

THE IMPACT OF A PSYCHOEDUCATIONAL MODEL ON
SECONDARY STUDENTS WITH EBD ATTENDING
A PUBLIC SCHOOL ON SOCIAL SKILLS

by

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(Under the direction of WILLIAM W. SWAN)

ABSTRACT

The purpose of this study was to investigate the impact of an integrated comprehensive psychoeducational program, Opportunity and Success in School (OASIS), on the academic and social behavioral achievement of secondary students with emotional or behavioral problems (EBD) attending a rural public school. This study determined the impact of OASIS on these students to increase their essential academic and social behavioral skills which enabled them to continue their education successfully. In addition, follow-up information was gathered to investigate the transition and post-secondary accomplishments of seniors who exited OASIS through graduation. The research design was a post-hoc action research (program evaluation, using the pre and posttest) group case study focusing on several variables. The independent variable was participation in OASIS. The data analysis was descriptive and inferential using range, mean, standard deviation and the directional (positive) paired t-test.

Results of the study indicated that some academic achievement increased for the students who participated in OASIS. Report card grades demonstrated practical significance. Students' academic achievement also increased on the Woodcock-Johnson Tests of Achievement and on the WRAT3. Findings resulted in statistical significance on

two subtests. There was an increase in social behavioral achievement. Descriptive statistics indicated an increase in attendance and a decrease in discipline referrals. Findings for both the Walker-McConnell Scale of Social Competence and the Behavior Evaluation Scale-2 were statistically significant.

The following conclusions were formulated as a result of the findings of this study. Students' report card grades reflected that both groups were achieving and demonstrated practical significance. The three seniors benefitted from OASIS, since their outcomes were graduation and postsecondary education or employment. The greatest gains for students were reflected in the social behavioral assessments. Teaching students appropriate behavior and problem solving strategies benefits their academic and social behavioral achievement.

The results of this study can aid other educators both in Georgia and across the nation regarding the education of this most challenging group of students. A recommendation is to replicate to other public schools in order to utilize a larger sample in the study in hopes of obtaining more statistically significant findings in the area of academic achievement. This study can serve as a spring board for a number of studies that implement and evaluate programs for students with behavioral challenges.

INDEX WORDS: Achievement, Affective Curriculum, Behavior Disorders, Disabilities, Emotional Behavior Disorders, High School Programs, Program Evaluation, Program Planning, Psychoeducational Programs, Related Services, Secondary Students with EBD, Social Skills

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CHAPTER I

INTRODUCTION

The population for this study was secondary students with emotional and behavioral disorders (EBD). Students meeting these characteristics have been described in the literature as behavior disordered, emotionally disturbed, severely emotionally disturbed, or emotional behavior disordered. The term emotional and behavior disorders (EBD) was used in this study since it is consistent with the rules of the Division for Exceptional Students in Georgia (GDOE, 2000).

Many students with EBD have difficulties in self-regulation of social and academic behaviors (Kauffman, 1989), exhibit an affective disorder that significantly interferes with their learning (Clees, 1994), and generally score below average on intelligence tests (Kauffman, 1989). Secondary students with EBD often experience severe interpersonal and academic problems which put them at risk for adjustment difficulties later in life (DiGangi & Maag, 1992; Kauffman, 1989). Recent, more rigorous high school educational requirements (No Child Left Behind, 2001; A Plus – Education Reform Act as Amended, 2003), additional required Carnegie units including vocational courses, and passing state mandated exit exams have made it more difficult for secondary students with EBD to obtain a general high school diploma (either college preparatory or with a vocational seal). Special education teachers, general education teachers, administrators, counselors, psychologists, and other support personnel are challenged to help these students improve both their social behavior and their academic skills.

The most prevalent service delivery option for students with emotional and behavioral disorders has been the self-contained classroom (Shapiro, Miller, Sawka,

Gardill, & Handler, 1999). Although their social/affective needs may be addressed in a self-contained classroom for students with EBD, this model isolates them from their peers. In addition, these authors reported that the following interventions were effective at addressing the needs of secondary students with EBD: modeling, self-control, social skills training, problem-solving training, counseling, peer tutoring, cooperative learning, and self-management. Quinn and McDougal (1998) presented a comprehensive intervention for this population of students. They called for school psychologists to use the science-practitioner model to develop and evaluate services for students with EBD, instead of remaining in the role of psychometricians. The authors' discussion of three mental health initiatives for students consisted of school based best practices, individualized stakeholder collaboration, and family-centered services. They claimed that a broad array of interrelated variables affecting students' emotions and behaviors must be simultaneously addressed in a coordinated manner. These interventions, that apply best/research based practices, must be maintained over time and must be adjusted to reflect the students' changing needs.

