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## The Effects Of Counseling Involvement On Elementary School Student Behavior.

Rosanne Marie Perry  
*University of the Pacific*

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THE EFFECTS OF COUNSELING INVOLVEMENT  
ON ELEMENTARY SCHOOL STUDENT BEHAVIOR

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A Dissertation  
Presented to  
The Faculty of the Graduate School  
University of the Pacific

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In Partial Fulfillment  
of the Requirement for the Degree  
Doctor of Education

---

by  
Rosanne M. Perry

May 1977

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This dissertation, written and submitted by

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DEDICATION

Dedicated to  
Nick and Teresa Perry  
and  
Catherine

## ACKNOWLEDGEMENTS

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R.M.P.

THE EFFECTS OF COUNSELING INVOLVEMENT  
ON ELEMENTARY SCHOOL STUDENT BEHAVIOR

Abstract of Dissertation

The purpose of this study was to investigate the effects of varying degrees of involvement in the therapeutic process. The sample of this field study was comprised of those clients involved in a county mental health linked program administered by a private agency. The target population was kindergarten, first and second grade students in selected county schools. Having been referred by their teachers, each child was then treated by a counselor who provided individual therapy, group therapy, family therapy, and/or consultation. If it seemed appropriate, in-class tutoring or compensatory classes were offered for the child. The two experimental groups were a) the full-time clients and b) those whose situations limited them to part-time involvement with the therapeutic situation. Each experimental group was compared to a control group of referred individuals that was never seen by a counselor due to the limitations of the staff.

The instrument for the recording of any changes between the onset of counseling and the conclusion was the agency established Behavior Rating Form consisting of 13 observable behaviors. Academic performance and school attendance were also monitored. Analyses of variance were performed to test the hypotheses pertaining to the eight testable variables as well as the sum of all behaviors. The Scheffé Test for all pairwise comparisons and a Pearson Correlation were performed also.

The results revealed that there was a significant difference between the full-time clients and the control group with regard to seven of the 16 variables. The full-time group significantly changed in the area of school related behaviors including academic performance. The part time group was shown to be significantly different in 4 of the studied variables, again school related. The Pearson Correlation showed these same school related variables, in general, to be significantly high in correlation with the length of the treatment situation.

It would appear from the statistical findings that duration of involvement with the therapeutic situation was a significant factor with regard to changes in school related behaviors and academic performance.

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## Chapter I

### INTRODUCTION

Psychologists, ranging from the strict behaviorist to the eclectic humanist, agree that the early childhood years are important ones.<sup>1</sup> Besides the consuming task of sheer physical development, these years are filled with the beginnings of reality testing and socialization.<sup>2</sup> To add to this already difficult task, many children are being guided by parents who themselves are ill-equipped to handle some troublesome areas of psychological development. It is not surprising that even at the age of four or five years signs of maladjustment are visible. It is not surprising, in fact, it is encouraging, that many characteristics or behaviors at this age are alterable, leaving less social impairment to the developing adult.<sup>3</sup> One of the means of

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<sup>1</sup>Richard C. Sprinthall and Norman A. Sprinthall, Educational Psychology: A Developmental Approach (Menlo Park, California: Addison-Wesley Publishing Co., 1974), pp. 79-97.

<sup>2</sup>Ruth Landes, "An Anthropologist Looks at School Counseling," Journal of Counseling Psychology, X (Spring, 1963), pp. 14-17.

<sup>3</sup>Benjamin S. Bloom, Stability and Change in Human Characteristics (New York: John Wiley & Sons, Inc., 1964), p. 227.

altering or reversing unwanted behaviors is through counselor intervention via the school setting.

Federal support for school counselors in recent history began with the National Defense Education Act of 1960. The primary goal of this act was to counteract the large number of high school dropouts. At that time there was little argument against the need for secondary school guidance counselors which this law met. There was and still is, however, evidence that problem behaviors of children at the secondary school level have their roots in the early years in the elementary school. Shaffer and Shoben note the importance of the early childhood years and propose that, "much of later learning. . . involves a modification of adjustment patterns rather than the acquisition of new ones. For these reasons, childhood is a crucially formative period."<sup>4</sup> Bloom reinforces his viewpoint in such statements as "approximately 50% of general achievement at grade 12 (age 18) has been reached by the end of grade three (age 9)."<sup>5</sup> Bloom further states that "at least one-third of the variance at adolescence in intellectual interests, dependency, and aggression is predictable," and this projection is possible at the mean age of two years.<sup>6</sup>

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<sup>4</sup>Laurence Frederick Shaffer and Joseph Edward Shoben, Jr., The Psychology of Adjustment (2d ed.; Boston: Houghton Mifflin Co., 1956), p. 406.

<sup>5</sup>Bloom, op. cit., p. 127.

<sup>6</sup>Ibid., p. 177.

In 1965, through the Elementary and Secondary Education Act, funds were made available to educate and prepare elementary school counselors. This legislation provided federal support for school counseling throughout a child's elementary and secondary educational experience. It allowed the application of counseling services in the elementary school years. Individual schools could then carry out the intent of the law and be more or less effective in preventing problems in the early childhood years from becoming greater problems in later years of school.

Counseling intervention whether through a private agency or through the schools became a reality for elementary school age children. There were persons involved in providing the counseling service, as well as others who were evaluating its impact.

Many problems facing counselors of adolescents can be traced to the elementary school years of the client. One study by Orlov<sup>7</sup> applied group counseling to this younger age group using previously diagnosed, behavior problem children. In this research, group counseling was applied to 50 students by two counselors. Orlov states that all too few counseling programs are undertaken at this level, in spite of the obvious need. Needless to say, even fewer

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<sup>7</sup>Leland G. Orlov, "An Experimental Study of the Effects of Group Counseling with Behavior Problem Children at the Elementary School Level" (unpublished dissertation, Catholic University of America, 1972).

research studies are made at this same level.

In 1971, it was found that counseling with or without the consultation proved to be more effective than no treatment for the elementary school students.<sup>8</sup> A quasi-replication of this study was done in the same year by Palmo<sup>9</sup> adding the dimension of parent-teacher conferences. He found that group counseling plus the parent-teacher conferences were perceived by teachers and observers to be more effective and, in fact, the results were significantly different from the control group results.

Further recognition of the importance of elementary school counseling is evidenced by a research project done at the University of Southern California.<sup>10</sup> This study sought to define the relationship of a behavioral counseling program to teach perceptions of children with problems. Here again not only counseling is provided but also something else, i.e., counselor-teacher consultation. It was found that 80 percent of the students made progress toward their individually defined goals; however, the difference

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<sup>8</sup>William Chadwick Marchant, "Counseling and/or Consultation: The Effectiveness of Three Procedures in the Elementary School" (unpublished dissertation, University of Arizona, 1971).

<sup>9</sup>Artis J. Palmó, "The Effect of Group Counseling and Parent-Teacher Consultations on the Classroom Behavior of Elementary School Children" (unpublished dissertation, West Virginia University, 1971).

<sup>10</sup>Patricia Joan Clark, "The Relationship of a Model Behavioral Counseling Program to Teacher Perceptions of Children with Problems" (unpublished dissertation, University of Southern California, 1972).

was not significant. The recommendations suggested a larger sample, a longer treatment period and the inclusion of parents in the therapeutic intervention.

#### Description and Importance of This Study

This dissertation analyzed a group of primary children in a private counseling program (an area of counseling not frequently studied). The setting is the Early Intervention Program which serves children in kindergarten through second grade in selected San Joaquin County schools (16-20 in number). This Program (EIP) has, as its primary mission, service to children in kindergarten through second grade in selected San Joaquin County Schools, though children in upper grade levels are not excluded from the program. The major goals of the Early Intervention Program is to increase the amount of appropriate social behavior of early school age children and to help resolve inappropriate behaviors which interfere with the child's social and school adjustment, interaction with peers and general adjustment in the family. The program was based on the belief that children with serious behavioral and emotional difficulties which are left untreated are likely to develop in later years into persons who have academic failure, delinquency, social isolation, and exhibit a high school drop-out rate and other non-conforming behaviors that interfere with their adjustment as responsible contributing citizens. The program reflects the general change in social services to schools

in that emphasis is on learning, thinking, and problem-solving as well as emotion, motivation and problem-solving.<sup>11</sup>  
(For history of program, see Appendix A.)

The program staff consists of social workers, counselors, teachers, and paraprofessionals, all of whom assist teachers in identifying and evaluating children with problem behaviors. Some of the children and families were accepted for individual and family counseling when the problem seemed to require intervention beyond the classroom setting. Typical interactions between the staff, child, and family include workshops in parent/child communication, group counseling sessions for both parent and child, and individual counseling for child and family. Children may also be referred to other community facilities (e.g. County Mental Health, or other private or public services) if such a level of intervention seems necessary.

During the 10-month period of this report (September 1, 1975 through June 30, 1976) the Early Intervention Program has provided the following services:

1. An outreach service for children residing in the communities of Stockton, Lodi, Manteca, and Linden.

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<sup>11</sup>Lela B. Costin, "Adaptations in the Delivery of School Social Work Services," Social Casework (June, 1972), pp. 348-54.

2. Prevention and treatment activities in 37 schools in San Joaquin County. (This higher number of schools reflects student transfers, etc.)
3. Prevention and treatment activities in 117 classrooms in San Joaquin County schools.
4. Treatment services for 170 children in San Joaquin County.
5. Consultation and educational services for 263 teachers, counselors and related school personnel.
6. Assessment and referral to other community agencies of certain children not suitable for the Early Intervention Program or who require services in addition to those provided in the Early Intervention Program.
7. An outcome evaluation of the treatment services provided through the contract.
8. Paraprofessional support services including transportation, interpretation, cultural consultation, client observation, in-class tutoring, and related activities.
9. Services to clients in the 1975-1976 school year included the following:
  - a. Client services - treatment 2,001 hours 29%
  - b. Client services - consultation 1,632 hours 23%
  - c. Training and educational services 521 hours 7%

d. Case management services	2,852 hours 41%
	<hr/>
	7,006 hours 100%

Note: Tutoring done by students of the

University of the Pacific 332 hours

The study was composed of three groups of clients. There was a control group composed of those children referred to the program, but who because of time and staff limitations were placed on a waiting list and did not participate in the program. Clients were seen on a first-come, first served basis. It seems probable that the waiting list, was composed of clients similar to those found in the therapy groups. The remaining two groups were the experimental groups. Clients were assigned to these groups as the result of counselor decision. This decision was based on whether or not the parents and/or the teacher were actively participating in the therapeutic intervention. Each counselor was asked to determine which cases were or were not allowing maximum utilization of the counselor and the therapeutic evaluation.

The first experimental group was composed of those clients participating on a full time basis with the EIP counselor. The second experimental group was composed of those clients who maintained a limited participation with the program and the counselor. In essence, the difference between these groups was a qualitative one as well as a quantitative one. Although the counselors met with students, parents, and teachers a determined number of times that was not the only indicator of group differences (see Table 3).

The counselors decided which of the cases involved an implementation of the program suggestion for the particular student, as well as an exposure to it. It might then be assumed that analysis of Experimental Group Two would show that the uncooperative, unreachable teachers and parents can outweigh or counteract the positive effects of therapeutic intervention.

The therapeutic intervention was primarily composed of individual counseling, but could be combined with group counseling, and there was parent-teacher-counselor consultation and even family therapy if needed. This therapeutic situation was in direct response to client need, i.e. based on the individual needs of the referred child and family. The importance of the evaluation lies herein. That is to say, the importance is not in the particular method of counseling but rather in the scope of the counseling intervention. This comprises its importance and, to a large degree, its excitement.

The evaluation instrument was the agency established Behavior Rating Form (Appendix B) used exclusively by the Early Intervention Program counseling staff. Further change assessment was provided by the school grades and rate of absences. An analysis of variance was used to determine significant differences between and among the three groups.

### The Problem

In analyzing a situation of primary children in a

counseling program this study attempted to evaluate some methods for modifying unacceptable behavior in that age group. More precisely, it was designed to answer the question: Does maximum involvement between counselor and teacher, parent and student effect the most significant change in subsequent observable behavior.

The following are the conceptual hypotheses for the study.

1. Those students admitted for treatment show improvement at the termination of treatment as assessed by various instruments.
2. The group of children accepted into the program but who for numerous reasons have limited involvement show a lesser degree of improvement as a result of their exposure to the therapeutic intervention.
3. The group who has not been exposed to the therapeutic intervention show no improvement in the behaviors for which they were referred.

Definition of Terms Used  
in this Study

1. Student - the child that was accepted into either the experimental groups or the control group, i.e. the client or potential client.
2. Teacher - the elementary school person assigned the major educational responsibility for the selected classroom.

3. Counselor - the Early Intervention Program  
staff person responsible for the  
administration of therapy.
4. Therapeutic Intervention - a recorded period  
of time in which any or all of the  
following can transpire.
  - a. Individual therapy - the reduction  
of inner stress of which unaccept-  
able behavior is a manifestation,  
done on a one-to-one basis by a  
trained professional.
  - b. Group therapy - guided change or  
experimentation in positive inter-  
personal relationships done by a  
trained professional working with  
more than one client.
  - c. Family therapy - modification of  
unacceptable behaviors and/or the  
the reduction of stress within the  
framework of a family whose members  
are manifesting behavior unaccept-  
able to any or all, done by a  
trained professional.
  - d. Teacher consultation - the inter-  
change of information between the  
counselor and the classroom teacher  
responsible for the referral of a

client. This interchange can be of an informational nature or a plan for change in the particular situation.

- e. Observation - the collection of information regarding the behavior pattern of a client whether it be in the classroom, on the playground, or any other situation when situation-specific behavior can be witnessed.
- f. Compensatory classes - educational instruction supplemental to the client's regular classroom schedule. Each candidate for this attends an individualized instruction period one day a week during which weaker areas of performance are emphasized.
- g. Class tutoring - the availability of instructional assistance on a one-to-one basis within the classroom, done by a volunteer paraprofessional.

