

Teacher-reported problem behaviour in Turkish immigrant and Dutch children: a cross-cultural comparison

Crijnen AAM, Bengi-Arslan L, Verhulst FC. Teacher-reported problem behaviour in Turkish immigrant and Dutch children: a cross-cultural comparison.

Acta Psychiatr Scand 2000; 102: 439–444. © Munksgaard 2000.

Objective: To compare problem behaviour in Turkish immigrant children living in the Netherlands versus problem behaviour in Dutch children from the general population as reported by teachers.

Method: Teacher's Report Forms (TRF) were filled out by Dutch teachers, and for a subsample also by Turkish immigrant teachers, concerning 524 Turkish immigrant children selected randomly from the immigrant population in two large cities in the Netherlands. TRFs completed for Turkish immigrant children were compared with TRFs filled out for 1625 children selected randomly from the Dutch general population.

Results: No significant differences were revealed between children from both cultures on the TRF total problems, internalizing, externalizing and specific syndrome scales. Turkish immigrant teachers, however, reported higher total problems, internalizing and anxious/depressed scores for immigrant children than did Dutch teachers for the same immigrant children.

Conclusion: No significant differences were found in the levels of behavioural and emotional problems reported by Dutch teachers for Turkish immigrant versus Dutch children. However, Turkish immigrant teachers reported high levels of anxiety and depression in immigrant children which go largely undetected by their Dutch teachers.

**Alfons A. M. Crijnen,
Leyla Bengi-Arslan,
Frank C. Verhulst**

Sophia Children's Hospital, Department of Child and Adolescent Psychiatry, Erasmus University, Rotterdam, the Netherlands

Key words: cross-cultural comparison; immigration; child behaviour; adolescent behaviour; anxiety; Teacher's Report Form (TRF)

Alfons Crijnen, Sophia Children's Hospital, Department of Child and Adolescent Psychiatry, Erasmus University, PO Box 2060, 3000 CB Rotterdam, the Netherlands

Accepted for publication June 26, 2000

Introduction

The increase in the number of Turkish immigrant children in Dutch society and the realization that they fare less well in school than Dutch children justify a closer examination of their behavioural and emotional adjustment. Turkish immigrant children in the Netherlands, however, form only a small part of the millions of children cast into unfamiliar cultural environments due to immigration or flight. Information on how all these children adapt to their host cultures and the problems they are faced with is limited. The current study examines Turkish immigrant children's behavioural and emotional problems in school by comparing teacher reports about these problems for Turkish immigrant children with teacher reports for a representative sample of Dutch children. The study informs teachers, mental health workers and policy

makers on how immigrant children may adapt to changing cultural environments.

In recent years, the number of Turkish immigrant children in the Netherlands has increased considerably. In the late 1970s and 1980s, children and women followed the Turkish men who came to the Netherlands as part of the labour force in the years previously; families were reunited and new families started. Now the 264 000 Turkish immigrants form the second largest immigrant population in the Netherlands. Fifty-five per cent of these immigrants are younger than 25 years which is considerably more than the 32% individuals younger than 25 years in the Dutch general population.

With the arrival of these children an appeal was made to teachers, health and mental health professionals to adjust their programmes for these children. Turkish immigrant children appeared to

fare less well than Dutch children: they leave elementary school at a later age than Dutch children, fewer complete a higher level secondary school, and more drop out of school than do Dutch children. On the job market, 15–25-year-old Turkish immigrants are overrepresented. Nevertheless, the level of unemployment for this group of youngsters is twice as high than for Dutch youngsters.

In our study on parent-reported problems of Turkish immigrant children, problem scores of Turkish immigrant children were compared with those reported for children living in Ankara, Turkey, as well as Dutch children (1). More problems were reported for Turkish immigrant children versus children living in Ankara, Turkey or the Netherlands: Dutch children obtained the lowest scores, Turkish children higher, and Turkish immigrant children in the Netherlands obtained the highest scores. The differences were most pronounced on the CBCL/4–18 anxious/depressed syndrome (2). On the somatic complaints syndrome, however, immigrant children were scored lower than Turkish children and on the delinquent behaviour syndrome, immigrant children did not differ from Dutch or Turkish children.

In the study presented here, Dutch teacher's reports on Turkish immigrant children living in the Netherlands were compared to Dutch teacher's reports on Dutch children. Also, for a subsample of Turkish immigrant children, Dutch teacher's reports were compared with reports on the same children obtained from Turkish immigrant teachers.

