Teacher ratings of children's behavior help children and science

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In Montreal, Canada, in 1962, Gabrielle Weiss and I began the first of our studies of hyperactive children. She later developed this work into the now well-known longitudinal studies through to adulthood (providing a previous Citation Classic). However, we began these studies because we wanted to do a psychopharmacological study. Hyperactive children appeared to be those in whom medication might be most indicated. This is the kind of practical and advanced information that can be obtained only by talking with other investigators in the field. So I visited one of the few other groups then interested in pediatric psychopharmacology. This group at Johns Hopkins was led by Leon Eisenberg and C. Keith Conners, a young psychologist who had only recently returned from holding a Rhodes Scholarship at Oxford University. Thus began a relationship that has continued to the present despite the vast distances between us.

To systematize diagnosis of hyperactivity and measurement of drug effects, Keith was developing his 39-item teacher questionnaire. I began to use it soon after.

In 1965, I moved to the University of Illinois at Urbana and began another continuing relationship with Robert L. Sprague. In 1970, I returned to New Zealand where child psychiatry research was virtually nonexistent. To overcome this isolation, I not only visited the US regularly and maintained a voluminous correspondence, but began collaborative research with Sprague.

In 1973, the National Institute of Mental Health's Biometrics Unit published a set of recommended measures for pediatric psychopharmacology, one of which was Conners Teacher Questionnaire. Sprague and I felt that we should establish local norms and determine if the factor structure, which Conners had found, was valid in other samples and other areas. The impact of our paper and its continuing popularity was due mainly to fortunate timing. It came just as interest in hyperactivity and stimulants began to mushroom to its present dominance in child psychiatry research. But much of its impact is due to the sterling quality of the instrument we chose to study. Conners Teacher Questionnaire has rightly gained a key role in both diagnosis and measurement of drug and other treatment effects. This success is due primarily to its brevity, clarity, simplicity, and salience. These factors have made it very teacher-friendly and a first-rate instrument for research on hyperactivity. It is reliable, valid, and one of the most sensitive measures of treatment.

The lessons here are that with care and flair, you can get something right the first time, as Conners did; and second, that you can do good research in professional isolation if you remain friends and in contact with your former colleagues and use every opportunity for collaboration. Also, choose the right moment to do a study and you will get the credit for what is a lucky break.