The experimental hypotheses, a more specific statement of the anticipated outcomes of this study state that there is a positive relationship between the extent of client participation and the magnitude of change in:

1. Behavior Rating Form Scores and the sum of their differences
2. Academic Performance
3. School Attendance

### Experimental Hypotheses

1. Students who have been referred and accepted as Early Intervention clients will:

- a. Show significantly greater improvement on the Behavior Rating Scale, and the sum of the differences.
- b. Show significant improvement in academic marks in school.
- c. Show a decrease in absences during the school year after the onset of treatment.

2. Students who have limited contact with the Early Intervention Program will:

- a. Show significantly greater improvement on the Behavior Rating Form and the sum of the differences, but most likely less than those who have full involvement.
- b. Show improvement in academic marks that is significant but less than the first experimental group.
- c. Show a decrease in absences after the onset of treatment.

3. Students not seen at all by the staff of the Early Intervention Program will:

- a. Show no significant improvement with regard to the Behavior Rating Form, or the sum

of the differences.

- b. Show no significant improvement in academic marks.
- c. Show no significant decrease in school absences.

### Limitations of the Study

This research was done with recognition of the limitations of a field study, i.e. one in which the data is the result of existing available records. The sample was determined solely by the academic year's caseload capacity. There were five counselors with their inherent differences. Confidentiality and ethics were a consideration in this study, as personal privacy for the clients was maintained and no child was refused treatment solely that he might be used in a control group.

Those variables for which control was not possible and thereby provided limitations for the study are as follows:

1. Observer effect on pupils.
2. Observer bias-unconscious desire to note improvement.
3. Instrumentation-changes in the observer's frame of reference affecting their evaluations of client behavior.

The evaluation instrument in this study was not a standardized test with defined norms. This Behavior Rating Form was originally used in the first year of operations of the Early Intervention Program (1971-72). It was an adoption

its initial use it has been revised three times and appears in its present form. Its primary strength is that of offering uniformity to the recording of behavioral observations. Adequate reliability and validity have not been clinically documented.

### Overview

This study involved a situation of primary children in a counseling program. The setting was the Early Intervention Program which served children, primarily in kindergarten through second grade in selected San Joaquin County schools.

The next chapter will be a review of the available literature in the area of this present research. Further detail regarding the description of the sample population and the data collection will appear in chapter three. The remaining chapters will discuss the findings, conclusions and suggestions for future reserach.

## Chapter II

### REVIEW OF RELATED LITERATURE

A considerable amount of investigation has been done in the area of elementary school counseling of emotionally disturbed, behaviorally-maladapted children. The growing body of knowledge is refining the picture of what is more or less effective in the remediation of the undesired behaviors. What method or combination of methods and for what length of time are important issues. The resolution of the conflict in these areas has far-reaching implications for early treatment of childhood problems and the future of the children involved. In the interest of counselor effectiveness and human relations even more research is indicated.

The greater part of this chapter concerned itself with the manifestation of maladaptive behavior in early childhood and the methods explored for its amelioration. Erikson, in discussing his stages of development, notes that beginning school is the first contact with the outside world,--his 'entrance into life', so to speak. This undertaking must be as free of inferior feelings as is

possible, otherwise the development of mastery over the fundamental tasks is hampered severely.<sup>1</sup> Havighurst also talks of developmental tasks and the need for guidance and counseling early in the child's school career. In fact, he states that "the individual's self is effective in the defining and accomplishing of his developmental tasks."<sup>2</sup> So it is that school for the young child is initiation into life with its complexity of expectations. It is, also, a time when the child is asked to control certain previously neutral behaviors. Slavson aptly states "it is when the child is placed in school that he experiences the full impact of frustration to basic drives for neuromuscular and vaso-motor activity".<sup>3</sup> To add to this already complicated situation, each child brings to school a distinctive background of social and psychological experiences. As Anna Freud points out, "each child brings with him a collection of characteristics, and reacts to the behavior of the kindergarten teacher in his own precise fashion".<sup>4</sup>

In spite of the tremendous tasks during this early

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<sup>1</sup>Erik H. Erikson, Childhood and Society (New York: W. W. Norton & Co., Inc., 1963), pp. 258-60.

<sup>2</sup>Robert R. Havighurst, Developmental Tasks & Education (New York: Longmans, Green, 1952), p. 3.

<sup>3</sup>S. R. Slavson, Child Psychotherapy (New York: Columbia University Press, 1952), p. 22

<sup>4</sup>Anna Freud, Psychoanalysis for Teachers & Parents (Boston: Beacon Press, 1960), p. 18.

childhood period and the individualized methods of coping with them it is possible to distinguish those children who, for whatever reason, are unable to pursue mastery at this stage in development. Stennet considers this early inability to be so widespread that he comments that

about five to ten percent of all children enrolled in elementary schools can be identified as having adjustment difficulties of sufficient severity to warrant professional attention.<sup>5</sup>

As the result of their developmental research other authors further state that

many of the behaviors exhibited by the child during the period 6 to 10 years of age, and a few during the period 3 to 6, were moderately good predictors of theoretically related behaviors during early adulthood.<sup>6</sup>

These researchers found many maladaptive behaviors in childhood were "each related to reasonably analogous behavior dispositions during early school years".<sup>7</sup>

The child has, therefore, entered a new environment at school. The demands of performance can either amplify already existing problems or cause formerly non-existent problems to appear. The counselor working with the early childhood students needs to consider his dual role in that "guidance in the school setting represents an attempt to help pupils make more adequate adjustments both as

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<sup>5</sup>R. G. Stennet, "Emotional Handicap in the Elementary Years: Phase or Disease?" American Journal of Orthopsychiatry, V. 36 (1966), pp. 444-49.

<sup>6</sup>Jerome Kagan and Howard S. Moss, Birth to Maturity (New York: John Wiley & Sons, 1962), p. 266.

<sup>7</sup>Ibid.

individuals and learners".<sup>8</sup> The counselor can become a person who facilitates the child in the accomplishment of early childhood developmental tasks. By work with the teacher, the counselor can affect the behavior of a broader range of students, going beyond the ones actually referred for service. Ryle states, "for each child referred to child guidance clinics there are five equally disturbed not referred".<sup>9</sup> The counselor has the potential for becoming the liaison, between school, home and child.

The following entries in this review of the related literature will deal with a) general elementary school counseling approaches, b) some specific methods used in the discipline, c) the place of group therapy in the elementary school, d) benefits of counselor-teacher-parent consultation, and 3) effects of counseling on academic performance.

#### General Elementary School Counseling Approaches

It is not unusual for a counseling program either to begin as or to evolve into one which is tailored to the needs of the students in the particular school. One such program in the Pittsburgh, Pennsylvania, public schools

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<sup>8</sup>William H. Van Hoose, Mildred Peters, and George E. Leonard, The Elementary School Counselor (Detroit: Wayne State University Press, 1967), p. 9.

<sup>9</sup>A. Ryle, "Psychotherapy by General Practitioners," Proceedings of the Rural Society of Medicine, 56 (1963), p. 834.

started in 1966.<sup>10</sup> It began as a response to the social, psychological, and educational problems of the elementary school students. It was found, however, in the years to follow that even at that primary school level there were attitudinal and behavioral problems, similar in intensity to secondary school situations, which necessitated an alteration in the counseling program. Another study<sup>11</sup> sought to not only respond to student needs but also wanted to test for the effectiveness of their elementary school counselor efforts. The study was designed to discern changes in academic performance, peer relationships, and personal relationships as measured by the Metropolitan Achievement Test and the California Test of Personality. From the results it was assumed that the measures used were not sensitive enough to reveal significant differences in immediate behavioral change. Teachers and peers were able to notice differences and they, therefore, became the source of reported changes in the studied behavior.

Schools have historically been central to the communities in which they serve. Gannon and Peterson<sup>12</sup> elaborated on this point in their publication in which they

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<sup>10</sup>Pittsburgh Board of Public Education, Pennsylvania, Elementary Counselors Program (pamphlet), 1968.

<sup>11</sup>William H. Van Hoose, The Efficacy of Counseling in the Elementary School (pamphlet), 1969.

<sup>12</sup>Frederick B. Gannon and Rodney L. Peterson (School 26, Rochester, New York) "An Outline for Elementary School Guidance: The Need, Philosophy & Program," New York State Education, 50, 8 (1963), 21-22.

postulate that the counselor more than any person on the school faculty has the flexibility and time to fully utilize the resources of the community and the school. With the counselor as liaison, the parents and teachers are able to coordinate efforts for the child's academic, social, and personal growth. An example of a school district responding to the very particular need of an area of its community was the Milwaukee Public schools in 1966.<sup>13</sup> The purpose of the Milwaukee project was to evaluate the effectiveness of its psychological services to children in areas of economic deprivation. The children who were tested and retested on intelligence and achievement showed no significant change at the end of the school year. School administrators did state, however, that the psychologists working in the schools fostered good morale among the teachers, a good teaching-learning environment, and made contributions to out-of-school activities.

Other researchers working in the area of disturbed children saw a need and tried to meet it. Ganter et al.<sup>14</sup> developed a clinical experiment resulting from their

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<sup>13</sup>Office of Education (Department of Health, Education & Welfare), "Extension & Improvement of Psychological Services Provided to Children in Areas of Economic Deprivation," Washington, D. C., 1966.

<sup>14</sup>Grace Ganter, Margaret Yeakel, and Norman A. Polansky, Retrieval from Limbo, The Intermediary Group Treatment of Inaccessible Children, Child Welfare League of America Inc., New York, N.Y., 1967.

observation that some children are either not available for residential treatment or are not the best candidates for it. Recognizing the need for a greater differentiation in the range of treatment resources they developed the technique of day treatment for the typically inaccessible child and his or her parent. They labeled their procedure as Intermediary Group Treatment and it was intended as a prelude to further therapeutic intervention. It was found that clients were more prepared for other therapy or were, in fact, more able to cope and required no additional services. There was not a control group available and further generalizations are useless. It is important to note several things, however; (a) persons were treated who normally are inaccessible to any therapeutic intervention, and (b) more than half continued in related therapy and the remainder either did not require it or chose not to continue. Further, because it was a day treatment situation parents could become actively involved and family cohesiveness was increased.

#### Some Specific Methods Used in the Discipline

Ginott has said that "the child's play is his talk and the toys are his words".<sup>15</sup> With this in mind it is

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<sup>15</sup>H. F. Ginott, Group Psychotherapy with Children (New York: McGraw-Hill, 1961), p. 51.

not surprising that play therapy is most appropriately used at this level of school counseling. Myrick and Haldin<sup>16</sup> discuss the advantages of the method when used by a trained professional, with the appropriate toys and in the indicated situation. Their case study revealed that the play process reduced anxiety in the child and increased classroom performance according to reports from the blind (uninformed) judges related teachers and principals. Another specialist in the area of child counseling,<sup>17</sup> recommends the use of the Adlerian model in the structuring of the therapeutic situation in the elementary school setting. The results of Platt's experimental study indicate that the method was effective in enhancing the relationship of the experimental group children and their parents and teachers. The reason for the effect was the increase in awareness of child dynamics, learning of alternatives to unacceptable behavior and improvements in methods of eliciting acceptable responses. Similar to the straightforwardness advocated in the Adlerian model is the method employed in the study by Wagner and Glicker,<sup>18</sup> In this study done at the University of Akron rational therapy was

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<sup>16</sup>Robert D. Myrick and William Haldin, "A Study of Play Process in Counseling," Elementary School Guidance and Counseling, 5, No. 4 (1970-1971), pp. 256-65.

<sup>17</sup>John M. Platt, "Efficacy of the Adlerian Model in Elementary School Counseling," Elementary School Guidance and Counseling, 6, No. 2 (1971-1972), pp. 86-91.

<sup>18</sup>Edwin E. Wagner and Morley D. Glicker (University of Akron), "Counseling Children: Two Accounts," Rational Living, 1, No. 2 (1966), pp. 26-30.

the modality chosen because it is "explanatory, educative, and didactic--very much like teaching".

Other researchers<sup>19</sup> have chosen to explore the differences in effectiveness of behavioral and client-centered therapy as used in the treatment of behavior problems of elementary school children. Students diagnosed as having behavior problems in the classroom were randomly assigned to one of the treatment groups, with a control group available. The findings showed no significant differences between the experimental groups or between each experimental group and the control group. Most research in this area suggests that removing a child from the classroom to 'correct' unacceptable behaviors in the classroom is inappropriate as well as being ineffective. The authors support this and advise that the best means of modifying classroom behavior is in the use of adequate classroom management skills. In this respect the counselor is best in his or her consultant role. A similar study<sup>20</sup> examined the effect of group counseling and behavior modification on in-class attention of specifically selected first graders. The measurement instruments included an internally developed Behavior Rating Scale and a simple test of

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<sup>19</sup>Theodore Alper and Gerald D. Kranzler, "A Comparison of the Effectiveness of Behavioral and Client Centered Approaches for the Behavior Problems of Elementary School Children," Elementary School Guidance and Counseling, 5, No. 1 (1970), pp. 35-42.

<sup>20</sup>Ardelle Kennedy Hubbert, "Effect of Group Counseling and Behavior Modification on Attention Behavior of First Grade Students," (unpublished dissertation, University of Arizona, 1969).

visual orientation. It was found that both methods were nearly equal in effecting positive change and, thus, both methods produced groups differing in amount of positive behavior change as compared to the control group.

An example of a novel approach to elementary school counseling is evidenced in a study by Goshko.<sup>21</sup> The project was designed to determine whether or not early childhood students could learn the skills of self-observation and thereby select and modify behavior of their own choosing. The children were introduced to the task, asked to role-play certain behaviors, given observation 'homework assignments' and then shown externally prepared role-played behaviors. It was found that the children were able to select behaviors that they wanted to change and as well utilized the small group for confirmation and support in change. The counselor role in this project was that of a facilitator with the children making their selection of the negative behaviors and the counselor merely reducing complex situations to the components manageable for this age group.

