistically significant level (r = .46, p = .03); all other correlations
were low to negligible and statistically non-significant. Table 29 shows the
correlations between TAT saliency raw scores and MEPSI resolution mean scores by
developmental issue.

<table>
<thead>
<tr>
<th>MEPSI RESOLUTION</th>
<th>TAT</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Trust</td>
</tr>
<tr>
<td>Trust</td>
<td>.12</td>
</tr>
<tr>
<td>Autonomy</td>
<td>--</td>
</tr>
<tr>
<td>Initiative</td>
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<tr>
<td>Industry</td>
<td>--</td>
</tr>
<tr>
<td>Identity</td>
<td>--</td>
</tr>
<tr>
<td>Intimacy</td>
<td>--</td>
</tr>
<tr>
<td>Generativity</td>
<td>--</td>
</tr>
<tr>
<td>Ego Integrity</td>
<td>--</td>
</tr>
</tbody>
</table>

\( N = 22 \)

*\( p < .05 \).

Table 29: Correlations between TAT saliency scores and MEPSI resolution scores by psychosocial issue.
Summary

Pearson correlations of saliency and resolution scores supported Hypothesis One (independence of saliency and resolution of psychosocial issues). For this hypothesis, there was no difference in results between the MPD-S first test and the retest. Therefore, this summary does not distinguish between the two MPD-S testings.

Out of 32 correlations, using four sets of data from three different instruments, only one reached statistical significance. Generativity/stagnation saliency, as measured by the TAT, was positively correlated at a moderate level with generativity/stagnation resolution as measured by the MEPSI ($r = .46$, $p = .03$). This single finding is not considered as refuting the independence hypothesis because (a) with multiple tests it is possible that one could reach statistical significance by chance alone, (b) if independence was related to the type of measurement, other TAT correlations would be expected to be significant; there were no other TAT significant correlations; and (c) if independence was related to the specific issue of generativity/stagnation, other generativity/stagnation correlations would be expected to be significant as measured by other instruments; there were no other generativity/stagnation significant correlations. The weight of support was in favor of the hypothesis that resolution and saliency are independent constructs.

Hypothesis Two: For mothers of infants, the saliency of the psychosocial issue of trust/mistrust will be greater than the saliency of the other childhood psychosocial issues.

Hypothesis Two was tested by comparing the mean levels of saliency among the five childhood developmental issues in the mothers-of-infants group. Paired-
sample t tests were conducted to determine differences between the saliency levels of trust/mistrust and the saliency levels of the other four childhood psychosocial issues. One-tailed t tests were used because the hypothesis was directional. The following conditions were considered as support for the hypothesis: (a) high trust/mistrust saliency based on an average level of saliency across the childhood issues, (b) the trust/mistrust group mean being significantly higher than the group mean of each of the other childhood developmental issues, and (c) no childhood issue’s group mean being significantly higher than the trust/mistrust group mean.

MPD-S Trust Saliency (First Test)

a) High trust saliency

For mothers of infants, out of a possible range of 9 to 47 saliency points for a given issue, the mean level of trust/mistrust saliency on the first test of MPD-S was 30.00. For mothers of infants, the average level of saliency across the five childhood issues was 26.75. Trust/mistrust was of above average saliency for mothers of infants when compared to the average childhood saliency.

b) Trust higher in saliency than other childhood issues

Trust/mistrust was more salient than three of the other childhood developmental issues (autonomy, initiative, and industry). Paired-sample t tests indicated that two of those differences reached statistical significance: autonomy and initiative.
c) No other childhood issue higher in saliency than trust

Identity was more salient than trust, although the difference did not reach statistical significance.

Table 30 shows the comparison of developmental issues based on group means of MPD-S first-test raw scores for mothers of infants.

<table>
<thead>
<tr>
<th>Comparison Issue</th>
<th>Trust M</th>
<th>Trust SD</th>
<th>Comparison Issue M</th>
<th>Comparison Issue SD</th>
<th>t*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autonomy</td>
<td>30.00</td>
<td>5.87</td>
<td>22.64</td>
<td>4.25</td>
<td>-2.67**</td>
</tr>
<tr>
<td>Initiative</td>
<td>30.00</td>
<td>5.87</td>
<td>22.00</td>
<td>4.15</td>
<td>-2.93**</td>
</tr>
<tr>
<td>Industry</td>
<td>30.00</td>
<td>5.87</td>
<td>28.64</td>
<td>5.56</td>
<td>.45</td>
</tr>
<tr>
<td>Identity</td>
<td>30.00</td>
<td>5.87</td>
<td>30.45</td>
<td>4.80</td>
<td>.17</td>
</tr>
</tbody>
</table>

n = 11
*One-tailed t tests were used.
**p ≤ .01.

Table 30: Comparison of mothers-of-infants MPD-S (first test) saliency group means by developmental issue.

MPD-S Trust Saliency (Retest)

a) High trust saliency

On the MPD-S retest, trust maintained its above average saliency compared across the five childhood issues. On the retest, the group mean for trust saliency rose from 30.00 to 33.18, and the average saliency for childhood issues decreased on the retest from 26.75 to 26.20. A paired-sample, two-tailed t test indicated that the rise in
trust saliency was statistically significant, t (10) = -3.65, p = .004 (M = 30.00, first test; M = 33.18, retest).

b) Trust higher in saliency than other childhood issues

On the retest of MPD-S, trust was more salient than all other childhood developmental issues. Paired-sample t tests indicated that three of those four differences reached statistical significance: autonomy, initiative, and industry. This was one additional significant difference (the addition of industry) compared to the MPD-S first test.

c) No other childhood issue higher in saliency than trust

On the retest of MPD-S, no childhood issues were more salient than trust. (Identity was more salient on the MPD-S first test, although the difference was not significant.)

Table 31 shows the comparison of developmental issues based on MPD-S retest raw scores for mothers of infants.

<table>
<thead>
<tr>
<th>Comparison Issue</th>
<th>Trust M</th>
<th>SD</th>
<th>Comparison Issue M</th>
<th>SD</th>
<th>t*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autonomy</td>
<td>33.18</td>
<td>5.44</td>
<td>20.18</td>
<td>5.95</td>
<td>-5.04***</td>
</tr>
<tr>
<td>Initiative</td>
<td>33.18</td>
<td>5.44</td>
<td>20.45</td>
<td>5.96</td>
<td>-4.01***</td>
</tr>
<tr>
<td>Industry</td>
<td>33.18</td>
<td>5.44</td>
<td>27.18</td>
<td>5.17</td>
<td>-2.05*</td>
</tr>
<tr>
<td>Identity</td>
<td>33.18</td>
<td>5.44</td>
<td>30.00</td>
<td>5.87</td>
<td>-1.26</td>
</tr>
</tbody>
</table>

n = 11

*One-tailed t tests were used.
*p ≤ .05. ***p ≤ .001

Table 31: Comparison of mothers-of-infants MPD-S (retest) saliency group means by developmental issue.
EPI Trust/Mistrust Saliency

a) High trust/mistrust saliency

For mothers of infants, on a scale of 1 to 2, the mean level of trust/mistrust saliency was 1.71, which indicates that, on average, mothers of infants referenced trust/mistrust concepts in 71% of their codable response coding units. For mothers of infants, an average level of saliency across the five childhood issues was 1.45. Trust/mistrust was of above average saliency for mothers of infants compared across the five childhood issues.

b) Trust/mistrust higher in saliency than other childhood issues

Trust/mistrust was more salient than all four of the other childhood developmental issues. Paired-sample t tests indicated all differences reached statistical significance.

c) No other childhood issue higher in saliency than trust/mistrust

No childhood issues were more salient than trust.

Table 32 shows the comparison of developmental issues based on the group means of EPI saliency corrected scores for mothers of infants.

TAT Trust/Mistrust Saliency

a) High trust/mistrust saliency

For mothers of infants, on a scale of 2 to 4, the mean level of trust/mistrust saliency was 3.91 which indicates that most mothers of infants referenced
Table 32: Comparison of mothers-of-infants EPI saliency group means by developmental issue.

<table>
<thead>
<tr>
<th>Comparison Issue</th>
<th>Trust M</th>
<th>Trust SD</th>
<th>Comparison Issue</th>
<th>M</th>
<th>SD</th>
<th>t*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autonomy</td>
<td>1.71</td>
<td>.09</td>
<td>1.44</td>
<td>.18</td>
<td>-5.10***</td>
<td></td>
</tr>
<tr>
<td>Initiative</td>
<td>1.71</td>
<td>.09</td>
<td>1.11</td>
<td>.12</td>
<td>-14.36***</td>
<td></td>
</tr>
<tr>
<td>Industry</td>
<td>1.71</td>
<td>.09</td>
<td>1.62</td>
<td>.12</td>
<td>-2.69**</td>
<td></td>
</tr>
<tr>
<td>Identity</td>
<td>1.71</td>
<td>.09</td>
<td>1.37</td>
<td>.15</td>
<td>-5.67***</td>
<td></td>
</tr>
</tbody>
</table>

n = 11
*One-tailed t tests were used.
**p ≤ .01, ***p < .001.

trust/mistrust on both TAT stories. For mothers of infants, an average level of saliency across the five childhood issues was 3.11. Trust/mistrust was of above average saliency for mothers of infants when compared across the five childhood issues.

b) Trust/mistrust higher in saliency than other childhood issues

Trust/mistrust was more salient than all the other four childhood developmental issues. Paired-sample t tests indicated that all of those differences reached statistical significance.

c) No other childhood issue higher in saliency than trust/mistrust

No childhood issues were more salient than trust/mistrust.

Table 33 shows the comparison of developmental issues based on group means of TAT saliency raw scores for mothers of infants.
<table>
<thead>
<tr>
<th>Comparison Issue</th>
<th>Trust M</th>
<th>Trust SD</th>
<th>Comparison Issue M</th>
<th>Comparison Issue SD</th>
<th>t²</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autonomy</td>
<td>3.91</td>
<td>.30</td>
<td>3.00</td>
<td>.89</td>
<td>-2.89**</td>
</tr>
<tr>
<td>Initiative</td>
<td>3.91</td>
<td>.30</td>
<td>2.64</td>
<td>.67</td>
<td>-5.37***</td>
</tr>
<tr>
<td>Industry</td>
<td>3.91</td>
<td>.30</td>
<td>3.27</td>
<td>.79</td>
<td>-2.61**</td>
</tr>
<tr>
<td>Identity</td>
<td>3.91</td>
<td>.30</td>
<td>2.73</td>
<td>.47</td>
<td>-6.50***</td>
</tr>
</tbody>
</table>

n = 11
*One-tailed t tests were used.
**p ≤ .01. ***p < .001.

Table 33: Comparison of mothers-of-infants TAT saliency group means by developmental issue.

Summary

Hypothesis Two (for mothers of infants, higher trust/mistrust saliency than saliency of other childhood issues) was tested separately using four sets of data: MPD-S first-test data, MPD-S retest data, EPI data, and TAT data. Because MPD-S retest data are subject to the limitations inherent to conditions of retesting (particularly in this case, the impact of the EPI and the TAT prior to the retesting), the following synthesis begins with a description of results exclusive of the MPD-S retest and is followed by a separate synthesis that takes into account the additional information from the retest results. Based on MPD-S (first test only), EPI, and TAT data, support for Hypothesis Two was mixed.

a) High trust/mistrust saliency

On all instruments, for mothers of infants, trust/mistrust was above average saliency when compared across the five childhood issues.
b) Trust/mistrust higher in saliency than other childhood issues

Of the 12 comparisons between trust/mistrust and other childhood issues (4 comparisons per data set), 10 indicated trust was significantly more salient. Both of the comparisons in which trust was not significantly more salient (industry and identity) were based on MPD-S (first test) data.

c) No other childhood issue higher in saliency than trust/mistrust

Based on MPD-S first-test data, trust was less salient than the childhood issue of identity, although the difference was not statistically significant.

Instrument comparison

Data from the EPI and TAT fully supported Hypothesis Two. The MPD-S (first test) data, however, provided mixed support. The higher saliency of trust over industry did not reach statistical significance, and identity measured of higher saliency than trust, although not at a level that reached statistical significance.

Additional information from the MPD-S (retest)

The retest of the MPD-S provided more support for Hypothesis Two than did the first test, although its results must be qualified based on the possible effects of retesting, particularly the intervening participation in the EPI and the TAT. On the MPD-S retest, trust maintained a higher than average level of saliency. T tests indicated that trust was significantly higher than three other childhood issues: autonomy, initiative, and industry. (Industry did not reach statistical significance on the first test.) Furthermore, on the retest, no childhood issues measured higher than
trust. (Identity had measured higher on the first test, although not significantly higher statistically.)

**Hypothesis Three: The psychosocial issue of trust/mistrust will be more salient for mothers of infants than for mothers of older children**

Hypothesis Three was tested using one-tailed t tests to compare the mean trust/mistrust saliency scores of the mothers-of-infant group and the mothers-of-older-children group based on MPD-S raw scores, EPI corrected scores, and TAT raw scores. Support for the hypothesis required that the mean score for trust/mistrust saliency for the mothers of infants be significantly higher than that for the mothers of older children.

On the MPD-S first test, mothers of infants indicated a higher level of trust saliency ($M = 30.0$) than did the mothers of older children ($M = 25.91$). The difference in means was statistically significant, $t(20) = 1.91, p = .04$.

As with the MPD-S first test, on the MPD-S retest, mothers of infants indicated a higher level of trust saliency ($M = 33.18$) than did the mothers of older children ($M = 25.55$); the difference was again statistically significant, $t(20) = 3.90, p = .000$.

On the EPI, mothers of infants indicated a higher level of trust/mistrust saliency ($M = 1.71$) than did the mothers of older children ($M = 1.58$). The difference in means was statistically significant, $t(20) = 2.74, p = .007$.

The t test of the TAT group means ($M = 3.91$, mothers of infants; $M = 3.73$, mothers of older children) was non-significant, $t(20) = .85, p = .20$. Table 34 shows the comparison of trust/mistrust saliency group means by instrument.
<table>
<thead>
<tr>
<th></th>
<th>Mothers of Infants n = 11</th>
<th>Mohters of Older Children n = 11</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M  SD</td>
<td>M  SD</td>
</tr>
<tr>
<td>MPD-S (first test)</td>
<td>30.00  5.87</td>
<td>25.91  4.04</td>
</tr>
<tr>
<td>MPD-S (retest)</td>
<td>33.18  5.44</td>
<td>25.55  3.56</td>
</tr>
<tr>
<td>EPI</td>
<td>1.71  .09</td>
<td>1.58  .15</td>
</tr>
<tr>
<td>TAT</td>
<td>3.91  .30</td>
<td>3.73  .65</td>
</tr>
</tbody>
</table>

\*One-tailed t tests were used.
\*p < .05. \**p < .01. \***p < .001

Table 34: Comparison of trust/mistrust saliency group means by instrument.