Material and methods

Instrument

To obtain standardized teacher reports about problem behaviour of Turkish immigrant children and Dutch children the Teacher's Report Form [TRF (3)] was used. The TRF instructs teachers to rate children's problems on 120 problem items. The TRF was translated into Dutch (4) and Turkish (5). The Dutch and Turkish translations were as close as possible to the original TRF, and the method of back-translation was used to check the wording of the items.

The problem items are scored by the teacher as 0 = not true, 1 = somewhat or sometimes true, and 2 = very true or often true, based on the preceding 2 months. The problem items were grouped into eight syndromes: withdrawn, somatic complaints, anxious/depressed, social problems, thought problems, attention problems, delinquent behaviour, and aggressive behaviour. The withdrawn, somatic complaints and anxious/depressed scales form the

internalizing scale, whereas the externalizing scale is constructed by summing scores on the delinquent behaviour and aggressive behaviour scales. The total problem score is computed by summing the scores for all problem items on the TRF (3).

Samples

Turkish immigrant children Four 17-year-old Turkish immigrant children were randomly selected from the municipal registers of two cities in the Netherlands. The selection procedure has been described by Bengi-Arslan et al. (1). Children were selected if at least one parent was born in Turkey. Usable Child Behaviour Checklists filled out by parents or parent-surrogates (CBCL/4–18) were obtained for 833 (68%) children of 1218 children eligible for participation in this study. For 524 (63%) of these 833 children TRFs were filled out by their teachers. The sample of children on whom a TRF was completed did not differ significantly from the sample on whom no TRFs were available regarding gender and level of parental education, but it included less children from ages 15–17, and no children of 18 years and older, $\chi^2(5, n=833)=25.53, P<0.001$. Also, CBCL total problem scores were not significantly different for children with or without TRF. These 275 boys and 249 girls were on average 10.3 (SD 3.4) years old.

In addition, for immigrant children who followed Turkish language and culture classes for 2.5 hours per week, a second TRF was filled out by the Turkish teacher. Most of these classes were given in primary school and a few in the first grades of secondary school. For 221 (42%) of the 524 Turkish immigrant children with available TRFs, the additional TRF completed by the Turkish teacher was available. The sample with both Dutch and Turkish TRFs did not differ from the children having only Dutch teacher-reports regarding gender and level of parental educational but the sample included, as expected, less children at ages 13–17, $\chi^2(4, n=524)=94.67, P<0.001$. This sample of children was on average 8.7 (SD 2.5) years old.

Dutch children The Dutch national sample was selected in a multistage cluster and random sampling design. Details of sampling and procedures are described by Verhulst et al. (6). From 2227 children participating in the national study, 2081 children with Dutch nationality were selected for inclusion in the present study. For 1625 of these children, usable TRFs were filled out by their teachers. The sample of children with completed TRFs was not significantly different from the sample of children without teacher reports with regard to gender and level of parental

education. However, as expected, for older children significantly less TRFs were filled out, $\chi^2(5, n=2081)=60.10, P<0.001$. These 818 boys and 807 girls were on average 10.5 (SD 4.0) years of age.

Results

Differences between TRF scales for Turkish immigrant and Dutch children were tested. Children were grouped according to the following age-intervals: 4–5, 6–8, 9–11, 12–14, 15–17 and 18 and older. Parental education was used as indicator of socioeconomic status (SES). Fathers and mothers were requested to indicate the level of education they had completed. The highest educational level of either father or mother was scored originally on a five-point scale which was reduced to a two-point scale for application in ANOVAs. A low level of parental education referred to no schooling, incomplete or complete elementary school and lower level secondary or lower level professional education; a high level of parental education referred to medium and high level secondary or professional education and university.

Scores on each of the scales for Turkish immigrants and Dutch children were compared through analyses of variance (ANOVA) in a 2 (Turkish immigrant versus Dutch) \times 2 (gender) \times 5 (ages 4–5, 6–8, 9–11, 12–14, 15–17) \times 2 (low versus high level of parental education) factorial design. As 43 TRFs of 18 years and older Dutch adolescents were excluded from the analyses because no TRFs of Turkish immigrant adolescents were available for comparison, and because information about parental education was missing for nine children, TRFs for 2097 children were available for analyses.

To test differences in problem scores obtained from Dutch and Turkish teachers, we performed repeated-measures ANOVAs that directly compared Dutch and Turkish teachers' reports for those children on whom both reports were available. Children's gender and level of parental education were taken into account. Repeated-measures ANOVAs were carried out for each of the scales in a 2 (gender) \times 2 (low and high level of parental education) factorial design ($n=221$).