Appropriate at this point is a study done by Witmer.<sup>22</sup> Five models of elementary school counseling were compared: client-centered relationship model (Rogers), behavioral

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<sup>21</sup>Robert Goshko, "Self Determined Behavior Change," Personnel and Guidance Journal, 51, No. 9 (1973), pp. 629-32.

<sup>22</sup>J. Melvin Witmer, Is a Theory of Elementary Counseling Per Se Passe for the 70's? (An Integrated Approach to Modifying Behavior: Individual & System Change), American Personnel and Guidance Association, Paper presented at the APGA convention, 1971.

model (Skinner), social psychological model (Adler), reality model (Glasser), the rational cognitive model (Ellis). The author sees these as comprising the eclectic approach. After comparing the five methods, the author concludes that each method has its weaknesses and strengths and that their importance as methods is relative to the client and their particular situation. What is workable then becomes the preferred method.

### The Place of Group Therapy Elementary Counseling

Man is a social animal and completes in his life many tasks by means of interaction with others within a group setting.<sup>23</sup> Group counseling is a rather natural setting for children and in fact as Seaman<sup>24</sup> would say provides the necessary conditions for ideal learning in that:

it is a safe environment; it is an understanding environment; it is a caring environment; it is a participating environment; and it is an approving environment.

The effect of groups is so strong that it prompts writers like Ausubel<sup>25</sup> to propose that persons with deep-seated

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<sup>23</sup>William C. Trow, A. F. Fonder, W. C. Morse, and D. H. Jenkins, "The Class as a Group: Conclusions from Research in Group Dynamics," Journal of Educational Psychology, 44 (1950), pp. 332-38.

<sup>24</sup>J. Seaman, "Motivation to High Achievement," in Merle M. Ohlsen, "Counseling Children in Groups," The School Counselor, 15 (1968), pp. 343-49.

<sup>25</sup>David P. Ausubel, Theory & Problems of Adolescent Development (New York: Grune and Strathan, 1954), p. 36.

problems arising from early childhood situations may actually avoid interpersonal relations while attempting to enhance or gain status in a designated peer group. Certainly these concepts predominate over any thinking that group counseling is 'mass production' in the therapy arena.

A variation of the typical group counseling setting is the activity/group-interaction<sup>26</sup> intended for short term counseling in the elementary school. An eclectic approach was taken by the counselor in working with children evidencing numerous unacceptable behaviors at home and in the classroom. The program lasted eight to twelve weeks and had an impact on the participants of the activity groups, according to the author. Each child was reoriented in his approach to other children in the group as well as the counselor and the teacher. The children especially became aware of the corrective influence that a group can exert. The author found that the activity-interaction groups provide enjoyable experiences thus increasing the child's longevity in the therapeutic situation. Yunker<sup>27</sup> at the University of Chicago further documents the value of small group counseling at the elementary school level. Again the goal was improved human relations and social adjustment.

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<sup>26</sup>Marilyn Gilbert Komechak, "The Activity-Interaction Group: A process for short-term counseling with elementary school children," Elementary School Guidance and Counseling, 6, No. 1 (1971-72), pp. 13-20.

<sup>27</sup>John A. Yunker, "Small Group Counseling: A Potential Means of Confronting Adjustment Problems in the Lower Elementary School" (unpublished dissertation, University of Chicago, Illinois, 1968).

Further experimentation in the area of alternate methods of counseling with elementary school children was done by Mayer et al.<sup>28</sup> In their study the effectiveness of social learning theory and cognitive dissonance theory were investigated. Dissonance was created in the small group sessions and appropriate coping behaviors were reinforced and, consequently, modeled leading to an increase in acceptable behaviors. The group process employed was found to be effective, it is reported, in aiding the children in the development of their own powers of observation and behavior change.

#### Benefits of Counselor-Teacher- Parent Consultation

The roles of the classroom teacher and the counselor are not static. The teacher is becoming more and more involved in the function of guidance and counseling while at the same time the counselor is delving into the role of consultant-as-teacher.<sup>29</sup> For the counselor as consultant it is primary that he bring about change in the viewpoint of the teacher regarding particular behaviors. McGehearty<sup>30</sup> presents a case study in which this time

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<sup>28</sup>G. Roy Mayer, Terrence Rohen, and A. Dan Whitley, "Group Counseling with Children: A Cognitive-Behavioral Approach," Journal of Counseling Psychology, 16, No. 2 (1970), pp. 142-49.

<sup>29</sup>J. Melvin Witmer and Harold F. Cottingham, "The Teacher's Role and Guidance Functions as Reported by Elementary Teachers," Elementary School Guidance and Counseling 5, No. 1 (1970-71), pp. 13-20.

<sup>30</sup>Loyce McGehearty, "Case Analysis: Consultation and Counseling," Elementary School Guidance and Counseling, 4, No. 1 (1969-70), pp. 54-58.

is elaborated. The counselor is seen as an agent of the teacher in providing objective appraisals of behavior management methods. The counselor is in a position to evaluate class problems and make recommendations pursuant to their remediation. Sugar and McKelvey<sup>31</sup> support this role conception and add that the counselor's total function can surround those things of a consultative nature. Elementary school counselors can provide training sessions for teachers in the method of classroom discussion leading and thereby increase the element of guidance and counseling in teaching. In another article<sup>32</sup> by the same authors, it is further stated that counselors can improve their own effectiveness by ongoing interaction with other practicing school counselors. An exchange of this nature improves the performance of the individual counselor and expands his or her awareness of coexistent practices in the field. The benefits from the shared experiences cannot be underestimated.

As well as initiating interaction with other colleagues the school counselor is in an excellent position to facilitate parent-teacher consultations for the remediation

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<sup>31</sup>Marilyn Susman Sugar and William McKelvey, eds., "Case Analysis: Consultation and Counseling," Elementary School Guidance and Counseling, 10, No. 1 (1975-76), pp. 72-76.

<sup>32</sup>Marilyn Susman Sugar and William McKelvey, eds., "Case Analysis: Consultation and Counseling," Elementary School Guidance and Counseling, 9, No. 2 (1974-75), pp. 233-41.

of problem behaviors. Csapo<sup>33</sup> found in her experimental study of the effect of joint parent-teacher intervention that the combined effort was more effective in reducing daily inappropriate behaviors than either home intervention or school intervention employed exclusively. The author stresses that for this to be most beneficial it is required that home and school programs be consistent in means and goals. (All groups, even those using a single setting for intervention, proved more effective than the group with no intervention.) Some studies, in fact, stress the counselor-parent interaction above that of the counselor-student intervention. Bricklin<sup>34</sup> in her study of the parents of learning disabled children found that parent counseling is very effective in providing the support for and continuity of therapeutic intervention by the counselor. Once parents are guided into an understanding of their child's problem in perspective, and know their own role in its solution they are more likely to develop reasonable limits and participate in the suggested program of development. Such behavior on the part of the counselor, as Nelson et al. illustrate, involves a great deal of risk

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<sup>33</sup>Marg Csapo, "Parent-Teaching Intervention with Inappropriate Behavior," Elementary School Guidance and Counseling, 7, No. 3 (1972-73), pp. 198-203.

<sup>34</sup>Patricia M. Bricklin, "Counseling Parents of Children with Learning Disabilities," Reading Teacher, 23, No. 4 (1970), pp. 331-38.

taking.<sup>35</sup> When it is anticipated that there will be a confrontation or disagreement with method it requires personal conviction to be vulnerable to contradiction or ridicule. But they state the demands of the counselor role are such that they require flexibility and a willingness to occasionally engage in the unorthodox, to take a chance for the sake of the client.

In a further investigation of the counselor-teacher relationship, Kavanaugh,<sup>36</sup> at the University of Miami, compared the role of the elementary school counselor as team member to that of the counselor as outside consultant. The counselor in the first case was responsible for analyzing child behavior relative to teacher behavior, providing the teacher with insights concerning behavior change and evaluation of process and progress. In the second case the counselor primarily served as a specialist in play therapy outside of the classroom. In both situations consultation with parents and/or teachers was available. The author found that both methods indeed decrease the frequency of the studied self-defeating behavior, but the teacher-counselor team was more effective. The changes

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<sup>35</sup>Richard C. Nelson, Marilyn R. Erickson, and Alan P. Milliren, "Issues and Dialogue: Challenging the Counselor," Elementary School Guidance and Counseling, 6, No. 4 (1971-72), pp. 269-72.

<sup>36</sup>Michelle Carol Kavanaugh, "An Investigation into the Relative Effectiveness of the Teacher-Counselor Team Method vs. Counseling in Facilitating Classroom Behavior Change" (unpublished dissertation, University of Miami, 1969).

were in the direction of increased supportive teacher responses and fewer responses suppressing classroom involvement. Thompson<sup>37</sup> says, in fact, that "teachers do need consultant assistance from the counselor on...problems involving misbehavior, learning, and personal-social concerns". The role of the counselor thereby includes that of clarification and differentiation of values in the classroom.

#### Effect of Counseling on Academic Performance

As mentioned earlier, the role of the school counselor is "to help pupils make more adequate adjustments both as individuals and as learners".<sup>38</sup> After all, it has been seen that success in school contributes to improved self-image and vice-versa. It is almost predictable that school counseling intervention in the life of a troubled child assures improvement in the academic realm. Winkler et al.<sup>39</sup> designed an experimental study in which various counseling methods were employed with underachieving elementary school students. There were found to be no significant differences between methods. The suggestion by the authors was that most likely the various methods were not the central issue

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<sup>37</sup>Charles Thompson, "Counseling Elementary School Students: Techniques and Proposals," Elementary School Guidance and Counseling, 4, No. 3 (1969), p. 164.

<sup>38</sup>William H. Van Hoose, op. cit., p. 9.

<sup>39</sup>Ronald Winkler et al., "The Effects of Selected Counseling and Remedial Techniques of Underachieving Elementary School Students," Journal of Counseling Psychology, 12, No. 4 (1966), p. 386.

but that any counseling method with underachievers should include remedial aid in the area of the special learning problems. It is advised that consultation with parents and teachers be a prerequisite. The authors unequivocally state that "if such a global approach were employed, it might be much more effective in helping the elementary underachiever".

In his study of client-centered group counseling with primary school children Moulin<sup>40</sup> obtained even more specific results with underachievers. He found that the children in his treatment group significantly increased not only their nonlanguage functioning but also their meaningful language usage. This author also suggests the use of tutorial services in needed areas along with the counseling given to underachieving elementary school children. Lodato and Skoloff<sup>41</sup> found that the group counseling for slow learners not only produced gains in the area of educational responsiveness but also and more impressively so in the areas of self-confidence and social confidence. Unexpectedly the attendance records of the group counseling members were significantly better than the attendance record of the over-all school population.

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<sup>40</sup>Eugene K. Moulin, "The Effects of Client-Centered Group Counseling Using Play Media on the Intelligence, Achievement and Psycholinguistic Abilities of Underachieving Primary School Children," Elementary School Guidance and Counseling, 5, No. 2 (1970-71), pp. 85-97.

<sup>41</sup>Francis J. Lodato and Martin A. Sokoloff, "Group Counseling for Slow Learners," Journal of Counseling Psychology, 10, No. 1 (1964), pp. 95-96.

Beckum,<sup>42</sup> in working with elementary children from low-income, ghetto and minority groups, found an interesting connection between social rewards and academic achievement. He found that reinforcement of behaviors important to academic success increases achievement and, as this improves, so does academic self-concept. With his sample, counseling and social rewards (intrinsic rewards) proved more effective than the same with extrinsic ones such as tokens, etc. The significant results of this study indicate that teachers need to know what social rewards are valued by their students. Counselors at the elementary level are good resources in situations of this nature and need to be made available for this purpose, the author emphasizes.

### Summary

This chapter explored the available literature regarding the area of elementary school counseling of emotionally disturbed children. The research in this field was founded on the premise that there are expected stages of development whose interruption hampers a child's development. With these predictable stages in mind, various elementary school counseling approaches have evolved. Approaches were used which incorporated the child's private

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<sup>42</sup>Leonard Charles Beckum, "The Effect of Counseling and Reinforcement on Behaviors Important to the Improvement of Academic Self-Concept" (Technical Report Number 38), Stanford University, Stanford, California, 1973.

domain, play, as well as the traditional individual therapy. Because of the social nature of man's learning group, therapy has a prominent place among counseling methods used with the young child. All methods, nonetheless, value the interaction of counselor, teacher, and parents in effecting change. An anticipated result of the enriching therapeutic situation for the elementary school child is improved academic performance state many authors.

## Chapter III

### EXPERIMENTAL DESIGN AND PROCEDURES

This study was designed to determine what differences there would be in three groups receiving varying levels of counseling. Changes in behavior, school attendance and academic achievement were the major concerns. The experimental design, the various treatments, the dependent and independent variables and the statistical analysis were discussed in this chapter.

#### I. EXPERIMENTAL DESIGN

##### Subjects

The sample subjects were clients of the Early Intervention Project for the academic year 1975-1976. The 112 individuals selected were those for which there were sufficient data available. As mentioned in Chapter I there were approximately 170 children served but 58 were on an indirect basis whereby the teacher consulted with the counselor but the child was never referred as an actual client. The treatment nature of this study precludes any attempt for a truly random sample. The actual clients referred became the sample to be studied. By using the total number of cases available for study, it is assumed that variables

in the population are naturally distributed or randomized throughout the group studied.

The first portion of this section compares the 112 clients of the Early Intervention Program with the county-wide population from which it draws. Variables such as age, sex, social and ethnic characteristics, and general income will be considered. The second portion serves to describe the 112 clients, in their respective groups, with regard to these variables as well as those such as parental situation, duration of treatment, and maladaptive behaviors recorded. This descriptive information served not only to define the sample population but also to define the limits of generalizability. (See Chapter Five for this discussion.)