Summary

Hypothesis Three (higher trust/mistrust saliency for mothers of infants than for mothers of older children) was tested separately using four sets of data: MPD-S first test data, MPD-S retest data, EPI data, and TAT data. Both the MPD-S first-test and retest data indicated significant hypothesis tests. Therefore, this summary does not distinguish between the two MPD-S testings.

Support for Hypothesis Three was mixed. Based on the MPD-S and EPI, trust/mistrust saliency levels were significantly higher for mothers of infants than for mothers of older children. On the TAT, however, there was no statistically significant difference in the trust saliency levels of the two groups.
CHAPTER 5

DISCUSSION

Findings

Introduction

The discussion that follows focuses on the findings related to three constructs of interest in this study: saliency as an independent construct, the existence of revisitation (high saliency of childhood issues in adults), and the existence of parallelism (high trust saliency for mothers of infants). The discussion also interprets each instrument’s unique contribution to the study of revisitation. Discussions of saliency as an independent construct are based on whole-group findings. Discussions of revisitation and parallelism are based on subgroup findings, because mothers of infants were the particular focus of those constructs in this study.

Of the three saliency instruments used and investigated in this study, the MPD-S has the most prior history of testing and validation. Therefore, the findings from the MPD-S data are considered to form the most conservative account of what was learned from this study. Thus, the discussion begins with interpretations of MPD-S data, followed by discussions of EPI and TAT findings. EPI and TAT findings are considered to be more exploratory interpretations of the constructs investigated.
The term exploratory is used to convey recognition that the Erikson psychosocial issue coding scheme used for the EPI and TAT has previously been untested and needs continued testing and refinement. Lastly, the discussion concludes with the implications of this study’s findings in terms of their relevance to theory building, professional practice, and future research.

**Measures of Psychosocial Development-Saliency (MPD-S)**

**Introduction**

The following discussions focus on specific segments of the data. The independence of saliency and resolution discussion focuses on whole-group correlational evidence from the testing of the independence hypothesis. The revisitation discussion focuses on the descriptive data of the mothers of infants. The parallelism discussion focuses on subgroup data from mothers of infants and mothers of older children. Both descriptive data from group profiles and inferential data derived from hypothesis tests are interpreted with regard to parallelism.

Both MPD-S first-test and retest data are reported. The first-test findings are considered to be more conservative findings because they are unencumbered by the limitations inherent in a retest condition. The retest data were included in the main study analysis because the MPD-S retest data evidenced a dramatic increase in the saliency of trust, which was the issue of most interest in this study. In instances where the findings of the MPD-S first test and the retest differed, they are discussed separately. A discussion of the implications of the retesting condition is also included in this section.
Independence of Saliency and Resolution

Both The MPD-S first test and the retest supported the hypothesis of independence between saliency and resolution. All correlations between MPD-S saliency scores and MEPSI resolution scores were statistically non-significant. The MPD-S provided clear justification for studying Erikson’s life-span developmental theory based on both saliency and resolution, rather than only in terms of resolution, which has been the norm heretofore.

Revisitation

The descriptive data in the group profiles from this study provided support for both Erikson’s epigenetic ascendancy tenets and the existence of revisitation. The following discussion focuses first on adult issue saliency as evidence of epigenetic age ascendancy and then on childhood issue saliency as evidence of revisitation.

Attention to adult issues

In comparing all eight issues, MPD-S first-test data indicated that generativity was the most salient issue for mothers of infants. Erikson’s epigenetic ascendancy tenets would predict that mothers of infants would be attending to generativity because (a) the group’s mean age was 29.00 (SD = 2.65); (b) they were new parents; and (c) the study itself had a generativity focus. (Participants volunteered to be part of a study about how parenting affects their growth and development, and the study purposely directed participants’ attention to generativity.) Thus, the strong MPD-S first-test evidence of generativity saliency for mothers of infants could be considered both a validation of the epigenetic ascendancy dynamic of Erikson’s theory and a validation
of the MPD-S as an instrument that is capable of measuring Eriksonian psychosocial saliency.

The MPD-S retest, however, did not provide as strong a support of age ascendancy. Generativity slipped to 2nd position overall, following trust. This secondary ranking for generativity was congruent with the substantial increase in trust saliency that occurred from the first test to the retest. That increase in trust saliency on the retest is discussed in the trust saliency section below.

In comparing only the rankings of the three adult issues, MPD-S evidence of Erikson’s basic epigenetic plan was strong on both the first test and the retest. Among the adult issues, the saliency rankings were generativity 1st, intimacy 2nd, and integrity 3rd, which is an exact reflection of Erikson’s predicted progression. Intimacy would be predicted to be of the 2nd highest saliency, because it was the ascendant issue early in adulthood and may not have been fully resolved as of yet; and integrity would be predicted to be of the 3rd highest saliency, because it is due to become ascendant in later adulthood and, theoretically, may have been at a preparation point but not yet ascendant.

**Attention to childhood issues**

Both the MPD-S first test and the retest revealed the revisitation or ascendancy of childhood issues in addition to the ascendancy of adult issues as already described. On the first test, identity was the 2nd most salient issue across all issues, holding a more ascendant position than did two of the adult issues. On the retest, trust was the 1st most salient issue across all issues making a childhood issue more salient than any
adult issues. In addition, using the average level of saliency across all eight issues as the demarcation of high and low saliency, three childhood issues (trust, industry and identity) were highly salient on the first test. On the retest, industry was not highly salient, but trust and identity remained highly salient. In summary, childhood issues were commanding more than an average amount of directed attention for this group of mothers.

Additionally, the tests of the parallelism hypotheses (described below) also inform the existence of revisitation because, by definition, parallelism (saliency for the childhood issue that a child is confronting) is a subset or more specific case of revisitation. Therefore, the existence of parallelism indicates *sine qua non* that the saliency of childhood issues can become ascendant in adults (revisitation).

**Parallelism**

Parallelism was defined as new mothers revisiting the issue that was ascendant for their infants. Erikson identifies trust/mistrust as the issue confronted by infants. Thus, three conditions indicated the existence of parallelism in this study: (a) greater than average level of saliency of trust for mothers of infants (based on descriptive data), (b) greater trust saliency than saliency of the other childhood developmental issues for mothers of infants (based on *t* tests), and (c) greater trust saliency for mothers of infants than for mothers of older children (based on a *t* test).

Two of these three conditions were fully met using MPD-S data from both the first test and the retest. The mother-of-infants group profile indicated that trust commanded more than an average amount of psychosocial energy. This was true
whether considering all eight issues or whether considering only the five childhood issues. Additionally, a t test indicated that trust saliency was significantly greater for mothers of infants than it was for mothers of older children, t (20) = 1.91, p = .04 on the first test; t (20) = 3.90, p = .000 on the retest.

The “trust more salient than other childhood issues” condition was only partially met by the MPD-S data. Based on first-test data, trust was more salient than two other childhood issues (autonomy and initiative), but not most salient of all childhood issues. There was no statistical difference between the saliency of trust and the saliency of industry or identity.

Based on the MPD-S retest, the mean trust saliency for mothers of infants rose to a level that ranked trust as the most salient issue of all eight developmental issues, and trust was significantly more salient than three of the four other childhood issues (more salient than autonomy, initiative, and industry). Identity was more salient than trust on both the first test and the retest, but the difference did not reach statistical significance using either set of data.

Three conclusions regarding the mothers of infants are derived from comparing trust saliency to the saliency of other childhood issues: (a) trust held a more salient position among the childhood issues, but not a most salient position, (b) in addition to trust, industry and identity saliency were strong for these mothers, and (c) trust saliency was particularly affected by the retest conditions of the MPD-S.
Trust Saliency

Trust saliency was above average for new mothers as predicted, although it was not so strong as to significantly exceed all other childhood issues. Based on MPD-S data, industry and identity saliency should also be considered active in new mothers.

One of the most interesting MPD-S findings regarding trust was the increase in trust saliency from the first test to the retest. For mothers of infants, trust saliency was significantly greater as measured by the retest than as measured by the first test, t (10) = -3.65, p = .004. Trust was the only issue for which saliency changed significantly from the first test to the retest, and trust changed significantly only for mothers of infants. This dramatic increase in trust saliency on the retest raised questions regarding retesting conditions and the combination of instrumentation used in this study. Explanations for differences in first-test and retest results are discussed below.

One explanation might be that the MPD-S is an inherently inconsistent measure of saliency, but evidence argues against a lack of reliability explanation. The within-study reliability assessment indicated an overall reliability coefficient of r = .75 and a trust subscale reliability coefficient of r = .77 (p = .000). The pre-study reliability assessment indicated an overall reliability coefficient of r = .75 and a trust subscale coefficient of r = .67 (p=.000). Furthermore, an “inconsistency of the instrument” argument would dictate that more than one issue would be affected, but only trust evidenced a significant change from the first test to the retest. Also, overall instrument inconsistency would be expected to affect all participants, but the
significant change in trust occurred only for mothers of infants, not for mothers of older children.

Another plausible explanation for first-test/retest difference in trust saliency is the effect of the EPI and TAT having occurred between the first test and the retest. This possibility is discussed first with regard to the EPI. The qualitative interviewing literature supports that dialogical interviewing changes one’s understanding of self and facilitates making connections not consciously made before (Beer, 1997). Thus, it is reasonable to expect that the consciousness-raising effect of having participated in the EPI prior to the retest may have clarified what was on participants’ minds.

Self-awareness as a plausible explanation for the change in trust saliency leads to the additional question, does the effect of consciousness-raising make the MPD-S retest more valid or less valid? Is consciousness-raising prior to an MPD-S sorting a contamination of the results or an enhancement of the MPD-S as a measurement tool?

With regard to the potential for enhancement, evaluation literature suggests that the consciousness-raising effect may be in the direction of greater validity. The literature suggests that changes in scores on pre and posttests with an intervention in between are due to respondents using a different understanding of the target concept or a different scale of measurement from Time 1 to Time 2 (Howard, 1980; Levinson, Gordon, & Skeff, 1990; Sprangers & Hoogstraten, 1989). For example, a respondent is asked to self-report his computer skills and reports that they are average. After participating in a computer class, the respondent is asked to self-report his post-class level of skill. He again reports that they are average. After being in the class, the
respondent realized the complexity of computer skills and now believes he is average. At the time of the pretest, the respondent thought he was average, because he didn’t realize how little he knew. With regard to the MPD-S, the target concept was the self. It is plausible that at the time of the retest, participants knew more about themselves and used a different measure to respond to the MPD-S items than they did at the time of the first test.

Howard (1980) and Levinson (1990) provided empirical evidence that a Time 2 self-report can be more valid than a Time 1 report. They pretested subjects with a traditional self-report measure paired with an objective, behavioral measure. After providing an experience that offered the subjects new awareness or understanding of the target concept, they asked subjects to retrospectively assess what they knew, believed, or could do before the intervening experience. They compared the three measures: traditional pretest (taken at Time 1), objective, behavioral pretest (taken at Time 1), and the retrospective pretest (taken at Time 2). The behavioral pretest correlated better with the retrospective pretest than it did with the traditional pretest. Thus, they concluded the retrospective measure taken after acquiring a better understanding of the concept was a truer measure of the concept than was the traditional pretest.

This pretest-posttest model suggests that through the construction of the narrative, the mothers of infants came to understand themselves better (the target concept), which caused them to respond differently to the items on the MPD-S retest.
Because the retest was done with more understanding of self, the retest may have been more valid.

With regard to the potential for contamination, a possible explanation is that sensitization to trust emanated from the language and probing of the interviewer. The possibility that the EPI (or the TAT or both) contaminated the MPD-S retest results will remain a limitation of this study until further research is conducted using the combination of instruments employed in this study. However, the follow-up investigation of the verbal priming of mothers of infants toward trust saliency did not support such contamination.

Greater use of trust keywords by the interviewer with mothers of infants might be considered evidence of interviewer-directed sensitization toward trust concepts. However, the word usage analysis indicated that the incidence of such was greater in the mothers-of-older-children group than in the mothers-of-infants group, making this an unsupported explanation for the response shift in the mothers of infants. Greater use of trust keywords by the interviewee in response to follow-up questions might imply contamination, if mothers of infants were asked more follow-up questions. However, there was no significant difference in the volume of follow-up questions asked of each group, \( t(20) = 1.61, p = .06 \) (\( M = 62.00 \), mothers of infants; \( M = 50.09 \), mothers of older children).

 Mothers of infants did use trust keywords more often in their responses to core questions than did the mothers of older children. However, based on the above discussion of the validity enhancing quality of self-awareness, this higher word usage
can be considered evidence of the natural, self-sensitization that can occur through narrative construction, which may increase self-awareness and, thus, enhance self-report measurement.

In summary, a word-usage analysis did not support an explanation of contamination by the interviewer but rather supported an explanation of natural sensitization from the process of narrative construction, which can be considered an enhancement of the measuring of saliency rather than a contamination. It is noted, however, that non-verbal priming could also have been a possible source of sensitization. Because the EPI and TAT sessions were not videotaped, non-verbal priming was not investigated.

Future research should explore the reactivity between the instruments used in this study. This discussion focused on the impact the EPI may have had on the MPD-S, because the EPI afforded the most opportunity for interviewer prompting. However, because the TAT is also a reflective instrument and was administered between the first test of the MPD-S and the retest, it could have also affected the MPD-S retest results. Controlled designs in which the order and combinations of the MPD-S, EPI, and TAT are varied among groups of participants would be useful in informing questions regarding (a) the increase in MPD-S trust for mothers of infants on the retest in this study and (b) in general, the impact that reflection may have for self-report data that draw on highly accessible, cognitive material as did the MPD-S.

A further limitation of this study related to the interaction of the instruments was that the hypothesis construction, interviewing, and coding analyses were all done
by a single researcher. A future design improvement would be to use interviewers and coders who are blind to the hypotheses and to use coders who did not also do the interviewing.