Because of the high statistical power that was achieved, effects are only reported as significant if $P<0.01$. Furthermore, significance levels of parameter estimates are reported after applying Bonferroni corrections for the number of comparisons actually made. Effect sizes (ES) are evaluated according to Cohen's criteria (7) as small (1–5.9% of variance), medium (5.9–13.8%) or large (13.8% or more).

The sample of 522 Turkish immigrant children and 1575 Dutch children ($n=2097$) spanning ages 4–17 for whom TRF scores and parental education scores were available did not differ regarding gender, but the samples were significantly different with regard to age distribution, $\chi^2(4, n=2097)=21.6, P<0.01$ and level of parental education, $\chi^2(1, n=2097)=305.7, P<0.01$. The Turkish immigrant sample included more 11–14-year-old children and less 4–5-year-old and 15–17-year-old children. In the Turkish immigrant sample, 68% of the parents achieved a low and 32% a high level of education compared to 26% and 74% in the Dutch sample.

Turkish immigrants versus Dutch children

ANOVAs revealed no significant culture effect on any of the TRF scales, indicating that no differences in the level of problem behaviours between Turkish immigrant and Dutch children were found. Significant gender effects indicating higher score for boys versus girls were found for the total problems, externalizing, attention problems, delinquent behaviour and aggressive behaviour scales. Effect sizes were small according to Cohen's criteria (7), or were less than 1%. No significant effects were found for age. SES effects, indicating higher problem scores for lower versus higher SES, were found for total problems, withdrawn, social problems, attention problems and delinquent behaviour. Effect sizes were small according to Cohen's criteria or were less than 1%. Gender \times age interactions for the externalizing and aggressive behaviour scales were significant, indicating that the difference between boys versus girls was most pronounced for 9–11-year-olds and smallest for 15–17-year-olds.

Dutch versus Turkish teacher reports on Turkish immigrant children

Repeated-measures ANOVAs revealed, in addition to the main effects described above, three significant effects indicating differences between the Dutch versus Turkish teacher scores: a large effect (ES 20%) for anxious/depressed, a medium effect (ES 11%) for internalizing and a small effect (ES 5%) for total problem score, with Turkish teachers reporting higher levels of problems than Dutch teachers (Table 1).

To study the differences between Turkish versus Dutch teacher's scores on the anxious/depressed scale in more detail, repeated-measures ANOVAs were carried out for each of the 18 items comprising the anxious/depressed scale. On eight items (indicated in Table 1), Turkish teachers scored Turkish immigrant children higher than Dutch teachers. The

Table 1. TRF anxious/depressed items for which significant effects ($P < 0.01$) between Turkish versus Dutch teachers reporting about Turkish immigrant children were found

TRF anxious/depressed items showing significant difference	Effect sizes	
Overconfirms to rules	38%	Large
Feels hurt when criticized	18%	Large
Fears (s)he might think or do something bad	16%	Large
Overly anxious to please	16%	Large
Feels (s)he has to be perfect	14%	Large
Is afraid of making mistakes	7%	Medium
Self-conscious or easily embarrassed	6%	Medium
Feels too guilty	5%	Small

Turkish teachers scored higher than Dutch teachers.

largest difference was for the item *overconfirms to rules* (ES 38%).

Discussion

Our comparison of teacher-reported problem behaviour in Turkish immigrant and Dutch children revealed no significant differences between both groups of children on any of the 11 TRF scales. A significant SES effect was found for the total problems, withdrawn, social problems, attention problems and delinquent behaviour scales, indicating higher levels of teacher-reported problems for children whose parents had a low level of education versus children of parents with high levels of education. In our sample, significantly more Turkish immigrant parents (68%) than Dutch parents (26%) achieved only a low level of education.

Cultural variation was revealed when scores from Dutch versus Turkish immigrant teachers obtained for the same children were compared. Immigrant teachers scored immigrant children higher on the total problems, internalizing and anxious/depressed scales than Dutch teachers. Inspection of the items of the anxious/depressed scale scored particularly highly by Turkish immigrant teachers revealed that, according to the Turkish teachers, immigrant children seemed to be especially worried about whether they can perform according to the expectations they perceive and whether they conform to the rules. This finding corroborates the finding in our earlier study, in which we compared parent-reported problems in Turkish immigrant, Turkish and Dutch children: Turkish immigrant children were scored higher on the anxious/depressed scale than both Dutch and Turkish children (1). The high scores on the anxious/depressed scale were explained in that study by cultural differences in parental perception of children's problem behaviour, by differences in the threshold for reporting them, or by differences in prevalence rates in the different cultures.