The Early Intervention Program involved with these 112 clients has served .5% of the San Joaquin County population between the ages of five and nine years of age. The range was five years to 11 years and the median age for the Early Intervention Program client was eight years of age. (There are very few cases, exactly eight, which fall in the 10 - 11 year old category.) Of those seen by Early Intervention, 72% were male and 28% were female. This contrasts with a county breakdown, for the same age group, of 51% male and 49% female. (See Table 1, page 38.)

The Early Intervention Program serves an ethnically diverse group. The majority of clients (73%) were white; the second largest group was Spanish surname

Table 1

A Comparison of the Five to Nine Year Old  
Population\* in San Joaquin County with  
the EIP Program for 1975-76

San Joaquin County**		Early Intervention Program	
Male	Female	Male	Female
14,337	13,623	81	31
51%	49%	72.3%	27.7%
Total	28,000	112	

\*Total population for entire county is 209,208.

\*\*Figures obtained from 1970 census for San Joaquin County.

with 18%. This is followed by eight percent of the clients being Black and one per cent being Filipino. The social and ethnic breakdown for the county and for the individual school districts is illustrated in Table 2. (See Page 40.)

In all of California eight per cent of the population falls below the federal standard of poverty for a family of four--\$3,721.00 a year.<sup>1</sup> Although it was not possible to assess the individual family income for the Early Intervention Program clients an approximation was made by means of the school's free lunch program. (See Appendix G.) Eligibility for that program required an income of \$6,264.00 per year for a family of four and/or unusually high medical bills, shelter costs, special education expenses, or disaster-casualty losses. For the 21 schools in this evaluation, the average number of students receiving a free lunch was 31% per school. (See Appendix C.)

In summary, it can be noted from the preceding information that the "average" Early Intervention Program client is male, white, eight years old and in first grade. He most likely is living with his mother and father, has a phone in his home, and can expect to be working with an Early Intervention worker for about six months.

As mentioned earlier, the 112 clients have been divided into three groups: the control group--referred to Early Intervention but not taken as cases; the first

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<sup>1</sup>City Planning Office, People of Stockton, Stockton Neighborhood Analysis Program, Report #1, and Profile #8, p. E-12.

Table 2

Racial and Ethnic Breakdown for EIP Program, San Joaquin County,  
and Related School Districts

Racial or Ethnic Group	Early Intervention Program 1975-1976	San Joaquin County 1970 Census <sup>a</sup>	Lincoln Unified School District 1975 <sup>b</sup>	Linden Unified School District 1973 <sup>c</sup>	Lodi Unified School District 1974	Manteca Unified School District 1973 <sup>c</sup>	Stockton Unified School District 1974
Black	8.0%	5.4%	3.0%	0.3%	0	0.8%	14.5%
Spanish Surname	18.0%	18.0%	8.0%	11.0%	17.0%	18.0%	27.8%
Asian-Oriental	0	2.7%	5.0%	3.0%	3.0%	3.0%	2.6%
American Indian	0	0.4%	0	0.5%	0	0.6%	0.5%
White	73.0%	70.1%	84.0%	85.2%	78.9%	77.6%	49.0%
Filipino	1.0%	2.4%	included in Asian	0	0	0	4.3%
Other	0	1.0%	0	0	1.1%	0	1.3%

<sup>a</sup>Information from 1970 census figures, provided by Stockton Chamber of Commerce.

<sup>b</sup>Information for each school district provided by the particular school district's most recent racial and ethnic report.

<sup>c</sup>This data includes elementary and secondary schools.

experimental group--full time involvement in therapeutic intervention; the second experimental group--access to therapeutic intervention on a minimal basis. (See Appendix D for table of variable relative frequencies for each group.)

#### Treatment Levels

In this study three groups taken from a general school population were compared for differences after exposure to a treatment variable. The treatment variable consisted of the following components:

1. Individual therapy
2. Group therapy
3. Family therapy
4. Teacher consultation
5. Observation

Besides the above types of client contact with the Early Intervention Program, two other alternatives were also available: Growth Group and In-class tutoring. The Growth Group provided remedial learning situations on a weekly basis, one hour per week per client for the duration of his or her treatment. There were fourteen participants in this program, 80 percent in Experimental Group One and 20 percent in Experimental Group Two. In-class tutoring was available to another seventeen clients on an as needed basis: 71 percent in Experimental Group One and 29 percent in Experimental Group Two. The average amount of time spent for each child

with his/her individual tutor was 20 hours over a three month period.

The three groups composing the treatment levels are defined by the following.

Full-time Involvement (Experimental Group One).

These clients were seen each week by the counselor. Their parent or parents were seen each week by the counselor. On a weekly basis the counselor was able to meet with the client's teacher. In other words the client and the family were available for planning and therapeutic situations appropriate for their needs.

Part-time Involvement (Experimental Group Two).

These clients were seen once or twice a month by the counselor. Their parent or parents were seen at the most once a month. The teacher was, however, seen once a week. These clients and their families were not available for planning or involvement with the therapeutic situation appropriate for their needs.

No Involvement (Control Group). These children and their families were never seen by a counselor. The teacher if seen by an EIP counselor was not discussing these children as clients.

In essence the subject groups studied represented varying levels of involvement during the therapeutic intervention

period. The control group received no exposure to the treatment variables. The first experimental group received all treatment variables and on a consistent weekly basis. The second control group, designated by the counselors themselves, received part of the available independent variables and/or were not consistently participating in the therapeutic intervention on a weekly basis.

#### Assessment of the Outcome Variables

The outcome variables in this study were behavioral adjustment, academic performance and school attendance. The first area of behavioral adjustment was assessed via 13 individual behaviors and the composite of these taken as a unit. The 13 behaviors and their brief definitions are as follows.

1. Failure to comply with requests or commands from the teacher--does not obey expected classroom or school ground behavior, regulations.
2. Failure to complete assigned tasks--lack of adequate performance of those tasks which are part of classroom learning routines.
3. Disobeys established classroom rules--does not obey rules regarding behaviors associated with routine classroom management.
4. Other learning problems--areas of difficulty associated with the acquisition of learning skills.
5. Physically attacks peers, adults--hostile acts

committed by the child toward classmates and adults.

6. Destroys property--willful destruction of school or private property.

7. Poor relationship with peers--inadequate or unacceptable interactions between child and others at school.

8. Shy, withdrawn--retires from interactions with others.

9. Incontinent--regular enuresis and/or encopresis.

10. Unacceptable sexual behavior--behavior of a sexual nature inappropriate at school

11. Stealing--taking of school or private property of others.

12. Profanity, name-calling, other unacceptable language usage--any inappropriate language directed at persons, places, or things.

13. Other--crying, pouting, inappropriate dress, easily frustrated, problematic attention seeking, unkempt, school phobic, hyperactive.

The instrument used to assess the dependent variables was the Behavior Rating Form (see Appendix B) of the Early Intervention Program. At the end of the school year or at the termination of the treatment each child was evaluated behaviorally. This was the joint effort of the assigned counselor and the teacher. The teacher alone assessed the academic performance as at the beginning of the year.

As indicated in Appendix E, certain maladaptive

behaviors were recorded for each of the referred clients. The intensity, or frequency, of that behavior was also assessed. These frequencies were grouped in categories shown as follows:

Frequency		Category
0, 1, 2	/daily	1- (Never, seldom)
3, 4, 5	/daily	2- (Infrequently)
6, 7, 8	/daily	3- (Frequently)
9, 10, 11	/daily	4- (Very often)
12, 13, 14, chronic	/daily	5- (Chronic)

When a behavior on the Behavior Rating Scale was not a component of the client's maladjustment problems it was left blank on the pre-test and post-test. With the frequency of the behavior recorded in this fashion on both the pre-test and post-test Behavior Rating Form, it was possible to obtain change scores on each client. The analysis of the change scores for each individual behavior included only those clients in each group who actually evidenced the behavior.

The purpose of the categories was to provide uniformity of behavior severity comparisons. Appendix E provides a breakdown of each behavior on the pre-test rating form and how often this behavior occurs within each of the groups studied.

Each subject was assessed by the teacher regarding beginning (first quarter) of the year general academic performance and end of the year (fourth quarter) academic performance. These subjective assessments were given as A, B, C, D, or F and recorded as 4, 3, 2, 1, and 0, respectively.

The actual number of days absent for each subject was obtained from the school's attendance records for each quarter. For a pre-post analysis of school attendance and academic performance the beginning of the year figure was compared to the end of the year figure.

## II. EXPERIMENTAL PROCEDURES

To avoid the problem of several recorders, all the collating of information in this study was performed by the experimenter. That is, all of the 112 case studies were reviewed by the experimenter alone. A total of five counselors working in a total of 21 schools were involved in the therapeutic intervention under study. Use of five different counselors provided the advantage of changes assumedly being the result of the method of treatment not the type of counselor. Information concerning counselors and schools are presented in Appendix F.

The Early Intervention program is so designed that referrals come directly from the classroom teacher. At the beginning of the school year each counselor visited the respective Kindergarten, First and Second grade classes and explained the program as well as defined the most likely candidates for service.

After receiving the referral for services from the teacher, each counselor typically arranged a meeting with the parent to obtain his or her permission to work with the referred child. Following such permission the counselor

was involved with the teacher, the child was seen on a weekly basis and the parents were seen either weekly or semi-monthly. Each counselor maintained a daily log of client, teacher, and parent contacts. The philosophy of this intervention program suggested the sequence and continuance of this process for each client.

Weekly, during the course of the school year the five counselors and the administrative staff person met with a consultant from the San Joaquin County Mental Health Services. It is at this time that ideas regarding cases and methods were exchanged. The purpose of these meetings was to provide assistance in the specifics of therapeutic intervention. The counselors, of course, had the opportunity to exchange ideas informally on a day to day basis. The regular staffings promoted the occurrence of this interchange. In addition cases were handled on an individual basis. The actual duration of treatment was determined by the counselor and/or the particular situations of the case. Each counselor made all elements of the therapeutic intervention available to every client. The willingness of the client and/or parents determined the extent of involvement in the available services. The consultative nature of this intervention method required full knowledge of progress along with results.

### III. STATISTICAL ANALYSIS

The .05 level of significance was adopted for this

study. This level was deemed appropriate and sufficiently precise for this study because the consequences of the findings do not involve expense or dramatic changes in program.

The first statistical method employed in this study was the one-way analysis of variance as described by Roscoe.<sup>3</sup> Subsequent to a statistically significant F-value, the Scheffe' test for all pairwise comparisons<sup>4</sup> was performed. These methods were selected for their ability to discern significant differences between the groups studied.

The hypothesis pertaining to behavioral adjustment involved separate analyses for each of the thirteen behaviors listed on the Behavior Rating Form. The hypotheses pertaining to the sum of behavior differences, academic performance, and school attendance each required a simple analysis of variance. Only six of the 13 individual behaviors had sufficient numbers of cases in their category for which an analysis of variance could be performed. Therefore, a total of nine separate analyses of variance were performed to test the hypotheses of this study.

#### SUMMARY

This study was conducted during the 1975-76 school year in San Joaquin County. The three groups studied

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<sup>3</sup>John T. Roscoe, Fundamental Research Statistics for Behavior Sciences (New York: Holt, Rinehart, and Winston, Inc., 1975), pp. 313-15.

<sup>4</sup>Ibid.

consisted of the 112 cases accepted for treatment services in the Early Intervention Program. The sample population was divided into three groups: Experimental Group One--full-time involvement with the therapeutic situation; Experimental Group Two--part-time involvement with the therapeutic involvement; and the Control Group--referred as clients but never able to be seen by a counselor. Five counselors employed the suggested means of therapeutic intervention. Changes in student behavior and performance were analyzed by means of a simple analysis of variance, and the Scheffé Test for pairwise comparisons. The .05 level of significance was adopted for all statistical analyses.

## Chapter IV

### STATISTICAL FINDINGS

This study involved primary children in a private counseling program. Drawn from selected schools in the county, the children composed three groups: one control and two experimental. The effectiveness of varying levels of interaction with a therapeutic situation was investigated.

The outcome variables for the investigation were a) behavioral adjustment, b) academic performance, and c) school attendance. There were thirteen separate behaviors selected as indicative of behavioral adjustment. (See Appendix B.)

#### Pre-Treatment Comparisons

As stated earlier every child was tested upon entrance into the therapeutic situation and upon termination of treatment. The groups were tested with regard to frequency and severity of maladjusted behavior, academic achievement, and frequency of absences. This last behavior element was included for study to investigate the possibility of therapeutic involvement effecting an increase in actual number of days spent at school for the diagnosed clients.

Table 3

Comparison between the Three Treatment Groups on 13 Pretreatment Behaviors,  
the Sum of Behaviors, Academic Performance, and School Attendance

Behavior	Mean	Standard Deviation	F <sup>a</sup>	p	N
1. Failure to comply with requests or commands from teacher	3.63	1.34	1.06	>.05	79
2. Failure to complete assigned tasks	3.58	1.34	0.29	>.05	85
3. Disobeys established classroom rules	3.86	1.28	0.70	>.05	72
4. Other learning problems: _____	4.32	0.97	1.57	>.05	59
5. Physically attacks peers, adults	3.37	1.35	1.39	>.05	51
6. Destroys property	3.33	1.34	0.04	>.05	15
7. Poor relationships with peers	4.18	1.06	0.0	>.05	75
8. Shy, withdrawn	4.40	1.04	0.87	>.05	27
9. Incontinent	2.54	1.36	2.24	>.05	11
10. Unacceptable sexual behavior	3.00	2.00	3.00	>.05	3
11. Stealing	2.33	1.22	0.70	>.05	9
12. Profanity, name-calling, other unacceptable language usage	3.00	1.30	1.03	>.05	22
13. Other: _____	4.74	2.55	0.02	>.05	31
14. Sum of pre-test behaviors <sup>b</sup>	18.31	6.87	<u>4.68</u>	<.05	112
15. Academic performance	1.21	1.13	1.76	>.05	112
16. School attendance (absences)	3.62	4.67	1.70	>.05	112

<sup>a</sup>An F ratio of 3.15 was required for statistical significance at the .05 level for all behaviors except: 4 and 5 (3.23), 6 (3.74), 8 (3.37), 9 (4.10), 10 (18.51), 11 (4.46), 12 (3.47) and other (3.32).