Summary

There are two ways to think of the MPD-S retest data: (a) it was contaminated by the prior sensitization of the EPI and TAT and should not be considered in drawing conclusions or (b) it was a truer reflection of saliencies than the first test because it was enhanced by the introspection of the EPI and projection of the TAT. If one takes the position that the retest data was contaminated and considers only first-test data, the following three conclusions are warranted. First, there is evidence that the developmental constructs of saliency and resolution are independent, which supports the use of both constructs in developmental research. Second, there was evidence that psychosocial energy was directed to childhood issues in a dynamic and intense way (revisited). In addition to trust revisitation for new mothers, there was evidence that industry and identity are also revisited within the context of new parenting. Third, there was evidence of parallelism. Although trust was not significantly more salient than all other childhood issues, it was more salient than autonomy and initiative, and there was additional strong evidence of parallelism from the two-group comparison in which mothers of infants were directing significantly more attention to trust than were mothers of older children. In summary, the MPD-S first-test data, taken alone, provided substantial support for all the constructs of interest: saliency/resolution independence, revisitation, and parallelism. If one takes the position that retest data
was a “truer” reflection of saliency and interprets the retest findings, the most substantive change in the above conclusions is to note that the evidence of parallelism is strengthened by the findings that trust exceeded the saliency of three (rather than two) of the four other childhood issues on the MPD-S retest.

Experience of Parenting Interview (EPI).

Introduction

The EPI was an exploratory instrument used for measuring saliency. The EPI has two characteristics different from the MPD-S: the use of reflective, less conscious material than that used by the MPD-S and results that were researcher-coded rather than self-reported. Comparisons between the MPD-S findings and the EPI findings are made throughout the following discussion of EPI data.

As with the MPD-S discussion, saliency/resolution independence is discussed based on a hypothesis test using whole-group correlational evidence; the revisitation discussion is based on mothers-of-infants subgroup descriptive data; and the parallelism discussion is based on both descriptive and inferential statistics using data from both subgroups.

Independence of Saliency and Resolution

The EPI supported the hypothesis of independence between saliency and resolution. All correlations between EPI saliency scores and MEPSI resolution scores were statistically non-significant. The EPI, like the MPD-S, provided clear justification for studying Erikson’s life-span developmental theory based on both saliency and resolution.
Revisitation

Attention to adult issues

The Erikson psychosocial issues coding scheme was appropriately sensitive to Erikson’s theory of age ascendancy. Such sensitivity could be considered a validation of both the epigenetic dynamic of Erikson’s theory and the coding scheme used. On the EPI, generativity was the most salient issue for mothers of infants, as would be predicted by Erikson’s ascendancy tenets for the reasons outlined in the MPD-S discussion. In addition to the overall 1st place ranking of generativity, when comparing only the three adult issues for mothers of infants, the saliency rankings were generativity 1st, intimacy 2nd, and integrity 3rd, which was an exact reflection of Erikson’s predicted progression and an exact reflection of the MPD-S results.

Attention to childhood issues

The mother-of-infants group profile also showed evidence of revisitation (ascendancy of childhood issues). Trust was the 2nd most salient issue across all issues, holding a more ascendant position than did two of the adult issues. In addition, using the average level of saliency across all eight issues as the demarcation of high and low saliency, three childhood issues (trust, autonomy, and industry) were highly salient. Childhood issues were commanding more than an average amount of directed attention for this group of mothers.

Both the MPD-S and the EPI indicated an ascendancy of childhood issues, but there were some differences in the specific childhood issues that evidenced revisitation based on MPD-S data and EPI data. On the EPI, trust had the highest rank of saliency
among the childhood issues and the 2nd highest rank among all issues. This same position of 1st among childhood issues and 2nd among all issues was held by identity on the MPD-S first test. On both MPD-S sortings, identity was highly salient, but it was not on the EPI. On the EPI, autonomy was of high saliency, but it was not on either of the MPD-S sortings. These discrepancies are matters for further research.

**Parallelism**

Parallelism was strongly supported by the EPI mothers-of-infants data. Trust commanded more than an average amount of psychosocial energy. This was true whether considering all eight issues or whether considering only the five childhood issues. Trust was significantly more salient than all of the other four childhood issues, which was a stronger finding of parallelism than that produced by either of the MPD-S sortings. The differences in EPI and MPD-S findings are discussed in the trust saliency section below. Furthermore, a t test indicated that trust saliency was significantly greater for mothers of infants than it was for mothers of older children, t (20) = 2.74, p = .007. This finding was also confirmed by both sortings of the MPD-S.

**Trust Saliency**

High trust saliency for mothers of infants is an indicator of parallelism. High mothers-of-infant trust saliency was predicted by the hypotheses of this study, and EPI data fully supported the hypotheses. The Results Chapter began with examples of mothers of infants confronting dimensions of the trust issue. They described getting basic needs met, the struggle to be comfortable asking for help, needing a life support system, experiencing joy and comfort at a visceral level, and relying on a sense of
hope that things will “work out.” The evidence for high trust saliency on the EPI was clear based on qualitative narratives and on the quantitative group profile which indicated that trust was of above average saliency and that only generativity was more salient than trust.

A less clear point is the divergence of EPI and MPD-S data on the magnitude of trust saliency. Both instruments confirmed high saliency, but the EPI did so more strongly by indicating that trust saliency significantly exceeded all other childhood issue saliencies for mothers of infants. The degree of divergence between the two instruments depends on which of the MPD-S results are considered.

If only MPD-S first-test results are considered, the divergence on the magnitude of trust saliency is considerable. The EPI reported trust more salient than all other childhood issues; the MPD-S first test reported trust only significantly more salient than autonomy and initiative. Reasons for this divergence could fall into three categories: sample size, characteristics of the instruments, or EPI coding error.

First, statistical significance is a strict measure in tests with only 11 cases. It could be that in a larger group of participants the first-test MPD-S would have shown trust saliency as significantly higher than all other childhood issues as did the EPI. Second, the EPI may be more sensitive to measuring trust than is the MPD-S. The level of awareness tapped by the two instruments differs. The EPI is likely to access material that resides at a lower level of participant awareness. As the first issue confronted by the human being and as the issue confronted when the individual is extremely immature cognitively, trust is, theoretically, the most foundational
developmental issue and the most primitive and visceral in nature. Thus, it may reside at a lower level of awareness making it more difficult for the MPD-S to access.

Third, because the EPI is researcher-coded (rather than self-reported), coding error must be introduced as an explanation for divergent findings. If the EPI is subject to more coding error than the MPD-S, than the MPD-S may be a “truer” measure. Only additional research can fully address coding error as an explanation for divergence. However, the EPI interrater agreement data provided support that there was a satisfactory level of control of coding error, especially for the subscale of trust, which is of primary interest in this study.

If MPD-S retest data are considered in the analysis, the EPI and MPD-S results approach convergence. The EPI reported trust more salient than all other childhood issues; the MPD-S retest reported trust significantly more salient than three of the four other childhood issues (identity being the exception). Reasons for the divergence between EPI and MPD-S retest data regarding identity would be the same as those described previously: lack of statistical power due to sample size, the EPI greater sensitivity to trust measurement, and coding error.

Summary

Three conclusions can be drawn on the basis of EPI data. First, there was evidence that the developmental constructs of saliency and resolution are independent constructs. Second, the EPI indicated that psychosocial energy was directed to childhood issues in a dynamic and intense way (revisitation). In particular, there was evidence that trust, autonomy, and industry are revisited within the context of new
parenting. The issues of autonomy and industry should be explored further, however, because they were not entirely congruent with MPD-S findings and because the interrater agreement data for the Erikson psychosocial issue coding scheme indicated the need for more refinement of the autonomy subscale. Third, there was strong support for parallelism with trust being the most salient issue among childhood issues for mothers of infants and trust saliency being significantly greater for mothers of infants than for mothers of older children.

Regarding the differences between EPI data and MPD-S data, further research is warranted concerning four research questions. Do reflective exercises sharpen respondents’ cognitive awareness of saliences, which then are more “available” for self-reporting on the MPD-S? Do childhood issues reside at progressively lower levels of awareness dependent upon when they were first confronted and resolved? Does EPI and MPD-S sensitivity to the measurement of issues differ based on the level of awareness at which issues reside? How valid is the Erikson psychosocial issue coding scheme?

**Thematic Apperception Test (TAT)**

**Introduction**

In this study, the TAT was an exploratory instrument used for measuring saliency at an unconscious level. Like the EPI, the TAT was a researcher-coded assessment rather than a self-report. The following discussions consider how TAT findings (a) validate the constructs of interest in this study and (b) converge or diverge from MPD-S and EPI findings. As with the prior discussions, saliency/resolution
independence is discussed based on whole-group correlational evidence; revisitation is discussed based on mothers-of-infants descriptive data; and parallelism is discussed based on both descriptive and inferential statistics using subgroup data.

**Independence of Saliency and Resolution**

The TAT supported the hypothesis of independence between saliency and resolution. Out of 8 correlations between TAT saliency scores and MEPSI resolution scores, only one (generativity/stagnation) reached statistical significance ($r = .46, p = .03$). This generativity/stagnation correlation was considered a chance occurrence for the following reasons. Multiple correlations were conducted, and mathematically one statistically significant finding could occur by chance alone under those conditions. Also, there was no corroborating evidence of a relationship between saliency and resolution from other issue findings or from other instrument findings. No other TAT correlations (across issues) were significant, and no other generativity/stagnation correlations (across instruments) were significant. The TAT, like the MPD-S and EPI, provided justification for studying Erikson’s life-span developmental theory based on both saliency and resolution.

**Revisitation**

**Attention to adult issues**

TAT findings were partially supportive of Erikson’s theory of epigenetic ascendancy. Although the adult issue of generativity would have been predicted to rank first in saliency overall, instead, it ranked 2nd, following trust. When comparing only the three adult issues, however, the adult issues ranked in the predicted order:
generativity 1st, intimacy 2nd, and integrity 3rd. This ordering of the adult issues is consistent with Erikson’s theory and converges with the results of both the MPD-S and the EPI. The strong trust saliency TAT findings (exceeding generativity, overall) are discussed in the trust saliency section below.

Attention to childhood issues

Using the average level of saliency across all eight issues as the demarcation of high and low saliency, the childhood issues of trust and industry were both highly salient. Childhood issues were commanding more than an average amount of directed attention for this group of mothers, which was evidence of revisitation. The high saliency of trust was congruent with MPD-S and EPI data. The high saliency of industry was congruent with MPD-S (first test) and EPI data, but not with MPD-S retest data.

Parallelism

Parallelism was partially supported by the TAT mothers-of-infants data. The TAT’s support for parallelism was from two findings. First, trust commanded more than an average amount of psychosocial energy across all eight issues and more than an average amount of psychosocial energy across the five childhood issues for mothers of infants. This finding replicated that of both the MPD-S and the EPI. Second, trust was significantly more salient than all of the other four childhood issues, which was a stronger finding of parallelism than that produced by either of the MPD-S sortings, but was exactly the same as the findings of the EPI. Explanations for why trust comparisons to other childhood issues were so strong on the TAT compared to
the MPD-S would be the same as those discussed in the trust saliency section for the EPI: small sample size, TAT sensitivity to material residing at a lower level of awareness, and coding error.

A third finding from TAT data failed to support parallelism, however. A $t$ test of TAT data indicated that there was no difference in the trust saliency for mothers of infants and mothers of older children, $t (20) = .85, p = .20$. The TAT was the only instrument that did not show a significant difference between these two subgroups on trust saliency. This is discussed below in the trust saliency section.

**Trust Saliency**

The TAT measured trust saliency as strong. It was of above average salience and comparatively more salient than all four other childhood issues. These findings were consistent with the EPI; they were stronger, however than MPD-S findings. The earlier EPI explanations regarding sensitivity to material at lower levels of awareness apply equally as well to these TAT findings. The TAT taps material at an unconscious level; trust is likely to reside at a low awareness or unconscious level; therefore, the TAT may be acutely able to uncover trust.

A second interesting finding about TAT trust saliency was the rank order between trust and generativity: trust ranked 1$^{st}$ and generativity 2$^{nd}$ across the eight issues. This finding violated Erikson’s ascendency theoretical expectation. The following are two possible explanations for this finding: (a) a card pull toward trust based on the specific TAT cards used and (b) the differing levels of awareness tapped by the various instruments.
TAT cards are known to have contextual pull (Cramer, 1998; Groth-Marnat, 1990). Therefore, there could have been a pull toward trust based on the cards selected for this study. However, the two cards were purposively selected because they were highly ambiguous and had no obvious emotional or situational context. The pensive woman had no other people in the picture, and her whereabouts were nondescript. The boat on the shore had no people in the picture, and, other than being outdoors, there was no situational context. Thus, there is no evidence that the TAT cards should be expected to have a pull toward trust.

The second explanation is that the TAT’s capacity for tapping unconscious material results in the instrument being highly sensitive to trust and less sensitive to generativity. Trust is a primitive, visceral developmental issue and is likely to reside at low to unconscious levels of awareness in adults. Generativity could be considered as residing at an easily accessible, cognitive level because it was the current age-ascendant adult issue for this group of new mothers and because the study itself established a context of parenting through its use of participants who volunteered based on an interest in parenting. Furthermore, generativity was not likely to be imbedded in the participants’ unconscious, because, theoretically, generativity was age ascendant for them, which suggests that they would be actively and consciously involved in resolving generativity at this time in their lives. Thus, trust may have edged out generativity in the saliency rankings on the TAT, because the TAT was highly sensitive to unconscious material, which made it more sensitive to trust than to generativity.
A unique finding based only on TAT data was that there was no statistically significant difference between mothers of infants and mothers of older children on trust saliency. A plausible explanation for this finding is that trust may be so much at the psychological core of individuals who are parenting that when material is measured from a deep level of awareness, trust is highly salient for all mothers regardless of the ages of their children.

The trust/generativity rank-order reversal and this failure to discriminate between subgroups on trust saliency suggest that the TAT may be tapping material at a deep enough level that what it uncovers is not susceptible to age-related or experience-related ascendancy. Such a condition raises questions regarding the meaning of TAT saliency with regard to revisitation.

Revisitation is defined as a mechanism of adult development that affords an opportunity to reconstruct past resolutions of childhood psychosocial issues. The importance of revisitation is its potential for reactivating the resolutions of developmental issues and the prospect that resolutions will become more positively functional for the demands of adult life. The psychosocial energy directed to childhood issues that resides deeply out of awareness may not serve this reawakening function. Therefore, saliencies at an unconscious level may not meet the definition of revisitation, because such energy may not reasonably be deployable to the task of the reconstruction of a resolution. Issue saliency may need to reside at least at a moderate level of awareness in order to qualify as revisitation, because it is at this level that
saliency becomes available for engagement in developmental movement via the reconstruction of psychosocial resolution.

Further research is needed to inform this relationship between revisitation and resolution and particularly the role that level of awareness plays in revisitation and resolution. Use of the TAT in revisitation research should be useful in better defining these relationships. Furthermore, the brevity of the TAT used in this study is a limitation, and a longer version of the TAT could better inform these questions.