Why are immigrant children scored higher by Turkish immigrant teachers than by their Dutch teachers on anxious/depressed problems? Teachers and parents both overestimate immigrant children's proficiency in Dutch: their interpersonal communicative skills are sufficiently developed to function well on daily tasks in the class but their academic language proficiency is relatively poor. Turkish immigrant children start elementary school with a 0.5–2 years' language arrears when compared to Dutch children. These children have problems keeping up with instruction but they will not ask for additional teaching, partly because they want to comply to the norms and partly because they lack the confidence and the vocabulary to do so. As a result the academic achievement of Turkish immigrant children is generally poorer than that of Dutch children. This process enhances feelings of distress and anxiety. At the same time, parents cannot support their children sufficiently because they do not understand Dutch and have only limited or even lacking educational experiences themselves. Many parents hope that their children will fare better than they did themselves, which may lead to expectations that are beyond a child's capabilities. The lack of adequate parental support and the high expectations add further to these feelings of distress.

Turkish immigrant teachers may be better informed than their Dutch colleagues about their students' emotional functioning even though they have far less opportunities to speak with them than Dutch teachers. The disclosure of anxiety and worries appears to be facilitated when children can report in their first language. Immigrant teachers, on the other hand, might also be more sensitive to the stresses that these children experience because they experienced these phases themselves.

An alternative explanation is that the teaching style used by immigrant teachers at the time of the study induced high levels of distress in immigrant children. Similar to Turkish parents, Turkish teachers exhibit a relatively authoritarian parenting style (8, 9) which contrasts with the more lenient style used by Dutch teachers. Immigrant children are used to the teaching style of their Dutch teachers and have to adjust to the methods used by immigrant teachers during only a few hours a week. The temporal adjustment may lead to feelings of insecurity and anxiety.

Lower SES appeared to be associated with higher scores on withdrawn and social problems scales as well as on attention problems and delinquent behaviour scales, and total problems. In studies with the TRF and studies with the CBCL similar results were obtained with higher

total problem scores for lower SES children (10–12). The number of parents with low SES in the Turkish immigrant sample (68%) exceeds the number of Dutch parents (26%) by far, which still reflects economic deprivation as the main reason for migration. When higher levels of teacher-reported problem behaviour are observed they should therefore be attributed to socio-economic disadvantage and poorer levels of parental education in the immigrant population rather than to cultural differences *per se*.

One of the problems in cross-cultural comparisons is that differences between cultures may reflect differences in thresholds for reporting certain types of problem behaviour rather than differences in the prevalence of problem behaviour (13–15). This problem was overcome in the current study by comparing reports given by teachers with a similar cultural background about children from two different cultural backgrounds. Specifically, reports by Dutch teachers on Turkish immigrant children were compared to Dutch teacher-reports on Dutch children.

However, teacher-reports on observable behaviour in immigrant children, such as, for example, externalizing behaviour, are probably more accurate than reports on children's internal state, such as emotions, fears and thoughts. The language and cultural barriers between teachers of the host culture and Turkish immigrant children seem to hinder the appropriate expression of internalizing problems by immigrant children and the perception of these problems by their teachers. This does not hold for Dutch teachers reporting on Dutch children, because it was shown that teacher's evaluations of internalizing problems were highly relevant for predicting children's own perceptions of having emotional problems (16).

The number of children in each of the different age-groups for whom TRF scores were available was different in both samples with less immigrant children at younger and older ages. The lack of immigrant children at younger ages is probably an artefact of the recruitment procedure, because a time lag occurred between the moment of inclusion in the study and actual recruitment. Although this is not compulsory, many immigrant parents will bring their children to kindergarten at the age of 4, just as Dutch parents do. However, the smaller number of adolescents with TRF scores reflects differences in the school careers of Dutch and Turkish immigrant youth. In particular, boys leave school early and at a low level of academic achievement to find a job and to be financially independent, which is considered in the Turkish culture as an indication of the achieve-

ment of manhood. This leads to the earlier-mentioned overrepresentation of Turkish adolescents on the job market as well as, due to the early arrest in school career, the high levels of unemployment.