<sup>b</sup>Significant at the .05 level.

Initial use of the analysis of variance on the individual behaviors, academic performance and attendance pre-test scores for the three groups indicated that there were no significant differences between the experimental groups and the control group (See Table 3). There was, however, a significant difference between the three groups with regard to the sum of pre-test behaviors. The table to follow represents the results of the Scheffé pairwise comparisons on this variable.

Table 4

Results of the Scheffé Pairwise Comparison  
Among the Three Treatment Groups on  
Sum of Pre-test Behaviors

	Exp. 1	Exp. 2	Control
Experiment 1	0	.06	4.69
Experiment 2		0	2.10
Control			0

There was a significant difference at the .05 level between Experimental Group One and the Control Group. The F-value of 4.69 was greater than the required F-value of 3.15. The pre-test mean for Experimental Group One (19.26) was 5.32 higher than the pre-test mean for the Control Group (13.94).

#### Descriptive Statistics

Tables 1 and 2 which appeared earlier compared the

sample population to that of the same age group for the entire San Joaquin County with regard to relative size and racial and ethnic composition. Table 5 which follows compares each of the treatment groups with regard to means, standard deviations and frequency of specific behavior elements. This table illustrates that the predominance of cases evidenced behaviors number one through eight. Generally speaking these behaviors might be associated with classroom or school behavior. This table also illustrates that although the behavior sum means for the Control Group do not change a considerable amount pre- and post-, they are lower than the means for the experimental groups. This indicates less severe problems for the control group as a whole.

#### Hypotheses Pertaining to Behavioral Adjustment

There were thirteen elements of behavior which were selected to represent behavior adjustment. Further, these thirteen behaviors were studied as a unit to investigate possible differences between the groups. The tables that follow show the results of the analysis of variance and Scheffé test for pairwise comparisons (when appropriate) as applied to these behavior elements, individually and as a unit.

Behavior 1: Failure to comply with requests or commands from teacher. This element refers to expected

Table 5

Comparison of Each Group's Pre-Test and Post-Test Means, Standard Deviations, and Frequencies

	Pre-Test									Post-Test								
	Exp. 1			Exp. 2			Control			Exp. 1			Exp. 2			Control		
	M	S.D.	N	M	S.D.	N	M	S.D.	N	M	S.D.	N	M	S.D.	N	M	S.D.	N
1. Failure to comply with requests or commands from teacher	3.74	1.30	53	3.67	1.40	15	3.09	1.45	11	1.42	.60	53	1.71	1.14	14	2.83	1.69	12
2. Failure to complete assigned tasks	3.55	1.31	58	3.81	1.56	16	3.46	1.29	11	1.71	.95	59	2.29	1.40	17	2.72	1.42	11
3. Disobeys established classroom rules	3.80	1.27	51	4.25	1.06	12	3.66	1.66	9	1.64	1.01	52	2.27	.91	11	3.00	1.48	11
4. Other learning problems:	4.21	1.03	44	4.80	1.63	10	4.40	.89	5	2.27	1.18	44	3.70	1.42	10	3.66	1.75	6
5. Physically attacks peers, adults	3.59	1.37	32	2.80	1.39	10	3.22	1.20	9	1.25	.57	32	1.70	1.25	10	2.64	1.63	11
6. Destroys property	3.40	1.51	10	3.25	1.26	4	3.00	N.A.*	1	1.25	.46	8	2.80	2.05	5	3.00	N.A.	1
7. Poor relationships with peers	4.21	1.07	58	4.10	1.10	10	4.14	1.07	7	1.86	1.05	56	2.13	1.36	8	3.86	1.68	7
8. Shy, withdrawn	4.25	1.16	20	5.00	N.A.	1	4.83	.41	6	1.95	1.10	20	2.50	2.12	2	4.17	1.60	6
9. Incontinent	2.33	1.23	9	5.00	N.A.	1	2.00	N.A.	1	1.46	.69	11	4.00	N.A.	1	2.00	N.A.	1
10. Unacceptable sexual behavior	4.00	1.41	2	N.A.	N.A.	0	1.00	N.A.	1	1.00	N.A.	1	N.A.	N.A.	0	1.00	N.A.	1
11. Stealing	2.43	1.27	7	3.00	N.A.	1	1.00	N.A.	1	N.A.	N.A.	0	N.A.	N.A.	0	N.A.	N.A.	0
12. Profanity, name-calling, other unacceptable language usage	3.17	1.24	17	3.00	1.41	2	2.00	1.73	3	N.A.	N.A.	0	N.A.	N.A.	0	N.A.	N.A.	0
13. Other	4.69	2.81	22	5.00	2.70	4	4.80	1.30	5	N.A.	N.A.	0	N.A.	N.A.	0	N.A.	N.A.	0
Behavior Summary	19.26	6.24	76	18.66	7.94	18	13.94	6.96	18	8.41	4.49	76	11.17	5.68	18	13.39	6.45	18
Academic Performance	1.33	1.19	76	.78	1.06	18	1.16	.86	18	2.25	.74	76	1.78	.69	18	1.33	1.15	18
School Attendance	3.20	4.04	76	5.44	6.78	18	3.61	4.53	18	3.50	4.07	76	7.72	9.17	18	6.05	5.16	18

\* N.A. -- Not appropriate to compute statistic with too few cases in this cell.

classroom behavior or school ground behavior.

Null hypothesis (1) There is no significant difference between the 3 treatment groups in the child's failure to comply with requests or commands from teacher.

Table 6

Summary Table for the Analysis of Variance  
Among the Three Treatment Groups with  
Respect to Behavior 1

Source of Variation	df	M.S.	F	p
Between Groups	2	25.72	9.75	<.001
Within Groups	78	2.63		
Total	80			
N = 81				

There was a significant difference at the .001 level among the three groups with regard to this behavior. The probability of an F value of 9.75 was far below the required .05 probability ( $F = 3.15$ ), the F value at the .001 level being 7.76.

There was a significant difference at the .001 level between Experimental Group One and the Control Group. The F value of 9.72 was greater than the required F value of 7.76. At the .01 level there was a significant difference between Experimental Group Two and the Control Group. The F value, 5.37, was greater than the required F value of 4.98. Both experimental groups reduced the severity of this

behavior more than the control group in terms of compliance with teacher commands or requests.

Table 7  
Results of the Scheffé Pairwise Comparison  
Among the Three Treatment Groups on  
Behavior 1

	Exp. 1	Exp. 2	Control
Experiment 1	0	.08	9.72
Experiment 2		0	5.37
Control			0

The mean change for Experimental Group One from the pre-test to the post-test was 2.32. Experimental Group Two means changed 1.96. The Control Group change was significantly less than either of the experimental groups, with a mean change of only .26.

Behavior 2: Failure to complete assigned tasks. This behavior refers to the performance of those tasks considered part of the classroom learning routine.

Null hypothesis (2) There is no significant difference between the 3 treatment groups in the child's failure to complete assigned tasks.

There was not a significant difference at the .05 level

among the three groups with regard to this behavior. The F value of 2.38 was less than the required F value of 3.15.

Table 8

Summary Table for the Analysis of Variance  
Among the Three Treatment Groups with  
Respect to Behavior 2

Source of Variation	df	M.S.	F	p
Between groups	2	5.84	2.38	>.05
Within groups	84	2.45		
Total	86			
N = 87				

(See Table 5 for a listing of the group means relative to this behavior element.)

Behavior 3: Disobeys established classroom rules.

This element refers to those behaviors associated with routine classroom management and protocol.

Null hypothesis (3) There is no significant difference between the 3 treatment groups in the child's disobedience of established classroom rules.

There was a significant difference at the .001 level among the three groups with regard to this behavior. The F value of 9.52 was greater than the required F value of 7.76.

Table 9

Summary Table for the Analysis of Variance  
Among the Three Treatment Groups  
with Respect to Behavior 3

Source of Variation	df	M.S.	F	p
Between Groups	2	20.91	9.52	<.001
Within Groups	72	2.20		
Total	74			
N = 75				

There was a significant difference at the .001 level between Experimental Group One and the Control Group. The F value of 9.88 was greater than the required F value of 7.76.

Table 10

Results of the Scheffe Pairwise Comparison  
Among the Three Treatment Groups  
on Behavior 3

	Exp. 1	Exp. 2	Control
Experiment 1	0	.02	9.88
Experiment 2		0	6.23
Control			0

There was a significant difference at the .01 level between Experimental Group Two and the Control Group. The F value of 6.23 was greater than the required F value of 4.98. The pre-test mean for Experimental Group One decreased 2.16 from the post-test mean. Experimental Group Two had a mean change of 1.98, whereas the Control Group was not statistically tested with a mean change of .66. The experimental groups, in essence, decreased the severity of their behavior relative to not obeying regular classroom rules.

Behavior 4: Other learning problems. This element refers to those areas of difficulty associated with the acquisition of learning skills.

Null hypothesis (4) There is no significant difference between the 3 treatment groups in the child's other learning problems.

There was a significant difference at the .05 level among the three groups with regard to this behavior. The F value of 4.91 was greater than the required F value of 3.15.

There was a significant difference at the .05 level between Experimental Group One and the Control Group. The F value of 4.25 was greater than the required F value of 3.15. Experimental Group One had a mean change of 1.94 from the pre-test to the post-test. Experimental Group Two decreased 1.10, and the Control Group only .74.

Table 11

Summary Table for the Analysis of Variance  
Among the Three Treatment Groups  
with Respect to Behavior 4

Source of Variation	df	M.S.	F	p
Between Groups	2	10.79	4.91	<.05
Within Groups	58	2.20		
Total	60			
N = 61				

Table 12

Results of the Scheffé Pairwise Comparison  
Among the Three Treatment  
Groups on Behavior 4

	Exp. 1	Exp. 2	Control
Experiment 1	0	1.03	4.25
Experiment 2		0	1.17
Control			0

Behavior 5: Physically attacks peers, adults.

This element of behavior refers to hostile acts committed by the child toward his classmates, teacher, or any other adult.

Null hypothesis (5) There is no significant difference between the 3 treatment groups in the child's physical attacks on peers and adults.

Table 13

Summary Table for the Analysis of Variance  
Among the Three Treatment Groups  
with Respect to Behavior 5

Source of Variation	df	M.S.	F	p
Between Groups	2	22.80	11.69	<.001
Within Groups	51	1.95		
Total	53			
N = 54				

There was a significant difference at the .001 level among the three groups with regard to this behavior. The F value of 11.69 was greater than the required F value of 8.25. The probability of an F value of 11.69 is far less than at the .05 probability level.

There was a significant difference at the .001 level between Experimental Group One and the Control Group. The F value of 11.00 was greater than the required F value of 8.25. The pre-test score for Experimental Group One compared

to the post-test score had a mean change of 2.34. Experimental Group Two made less of a change evidenced by a change score of 1.10. The Control Group as well did not change significantly with only a mean change of .58. Experimental Group One significantly decreased the severity of its behavior relative to physical attacks on peers and adults.

Table 14  
Results of the Scheffé Pairwise Comparison  
Among the Three Treatment  
Groups on Behavior 5

	Exp. 1	Exp. 2	Control
Experiment 1	0	2.74	11.00
Experiment 2		0	1.64
Control			0

Behavior 7: Poor relationship with peers. This element of behavior refers to those in-class and out-of-class interactions that the child has with other children in the everyday routine of school.

Null hypothesis (6) There is no significant difference between the 3 treatment groups in the child's poor relationship with peers.

There was a significant difference at the .001 level among the three groups with regard to this behavior. The F value of 8.72 was greater than the required F value of 7.76.

Table 15

Summary Table for the Analysis of Variance  
Among the Three Treatment Groups  
with Respect to Behavior 7

Source of Variation	df	M.S.	F	p
Between Groups	2	16.73	8.72	<.001
Within Groups	73	1.92		
Total	75			
N = 76				

Table 16

Results of the Scheffé Pairwise Comparison  
Among the Three Treatment Groups  
on Behavior 7

	Exp. 1	Exp. 2	Control
Experiment 1	0	.0004	8.19
Experiment 2		0	5.25
Control			0

There was a significant difference at the .001 level between Experimental Group One and the Control Group. The F value of 8.19 was greater than the required F value 7.76. Experimental Group One changed more than the Control Group in terms of increasing the number of positive

interactions with peers as evidenced by the change score of 2.35 from pre-test to post-test.

Experimental Group Two was significantly different than the Control Group at .01 level. The F value of 5.25 was greater than the required F value of 4.98. Experimental Group Two changed 1.97 whereas the Control Group did not change significantly with a mean change of .28.

Behaviors six and eight through 13 had an insufficient number of cases upon which an analysis of variance could be performed. They are listed below with their descriptions and a table of their pre-test and post-test means and differences follows.

Behavior 6: Destroys property. This element of behavior refers to willful destruction of school or private properties.

Behavior 8: Shy, withdrawn. This element of behavior refers to activity on the part of the child that is characterized by retiring from interaction with either peers or adults.

Behavior 9: Incontinent. This element of behavior refers to enuresis or encopresis on a regular basis.

Behavior 10: Unacceptable sexual behavior. This element of behavior refers to any behavior of a sexual nature which is deemed inappropriate at school.

Behavior 11: Stealing. This element of behavior refers to the taking of school or private property that the child is not to have in his possession.

Behavior 12: Profanity, name calling, other unacceptable language usage. This element of behavior refers to inappropriate language directed at persons, places, or things.