Summary

Three conclusions can be drawn on the basis of TAT data. First, there is enough evidence that the developmental constructs of saliency and resolution are independent to warrant the use of both constructs in developmental research. Although one significant correlation (generativity/stagnation) was evidenced on the TAT, there was no corroborating evidence to warrant a conclusion that saliency and resolution are predictive of one another. Second, there was evidence that psychosocial energy was directed to childhood issues in a dynamic and intense way (revisitation). Both trust and industry were ascendant childhood issues. Third, there was evidence that saliencies at unconscious levels may not be strongly influenced by age or life experience. This finding raised the question as to whether unconscious childhood saliencies qualify as revisitation with regard to their employability in the work of reconstructing psychosocial resolution and whether they will discriminate among individuals. The former has practical implications for TAT findings; the latter has research implications.
Regarding TAT findings that diverge from those of the other instruments, because the TAT was researcher-coded, coding error must be introduced as an explanation. Only additional research can fully address this question. However, TAT interrater agreement was at satisfactory levels and, therefore, argues against coding error.

Summary

Table 35 summarizes the findings from this study that supported the previous discussions and the following conclusions. They focus on what was learned about the constructs of interest (saliency/resolution independence, revisitation, and parallelism) and the results of the study’s three hypothesis tests.

Essentially all instruments supported the independence of saliency and resolution, which established the validity of introducing the construct of saliency in order to better inform the mechanisms of Erikson’s life-span theory of development. This study suggests that both saliency and resolution should be used to build adult developmental theory and to provide practice recommendations for family professionals.

The degree of support for parallelism from this study varied by the definition of parallelism used. A moderate definition of parallelism requires only that trust be highly salient (above average saliency) for mothers-of-infants. Evidence for parallelism based on this definition was strong; on all instruments, for mothers of infants, trust/mistrust was of above average saliency.
<table>
<thead>
<tr>
<th>Hypothesis Tests and Important Findings</th>
<th>MPD-S (first test)</th>
<th>MPD-S (retest)</th>
<th>EPI</th>
<th>TAT</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Hypothesis One:</strong> Saliency/resolution independence (whole-group analysis)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes*</td>
</tr>
<tr>
<td>*one significant correlation (generativity) considered a chance occurrence</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td><strong>Hypothesis Two:</strong> Parallelism defined as greater than average trust saliency for mothers of infants (mothers-of-infants analysis)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Hypothesis Two:</strong> Parallelism defined as trust more salient than other childhood issues (mothers-of-infants analysis)</td>
<td>Trust more salient than: Autonomy Initiative</td>
<td>Trust more salient than: Autonomy Initiative Industry</td>
<td>Trust more salient than: Autonomy Initiative Industry Identity</td>
<td>Trust more salient than: Autonomy Initiative Industry Identity</td>
</tr>
<tr>
<td><strong>Hypothesis Three:</strong> Parallelism defined as trust more salient for mothers of infants than mothers of older children (analysis of comparison groups)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

Table 35: Hypothesis tests and important findings by instrument. continued
Table 35: continued

<table>
<thead>
<tr>
<th>Important Finding:</th>
<th>Yes</th>
<th>No**</th>
<th>Yes</th>
<th>No**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age ascendancy defined as generativity ranked first among eight issues (mothers-of-infants analysis)</td>
<td>Yes</td>
<td>No**</td>
<td>Yes</td>
<td>No**</td>
</tr>
<tr>
<td><strong>Generativity ranked 2nd</strong></td>
<td><strong>Generativity ranked 2nd</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Important Finding: Age ascendancy defined as adult issues ranked generativity 1st, intimacy, 2nd, and integrity 3rd (mothers-of-infants analysis)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>

A stricter definition of parallelism requires that trust be significantly more salient than each of the other childhood issues for mothers of infants. Of 16 comparisons between trust and the other four childhood issues, 14 indicated trust was significantly more salient. The EPI and TAT provided the most support based on this definition. The MPD-S support was mixed, with the retest being more supportive than the first test based on this strict definition.
A third definition of parallelism requires that trust saliency for mothers of infants be greater than for mothers of older children. Both the MPD-S (first test and retest) and the EPI supported this definition. The TAT did not. Overall, EPI data satisfied the most conditions of parallelism.

Several findings from this study reflected Erikson’s predicted age ascendency of the adult psychosocial issues and added support to both the validity of Erikson’s tenets and to the instrumentation. The MPD-S first test and the EPI clearly reflected Erikson’s predicted age ascendency of the adult psychosocial issues. On the MPD-S retest and the TAT, support for age ascendency was not as clear.

Descriptive data from all instruments supported the construct of revisitation. The issues of most saliency for the mothers-of-infants group were trust, industry, and identity. Autonomy was highly salient as measured by the EPI, but there was no corroborating evidence for revisitation of autonomy based on other instrumentation, and autonomy was only minimally above average in saliency on the EPI.

Table 36 summarizes the performance of the three instruments with regard to hypothesis support and support of important findings. Overall, the EPI provided the most consistent support.

The MPD-S diverged partially on one of the two parallelism hypothesis tests; trust was more salient than other childhood issues, but not most salient of all the childhood issues. In addition, the MPD-S retest failed to support one aspect of age ascendency with trust outranking generativity overall.
<table>
<thead>
<tr>
<th>Hypothesis Test and Important Findings</th>
<th>MPD-S (first test)</th>
<th>MPD-S (retest)</th>
<th>EPI</th>
<th>TAT</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Hypothesis One:</strong> Saliency/resolution independence</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td><strong>Hypothesis Two:</strong> Parallelism defined as greater than average trust saliency for mothers of infants (mothers-of-infants analysis)</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td><strong>Hypothesis Two:</strong> Parallelism defined as trust more salient than other childhood issues (mothers-of-infants analysis)</td>
<td>✔</td>
<td>□</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td><strong>Hypothesis Three:</strong> Parallelism defined as trust more salient for mothers of infants than mothers of older children (analysis of comparison groups)</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>□</td>
</tr>
</tbody>
</table>

Table 36: Performance of the MPD-S, EPI, and TAT by findings.
Table 36: continued

<table>
<thead>
<tr>
<th>Important Finding:</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Age ascendency defined as Generativity ranked first among eight issues (mothers-of-infants analysis)</td>
<td>⬤</td>
<td>⬦</td>
<td>⬤</td>
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<tr>
<th>Important Finding:</th>
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</thead>
<tbody>
<tr>
<td>Age ascendency defined as adult issues ranked generativity 1st, intimacy 2nd, and integrity 3rd (mothers-of-infants analysis)</td>
<td>⬤</td>
<td>⬤</td>
<td>⬤</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Important Finding:</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Revisitation evidenced by above average saliency of one or more childhood issues (mothers-of-infants analysis)</td>
<td>⬤</td>
<td>⬤</td>
<td>⬤</td>
</tr>
</tbody>
</table>

● = Full Support  ⬦ = Partial Support  ○ = No Support

One of the more interesting findings of this study was the response shift on the MPD-S with trust saliency for mothers of infants increasing significantly on the retest. The most plausible explanation for differences in findings between the first test and the retest is based on the effect of the respondents having participated in deep
reflection via the EPI and the TAT before doing the MPD-S retest. Questions remain as to whether such an effect is a contamination or an enhancement of measurement. More research needs to be done regarding this matter. It has implications for future revisitation research, and it may have implications for the pairing of reflective, qualitative measures with quantitative, self-report measures in many areas of research.

The TAT was the most divergent of the three instruments. It provided no support of one of the two parallelism hypothesis tests; there was no difference in the trust saliency of mothers of infants and mothers of older children. In addition, the TAT (like the MPD-S retest) did not support one aspect of age ascendancy with trust outranking generativity overall. Particularly because the TAT was the only instrument to not support the group comparison hypothesis, further study is needed to determine the unique nature of the TAT’s measurement and the implications of such for both research and practice.

These two divergent findings on the TAT raise questions as to the unique dimensions of saliency that the TAT was capturing. Future research should investigate whether saliencies tapped at an unconscious level fail to be impacted by age or the context of life events and whether at this level they are available for active engagement in a revisitation/reconstruction process. Knowledge of the saliency of issues at this deep level may not provide information about how development interacts with life events, which is the essence of the construct of revisitation. Furthermore, knowledge of the saliency of issues at this level may not provide information that
directs how individuals can use revisitation to propel adult development in positive
ways, which is the practical purpose of revisitation research.

Additionally, the three instruments employed in this study varied as to (a)
which of the childhood issues were of above average saliency in addition to trust and
(b) which were significantly less salient in comparison to trust. Further study is needed
to explain these differences.

Implications

Theory Building

Saliency and Resolution

This research supports the existence of two independent constructs important
to a psychosocial theory of development: saliency and resolution. Hereafter,
resolution has been a key construct used for studying Erikson’s life-span theory of
development. The results of this study proposed that both saliency and resolution are
mechanisms of development and suggested more use of saliency as a variable in the
study of life-span theory. Saliency expands our conceptualization of development
from a construct that is static to a dynamic construct. Development seen as a matter of
possessing attributes that are associated with resolution of psychosocial issues is static.
Development seen as an active state of directing variable amounts of attention to all
eight psychosocial issues with the constant potential for better (or worse) resolution is
dynamic.
Life experience is a catalyst for saliency. It is the convergence of an individual’s world and an individual’s capacities and needs that invites the individual to attend to a developmental issue. Thus, building the construct of saliency into psychosocial theory can be a link between life experience and the developmental outcome of psychosocial resolution or psychosocial maturity. Including propositions of saliency in psychosocial theory gives additional recognition to the ecological, contextual nature of Erikson’s theory.

Saliency is a necessary condition for resolution of psychosocial issues. It is a reasonable presumption that saliency is a companion to resolution and that saliency either precedes resolution, having a preparatory effect, or follows resolution as a residual effect. It may be that an individual must possess a level of saliency of an issue in order to do the psychological work of resolving or reconfirming a resolution of that issue, or it may be that an individual maintains a level of saliency of an issue as a result of having done the psychological work of resolving or reconfirming a resolution of an issue. Either progression positions saliency on the path from life experience to developmental maturity and identifies saliency as an indicator of the developmental work of resolution.

Resolution is a measure of developmental maturity. Developmental maturity is what theory explains or predicts. Because saliency is an indicator of resolution as well as a route by which experience may impact resolution, theory will only be able to explain development fully when propositions regarding saliency are included.
Additionally, the most practical use of developmental theory by family professionals is as an aid to their ability to support the positive resolution of psychosocial issues in individuals. A theory that better understands the mechanisms of resolution will better serve family professionals. Because saliency has the potential of informing resolution from a real-world experience perspective, a theory that incorporates saliency in its propositions can be well used by family professionals.

Revisitation

This research provided support for explaining adult development in terms of childhood psychosocial issues as well as adult psychosocial issues. The findings of this study suggested that developmental theory has continuity and that segregating childhood development from adult development neglects the important connection between the two. Support for revisitation suggests that there is synergy in life-span theory; theory that includes the childhood/adult connection can be more explanatory than either childhood theory or adult theory alone.

Building the construct of revisitation into psychosocial theory can advance theory in the following ways. The construct of revisitation can form a bridge between adult developmental theory and practice. Because family life practitioners and family clinicians tend to incorporate the childhood issues into their understanding of adult needs and how to support adult development, a theory of adult development that incorporates revisitation is a theory that is responsive to practice and opens avenues for practice to be responsive to theory.
Furthermore, revisitation expands life-span developmental theory beyond the description of life issues that confront individuals on a one-way path from birth to death. Instead, life-span theory that includes revisitation propositions explains a process of development that tightly knits the developmental processes of childhood into the developmental processes of adulthood as a seamless construct.

Parallelism

Data from this research provided mixed support for parallelism. Mothers of infants were attendant to the issue of trust, which was the age-ascendant issue of their children, and data from two of the three instruments indicated that mothers of infants were more attendant to trust than were mothers of older children. However, parallelism was less supported than were the other two constructs of interest: the independence of saliency and resolution and revisitation. Future research is needed to further investigate the validity of parallelism as a pattern of revisitation within the context of parenting.

Professional Practice

Introduction

Because this research focused on new mothers, the most direct professional practice implications are in the area of transition to parenthood and support for new parents. The following principles of practice are those that are suggested by the specific findings of this research or by the constructs of a revisitation theoretical framework that this research validated. Replication of this study’s findings through further research with larger, more diverse populations will be necessary to fully
support these principles. The purpose of outlining them is to encourage discussion of
their merits and the engagement of practitioners in the study of revisitation.

**Principles**

1. Attend to both parent and child.

   Based on Erikson’s theory of development, it has been well recognized that
development occurs through social/cultural mechanisms. Because parenting is an
important sociocultural experience in an adult’s life, it has great potential for
promoting adult development. Healthy individuals make healthy parents; therefore, it
is consistent with the goals of family professionals to attend to the development of
healthy adults.

2. Attend to both nurture and competency needs.

   This study supported that competency needs were prominent for new mothers.

When asked about their needs, new mothers often give priority to competency needs
such as information about basic newborn care and time management techniques
(Brooks, 1994; Hamner & Turner, 1996; McKim, 1987; Plutzik & Laghi, 1983). It
clearly makes sense that family-serving programs should attend to these perceived and
real needs. However, this study supported that nurture concerns (embedded in the
psychosocial issue of trust) may be of greater concern for new mothers than
competency needs (embedded in the psychosocial issue of industry). The findings of
this study support a dual emphasis on nurture and competency and suggest that parent
programs should not deal exclusively with one or the other.
Furthermore, it is reasonable to consider attention to nurture as also an investment in competency. Erikson’s progression of developmental tasks suggests that the first task of coming to believe in one’s unconditional worth (embedded in trust) is foundational and preparatory to positive resolution of all future issues, including decisions about one’s competency. Thus, a well-nurtured individual is more likely to work successfully at becoming competent than is a nurture-deprived individual. Clarke and Dawson (1998) propose that it is nurture that enables one to hear information (even “you can do better” information) as constructive instruction rather than criticism. By recognizing this inseparable duality of nurture and competency, family-serving programs can justify attention to nurture even when their primary focus is on the “how to’s” of parenting.

This study found high trust saliency for new mothers. It is assumed that saliency is a necessary condition for resolution or reconstruction of an issue. Thus, new mothers may have an opportunity to establish or reestablish a belief in their own unconditional worth in a complex adult way that will be more contextually appropriate than past resolutions of trust may have been.

3. Anticipate the parent’s needs based on the age of the child.

This study supported the construct of parallelism, which suggests that a parent is triggered to revisit the developmental issues of the child being parented. For new parents that means they may be reviewing their thinking and feeling about: (a) their unconditional worth, (b) their trust that there are people who love them and who will care for them unconditionally, (c) whether it is OK for them to have needs -- and to
express those needs, and (d) whether they "belong" in this place -- at this time --
becoming a parent -- parenting this child. Likewise, at later ages there may be
particularly salient issues. The parents of preschoolers may be triggered into thoughts
and feelings about their own personal power; parents of teenagers might struggle with
their own sexuality or their own individuation. It can be helpful to family-serving
professionals to anticipate these “developmental moments” for parents and, even more
importantly, to help parents anticipate and recognize these triggers themselves.