Finally, it was concluded that this cross-cultural comparison of teacher-reported problem behaviour in Dutch and Turkish immigrant children and adolescents revealed no significant differences between both populations. Low socioeconomic status was associated with higher levels of problem behaviour; many more Turkish immigrant (68%) than Dutch (26%) children are from a low SES background. Also, higher levels of anxiety and depression were revealed when scores about the same child given by Turkish immigrant teachers and Dutch teachers were compared. However, these heightened levels of anxiety and depression in Turkish immigrant children go largely undetected by their teachers.

Acknowledgments

This study was supported by the Educational Deprivation Foundation Rotterdam (FAO) and the Sophia Foundation for Medical Research (SSWO). The authors gratefully acknowledge the children's teachers, who filled out so many questionnaires.

References

1. BENGI-ARSLAN L, VERHULST FC, VAN DER ENDE J, EROL N. Understanding childhood (problem) behaviors from a cultural perspective: comparison of problem behaviors and competencies in Turkish immigrant, Turkish and Dutch children. *Soc Psychiatry Psychiatr Epidemiol* 1997;**32**:477–484.
2. ACHENBACH TM. Manual for the Child Behavior Checklist/4–18 and 1991 profiles. Burlington, VT: University of Vermont Department of Psychiatry, 1991.
3. ACHENBACH TM. Manual for the Teacher's Report Form and 1991 profile. Burlington, VT: University of Vermont Department of Psychiatry, 1991.
4. VERHULST FC, VAN DER ENDE J, KOOT HM. Handleiding voor de Teacher's Report Form (TRF) (Manual for the Teacher's Report Form (TRF)). Rotterdam, the Netherlands: Sophia Children's Hospital, 1997.
5. EROL N, BENGI-ARSLAN L, AKCAKIN M. The adaptation and standardization of the Child Behavior Checklist among 6–18-year-old Turkish children. In: SERGEANT J, ed. *Eunethydis: European approaches to hyperkinetic disorder*. Zurich: Fotorotar, 1995.
6. VERHULST FC, VAN DER ENDE J, FERDINAND RF, KASIUUS MC. The prevalence of DSM-III-R diagnoses in a national sample of Dutch adolescents. *Arch Gen Psychiatry* 1997;**101**: 329–336.
7. COHEN J. *Statistical power analyses for the Behavioral Sciences*, 2nd edn. Hillsdale, NJ: Erlbaum, 1988.
8. HOFSTEDE G. *Cultures and organizations*. London: Harper Collins, 1994.
9. TAYLOR RD, GULTER O. Identity formation in Turkish and American late adolescents. *J Cross-Cultural Psychol* 1995; **26**:8–22.

10. ACHENBACH TM, VERHULST FC, EDELBROCK CS, BARON DG, AKKERHUIS GW. Epidemiological comparisons of American and Dutch children: II. Behavioral/emotional problems and competencies reported by teachers for ages 6 to 11. *J Am Acad Child Adolesc Psychiatry* 1987;**26**:326–332.
11. LAMBERT MC, KNIGHT FH, TAYLOR R, ACHENBACH TM. Comparisons of behavioral and emotional problems among children of Jamaica and the United States. Teacher reports for ages 6–11. *J Cross-cultural Psychol* 1996;**27**:82–97.
12. VERHULST FC, ACHENBACH TM. Empirically based assessment and taxonomy of psychopathology: cross-cultural applications. A review. *Eur Child Adolesc Psychiatry* 1995;**4**:61–76.
13. CRIJNEN AAM, ACHENBACH TM, VERHULST FC. Comparisons of problems reported by parents of children in 12 cultures: total problems, externalizing, and internalizing. *J Am Acad Child Adolesc Psychiatry* 1997;**36**:1269–1277.
14. CRIJNEN AAM, ACHENBACH TM, VERHULST FC. Problems reported by parents of children in multiple cultures: the Child Behavior Checklist Syndrome Constructs. *Am J Psychiatry* 1999;**156**:569–574.
15. WEISZ JR, SUWANLERT S, CHAIYASIT W, WEISS B, ACHENBACH TM, WALTER BR. Epidemiology of behavioral and emotional problems among Thai and American children: parent reports for ages 6 to 11. *J Am Acad Child Adolesc Psychiatry* 1987;**26**:890–897.
16. VERHULST FC, DEKKER MC, VAN DER ENDE J. Parent, teacher and self-reports as predictors of signs of disturbance in adolescents: whose information carries the most weight? *Acta Psychiatr Scand* 1997;**96**:75–81.