Behavior 13: Other. This element of behavior refers to any of the possible behaviors not listed yet pertaining to school behavior. Those behaviors occurring in this category were: crying, pouting, inappropriate dress, easily frustrated, problematic attention seeking, unkempt, school phobic, hyperactive.

Note: Due to the nature of this category as a miscellaneous grouping, it was sometimes used on the pre-test and not used at all on the post-test. This fact is in addition to there being an insufficient number of cases for analysis.

Table 17

Pre-Test and Post-Test Means, Frequencies and Their Differences  
For Behaviors Six and Eight Through Other

Behavior Number	Pre-test						Post-test						Differences		
	Exp. 1		Exp. 2		Control		Exp. 1		Exp. 2		Control		Exp.1	Exp.2	Control
	M	N	M	N	M	N	M	N	M	N	M	N			
6	3.40	10	3.25	4	3.00	1	1.25	8	2.80	5	3.00	1	2.15	.45	0
8	4.25	20	5.00	1	4.83	6	1.95	20	2.50	2	4.17	6	2.30	2.50	.66
9	2.33	9	5.00	1	2.00	1	1.46	11	4.00	1	2.00	1	.87	1.00	0
10	4.00	2	N.A.*	0	1.00	1	1.00	1	N.A.	0	1.00	1	3.00	N.A.	0
11	2.43	7	3.00	1	1.00	1	N.A.	0	N.A.	0	N.A.	0	N.A.	N.A.	N.A.
12	3.17	17	3.00	2	2.00	3	N.A.	0	N.A.	0	N.A.	0	N.A.	N.A.	N.A.
Other	4.69	22	5.00	4	4.80	5	N.A.	0	N.A.	0	N.A.	0	N.A.	N.A.	N.A.

\*N.A. - Not appropriate to compute statistic with too few cases in this cell.

Table 18

Summary Table for the Analysis of Variance  
Among the Three Treatment Groups  
with Respect to Sum of  
Behavior Differences

Source of Variation	df	M.S.	F	p
Between Groups	2	786.38	27.19	< .001
Within Groups	109	28.92		
Total	111			
N = 112				

Table 19

Results of the Scheffé Pairwise Comparison  
Among the Three Treatment Groups on Sum  
of Behavior Differences

	Exp. 1	Exp. 2	Control
Experiment 1	0	2.77	26.20
Experiment 2		0	6.68
Control			0

Behavior differences: Sum. This unit of behavior is the collective representation of the preceeding behaviors. It summarizes all the behavior problems as they might occur for any one child.

Null hypothesis (7) There is no significant difference between the three treatment groups in the sum of their behavior differences.

There was a significant difference at the .001 level among the three groups with regard to the behavior differences sum. The F value of 27.19 was greater than the required F value of 7.76.

There was a significant difference at the .001 level between Experimental Group One and the Control Group. The F value of 26.20 was greater than the required F value of 7.76. There was also a significant difference between Experimental Group Two and the Control Group at the .01 level. The F value of 6.68 was greater than the required F value of 4.98. Experimental Group One had a change score of 10.85 from pre-test to post-test. For Experimental Group Two the change was 7.49. The Control Group, where there was no significant change had a change score of .55 from pre-test to post-test. When the differences of the individual elements of the Behavior Rating Scale are summed, the resulting evidence is that the experimental groups made a significantly more positive change in general than did the control group.

Academic Performance: This element refers to the teacher's assessment of the child's performance in the assigned learning tasks.

Null hypothesis (8) There is no significant difference between the 3 treatment groups in the child's academic performance.

Table 20

Summary Table for the Analysis of Variance  
Among the Three Treatment Groups with  
Respect to Academic Performance

Source of Variation	df	M.S.	F	p
Between Groups	2	4.51	6.83	<.05
Within Groups	109	0.66		
Total	111			
N = 112				

There was a significant difference at the .01 level among the three groups with regard to this variable. The F value of 6.83 was greater than the required F value of 4.98.

There was a significant difference at the .01 level between Experimental Group One and the Control Group. The F value of 6.44 was greater than the required F value of 4.98.

There was a significant difference at the .05 level between Experimental Group Two and the Control Group. The F value of 4.31 was greater than the required 3.15. Both treatment groups made a greater positive change in their level of academic functioning than did the Control Group.

Table 21  
Results of the Scheffé Pairwise Comparison  
Among the Three Treatment Groups  
on Academic Performance

	Exp. 1	Exp. 2	Control
Experiment 1	0	.11	6.44
Experiment 2		0	4.31
Control			0

Experimental Group One, in fact, had a positive change score of .92. Experimental Group Two had a mean change of 1.00. Both groups gained almost one full grade letter during treatment. On the other hand, the Control Group had no significant improvement with a change score of .17 from pre-test to post-test.

School Attendance: This element refers to the actual number of recorded days the child attended school.

Null hypothesis (9) There is no significant difference between the 3 treatment groups in the child's school attendance.

There was no significant difference at the .05 level among the three groups with regard to this variable. The F value of 1.50 was not greater than the required F value of 3.15 and the null hypothesis could not be rejected.

Table 22

Summary Table for the Analysis of Variance  
Among the Three Treatment Groups  
with Respect to School  
Attendance

Source of Variation	df	M.S.	F	p
Between Groups	2	51.88	1.50	>.05
Within Groups	109	34.47		
Total	111			
N = 112				

In addition to the preceeding analyses of variance and the Scheffé pairwise comparisons two Pearson product moment correlation matrices were constructed. The first correlation, Table 23, shows the association between all the pre-test behavior variables. A coefficient of  $\pm .19$  was required for significance at the .05 level. The underlined coefficients are the only ones not great enough to meet the significance requirement. There were only 12 (20%) of the 59 coefficients which were not significant. Eighty percent of the behaviors significantly correlate with each other with twelve percent being negatively correlated. Stealing behavior

Table 23  
Matrix for the Pre-test Behaviors

	#1	#2	#3	#4	#5	#6	#7	#8	#9	#10	#11	#12	Other
1. Failure to comply with re- quests or commands from teacher.	1.00	.39	.63	.35	.47	.31	.25	<u>-.05</u>	.19	-- <sup>b</sup>	<u>-.17</u>	.51	<u>.04</u>
2. Failure to complete assigned tasks			.50	<u>.02</u>	.47	.46	.35	<u>-.10</u>	.72	--	<u>-.23</u>	.41	.56
3. Disobeys established class- room rules				.43	.19	.75	.25	.41	.25	--	<u>-.32</u>	.50	.27
4. Other learning problems				<u>-.08</u>		<u>-.35</u>	<u>.07</u>	.51	<u>.00</u>	--	<u>-.39</u>	<u>-.64</u>	.24
5. Physically attacks peers, adults						.91	.49	.53	1.00	--	<u>.00</u>	.80	<u>.18</u>
6. Destroys property							.73	--	--	--	--	--	.78
7. Poor relationship with peers								.69	<u>.14</u>	.87	<u>-.62</u>	.39	<u>-.03</u>
8. Shy, withdrawn									<u>-.32</u>	--	--	--	.21
9. Incontinent										--	--	--	--
10. Unacceptable sexual behavior											--	--	--
11. Stealing												.32	--
12. Profanity, name calling, other unacceptable lan- guage usage													.70
13. Other													1.00

<sup>a</sup>A coefficient of + .19 was required for statistical significance at .05 level.

<sup>b</sup>Coefficient could not be computed.

was significantly correlated in a negative way with failure to complete assignments, disobedience to established classroom rules, learning problems, and poor peer relationships. Use of profanity and destruction of property were negatively correlated with learning problems. Incontinence was negatively correlated with shy, withdrawn behavior. The remaining significant correlations (68%) were positive in nature.

The second correlation matrix in Table 24, correlated the individual descriptive elements of the sample population and the behavior change scores. A change score indicating a positive change in behavior toward better psycho-social adjustment would be a negative number. A change score indicating improved academic performance would be a positive number. There were five points of significant correlation. All but one of these was in the category of duration of treatment. Duration of treatment was significantly correlated with positive improvements in completion of assignments, disobedience to classroom rules, learning problems and academic performance. The longer the treatment, therefore, the greater the likelihood of positive changes. Having a phone in the client's home was also significantly correlated with improved academic performance.

### SUMMARY

In using the analysis of variance and the Scheffé pairwise comparison it was found that the groups were not

Table 24

Correlation Between Selected Descriptive Demographic  
Factors and Behavior Change Scores<sup>a</sup>

Behaviors <sup>b</sup> 1, 2, 3, 4, 5 & 7 and Academic Performance	Age	Sex <sup>c</sup>	Duration of Treatment	Phone in Home <sup>d</sup>	Ethnic Group <sup>e</sup>	Parent Situation <sup>f</sup>
1. Failure to comply with requests or commands from teacher	.09	.13	-.15	.01	.04	-.15
2. * Failure to complete assigned tasks	.07	.08	-.27	-.12	.13	.00
3. * Disobeys established classroom rules	.03	.14	-.22	.05	-.11	-.01
4. * Other learning problems:	.00	.12	-.24	.07	.00	.14
5. Physically attacks peers, adults	.09	.15	.00	-.08	-.01	.01
7. * Poor relationships with peers	.08	-.12	-.15	-.06	-.12	.02
Academic Performance*	.05	.11	.33	.20	-.03	-.07

<sup>a</sup>Behavior 6 and 8 through other were omitted because of insufficient frequencies.

<sup>b</sup>A coefficient of  $\pm .19$  was required for statistical significance at .05 level.

<sup>c</sup>male, female

<sup>d</sup>yes a phone; no phone

<sup>e</sup>Black, Spanish Surname, Asian-Oriental, American Indian, White, Filipino, Other.

<sup>f</sup>Child lives with 1/mother and father, 2/mother, 3/father, 4/foster parents, 5/guardians.

\*The analysis of variance showed a significant difference between groups on this factor.

significantly different with regard to the pre-test individual differences, academic performance and school attendance. They were significantly different with regard to the sum of pre-test behaviors: Experimental Group One was significantly different from the Control Group.

Seven of the individual behaviors on the Behavior Rating Scale had an insufficient number of cases and an analysis of variance could not be performed. These behaviors were a) destruction of property; b) shy, withdrawn; c) incontinent; d) unacceptable sexual behavior; e) stealing; f) profanity; and g) other miscellaneous behaviors. The remaining behaviors were tested by means of the analysis of variance and when appropriate the Scheffe test for pairwise comparisons. There was a significant difference at the .001 level between Experimental Group One and the Control Group with regard to a) failure to comply with requests; b) disobedience of established classroom rules; c) physical attacks on peers and adults; d) poor relationship with peers; and e) sum of differences. There was a significant difference at the .05 level between Experimental Group One and the Control Group with regard to a) other learning problems, and b) academic performance. There was a significant difference at the .01 level between Experimental Group Two and the Control Group with regard to a) failure to comply with requests; b) disobedience of classroom rules; c) poor peer relationships; d) sum of differences; and ,

e) academic performance. There was no significant difference at the .05 level for any group with regard to completion of assignments.

The first correlation matrix performed on the data indicated that 80% of the pre-test behaviors were correlated with each other. A second correlation matrix revealed that duration of treatment was correlated with improved academic performance and improved obedience in class, completion of tasks, and diminished learning problems.

## Chapter V

### DISCUSSION OF THE FINDINGS AND CONCLUSIONS

The foregoing chapters presented the problem to be discussed, the related literature, the experimental design and procedures, and the results thereof. The purpose of this final chapter is to discuss the results more fully and to suggest conclusions and possible recommendations for further research.

The students with unacceptable behaviors were referred by their teachers to the Early Intervention Program. These 112 were then divided into either Control Group, Experimental Group One or Experimental Group Two. The students were exposed to varying levels of therapeutic intervention and the results were analyzed by means of the simple analysis of variance procedures. It was expected that the groups receiving the most intensive amount of therapeutic intervention (Experimental Group One) would be significantly different than the other two at the termination of treatment with regard to behavioral adjustment, academic performance, and school attendance.

To follow will be discussion of the study's dependent variables; behavioral adjustment, academic performance and school attendance. These will be followed by the

conclusions and recommendations.

### 1. Behavioral Adjustment

There were 13 elements in this category as listed on the Behavior Rating Form (Appendix B) along with the Sum of Behavior Differences. Seven of the 13 behaviors could not be tested because of an insufficient number of cases. Of the remaining six behaviors and the sum of differences, six were found to be significantly different between Experimental Group One (full-time clients) and the Control Group. These elements were:

1. Failure to comply with requests or commands from the teacher.
2. Physcially attacks peers, adults.
3. Disobeys established classroom rules.
4. Other learning problems.
5. Poor relationship with peers.
6. Sum of behavior differences.

According to the analysis of variance on the pre-test scores, the first five behaviors were not significantly different between the two groups. There was, however, on the pre-test analysis of variance and accompanying Scheffé pairwise comparison a significant difference between Experimental Group One and the Control Group with regard to Sum of Differences. As stated earlier the Control Group evidenced a less severe total of behavioral maladjustments. Experimental Group One and Experimental Group Two made notably larger,

more positive changes in severity of behavioral maladjustments namely 10.85 and 7.49, respectively. These, compared to the Control Group's change of .55, reflect a rather impressive decrease in maladjustment for the experimental groups.

Experimental Group Two (part-time therapeutic involvement) was significantly different than the Control in the following behaviors:

1. Failure to comply with requests or commands from the teacher.
2. Disobeys established classroom rules.
3. Poor peer relationships.
4. Sum of Behavior Differences

According to the pre-test analysis of variance there was not a significant difference between these two groups before treatment. The studies by the Pittsburgh Board<sup>1</sup> of Public Education and Van Hoose<sup>2</sup> which were similar in design, were unable to find significant results in investigating similar behaviors.

The correlation between the pre-test to post-test differences and duration of treatment was positively related to improved behavior in four school-related areas.