4. Encourage work on the marital/couple relationship.

Researchers have shown that the marital/couple relationship is important in the
transition to parenting (Cowan & Cowan, 1988; Fedele, Golding, Grossman, &
Pollack, 1988). A revisititation framework and the results of this study justify attention
to the marital/couple relationship in intervention programs that target new mothers,
because that relationship can be critical to the adult need for nurture, a need that this
study confirmed was ascendant while parenting an infant.

A developmental task such as learning to meet one’s own basic personal needs
in appropriate ways can best be resolved in adult-to-adult relationships. The
marital/couple relationship can be an appropriate source for meeting nurture needs. An
emphasis on this relationship and its potential for nurture also guards against parents
expecting and pressuring a child to meet their adult needs, a condition that Bavolek
and Bavolek (1989) associate with abusive parenting.

5. Let parents know that they have something to gain from time and energy
expended as parents.
Young adults are sometimes considered to be too focused on themselves. A revisitation framework allows for such thinking, but does so in a positive way -- in the interest of growth toward becoming a more caring person. This study’s findings suggested that an appropriate emphasis on “me” (revisitation of trust) is to be expected enroute to a fully developed state of generativity.

Adult roles that seem to be in vain or to be without personal gain are the least likely to persist and become salient (Turner, 1978). The more benefits parents can see from their parenting the more motivation they are likely to have toward better parenting. It is important, however, that the benefits of parenting not be interpreted as what a child can do for the parent (Bavolek & Bavolek, 1989). A revisitation framework guards against such role reversal by emphasizing that the benefits of parenting are what parents can do for a child and what parents can do for themselves.

Besides the psychosocial benefits when parents perceive personal gain from parenting, such thinking can also be a positive marketing approach for family-serving programs. Parents can begin to think of their efforts as being “two for the price of one.” Whatever they do to improve their parenting has the potential for improving their own life satisfaction, and whatever they do to improve their adult functioning can improve their parenting.

6. Encourage social support that provides nurture (as well as instrumental help).

This study suggested that mothers of newborns need to establish trust that (a) their needs are important, (b) it is OK to express their needs, and (c) there are people...
who love them and will care for them. Such trust can be fostered by social support, if the support system provides nurture in addition to instrumental help.

7. When evaluating programs measure adult development.

This study suggested that there is a reciprocity between parenting and adult development. To further the understanding of that reciprocity, it is important that adult development outcomes be measured and considered in the evaluation of parenting programs. Because development means change over time, to evaluate development requires recognition that programs may not have immediate short-term effects in this area.

8. Begin researching the role of parenting and adult development.

Little is known empirically about the mechanisms of adult development in the context of parenting. This study provides a theoretical framework and methodology for such contextual research of adult development. Specifically, this study identified and validated revisitation framework constructs (saliency, revisitation, and parallelism) and designed instrumentation suitable for measuring them. In order to further the understanding of revisitation constructs and the psychometrics of the instrumentation used for this line of research, practitioners need to become an active part of research teams by assessing the adult development of their clientele, designing interventions based on revisitation theory, and measuring adult development outcomes.
Future Research

Related to Theory Building

Revisitation and resolution

The nature of the connection between revisitation and resolution has not yet been established. The importance of revisitation as a mechanism for adult development is its potential for opening a window of opportunity for individuals to rethink their belief systems as they relate to the positive and negative aspects of the psychosocial developmental issues. Theoretically, revisitation of a childhood issue could result in a more positive resolution, a more negative resolution, or a reconfirmation of a former resolution. This study established that revisitation does exist, but it did not address how revisitation might affect resolution. Future researchers should address this critical point.

Does saliency of a given childhood issue result in a change in resolution status of that issue? If so, for whom and under what conditions? Is there a temporal relationship between saliency and a change in resolution? Does heightened saliency precede or follow change in resolution status? What role does intensity play in the relationship between saliency and resolution? Does saliency need to be at a given awareness level before it can impact or reflect a change in resolution?

Are any of these relationships personologic? The current study established that the positive or negative resolution of an issue did not predict saliency across individuals, but are there some individuals who do evidence this predictive relationship, and what can we learn from those exceptions to the rule?

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Saliency and life experience

The nature of the connection between saliency and life experience needs to be further developed. The current study introduced the connection between saliency and the life event of parenting. It validated the construct of parallelism (revisiting the age-ascendant issue of the child being parented) in a group of new mothers. Parallelism for parents of older children also needs to be studied. It would be especially useful to determine whether parents move along the psychosocial issue continuum in tandem with their child. For example is autonomy revisited, when parenting a toddler at the “no” stage? Industry, when parenting a school-age child focused on learning skills? Identity, when parenting an adolescent?

How does parenting multiple children impact the pattern of parallelism? How does non-parental caretaking of children affect the pattern? Other triggering patterns within the context of parenting need to be studied. Are there patterns other than parallelism?

Issues revisited by new parents

This study identified clearly that new mothers revisit the issue of trust. This study also found that other issues are highly salient for new mothers, but there were divergences regarding which issues, particularly regarding industry and identity. The role of industry and identity for new parents needs further investigation. Additionally, initiative was consistently not salient for the new mothers in this study. That finding needs to also be investigated to determine whether the instruments used are validly measuring initiative.
Contexts for revisitation

Revisitation in the context of other life events should be studied (e.g., contexts of work, health, religion, education, and marriage). The current study found support for parenting as one life experience that is a catalyst for revisitation. How consistent would these results have been, if the participants had been more involved in paid work? What other life experiences trigger saliency of childhood developmental issues? What factors about an experience qualify it as capable of triggering revisitation? Profoundness? Pervasiveness? Transitional character? What patterns (like parallelism) exist within the contexts of other life experiences? What determines which of the multiple contexts in which people live has the greater impact on revisitation?

Revisitation and systems theory

This study focused on reciprocity between mother and infant. Trust issues may also be emanating from other family system relationships. More family system variables should be added to future revisitation research.

Revisitation and age

This study focused exclusively on parenting as the primary characteristic of both groups of participants. Age was an uncontrolled variable. Future research should include parenting and non-parenting comparison groups matched for age in order to investigate the relationship of age and revisitation.
Related to Methodology

Sampling

This study was conducted with a purposive, homogeneous sample of mothers. Further studies should be conducted with larger, more diverse samples that include individuals with diverse characteristics as to age, race, culture, employment status, family size, and educational background. Particularly, studies need to be conducted with fathers.

Longitudinal studies

Longitudinal designs would best serve revisitation research. Longitudinal research could address (a) whether change in resolution does occur in relationship to heightened saliency, (b) how saliency and life experience intersect (Is saliency affected before, during, or after a life event?), and (c) which life experiences trigger revisitation of which childhood issues.

Coding refinement

Because this study used interpretation of qualitative data to test pre-established theoretical propositions, it was vulnerable to coding error. Further studies should be conducted to refine the Erikson psychosocial issues coding scheme. Theoretically all eight psychosocial issues are nested. Each one makes a contribution to the next. Therefore, definitions of the eight issues can easily overlap. For example, persistence is an element of autonomy in terms of exerting one’s will, but it is also an element of industry in terms of a work ethic. What about persistence would require that it is coded as initiative, and what about persistence would require that it is coded as
industry? This study collected anecdotal evidence of how psychosocial issues present themselves in adult lives. More such evidence needs to be accrued in order to continue to refine the conceptual definitions of Erikson’s developmental issues.

Inter-rater agreement levels and inter-rater score correlations for the Erikson psychosocial issue coding scheme need to be improved by providing (a) more refinement and differentiation of the definitional concepts for the eight issues and (b) more extensive training protocols for coders. Based on this study’s findings, autonomy and initiative, in particular, need improvement in definition.

**Sensitization effect of reflective and projective instruments**

More study needs to be done to address sensitization effects of the EPI and TAT. Questions of sensitization were raised in this study by the changes in trust saliency scores on the MPD-S from the first test to the retest. This potential effect needs to be validated. If sensitization is a property of the EPI and TAT, is it a natural effect of reflection or an interviewer-directed sensitization?

**Coding scheme construct validity**

The sensitivity of the coding scheme for assessing saliency should also be further validated by targeting specific issues in controlled ways. For example, select adults whose lives are known to have industry-related characteristics (e.g., adults who have returned to school) and apply the coding scheme to interview data in which respondents have created a life narrative about the current “chapter” in their lives. Does the coding scheme reflect a predictable attention to industry?
Qualitative analysis

This study was analyzed based on quantitative, group data. The data from this study should also be analyzed as qualitative case studies in order to begin to assess personologic contributions to revisitation and to better understand the meaning that mothers make of their developmental saliencies.

Related to Practice

The construct of revisitation can form a bridge between adult developmental theory and practice. Theory building can become more comprehensive and more supportive of the development of “best practice,” if practitioners are encouraged to participate in the research process. Practitioners need to be enlisted to (a) assess the adult development of their clientele, (b) design interventions based on revisitation theory, and (c) measure adult development outcomes.
Phone Script for Solicitation of Potential Participants

At this point in time I am working with parents with specific kinds of characteristics and background. Can I ask you a few questions to see if those characteristics and background circumstances fit you?

Name: __________________________________________ Date: __________
Age: __________________________________________
Number of children? __________ Name of your child: ______________________
Age of child: ____________________________ Sex of child: ______________
Were you in the workforce prior to the birth of this child? ______________
Have you returned to the workforce since the birth of your child? ______________
Are you currently in the workforce? ________________________________
If not, how long have you been out of the workforce? __________________
Do you plan to return to the workforce and if so, approximately when?

______________________________________________
Highest grade completed in school: ________________________________
Marital status: ________________________________
How long have you been married? ______________
Are you currently married to the father of your child? __________________

If the potential participant does not meet the criteria for the study:

Explain that you need to talk with mothers with specific characteristics and backgrounds because these are things that could affect the results of the study as it is currently designed. Thank her for calling and tell her you would like to keep her phone number for future studies that may use different criteria. If she agrees take her phone number: ___________

If the potential participant meets the criteria for the study:

I’d like to explain more about this study and then have you tell me whether you are willing to participate. Do you have about 20 minutes to talk right now or would you like me to call you back? (If a callback is necessary, take her phone number: __________________)

This study is one I am doing to earn my Ph.D. at Ohio State University. My advisor for this study is Dr. Barbara M. Newman. The participants in this study will be moms of babies and moms of third graders who have all volunteered to talk with me about what it has been like to be a parent during the last six to twelve months.
I am glad you are considering being a part of this effort to learn more about what it is like to be a mom. Your willingness to share your personal experiences can help many other parents, as well as many professionals, better understand the most important job of parenting and how it affects adult personal growth and development.

I have been working with parents in the Columbus area for the past 30 years and have developed a deep interest in the well-being of parents and their children. I am now a Ph.D. candidate at The Ohio State University in the Department of Human Development and Family Science. My work over the years, both here at the University and out in our community, has given me the opportunity to listen to many parents, and it is their stories that have led me to want to learn more about how parenting affects adult growth and development. That is the basic question that this study is trying to answer: What impact has parenting an infant (or a third-grader) had on your personal growth and development?

I would consider us both to be “co-researchers” in this study, because it is you that is the expert on what parenting is really like for you. My job will be to guide the study and make our time together organized, enjoyable, and beneficial. I am excited about and welcome that opportunity.

I am mostly interested in what you think it is important to tell me about your experience as a parent, so I want to be careful about overly influencing you with my ideas right now. Therefore, I will not explain too fully all the ideas behind this study now, but I will explain more about our various activities toward the end of our time together.

As a volunteer in this study, you will be attending two or three meetings. The third meeting will be optional (I’ll explain more about that in a minute.). Each meeting will be about two-hours long. I will ask you to schedule meetings at a time you can be away from your baby (child). You could think of this as time to give yourself a “breather” from baby care (childcare), a time to focus on yourself. You could consider these meetings as a gift to yourself, a chance to get in touch with your experiences as a growing person and how parenting relates to your personal growth and development.

I will schedule meetings at your convenience at a place that works best for you. That might be at a public place like a library or healthcare facility or at my home or at your home, if your baby (child) is away with another caretaker, or there is a time at your home that someone else will be available to care for your baby (child). We will have a lot to cover in our time together and will only be able to do so, if we stay very focused on the study activities. That is why I’m scheduling meetings at times when you will not need to attend to your baby (child).
Let me give you a general idea about what we will do in these meetings. Stop me to ask questions at any point. One of the most important things for you to know is that you will not be asked to do or say anything that you would choose not to. This is a purely voluntary study. You will always have the right to pass.

I’ll have you complete a questionnaire that gives me information about your background, much like the kinds of questions I asked you at the beginning of our conversation today.

I will ask you to sign a consent form that says that you understand the nature of the study, that your questions about the study have been answered, that you willingly volunteer to participate which means that you are in charge and can stop at anytime, that it is acceptable to you to be taped during parts of the meetings (I’ll explain more about that in a minute.), and that you understand that your information will be treated confidentially and in the case of any written or verbal reports your information will not in any way be associated with your name.

I will ask you about the various roles you play in your life.

I will show you two pictures, one at a time, and ask you to use your imagination and tell me a brief story about each picture. This is one of the times I will tape you. I will audiotape your stories so that I can carefully and accurately remember and understand them. These tapes will be used confidentially only by researchers on this project. They will never be used publicly. The tapes will remain in my possession for three years following the conclusion of the study after which they will be destroyed. We will have a fairly general conversation about what it has been like for you to be a parent. I will have a few questions to direct this conversation, but I will be especially interested in the topics that you think are important. This will also be audiotaped.

I will ask you to look at phrases and tell me which of them are most on your mind at this time in your life.

I will ask you to look at words and phrases and tell me which of them best describe you and your view of the world right now.

I will explain in some detail the ideas behind this study and give you an opportunity to share what you think about those ideas. I will also suggest ways that these ideas might help you in your parenting and in your own personal growth and development. I’ll give you some take-home material about these ideas as well. This part of our meetings will also be audiotaped.

If you wish to schedule a third meeting to discuss your individual responses, I will be happy to schedule that at your convenience. This third meeting is optional. It will be
your decision whether you want to schedule it. At that time I can share with you what I have learned from your responses. This information should summarize for you some of the meaning that parenting has for you and perhaps some ways that parenting is related to your personal growth and development.

Do you have any questions so far?

Let me share some things that will happen after our meetings.