For the study at hand, there were several possible explanations for not discerning a significant change in a greater percentage of the elements of the behavior variable.

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<sup>1</sup>Pittsburgh Board of Public Education, Elementary Counselors Program, Pennsylvania: pamphlet 1968.

<sup>2</sup>William H. Van Hoose, The Efficacy of Counseling in the Elementary School, pamphlet, 1969.

Since the EIP program is limited primarily to the school year, perhaps there was not sufficient time spent with some of the referred students. The needs of some clients may require more than the ten month period of this study. A larger number of cases in the behaviors associated with completion of tasks, destruction of property, shyness, incontinence, unacceptable sexual behavior, stealing, profanity, and miscellaneous others, may have proven to be statistically significant. A larger sample, in general, would increase this study's generalizability.

In addition to the assumed effect of the therapeutic situation there are plausible alternative explanations for the significant changes in the designated elements of Behavior Adjustment. Perhaps the students without the aid of a counselor and therapeutic involvement would have nonetheless changed in a positive direction. Some researchers term this phenomenon maturation interaction.<sup>3</sup> Perhaps the observations of the teacher and counselor were biased toward certain behaviors in ways that elude measurement. The most plausible explanation is that the involved teachers and counselors were disposed to see positive changes. That is,

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<sup>3</sup>Donald T. Campbell and Julian C. Stanley, Experimental and Quasi-Experimental Designs for Research (Chicago: Rand McNally College Publishing Company, 1966), p. 41.

<sup>4</sup>Ibid.

an untended problem with instrumentation was this desire on the part of the evaluators to see change.<sup>4</sup>

This study, however, tends to support the concept that the benefits of counselor-teacher-parent consultation on a full-time basis outweigh the disadvantages as illustrated in Witmer and Cottingham,<sup>5</sup> McGehearty,<sup>6</sup> and Sugar and McKelvey.<sup>7</sup> The research by these authors found that especially at the elementary school level the counselor-as-liaison was an influential therapeutic role.

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<sup>5</sup>J. Melvin Witmer and Harold F. Cottingham, "The Teacher's Role and Guidance Functions as Reported by Elementary Teachers," Elementary School Guidance and Counseling, 5: 1970-71 1, pp. 13-20.

<sup>6</sup>Loyce McGehearty, "Case Analysis: Consultation and Counseling," Elementary School Guidance and Counseling, 4: 1969-70, pp. 54-58.

<sup>7</sup>Marilyn Susman Sugar and William McKelvey, eds. "Case Analysis: Consultation and Counseling," Elementary School Guidance and Counseling, X, No. 1, 1975-76, pp. 72-76; see also "Case Analysis: Consultation and Counseling," Elementary School Guidance and Counseling, XIX, No. 1, 1974-75, pp. 233-41.

## 2. Academic Performance

It was found that there was a significant difference statistically in regard to changes in academic performance between the Control Group and Experimental Group One, and between the Control Group and Experimental Group Two. The referred students; teachers perceived an improvement in the area of academic performance. At the elementary school level in this county there is often no letter grade given to the students by their teacher. The evaluation of academic performance for this study was done in a subjective manner, therefore. These findings nonetheless, support the work of Moulin<sup>8</sup> and Lodato<sup>9</sup> who found that therapeutic intervention improved academic functioning of diagnosed underachievers.

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<sup>8</sup>Eugene K. Moulin, "The Effects of Client-Centered Group Counseling Using Play Media on the Intelligence, Achievement and Psycholinguistic Abilities of Under-achieving Primary School Children," Elementary School Guidance and Counseling, 5:2, 1970-71, pp. 85-97.

<sup>9</sup>Francis J. Lodato and Martin A. Sokoloff, "Group Counseling for Slow Learners," Journal of Counseling Psychology, 10:1, 1964, pp. 95-96.

### 3. School Attendance

The results of the analysis of variance on the change scores between the first quarter absences and the last quarter absences revealed no significant difference among any of the studied groups. Perhaps therapeutic involvement in general does not influence school attendance, or as in this particular study it does not. The null hypothesis could not be rejected.

### DISCUSSION AND RECOMMENDATIONS

This study, as a field study, was restricted in some ways. The sample population necessarily was limited to the available clients of the Early Intervention Program. Not having a random sample was a distinct limitation of this study's generalizability. For this reason ample descriptive information regarding the sample was supplied. The data collection instrument, the Behavior Rating Scale, was the primary tool of the Early Intervention Program, and, consequently, became the tool of this study and did not

disrupt the day-to-day workings of the agency counselors. This study employed only some of the many therapeutic methods available for use with elementary school age clients. The results of this study were tempered by these limitations and the conclusions need to be viewed cognizant of the above considerations.

Since the clients composing the three groups were obtained from similar if not the same schools and encountered the same influences of history and maturation then any changes in behavior may logically be attributable to the level of involvement with the therapeutic intervention. This will be the underlying assumption in the interpretation of this data. The results of this research showed that 40 percent of the changes in behavior adjustment elements were statistically significant. There was also a significant change in academic performance at the end of the therapeutic situation. These areas of change cluster about what might be called school-related behaviors. That is, it seems that the primary effect of the treatment was on those behaviors related to appropriate classroom behaviors, learning skills, and peer relationships.

Although the counselors work with the parents of the clients, it is predominantly a school based program. The results, therefore, would seem to be consistent with the approach of the program.

Using the limitations and conclusions of this study

as a base several recommendations are made for future research. A replication of this study might use a larger, randomized sample. The pre-test and post-test could be standardized achievement or personality test of increased objectivity. Future researchers might employ judges whose job it would be to make external assessments regarding behavioral change but who would not be the teacher or the counselor. It would also be of value to incorporate different methods of treatment exclusively (reality therapy, behavior modification, etc.) as well as varying the extent of involvement in treatment.

This study as other field studies was limited in its ability to alter certain treatment and measuring factors of the program. In light of such restrictions it was notable that the treatment groups were significantly different than the control group with regard to changes in academic performance. Both experimental groups in fact, were significantly different than the Control Group with regard to school related behaviors in general.

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## APPENDIX A

## APPENDIX A

## BACKGROUND OF EARLY INTERVENTION PROGRAM

Catholic Social Service of Stockton was founded in 1934. It is a family counseling agency, sponsored by the Roman Catholic Diocese through Catholic Charities, and a United Way Member Agency. Although religious in its sponsorship, its services are nonsectarian, and available to all persons in the community. Through the years, Catholic Social Service has developed an excellent community reputation for social casework assistance to children and their families.

Through its experiences in the treatment of children and youth, the Catholic Social Service staff recognized that the problems of many youths were in evidence long before they came to the attention of Catholic Social Service caseworkers. In many cases, signs of poor functioning were identifiable in school histories as early as kindergarten and first grade. When referral occurred, unfortunately, many youths had already entered the juvenile justice system. By that time, parents and school personnel had often exhausted their resources and patience attempting to deal with the problems.

The Catholic Social Service staff concluded that a program was needed that would assist children with problems before they reached their teens and before the youths became serious societal problems. Also, it was recognized

that problems might be more easily resolved if detected and treated early.

In 1970, Catholic Social Service conducted a survey of 1,963 kindergarten and first grade children in the major school districts in the Stockton area, representing a sample of 19.6 percent of the total kindergarten and first grade students enrolled in area schools at that time. In the survey, teachers were asked to report the number of students in their classes with signs of behavioral and emotional difficulties. The data indicated that 19 percent of the children in the survey showed such signs. Ten percent were identified as having serious or severe problems.

A small pilot program was initiated in one public elementary school in September, 1970. Thirteen children in four kindergarten classes were involved. Catholic Social Service caseworkers consulted with teachers regarding the problems of the children. Frequently the teachers were able to persuade parents to come to school for consultation with caseworkers. Nine of 13 families subsequently accepted casework services. This experience convinced the Catholic Social Service staff that a similar, but larger scale program, was feasible.

Project Early Intervention (EIP) was initiated in July, 1971, funded by the California Council on Criminal Justice, in cooperation with San Joaquin County. Subsequent

funding has been provided by the California State Department of Mental Hygiene through the San Joaquin County Mental Health Services, and subsequently by the State Department of Social Welfare (now titled Department of Health) through Social Rehabilitation and Short-Doyle Mental Health Funds.

The objectives of the Early Intervention Project are:

1. To increase parents' recognition of the mental health needs of their children, as indicated by their acceptance of treatment services.
2. To assist parents in developing better methods of dealing with the problems of their children, as indicated by changes in their parenting behaviors.
3. To increase teachers' recognition of the mental health needs of their students as indicated by their referral of troubled students to EIP and expressed attitudes toward EIP.
4. To assist teachers in developing better methods of dealing with the problems of their students, as indicated by changes in their classroom methods.
5. To assist children in dealing with their mental

health problems, as indicated by changes  
in their behaviors at home and in the class-  
room.

Tom S. Allison, Ph.D.  
Fourth Year Evaluation Report  
July 1974 - June 1975

## APPENDIX B

# APPENDIX B

## CATHOLIC SOCIAL SERVICE EARLY INTERVENTION PROGRAM

Referral/Follow-up

Child's Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Sex \_\_\_\_\_ Grade \_\_\_\_\_  
 Parent's Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_  
 School \_\_\_\_\_ Teacher \_\_\_\_\_ Parent Contacted \_\_\_\_\_

PROBLEM AREA	DESCRIPTION OF BEHAVIOR	HOW OFTEN IT OCCURS
1. Failure to comply with requests or commands from teacher		1. _____ per _____
2. Failure to complete assigned tasks		2. _____ per _____
3. Disobeys established classroom rules		3. _____ per _____
4. Other learning problems: _____		4. _____ per _____
5. Physically attacks peers, adults		5. _____ per _____
6. Destroys property		6. _____ per _____
7. Poor relationship with peers		7. _____ per _____
8. Shy, withdrawn		8. _____ per _____
9. Incontinent		9. _____ per _____
10. Unacceptable sexual behavior		10. _____ per _____
11. Stealing		11. _____ per _____
12. Profanity, name-calling, other unacceptable language usage		12. _____ per _____
13. Other: _____		13. _____ per _____

## APPENDIX C

## APPENDIX C

## % of Students in Free Lunch Program at the EIP Schools

<u>School</u>	<u>% in Free Lunch</u>
August	38%
El Dorado	22%
Fillmore	30%
French Camp	48%
Golden West	13%
Hazelton	67%
Jackson	37%
Jefferson	46%
John R. Williams	2%
Kennedy	N/A*
Leroy Nichols	16%
Lincoln (Lincoln)	8%
Lincoln (Manteca)	N/A
Live Oak	12%
Roosevelt	67%
Sequoia	N/A
Shasta	N/A
St. George	(no lunch program)
Taft	72%
Village Oaks	17%
Waverly	10%
	<hr/>
Average	31%

\*N/A: School did not have prepared lunch program.

## APPENDIX D

# APPENDIX D

## Descriptive Variable Frequencies for Each Treatment Group

		% in Control		% in Exp. #2		% in Exp. #1		Total for Category	
Sex	Male	14.8%	(12)	17.3%	(14)	67.9%	(55)	72.3%	(81)
	Female	19.4%	(6)	12.9%	(4)	67.7%	(21)	<u>27.7%</u>	<u>(31)</u>
								100%	(112)
Age	5 yr.	60%	(3)	0		40%	(2)	4.5%	(5)
	6 yr.	25%	(6)	25%	(6)	50%	(12)	21.4%	(24)
	7 yr.	6.3%	(2)	18.7%	(6)	75%	(24)	28.6%	(32)
	8 yr.	15.2%	(5)	9.1%	(3)	75.7%	(25)	29.4%	(33)
	9 yr.	20%	(2)	10%	(1)	70%	(7)	8.9%	(10)
	10 yr.	0		33.3%	(2)	66.7%	(4)	5.4%	(6)
	11 yr.	0		0		100%	(2)	<u>1.8%</u>	<u>(2)</u>
								100%	(112)

Appendix D (Continued)

		% in Control	% in Exp. #2	% in Exp. #1	Total for Category
Grade in School	Preschool	0	0	100% (4)	3.6% (4)
	Kindergarten	18.5% (5)	25.9% (7)	55.6% (15)	24.1% (27)
	1st.	15.8% (6)	15.8% (8)	68.4% (26)	33.9% (38)
	2nd.	16.1% (5)	6.5% (2)	77.4% (24)	27.6% (31)
	3rd.	28.6% (2)	42.8% (3)	28.6% (2)	6.3% (7)
	4th.	0	0	100% (2)	1.8% (2)
	5th.	0	0	100% (1)	0.9% (1)
	6th.	0	0	100% (1)	0.9% (1)
	7th.	0	0	100% (1)	0.9% (1)
					100% (112)
Parental Situation	Mother & Father	N/A	10% (6)	90% (54)	63.8% (60)
	Mother Only	N/A	41.7% (10)	58.3% (14)	25.6% (24)
	Father Only	N/A	0	100% (1)	1.1% (1)
	Foster Parents	N/A	0	100% (2)	2.1% (2)
	Guardians	N/A	28.6% (2)	71.4% (5)	7.4% (7)
					100% (94)**

Appendix D (Continued)

		% in Control	% in Exp. 2	% in Exp. 1	Total for Category
Phone in Home	Yes	N/A	17.7% (14)	82.3% (65)	84% (79)
	No	N/A	26.7% (4)	73.3% (11)	16% (15)
					100% (94)**
Duration of Treatment*	2 mos.	0	0	100% (2)	1.8% (2)
	3 mos.	13.3% (2)	13.3% (2)	73.4%(11)	13.4%(15)
	4 mos.	14.3% (2)	21.4% (3)	64.3% (9)	12.5%(14)
	5 mos.	47.7% (10)	19% (4)	33.3% (7)	18.7%(21)
	6 mos.	9.1% (1)	27.3% (3)	63.6% (7)	9.8%(11)
	7 mos.	10%	20% (2)	70% (7)	8.9%(10)
	8 mos.	4.8% (1)	19% (4)	76.2%(16)	18.8%(21)
	9 mos.	9.1%	0	90.9%(10)	9.8%(11)
	10 mos.	0	0	100% (7)	6.3% (7)
					100% (112)

Appendix D (Continued)

		% in Control	% in Exp. #2	% in Exp. #1	Total for Category
Racial and Ethnic Group	Black	0	44.4% (4)	55.6% (5)	8% (9)
	Spanish Surname	30% (6)	25% (5)	45% (9)	17.9% (20)
	Asian- Oriental	0	0	0	0
	American Indian	0	0	0	0
	White	14.6% (12)	11% (9)	74.4% (61)	73.2% (82)
	Filipino	0	0	100% (1)	0.9% (1)
	Other	0	0	0	0
					100% (112)

\*For the control group, the Duration of Treatment figures indicate the time between the pre- and post-tests of the Behavior Rating Form.