I plan to write a one-page summary of our general conversation. I will give you this summary to review so that you can let me know if it seems accurate to you.

I might contact you by phone after our meetings to briefly clarify or add to information we have discussed.

My goal is to continue to learn about how parenting relates to your growth and development as your child grows older, so it is likely that at some future time I may contact you again to ask if you would be willing to join me in a new study that will build on the information learned from this study.

Are there any questions I can answer for you? Are you willing to be a part of this study?

If caller says yes:

Address:

Phone number: ____________________________
Best times and places for meetings: ____________________________

I’ll be calling you back to confirm a first meeting time and then I will send you a copy of a Profile Questionnaire with questions similar to those we’ve discussed today, a copy of the Consent Form that I will need you to sign in order for you to participate, and a general idea of what we will be doing at each of our meetings. You will need to bring these to your first meeting.

I’m very much looking forward to working with you. Thank you for caring so much about parenting that you are willing to take the time to share your wisdom this way.
If caller hesitates:

Would you like me to send you the information we have talked about and then call you back after you have had some time to think about it?

Get the following information.

Address:

Phone number: ________________________________

I’ll send materials right out to you and call you in a few days.

I would very much look forward to working with you. Thank you for caring so much about parenting that you are willing to take the time to consider sharing your wisdom this way.

Script for follow-up phone call:

Did you receive the study materials I sent you? Do you have any questions I can answer for you? Have you decided to be a part of the study?

If yes:

Best times and places for meetings: ______________________________

______________________________

______________________________

I’ll be calling you back to confirm a first meeting time. Keep your copy of the Profile Questionnaire and the Consent Form; you will need to bring these to your first meeting.

I’m glad you are going to be part of the study.

If no:

Thank the caller for taking the time to hear about the study.
Phone Script for Solicitation of Referral Agency

My name is Kathy Shibley. I am a Ph.D. candidate in Human Development at The Ohio State University. I’m currently doing my dissertation research on the impact of parenting on the personal growth and development of adults. Since you serve mothers and are committed to the health and well being of both parents and children, I hoped you would help me get the word out about my research to the mothers you serve.

Most people who hear about my research say it sounds very interesting and I’ve designed the sessions with participants in such a way that I expect participants to enjoy our time together and to find it educational with regard to both their child’s development and their own development. I’ll be asking them to reflect on their experience as a parent in several different ways: interview questions, open discussion, storytelling, and paper-and-pencil questionnaires.

I have been working with parents in the Columbus area for the past 30 years as a parent educator. My current research involves talking with first-time moms of infants aged six months or younger and moms of only children who are eight- or nine-years-old. I will be asking moms to reflect on what it has been like for them to be a parent of an infant or the parent of an eight- or nine-year-old. In so doing, I will be trying to learn what developmental issues have been most important to them during this time. I hope to learn more about how the developmental stage of their child might be related to developmental work they may be doing while parenting their child at given ages.

The study is strictly voluntary. Participants will always have the right to pass on any questions or activities that are part of the study. Confidentiality of the participants’ information will be maintained, and participants’ names or other identifying information will be removed from all written and verbal reports of the study.

The moms I need to talk with in this study should
- have only children (infants or third graders)
- be married
- have attended college (It doesn’t matter for how long or if they graduated.)
- be currently out of the workforce

I have a flyer that tells moms who I am looking for and what the study is about. It gives them my phone number to call, if they think they might be interested in participating.

Is there a way you can post or distribute that flyer to your (patients, clients, students)?
Do you have any questions about the research that I can answer for you?

If willing to act as a referral source:

Address to send flyers: ____________________________________________________

______________________________________________________________

Number of flyers to send: ___________________________________________

I’ll call you back in a week or so to make sure you have enough flyers and to see if you have any questions about the process. Should I talk with you or someone else at that time?

Name of contact person: ______________________________________________

Thank you for your help and for caring so much about parenting that you are willing to take the time to hear about this study.

If the caller cannot help:

Thank the caller for taking the time to hear about the study.
**WANTED**

- Moms with only one child

Can you answer yes to all three of the following questions?

1. Have you ever attended college (doesn't matter for how long or whether you graduated)?

2. Is your child

   - a baby no older than 6 months?
   - a four-year-old?
   - a 2nd grader, 3rd grader, 4th grader or 5th grader?

3. Are you either a stay-at-home mom or very minimally employed (6-10 hours per week)?

   **If you answered yes to all three of the above questions,**
   **I would love to talk with you.**

My name is Kathy Shibley. I have been a parent educator in the Columbus area for nearly 30 years. I love working with moms and learning more about what being a mom is like for them. I am now a Ph.D. candidate at The Ohio State University doing a study about how being a mom affects personal growth and development. In other words, I'm doing a study about YOU. I'm looking for volunteers who are willing to focus on themselves and think about what being a mom really means to them. My advisor for this study is Dr. Barbara M. Newman.

If you volunteer for this study, I would meet with you three times scheduled at your convenience. The first meeting would be for an hour and each of the other two meetings would be approximately two-hours long. I will ask you to share your experiences as a parent several different ways: interview questions, open discussion, paper-and-pencil questionnaires. In our last session, I will share with you some interesting ideas about the relationship between parenting and adult growth and development.

If you are interested in learning more about yourself and what being a mom may mean to you, I would love to explain more about this study.

**Please call Kathy at 614-268-1080**
Solicitation Letter for Mothers of Infants

October 23, 1998

Dear

Thank you for your interest in this study. I am glad you are considering being a part of this effort to learn more about what it is like to be a new mom. Your willingness to share your personal experiences can help many other parents, as well as many professionals, to better understand the most important job of parenting and how it affects the personal growth and development of parents.

I have been working with parents in the Columbus area for the past 30 years and have developed a deep interest in the well-being of parents and their children. I am now a Ph.D. candidate at The Ohio State University in the Department of Human Development and Family Science. My work over the years, both here at the University and out in our community, has given me the opportunity to listen to many parents, and it is their stories that have led me to want to learn more about how parenting affects adult growth and development. That is the basic question that this study is trying to answer: What impact has parenting an infant had on your personal growth and development?

I would consider us both to be "co-researchers" in this study, because it is you that is the expert on what parenting is really like for you. My job will be to guide the study and make our time together organized, enjoyable, and beneficial. I am excited about and welcome that opportunity.

I am mostly interested in what you think it is important to tell me about your experience as a parent, so I want to be careful about overly influencing you with my ideas right now. Therefore, I will not explain too fully all the ideas behind this study now, but I will explain more about our various activities toward the end of our time together.

As a volunteer in this study, you will be attending two or three meetings. The third meeting will be optional. Each meeting will be about two-hours long. I will ask you to schedule meetings at a time you can be away from your baby. You could think of this as time to give yourself a "breather" from baby care, time to focus on yourself. You could consider these meetings as a gift to yourself, a chance to get in touch with your experiences as a growing person and how parenting relates to your personal growth and development.
My reasons for asking you to meet with me without your baby are as follows. As a parent myself, I know how our children take our attention. Time can fly by as we delight in just watching their playfulness. We will have a lot to cover in our two hours and will only be able to do so, if we stay very focused on the study activities.

I will schedule meetings at your convenience at a place that works best for you. Meetings might be at a public place like a library or a healthcare facility or at my home or at your home, if the baby is away with another caretaker, or you can arrange to have someone else at home available to care for the baby for the two hours that we are talking.

Enclosed is an outline of what we will do at each meeting. In these meetings, you will not be asked to do or say anything that you choose not to. Your participation is entirely voluntary. You will always have the right to pass. All information that you leave with me will be treated confidentially, and no verbal or written reports from this study will identify you by name. Also enclosed is a Consent Form and a Profile Questionnaire that you will need, if you decide to become part of the study.

I will be calling you in the next few days to answer any questions you may have and to ask if you are willing to become a part of this study. I would very much like to work with you. Thank you for caring so much about parenting that you are willing to take the time to consider sharing your wisdom in this study.

Sincerely,

Kathy Shibley  
Ph.D. Candidate  
The Ohio State University
Solicitation Letter for Mothers of Older Children

October 23, 1998

Dear

Thank you for your interest in this study. I am glad you are considering being a part of this effort to learn more about what it is like to be the mom of a (age) child. Your willingness to share your personal experiences can help many other parents, as well as many professionals, to better understand the most important job of parenting and how it affects the personal growth and development of parents.

I have been working with parents in the Columbus area for the past 30 years and have developed a deep interest in the well-being of parents and their children. I am now a Ph.D. candidate at The Ohio State University in the Department of Human Development and Family Science. My work over the years, both here at the University and out in our community, has given me the opportunity to listen to many parents, and it is their stories that have led me to want to learn more about how parenting affects adult growth and development. That is the basic question that this study is trying to answer: What impact has parenting a third-grader had on your personal growth and development?

I would consider us both to be “co-researchers” in this study, because it is you that is the expert on what parenting is really like for you. My job will be to guide the study and make our time together organized, enjoyable, and beneficial. I am excited about and welcome that opportunity.

I am mostly interested in what you think it is important to tell me about your experience as a parent, so I want to be careful about overly influencing you with my ideas right now. Therefore, I will not explain too fully all the ideas behind this study now, but I will explain more about our various activities toward the end of our time together.

As a volunteer in this study, you will be attending two or three meetings. The third meeting will be optional. Each meeting will be about two-hours long. I will ask you to schedule meetings at a time you can be away from your child. You could think of this as time to give yourself a “breather” from childcare, time to focus on yourself. You could consider these meetings as a gift to yourself, a chance to get in touch
with your experiences as a growing person and how parenting relates to your personal growth and development.

My reasons for asking you to meet with me without your child are as follows. As a parent myself, I know how important it is to respond to children when they need us and that it is difficult to predict when they will need us. We will have a lot to cover in our two hours and will only be able to do so, if we stay very focused on the study activities.

I will schedule meetings at your convenience at a place that works best for you. Meetings might be at a public place like a library or a healthcare facility or at my home or at your home, if your child is away with another caretaker, or you can arrange to have someone else at home available to care for your child for the two hours that we are talking.

Enclosed is an outline of what we will do in each meeting. In these meetings, you will not be asked to do or say anything that you choose not to. Your participation is entirely voluntary. You will always have the right to pass. All information that you leave with me will be treated confidentially, and no verbal or written reports from this study will identify you by name.

Also enclosed is a Consent Form and a Profile Questionnaire that you will need, if you decide to become part of the study.

I will be calling you in the next few days to answer any questions you may have and to ask if you are willing to become a part of this study. I would very much like to work with you. Thank you for caring so much about parenting that you are willing to take the time to consider sharing your wisdom in this study.

Sincerely,

Kathy Shibley
Ph.D. Candidate
The Ohio State University
Solicitation Letter for Agencies

January 29, 1999

Dear

Thank you for taking the time on the phone recently to hear about my study. My advisor, Dr. Barbara M. Newman, and myself are hopeful that this study will help parents and professionals who work with parents to better understand the most important job of parenting and how it affects the personal growth and development of parents.

I am sending you this flyer that describes the type of mom I am looking for to participate in this study with me. I appreciate your circulating this information among your staff and parents. If you learn of anyone who might qualify to be a part of this project, please give me a call. Also, feel free to give my phone number out to any potential participants.

As I mentioned to you on the phone, I am interested in how parenting affects the adult growth and development of moms. The study is strictly voluntary. Each volunteer in this study will meet with me three times at a time and place convenient to her. The first time we meet we will spend about one hour together. The next two meetings will take about two hours each.

I will be asking moms to reflect on their experience as a parent in several different ways: interview questions, open discussion, storytelling, and paper-and-pencil questionnaires. The focus of our conversations will be what things are most on their minds and how they view themselves and their world. The confidentiality of the participants’ information will be maintained.

As I have worked with women in preparation for this study, they have found the activities of the study to be enjoyable, interesting, and useful. In many ways they have considered it a gift to themselves to take some time to get in touch with their experiences as growing persons and think about how parenting relates to their personal growth and development.

If you have any questions or want to pass the names of possible participants, I can be reached at 614-268-1080. Again, thank you for caring so much about parenting that you are willing to take the time to think about those who might qualify to participate.

Sincerely,

Kathy Shibley
Ph.D. Candidate
The Ohio State University
Newspaper Ad

First-time moms with new babies: A local parent educator is looking for volunteers willing to think about what being a mom really means to them and how being a mom may be affecting their own growth and development. This project is affiliated with Ohio State University and is supervised by Dr. Barbara M. Newman.

Moms of only children: A local parent educator is looking for volunteers willing to think about what being a mom really means to them and how being a mom may be affecting their own growth and development. This project is affiliated with Ohio State University and is supervised by Dr. Barbara M. Newman.
Newsletter Copy

If you are the mom of an only child and are either a stay-at-home mom or very minimally employed, Kathy Shibley, a local parent educator, would like to talk with you about an Ohio State University study about what being a mom really means to moms and how being a mom may be affecting the adult growth and development of moms. In order to participate in this project you must have only one child who is either a baby not more than 6 months old OR a four-year-old OR a 2nd, 3rd, 4th, or 5th grader. You must be married and have had some college (doesn’t matter how long you attended or whether you graduated). You must also be either unemployed or very minimally employed (10-12 hrs. per week is considered minimal). This study provides an opportunity to evaluate some interesting ways to think about the impact children can have on your adult development. Moms who have participated have found it enjoyable and useful for both their own growth and their parenting skills. If you qualify, please call Kathy at 614-268-1080. If you yourself do not qualify, please consider passing along the information to friends, relatives, and acquaintances that may qualify. Thank you for caring about parenting enough to take the time to think about possible participants in this project. This project is supervised by Dr. Barbara M. Newman.
APPENDIX B

PARENTAL SALIENCY “PIE”
The Pie

I'm interested in learning more about what your life is like right now. Please divide this pie into the important roles that you play in life. Each part of the pie should represent a role. Each part can be as large or as small as you think it actually is in your life. I do not mean large or small in terms of time spent, but rather large or small in importance to you. Please name each piece of your pie.

Name: ____________________________________________ Date: ___________
APPENDIX C

MEASURES OF PSYCHOSOCIAL DEVELOPMENT - SALIENCY (MPD-S)
Examples of Comparisons between Positive Items from the Measures of Psychosocial Development (MPD; Hawley, 1988) and Items from the Measures of Psychosocial Development–Saliency (MPD-S)

<table>
<thead>
<tr>
<th>MPD</th>
<th>MPD -S</th>
</tr>
</thead>
<tbody>
<tr>
<td>Directions: Tell whether each statement</td>
<td>Sort into 7 hierarchical categories indicating to what degree you</td>
</tr>
<tr>
<td>or phrase is like you (using a 5-point</td>
<td>think about these ideas or concepts at this time in your life.</td>
</tr>
<tr>
<td>Likert scale from “not at all” to “very</td>
<td></td>
</tr>
<tr>
<td>much”).</td>
<td></td>
</tr>
<tr>
<td><strong>Trust</strong></td>
<td></td>
</tr>
<tr>
<td>Calm, relaxed, easy going</td>
<td>To be calm, relaxed, easy going</td>
</tr>
<tr>
<td>Generally trust people</td>
<td>To generally trust people</td>
</tr>
<tr>
<td><strong>Autonomy</strong></td>
<td></td>
</tr>
<tr>
<td>Self-sufficient; stand on my own two feet</td>
<td>To be self-sufficient; stand on your own two feet</td>
</tr>
<tr>
<td>Make my own decisions</td>
<td>To make your own decisions</td>
</tr>
<tr>
<td><strong>Initiative</strong></td>
<td></td>
</tr>
<tr>
<td>Seek out new projects and undertakings</td>
<td>To seek out new projects and undertakings</td>
</tr>
<tr>
<td>Insist on setting goals and planning in</td>
<td>To insist on setting goals and planning in advance</td>
</tr>
<tr>
<td>advance</td>
<td></td>
</tr>
<tr>
<td><strong>Industry</strong></td>
<td></td>
</tr>
<tr>
<td>Eager to learn and develop my skills</td>
<td>To be eager to learn and develop your skills</td>
</tr>
<tr>
<td>Industrious, hardworking</td>
<td>To be industrious, hardworking</td>
</tr>
</tbody>
</table>
Identity

Have worked out my basic beliefs about such matters as occupation, sex, family, politics, religion, etc.

Clear vision of what I want out of life

Intimacy

Warm and understanding

Share my most private thoughts and feelings with those close to me

Generativity

Like taking care of people and things

Involved in service to others

Ego Integrity

Believe in the basic dignity of all people

Believe in the overall wholeness of life

To work out basic beliefs about such matters as occupation, sex, family, politics, religion, etc.

To have a clear vision of what you want out of life

To be warm and understanding

To share your most private thoughts and feelings with those close to you

To like taking care of people and things

To be involved in service to others

To believe in the basic dignity of all people

To believe in the overall wholeness of life

The MPD was adapted and reproduced by special permission of the Publisher, Psychological Assessment Resources, Inc., 16204 North Florida Avenue, Lutz, Florida 33549, from Measures of Psychosocial Development by Gwen Hawley, Ph.D., Copyright, 1980, 1984, 1988 by Psychological Assessment Resources, Inc. Further reproduction is prohibited without permission from PAR, Inc.
Q-Sort Directions
for the
Measures of Psychosocial Development-Saliency (MPD-S)

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Script for introducing the instrument:

I will walk you through the use of this instrument step-by-step.

You have before you 46 phrases on cards. Your job is to consider to what degree each phrase is something you often think about at this time in your life. I will guide you as you sort them into the ones that you do think often about or do not think often about.

Remember, I am not asking you whether you consider these phrases to truly describe you at this point in your life. For most people that varies from time to time in their lives. I am asking you to what degree you think about the ideas in these phrases, regardless of how well they actually do or do not describe you.

In working with a group:

Although several of you are here all using this same instrument, I will ask you to not discuss your responses or your thinking about the responses as you are using the instrument, because that might influence someone else’s responses or thinking.
DIRECTIONS:

It usually works best, if you do this sorting exercise on a table. First, lay out all 56 items in any order so that you can see them all. Then, proceed through the following steps which will guide you in arranging all 56 items into a seven-column layout as shown on the Results Layout Sheet.

Step 1: Read the 56 phrases and for each one consider: to what degree are you concerned about this, think about this, wish for this, or think this is important? Do not be particularly concerned about how much the phrase does or does not apply to you at this point in time. For most people that can vary from time to time in their lives. Instead, consider how much the phrase is relevant to your thoughts, wishes, and values right now for whatever reason.

Step 2: Out of all 56 phrases, select the five (5) that you most are concerned about, think about, wish for, or think is important. Line these up in column one. Their order within the column is not important.

Step 3: Out of the remaining 51 phrases, select the five (5) that you least are concerned about, think about, wish for, or think is important. Line these up in column seven. Their order within the column is not important.

Step 4: Out of the remaining 46 phrases, select the seven (7) that you most are concerned about, think about, wish for, or think is important. Line these up in column two. Their order within the column is not important.

Step 5: Out of the remaining 39 phrases, select the seven (7) that you least are concerned about, think about, wish for, or think is important. Line these up in column six. Their order within the column is not important.

Step 6: Out of the remaining 32 phrases, select the ten (10) that you most are concerned about, think about, wish for, or think is important. Line these up in column three. Their order within the column is not important.

Step 7: Out of the remaining 22 phrases, select the ten (10) that you least are concerned about, think about, wish for, or think is important. Line these up in column five. Their order within the column is not important.

Step 8: The remaining 12 phrases should be lined up in column four (the middle column). Their order within the column is not important.

When you have all 56 items arranged, transfer your arrangement to the Results Layout Sheet. Notice that each of your items has a number in the corner. Record that number for each of your items in the proper column on the Layout Sheet. Make sure you have placed exactly the right number of items in each column.
Measures of Psychosocial Development-Saliency (MPD-S) 
Results Layout Sheet

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Name: ___________________________ Sex: _______ Age: _______ Date: __________
Number of children: ___________ Ages of children: ___________________________

<table>
<thead>
<tr>
<th>Column One</th>
<th>Column Two</th>
<th>Column Three</th>
<th>Column Four</th>
<th>Column Five</th>
<th>Column Six</th>
<th>Column Seven</th>
</tr>
</thead>
<tbody>
<tr>
<td>(five items)</td>
<td>(seven items)</td>
<td>(ten items)</td>
<td>(twelve items)</td>
<td>(ten items)</td>
<td>(seven items)</td>
<td>(five items)</td>
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</tbody>
</table>

Each of your items has a number in the corner. That number from each of your items should be placed in a box below in its proper column so that this sheet looks just like your layout.

Return to:
Kathy Shibley
3590 Milton Ave.
Columbus, OH 43214
APPENDIX D

EXPERIENCE OF PARENTING INTERVIEW (EPI)
Experience of Parenting Interview (EPI)

This interview is intended to concentrate on things that you think and feel are important to you at this particular time in your life, the things that say something about who you are and how you became that person. I am not trying to figure out whether there is anything wrong with you nor help you figure out whether there is anything wrong with you. This interview is to gather information that will help me better understand parenting and adult growth and development. I think you will enjoy the interview. Others have said that has been true for them.

1. What has it been like to be a parent of an infant (or older child)?
2. What have you needed most during this period of your life?
3. What have your greatest strengths been as a parent of an infant (or older child)?
4. What have your greatest weaknesses been as a parent of an infant (or older child)?
5. As you see it, what have your friends, family, and society-at-large expected of you as a parent of an infant (or older child)?
6. What resources, both people and things, have been the most important to you during this period of your life?
7. Do you think you have changed as a person during this period of your life? If so, in what ways?
For the next part of our conversation, I want you to think of your life as a book with a story line, characters, plots, and so forth. There will be high and low points, good times and not so good times, heroes and villains, and so forth. Think of this period of your life while you are parenting an infant (or older child) as just one chapter of this book about your life.

8. What would be the title of this chapter of your life?

9. What would be a short summary of what would appear in this chapter?

Now I will ask you to concentrate on some key events that would be in this chapter, events that might stand out in bold print. Key events would not be described as “being pregnant,” “going on vacation,” or “a difficult school year” because those descriptors are too general and extend over a long period of time. Key events might be described as “the time I talked to Grandma about her childhood” or “the day I decided to send my child to preschool.” For each event, describe what happened, where you were, who was involved, what you did, what you were thinking and feeling, and the impact the event has had on who you are as a person.

10. Will you describe a particular “high point” experience that would appear in this (infant or older child) chapter of your life? A high point experience is one in which you experienced very positive emotion.
11. Will you describe a particular “low point” experience that would appear in this (infant or older child) chapter of your life? A low point experience is one in which you experienced very negative emotion.

12. Will you describe a particular “turning point” experience that would appear in this (infant or older child) chapter of your life? A turning point experience is a time when you underwent personal change, when you came to a new understanding of yourself. (If interviewee can’t think of a turning point, ask her to describe an event that is the closest thing to a turning point. If interviewee refers to the high or low point, ask her to choose another one. It is OK for her to repeat events that she described when she gave the summary of the chapter.)

13. What was the greatest challenge you faced in this (infant or older child) chapter? How have you faced or dealt with that challenge? Have others assisted you? How has this challenge made you the person you are?

14. Will you identify the single person, group, or institution that has had the most positive influence on this (infant or older child) chapter?

15. Will you identify the single person, group, or institution that has had the most negative influence on this (infant or older child) chapter?

16. What would be a positive description of the next chapter in your story? What positive future goals and dreams might you accomplish or realize in the next chapters of your story? Be reasonably realistic by suggesting things that you think could actually happen.
17. What would be a negative description of the next chapter in your story? What would you fear could be in the next chapter of your story, although you hope it won’t be? Be reasonably realistic by suggesting things that you think could actually happen even though you hope that they won’t happen.

18. What would be the main theme, message, or idea of this (infant or older child) chapter?

19. What else should I know to understand this period of your life story?

20. In reflecting back on what we have discussed, do you have any additional thoughts about what we have discussed?

Note: Questions 8-18 of the EPI were adapted from the life-story interview used by McAdams (1985, 1993).
APPENDIX E

ERIKSON PSYCHOSOCIAL ISSUE CODING SCHEME
Erikson Psychosocial Issue Coding Scheme

DIRECTIONS:

For each developmental issue, assign a value for each coding unit. Each coding unit will receive 8 code values, one for each developmental issue.

Values are as follows:
1 = No reference to the given developmental issue
2 = At least one reference to the given developmental issue

A given issue can be coded only once per coding unit regardless of how many references to a given developmental issue are present within the coding unit. For example, if a coding unit response includes a reference to getting enough sleep (a trust definitional concept), the issue of trust would receive a “2” for that coding unit. If that same coding unit response also includes a reference to needing to ask a spouse for help more often (another trust definitional concept), the issue of trust would still only receive a “2” for that coding unit since an issue can be coded only once per coding unit.

There may be coding units that are assigned no value because no references to any issues exist.
Erikson Psychosocial Issue Coding Scheme
6/29/99

Trust/Mistrust
The trust issue is defined in terms of the existence or non-existence of the following concepts or conditions. The trust issue is visceral, primitive and naive. It is about immediate needs. It is emotional. It is not particularly planful or cognitive. It encompasses a sense of mutuality that there is a synchrony between one’s needs and the ability of oneself and one’s world to fulfill those needs.

DEFINITONAL CONCEPTS: (includes concept listed and it’s opposite)

- Meeting personal needs
  - Knowing what one’s needs are; identifying them
    - Includes food, shelter, sleep, security, safety, interaction, unconditional love
  - Striving to get one’s needs met
  - Asking for help
  - Accepting help that is offered
  - Believing one’s needs are important; believing one deserves care
- Happiness, joy, calmness
- Belief that one is lovable and worthwhile
  - Is worthy to live
  - Deserves to be happy and have needs met
- Hopefulness
  - Expecting needs to be met
  - Ability to wait for need fulfillment
- Trusting oneself
  - Trusting one’s intuition or instincts
  - Being trustworthy
    - To perceive one’s sensory world
    - Ability to cope with own urges (cope is different than control)
    - Ability to meet own needs
- Trusting others
  - Expecting others to be helpful (related to hopefulness)
    - Includes trusting in a Supreme Being
  - Expect world to be stable and predictable
- Generosity
  - Ability to give to others because see own needs as met or hopeful that they will be met (related to hopefulness and ability to wait for need fulfillment)
- Comfort and joy with sensual, non-sexual contact
  - Includes hugging, touching, cuddling, enjoying warmth and softness of body contact

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Erikson Psychosocial Issue Coding Scheme
6/29/99

Autonomy/Shame and Doubt
The autonomy issue is defined in terms of the existence or non-existence of the following concepts or conditions. The autonomy issue is about establishing one’s will, doing one’s own thinking and feeling, and deciding whether that is OK and whether one can think and feel for oneself and still count on the love and care of others. It is about self-control and about coping with strong emotions.

DEFINITIONAL CONCEPTS: (includes concept listed and it’s opposite)

- Demandingness
- Wanting things done own way
  - Even if others disagree
- Behaving independently; doing things on own
  - Rejecting help so that one can do it on own
  - Pride and experience of doing something on one’s own
  - Not the not asking for help for fear of rejection that is associated with trust
  - Stand on own two feet
  - Self-sufficient
  - Self-reliance
- Shame
  - Feeling exposed
  - Self-consciousness
  - Needing to save face
  - Shame involves a public sense while guilt is a more private sense of badness
- Embarrassment from behaving in stupid, thoughtless, clumsy way
- Doubtful
  - Uncomfortable with the unknown; worrying about what is unseen
  - Uncomfortable with the prospect of failure
  - Second-guessing
- Exercising one’s will
  - Directing and controlling one’s own action
  - Wish to have a choice and not have that wish cut one off from care
  - Hard to make up my mind
  - Make own decisions; comfort in role as decision maker
  - Do what want
  - Control own life
- Persistence
  - Inner determination to set goals and persistence to achieve them
Autonomy/Shame and Doubt (continued)

- Self control
  - Patience in terms of not losing temper
  - Also over-control as in compulsive or obsessive thinking or behavior
- Self-confidence
  - Don’t feel confident in my role as decision maker
- Using thinking and creativity to solve problems
- Test reality; push against boundaries
- Deal with feelings
  - Anger
- Following advice
  - Overadaptive
  - Rebellious
- Saying no or yes without thinking
  - Fear of saying no; allowing others to dominate
- Rather be right than successful
Erikson Psychosocial Issue Coding Scheme
6/29/99

Initiative/Guilt
The initiative issue is defined in terms of the existence or non-existence of the following concepts or conditions. The initiative issue is about identifying who one is and how one will interact with one’s world. It includes deciding how one must relate to others in order to get needs met, what the parameters are of one’s personal power, how one will relate to authority, and establishing a voice of conscience.