\*\*Information not available for control group.

## APPENDIX E

# APPENDIX E

## Frequency of Behaviors Within Groups on Behavior Rating Scale

	Control	Exp. #2	Exp. #1	Total
1. Failure to comply with requests or commands from teacher	13.9% (11)	19.1% (15)	67% (53)	15% (79)
2. Failure to complete assigned tasks	12.9% (11)	18.8% (16)	68.3% (58)	16% (85)
3. Disobeys established classroom rules	12.5% (9)	16.7% (12)	70.8% (51)	13% (72)
4. Other learning problems....	8.5% (5)	16.9% (10)	74.6% (44)	11% (59)
5. Physically attacks peers, adults	17.6% (9)	19.7% (10)	62.7% (32)	9% (51)
6. Destroys property	6.6% (1)	26.7% (4)	66.7% (10)	3% (15)
7. Poor relationship with peers	9.4% (7)	13.3% (10)	77.3% (58)	13% (75)
8. Shy, withdrawn	22.2% (6)	3.7% (1)	74.1% (20)	5% (27)
9. Incontinent	9.1% (1)	9.1% (1)	81.8% (9)	2% (11)
10. Unacceptable sexual behavior	33.3% (1)	0	66.7% (2)	1% (3)
11. Stealing	11.1% (1)	11.1% (1)	77.8% (7)	2% (9)
12. Profanity, name-calling, other unacceptable language use	13.6% (3)	9.1% (2)	77.3% (17)	4% (22)
13. Other.....*	16.1% (5)	12.9% (4)	71% (22)	6% (31)
				100%

\*Includes crying, pouting, inappropriate dress, easy frustration, chronic attention seeking, poor attendance, unclean or dirty appearance, school phobic, hyperactive.

## APPENDIX F

# APPENDIX F

## Listing of Schools and Staff Involved in EIP for 1975-1976 School Year

School Name	Enrollment	% of Clients		Counselor
1. August (Stockton)	565	3.6%	(4)	A
2. El Dorado (Stockton)	600	4.5%	(5)	A
3. Fillmore (Stockton)	700	7.1%	(8)	B
4. French Camp (Manteca)	550	1.8%	(2)	C
5. Golden West (Manteca)	762	.9%	(1)	C
6. Hazelton (Stockton)	260	3.6%	(4)	B
7. Jackson (Stockton)	475	8.0%	(9)	B
8. Jefferson (Stockton)	548	5.4%	(6)	D
9. J. R. Williams (Lincoln)	480	.9%	(1)	A
10. Kennedy (Stockton)	898	transfer	(0)	D
11. Leroy Nichols (Lodi)	705	9.7%	(11)	E
12. Lincoln (Lincoln)	507	5.4%	(6)	A
13. Lincoln (Manteca)	690	.9%	(1)	C
14. Live Oak (Lodi)	345	8.9%	(10)	E
15. Roosevelt (Stockton)	243	7.1%	(8)	B
16. Sequoia (Manteca)	681	.9%	(1)	C
17. Shasta (Manteca)	770	11.6%	(13)	C
18. St. George's (Stockton)	210	1.8%	(2)	D
19. Taft (Stockton)	202	4.5%	(5)	D
20. Village Oaks (Lincoln)	470	5.4%	(6)	A
21. Waverly (Linden)	286	8.0%	(9)	B
Totals	10,947	100.0%	(112)	5
Average/School	521	5.0%	(5)	one day/week
% / School District:				
Lincoln	Linden	Lodi	Stockton	Manteca
12% (13)	8% (9)	18% (21)	46% (51)	16% (18)

Appendix F (Continued)

NOTE: There were actually 37 schools involved in some way with the Early Intervention staff. These 21 schools provided the 112 clinets in this evaluation.

## APPENDIX G

## APPENDIX G

## Stockton Unified School District

701 NORTH MADISON STREET

STOCKTON, CALIFORNIA 95203

TELEPHONE 466-3911

August 22, 1975

Dear Parent or Guardian:

The Stockton Unified School District serves nutritious meals every school day. Students may buy lunches for 40¢ in elementary school; 45¢ for a single meal in Junior/Senior High Schools (or a special 5-meal rate of \$2.10 in Junior/Senior High Schools); milk, all levels, 8¢.

Children from families whose income is at or below the levels shown on the scale at the bottom of this letter are eligible for free meals and free milk. If your income is greater than those shown but you have unusually high medical bills, shelter costs in excess of 30% of your income, special education expenses due to the mental or physical condition of a child, or disaster or casualty losses, your children may still be eligible.

To apply at any time during the year for free meals and free milk for your children, complete the application on the reverse side and return it to the school. The information provided on the application will be confidential and will be used only for the purpose of determining eligibility. Within 10 school days of receiving your application, the school will let you know whether or not your children are eligible. If you do not agree with the school's decision, you may wish to discuss it with the school. If you wish to review the decision further, you have a right to a fair hearing. This can be done by calling or writing to Mr. George Brumm at 701 North Madison, Phone 466-3911.

In certain cases foster children are also eligible for these benefits. If you have foster children living with you and wish to apply for such meals and milk for them, please notify us or indicate it on the application.

All children are treated the same regardless of ability to pay. In the operation of child feeding programs, no child will be discriminated against because of his race, sex, color or national origin.

If we can be of further assistance, or if your income changes during the year, please contact us.

Sincerely,

*W. C. Carey*  
William C. Carey, Superintendent

CALIFORNIA ELIGIBILITY SCALE FOR FREE MEALS AND FREE MILK (Escala de Elegibilidad Para Comida y Leche Gratis)			
Number in Family * (Numero de Miembros en la Familia) *	Total Monthly Gross Income (Ingresos Totales Por Mes de la Familia)	Number in Family * (Numero de Miembros en la Familia) *	Total Monthly Gross Income (Ingresos Totales Por Mes de la Familia)
1	\$ 0 - - -to- - - \$ 2-9	5	\$ 6 - - -to- - - \$ 52-9
2	0 - - -to- - - 3-3	6	0 - - -to- - - 6-3
3	0 - - -to- - - 4-36	7	0 - - -to- - - 7-6
4	0 - - -to- - - 5-22	8	0 - - -to- - - 8-9
Add \$ 63. for each additional family member (Agrega \$63. por cada miembro adicional)			
*Family size of one means a pupil who is his sole support. A foster child may be considered a family of one. (Familia de uno suena decir un alumno que se mantiene solo. Un niño adoptivo se considera familia de uno.)			

Estimados Señores:

El Distrito de las Escuelas Unidas de Stockton sirve comidas nutritivas todos los días. Estudiantes pueden comprar una comida por 40 centavos en la escuela primaria; y 45 centavos en la escuela de los grados 7 a 12 (o un precio especial de \$2.10 por cinco (5) comidas en la escuela de los grados 7 a 12); y leche en todos los grados a 8 centavos.

Niños de las familias que tienen ingresos al par o menos de lo que indica la escala imprimada en medio de esta carta pueden recibir comida gratis y leche gratis. Si sus ingresos son mas de lo que enseña la escala pero tiene deudas medicas extraordinariamente, o pagos de casa donde vive de mas de 30% de sus ingresos, o gastos para educacion especial por causa de algún niño que tiene una condición física o mental, o algún desastre o accidente, sus niños siempre podran recibir comidas gratis.

Para solicitar comida gratis y leche gratis para sus niños en cualquier tiempo del año, llene la solicitud en el lado reverso y devuelvalo a la escuela. La información que nos dara Vd. en la solicitud sera confidencial, y se usara solamente para el proposito de determinar su elegibilidad. Al recibir su solicitud, la escuela le avisara dentro de diez días de escuela si sus hijos son elegibles. Si su solicitud es rechazada y Vd. no esta de acuerdo con la decisión, puede discutirlo con la escuela. Si desea revisar la decisión mas, Vd. tiene el derecho de apelar. Esta apelación se puede hacer por medio de una llamada telefónica o escribiendole al Sr. George Brumm, 701 Madison, Número de Teléfono, 466-3911.

En ciertos casos niños de adoptivos son elegible para estos beneficios. Si Vd. tiene niños adoptivos viviendo con Vd. y desea solicitar comida para ellos, por favor de avisarnos, o indíquelo en su solicitud.

Todos los niños se tratan igual, no le hace si pueden pagar o no. En este programa de comida para niños, ningún niño sera distinguido por causa de su raza, sexo, color, o nacionalidad.

Si necesita asistencia acerca del programa de alimentación, o si sus ingresos cambian durante el año, favor de avisarnos.

Su S.S.,

*W. C. Carey*  
William C. Carey, Superintendente

**Stockton Unified School District**

Division of Business Administration  
 REGISTRATION CENTER—701 N. MADISON STREET  
 STOCKTON, CALIFORNIA 95202

**APPENDIX G (Continued)**

NON-PROFIT  
 ORGANIZATION  
 U.S. POSTAGE

**PAID**

PERMIT NO. 402  
 STOCKTON, CALIF.

**INFORMATION: FREE MEALS AND FREE**
**MILK**

1. Letter to Parents
2. Application Form

**INFORMACIÓN DE: COMIDA Y LECHE**
**GRATIS**

1. Carta para Los Parientes
2. Forma de Solicitud

**STOCKTON UNIFIED SCHOOL DISTRICT - APPLICATION FORM 1975-76  
 FOR FREE MEALS AND FREE MILK**

STUDENT NAME \_\_\_\_\_ ATTENDANCE SCHOOL \_\_\_\_\_ GRADE \_\_\_\_\_  
 PARENT/GUARDIAN \_\_\_\_\_ ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_ TOTAL NUMBER  
 IN FAMILY \_\_\_\_\_  
 TOTAL FAMILY INCOME BEFORE DEDUCTIONS: Include wages of all working members, welfare payments, pensions, social  
 security and all other income.  
 FILL IN ONE: YEARLY \$ \_\_\_\_\_ MONTHLY \$ \_\_\_\_\_ WEEKLY \$ \_\_\_\_\_ OTHER \$ \_\_\_\_\_ (If "other" explain \_\_\_\_\_)

In certain cases foster children are eligible for free meals and free milk regardless of your family income. If you  
 have foster children living with you and wish to apply for such meals and milk for them please check here: ☐.  
 The school may wish to contact you for more information about your foster child to determine eligibility.

If your family income is more than the amount listed in the California Eligibility Scale for your family (see letter  
 to parents) and you wish to apply under any of the hardship conditions, please complete the following questions:

UNUSUAL EXPENSES  
☐ ...High Medical Bills ..... \$ \_\_\_\_\_ (MONTHLY AMOUNT)  
☐ ...Shelter Costs in excess of 30% of your income. (Interest on home loan and home  
 insurance premium may be included but NOT utilities or repairs)..... \$ \_\_\_\_\_ (MONTHLY AMOUNT)  
☐ ...Special Education Expenses (Due to mental or physical condition of a child)... \$ \_\_\_\_\_ (MONTHLY AMOUNT)  
☐ ...Disaster or Casualty Losses (Type of loss - fire, flood, etc.) ..... \$ \_\_\_\_\_ (AMOUNT)

I hereby certify that all of the above information is true and correct to the best of my knowledge and belief.

SIGNATURE OF ADULT FAMILY MEMBER OR GUARDIAN \_\_\_\_\_

DATE \_\_\_\_\_

RETURN THIS FORM PROPERLY FILLED OUT TO THE SCHOOL OFFICE

**FOR SCHOOL USE ONLY**

☐ ...Approved for free meals & free milk (Aprobado para comida gratis y leche gratis)..BY: \_\_\_\_\_ DATE \_\_\_\_\_  
☐ ...Denied for the following reasons (Rechazado por estas razones: \_\_\_\_\_ BY: \_\_\_\_\_ DATE \_\_\_\_\_

INSTRUCCIONES: Llene la forma anterior. Imprima claramente. Apunte el nombre del estudiante; la escuela que atiende  
 el grado; nombre de pariente/o guardián; domicilio; número de teléfono; y número total de miembros de la familia.  
 Apunte los ingresos total de la familia antes de deducciones de gobierno. (Incluya sueldos de todos los trabajadores  
 en la familia, cheques del seguro social, ayuda del departamento de asistencia pública, o todo otro ingreso que  
 tenga.) Llene no mas uno. Apunte el total por semana, o mes, o anual.

Si los ingresos totales de la familia son mas de la escala de sueldos apuntados en el lado reverso, pero tiene  
 alguna razon de penalidad, llene la solicitud y marque la razon de penalidad y apunte el aumento.

En ciertos casos si tiene niños adoptivos de crianza, ellos son elegibles para recibir leche o comida gratis, no le  
 hace cuantos ingresos tenga la familia. Si tiene hijos adoptivos viviendo con Vd., favor de apuntarlo en el propio  
 lugar en la forma anterior.

Certifique que la información dada en esta solicitud es correcta y verdadera, firmelo, y apunte la fecha.

DEVUELVIA ESTA SOLICITUD LLENADA PROPIAMENTE A LA OFICINA DE LA ESCUELA