DEFINITIONAL CONCEPTS: (includes concept listed and it’s opposite)

- Imposing self on one’s social world
  - Asserting one’s presence
  - Self-conscious and restrained in action
  - Passive self-protective approach
  - Showing purpose
    - Imposing intention and goals on action
  - Pleasure in attack and conquest
  - Believe aggression helpful
  - Identity separate from others
  - Discover effect on others
  - Practice socially appropriate behavior
  - Competition
- Active conceptual investigation of the world
  - Discovering how things work
    - Inventing
    - Building, making
    - Asking
  - Curiosity; experimentation
  - Directed, action-oriented problem solving
  - Finding out about new things places
  - Seek new projects
  - Set goals and plan in advance
  - Like getting things started
  - Like to experiment and try new things
  - Innovating; taking the risk to creatively look at things a different way and use creativity and innovation as a way to investigate possibilities
  - Acquire info about world

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Erikson Psychosocial Issue Coding Scheme (6/29/99)

Initiative/Guilt (continued)

- Leadership
  - Depending on direction from others
  - Assuming responsibility
  - Follower rather than leader
- Guilt
  - Recognition and responses to taboos
  - Over goals contemplated and actions taken in exuberance of power
- Rigid moral code
  - Inhibition, suppression, restraint of behavior
  - Evidence of the “Parent” or “Superego”
  - Self observation
  - Self-guidance
  - Self-punishment
  - Conscience development
  - Think basically bad
- Power/authority issues
  - Concern over clearing the field of those who might have more power/authority
  - Learn to exert power/authority to affect relationships
  - Learn extent of personal power
  - Having to be in position of power/authority
  - Afraid of or reluctant to use power/authority
  - One-upmanship
- Risk taking
- Adventurous
- Separate fantasy and reality
  - Wanting magical solutions
Erikson Psychosocial Issue Coding Scheme
6/29/99

Industry/Inferiority
The industry issue is defined in terms of the existence or non-existence of the following concepts or conditions. The industry issue is about becoming a competent doer in one’s world. It involves learning and using skills and understanding the rules and structure of one’s world.

DEFINITIONAL CONCEPTS: (includes concept listed and it’s opposite)

• Attitudes toward work
  • Love of learning and work
  • Apathy, disinterest, inertia
  • Lack of energy (fatigue), enthusiasm (boredom) or confidence for action
  • Procrastination
  • Aimlessness
  • Doing more than just getting by
• Ego boundaries include tools and skills
  • Tools and skills become measure of worth and power
  • Eager and absorbed unit in a productive situation
    • Eagerness to perform meaningful work
• Striving for success
  • External sources of reward
  • Win recognition by producing things
  • Trying to achieve goals
• Acquiring skills and knowledge, especially in socially valued areas
  • Desire to know
  • Eager to learn skills
  • Learn from mistakes
• Showing personal standards of evaluation
  • Social comparison
  • Test abilities against others
• Competence
  • Effectiveness
  • Mastery
  • Self-efficacy
  • Decide to be adequate
Erikson Psychosocial Issue Coding Scheme (6/29/99)

Industry/Inferiority (continued)

- Applying skills and knowledge
  - Exercising dexterity and intelligence
  - Bringing a productive situation to completion
    - Pleasure in work completion
  - Useful to have around
  - Proud of skills and abilities and efforts
  - Provider
- Inadequacy; inferiority
  - Not good at things needing brains or skill
- Industrious; hardworking
  - Waste time
  - Productive; accomplish much
- Check out rules
  - Learn relevancy of rules
  - Experience consequences of breaking rules
Erikson Psychosocial Issue Coding Scheme
6/29/99

Identity/Identity Diffusion
The identity issue is defined in terms of the existence or non-existence of the following concepts or conditions. The identity issue is about making stable commitments to persons, ideas, and values. It involves decisions about how one will fit into his/her world in terms of self-view and roles one will play. It includes decisions about one’s sexuality and physical attractiveness. It includes one’s responses to separation from persons, relationships, or roles.

DEFINITIONAL CONCEPTS: (includes concept listed and it’s opposite)

- Important things in life clear
- Emotional separation from parents
  - Overdependence or alienation from family and friends
  - Problems with starting and ending jobs, roles, relationships
  - Integrate past identifications with future aspirations and current cultural issues
- Have thoughts, values, beliefs and characteristics that are self recognizable
  - Worked out basic beliefs about occupation, sex, family, politics, religion
  - Unsure of own values; vulnerable to peer pressure
  - Can recognize roles one plays
- Has sense of being the originator of one’s thoughts and actions
  - Responsible for own needs, feelings and behaviors
- Sense of continuity and sameness within oneself
  - Change my opinion of self often
- Has boundaries between self and others
  - Appreciate own uniqueness
  - Looks to others for definition of self
- Ability to self reflect to recognize own thoughts and actions
  - Ability to synthesize the roles one plays with private, internal view of self
- Evaluate the significance of thoughts, values, beliefs and characteristics
- Occupational, ideological, and interpersonal commitments
  - Connecting learned skills and roles to occupations
  - Stand up for what believe even in adversity
  - Trouble making and keeping commitments
  - Develop causes, interests, relationships
-Ability to integrate various roles
- Having a hold on self and future
  - Clear idea what want to be and want to get out of life
  - Got it together
  - Feel mixed up
  - Found place in world

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Erikson Psychosocial Issue Coding Scheme (6/29/99)

Identity/Identity Diffusion  (continued)

- Repudiation of ideas values and groups that don’t agree with own
- Concern over how appear to be compared with how really are
  - Keep up a front
  - Others see you as see yourself
- Know what kind of person I am
  - Like myself and proud of what stand for
- Preoccupation with sex, body, clothes, appearance, friends, sex role
  - Confuses sex with nurturing
  - Unsure of maleness or femaleness
Erikson Psychosocial Issue Coding Scheme

6/29/99

Intimacy/Isolation
The intimacy issue is defined in terms of the existence or non-existence of the following concepts or conditions. The intimacy issue is about revealing one’s authentic self to others and expecting others to accept both one’s strengths and weaknesses. It is also about comfort with others revealing their true selves and being able to accept their strengths and weaknesses. Although it includes sexual intimacy it is more expansive to include a more complete physical and emotional intimacy or connection.

DEFINITIONAL CONCEPTS: (includes concept listed and it’s opposite)

- Open to close physical and emotional relationship without losing own identity
  - Self abandon without fear of loss of ego
  - Won’t get too involved with people
  - Comfortable in close relationships
- Permits independent judgment
- Willing to give and take in close relationships
- Discloses thoughts and feelings
  - Avoiding conflict
  - Repressing own views
  - Putting on false front
  - Embarrassed when someone tells personal things
  - Prefer to not show too much of self to others
  - Share private thoughts and feelings
  - Others understand you
- Shares and develops ideas and plans with others
- Perceives mutual enrichment due to relationship
- Forms intimate relationships with those outside own family of origin
  - Solidarity of “us” and defense against “them”
- Considers relationship irreplaceable
  - Jealousy
  - Sense of competing alliances because
- Isolation
  - Lack of shared meaning
  - Loneliness
  - Maintaining unattainable standards about who one will relate to or about whether one qualifies for others to relate to.
  - Self absorption
  - A loner

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Intimacy/Isolation (continued)

- Lack of libido
  - Compulsive sexual behavior
  - Satisfying sexual relations
- Enmeshment; over involvement
- Love
  - Passionate expressing of physical and psychological needs and desires
  - Cognitive commitment to remain in relationship
  - Promoting welfare of loved one
  - Experiencing happiness with loved one
  - Having high regard for loved one
  - Having mutual understanding
  - Sharing self and possessions
  - Giving emotional support
  - Carrying on intimate communication
  - Valuing loved one in one's own life
- Exclusivity of shutting others out of one's life
  - Limiting new information
  - Restricting movement in social environment
- Warm, understanding, and friendly
  - Easy to make friends
  - Be there when friends need you
  - Empathy centering on shared feelings
Erikson Psychosocial Issue Coding Scheme
6/29/99

**Generativity/Stagnation**
The generativity issue is defined in terms of the existence or non-existence of the following concepts or conditions. The generativity issue is about becoming other-centered and turning one’s interests to the next generation. It involves sharing one’s self with the world, sharing one’s worldview. This can be done through rearing a family, creative pursuits, or leadership roles in the work world. This issue is about feeling like one is moving forward in the circle of life rather than remaining stagnant at the crest of the cycle.

**DEFINITIONAL CONCEPTS:** (includes concept listed and it’s opposite)

- Directing a course of action in one’s own life and other’s lives
  - Self generation concerned with further identity development
  - Personal strivings for generative goals
  - Expansion of ego interests
    - Find new avenues of self-fulfillment
- Pressure to improve life conditions of future generations
  - Maintaining the world
  - Being concerned
  - Realizing opportunities and confidence in capacity to have an impact
  - Improving environment
  - Repairing
  - Obligation to contribute to society
  - Prosocial
  - Making a lasting contribution
    - Proud of what I’ve accomplished
    - Desire to have impact on world and setting such goals
    - Metacognition about assessing/judging whether have made a difference
    - Sense of own generative accomplishment; leaving a mark on world
  - More important to work for others than just self
    - Involved in service to others
    - Faith in future
    - Belief in species
- Procreativity
  - Bringing into existence
  - Establishing and guiding the next generation
- Productivity with emphasis on fact that one is producing something rather than the quality or quantity of producing that is the emphasis in industry
Erikson Psychosocial Issue Coding Scheme (6/29/99)

Generativity/Stagnation (continued)

- Creativity
  - Invention
  - Innovating
  - Act of creating, making something new
- Nurturing
  - Like taking care of people and things
  - Doing for
  - Care not to harm
- Empathy that is an appreciation and concern for the circumstances of others
- Teaching
  - Expanding knowledge
- Recognition of mortality
- Stagnation
  - Lack of psychological movement or growth
  - Stuck in an unsatisfying job
- Narcissistic
  - Self absorbed
  - Self aggrandizement
  - Accumulating wealth and possessions and people who will serve oneself
  - Self indulgence
- Rejecting persons who threaten one’s circle of care
  - Aggression toward threats to one’s circle of care
Erikson Psychosocial Issue Coding Scheme
6/29/99

**Ego Integrity/Despair**
The integrity issue is defined in terms of the existence or non-existence of the following concepts or conditions. The integrity issue is about life review and the wisdom that living life can bring. This involves decisions about satisfaction of life, the meaning of life, and a commitment to stay involved with life and share the wisdom learned and earned.

DEFINITIONAL CONCEPTS: (includes concept listed and it’s opposite)

- Life review
  - Assessing the meaning of life given the reality of death
  - Accepting facts of one’s life and death without fear
  - Integrating the past with present and being content with the outcome
  - Despair over what won’t be accomplished
  - Regret about the past
  - Desire to do life over
  - Bitterness over how life turned out
  - Speculate how life might have been
  - Acceptance of one’s life cycle as having to be
  - Defending dignity of own life style
  - Achievements and failures a consequence of own actions
  - At peace with one’s life
  - Parents did best they could
  - Wouldn’t change own life
  - Need to make up for lost time
  - Regrets about what one could have become
  - Sorry about life
- Concern for meaning of life
  - Believe in dignity of all people
  - Believe in wholeness of life
  - Believe life has meaning
  - Spiritual sense
  - Akin to all humankind; past, present, future
    - Part of larger history including prior generations
- Self evaluation
  - Devaluation of self
  - Deterioration of abilities
Erikson Psychosocial Issue Coding Scheme (6/29/99)

Ego Integrity/Despair (continued)

- Attitude toward death
  - Seeking death
  - Fearing death
  - Afraid of growing old
- Wisdom
  - Desire to learn and communicate essential lessons from experience
  - Expert knowledge
  - Factual knowledge
  - Procedural knowledge; strategies for coping with life
  - Having a lifespan contextualism; events happen in a context within history
  - Allowing and appreciating differences while preserving core universal values
  - Recognition and management of uncertainty
  - Flexible thought
    - Openness to new interpretation
    - Accepting the complexity of life
  - Have wisdom and experience to help others
- Detached concern for life
- Disdain
  - Arrogance that one’s own ideas are superior
  - Rejection of other’s ideas
  - Contempt
  - Disgust
  - Despair
- Detaching from world around self
- Post-narcissism
APPENDIX F

PROFILE QUESTIONNAIRE
The Personal Development of Mothers
Profile Questionnaire

Thank you for participating in this study about how parenting impacts the personal development of mothers. The following questions are designed to help the guiding researcher for this study determine whether certain characteristics and circumstances of the participants might affect the results of the study. All answers to these questions will be treated confidentially. All participants will remain anonymous in any verbal or written reports of this study.

Name: ___________________________ Date: ___________________
Address: __________________________
Phone Number: __________________ Race: __________________________
Age: __________________ Marital Status: __________________ How long have you been married? ______
Are you currently married to the father of your child? ______
Highest grade completed in school: __________________

Number of children: __________ Name of your child: __________________
Age of child: __________ Sex of child: __________________
Would you say that your pregnancy for this child was: planned ______ unplanned _____
Did you experience any complications in your pregnancy or the birth of this child? ______

Were you in the workforce prior to the birth of this child? ______
Have you returned to the workforce since the birth of your child? ______
Are you currently in the workforce? ______
If not, how long have you been out of the workforce? ______
Do you plan to return to the workforce and if so, approximately when? ______

How would you rate the amount of support that is available to you concerning your parenting? This would include support that is available from your husband, family, friends, and professionals. Examples of possible support could be offerings of baby supplies, babysitting, or the moral support of having people available to talk about issues or to answer questions. Consider how available this support is, even if you have not used it or needed it.

considerable amount ______ moderate amount ______ very little ______

Have you experienced any major transition in your life during the past year or so (for example, a move to a new neighborhood, serious health issues, a new school for your child, etc.)? Yes ______ No ______ If yes, please explain. ______
APPENDIX G

CONSENT FORM
CONSENT FOR
PARTICIPATION IN SOCIAL AND BEHAVIORAL RESEARCH

I consent to participating in research entitled:

The Personal Development of Mothers

Kathleen Shibley, the authorized representative of Dr. Barbara M. Newman, has explained the purpose of the study, the procedures to be followed, and the expected duration of my participation. Possible benefits of the study have been described.

I acknowledge that I have had the opportunity to obtain additional information regarding the study and that any questions I have raised have been answered to my full satisfaction. Further, I understand that I am free to withdraw consent at any time and to discontinue participation in the study without prejudice to me.

I agree to the audiotaping of my participation in this study. I understand that such tapes will be used only for the researchers to review the information, that they will be treated confidentially, and that they will not be used in any public way. I further understand that the tapes will remain in the possession of Kathleen Shibley for three years following the conclusion of the study after which they will be destroyed.

Finally, I acknowledge that I have read and fully understand the consent form. I sign it freely and voluntarily. A copy has been given to me.

Date: ________________________________

Signed: ________________________________ (Participant)

Signed: ________________________________

Barbara M. Newman, Ph.D.
Principal Investigator

Witness: ________________________________

Kathleen Shibley
LIST OF REFERENCES


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