Statement of the Problem

The problem is that there are a limited number of effective models available that improve the social behavioral and academic achievement for secondary students with EBD in the public schools. There are few studies about effective affective programs for secondary students with EBD in the public schools. In addition, there is a shortage of qualified teachers who are effective in working with secondary students with EBD (Kamps, Kravits, Stolze, & Swaggart (1999). Fore, Martin, and Bender (2002) attributed some of the causes of the burnout/teacher retention problem in special education to the evolving nature of special education instruction e.g., the recent expectations for inclusive instruction, the changes in disciplinary tactics as reflected in the recently mandated behavioral intervention plans, and the increase in paperwork. Singh and Billingsley (1996) reported that the highest burnout area in special education is working with students with

EBD, which results in increased teacher stress. It is important that teachers serving secondary students with EBD receive relevant and continuous training, as well as support from administrators and related staff.

The Individuals with Disabilities Education Act (IDEA, 1997) requires school districts to provide a free, appropriate, public education to all students with disabilities. Clearly, teaching appropriate behavior to students with EBD must be included in providing an appropriate education for these students. Included within this mandate is the development of an Individual Education Program (IEP) for each student. The IEP is a program that includes a behavior intervention plan, educational progress, and transition into adulthood for secondary students with EBD. Therefore, these students need an affective curriculum as well as an academic curriculum (Georgia Department of Education Division for Exceptional Students, 1992). These skills can be taught through a social skills class and reinforced through monitoring and consultation with general education teachers, or additional segments of special education services, depending on the individual needs of the students. For example, the special education teacher can teach components of the affective curriculum to the general education teachers through collaboration. Secondary students with EBD can transfer their knowledge of the affective curriculum to the general education environment through self-management, self-evaluation, and problem solving sessions with the special education teacher.

However, most often students with EBD have not been exposed to an affective curriculum and may not have been instructed with the necessary skills and strategies necessary to change their behavior. They frequently receive punitive reactions for inappropriate behavior, such as in school suspension, time out, or short term suspension at home (Goldstein, Glick, & Gibbs, 1998; Nelson, 2000). These actions tend not to improve the academic and social behavioral achievement for these students. Punishment strategies fail to teach alternative, prosocial behaviors (Goldstein, et al., 1998). Punitive and exclusionary strategies are often not examined as to whether they are in the best

interest of the student, the community, or society (Nelson, 2000). Educational leaders and teachers must recognize the extent of this problem and effectively address it through appropriate curricular, instructional, organizational, and leadership modifications.

Purpose of Study

The purpose of this study was to investigate the impact of an integrated comprehensive psychoeducational program, Opportunity and Success in School (OASIS), on the social, behavioral, and academic achievement for secondary students with EBD attending a rural public school. This study determined the impact of OASIS on these students to increase their essential social behavioral and academic skills which enabled them to continue their education successfully. In addition, follow-up information was gathered to investigate the transition and post-secondary accomplishments of seniors who exited OASIS through graduation.

Research Question and Null Hypotheses

The research question was formulated based on a review of the literature, teaching experience, and clinical work with secondary students who have EBD. The research question and hypotheses were as follows:

Research Question: Can secondary rural male students' with EBD participation in OASIS increase their academic achievement and appropriate social behavioral achievement at a public high school?

Null Hypotheses:

Ho 1: There is no statistically significant difference between mean pretest and posttest report card grades (GPA) for rural male secondary students with EBD participating in OASIS.

Ho 2: There is no statistically significant difference between mean pretest and posttest number of students graduating for rural male secondary students with EBD participating in OASIS.

- Ho 3: There is no statistically significant difference between mean pretest (during the fall) and posttest means (during the spring) on the Woodcock-Johnson Tests of Achievement (Standard Batteries) - (a) Letter-Word Identification; (b) Passage Completion; (c) Calculation; (d) Applied Problems; (e) Dictation; (f) Writing Samples; (g) Science; (h) Social Studies; and (I) Humanities) scores for rural male secondary students with EBD participating in OASIS.
- Ho 4: There is no statistically significant difference between mean pretest and posttest WRAT3 test scores - (a) Word Identification (Reading), (b) Spelling, and (c) and Math Calculation (Arithmetic) for rural male secondary students with EBD participating in OASIS.
- Ho 5: There is no statistically significant difference between mean pretest and posttest number of school days present for rural male secondary students with EBD participating in OASIS.
- Ho 6: There is no statistically significant difference between mean pretest and posttest number of discipline referrals for rural male secondary students with EBD participating in OASIS.
- Ho 7: There is no statistically significant difference between mean pretest and posttest Walker-McConnell Scale of Social Competence and School Adjustment total and subtest scores (a) Self Control; (b) Peer Relations; (c) School Adjustment; and (d) Empathy for rural male secondary students with EBD participating in OASIS.
- Ho 8: There is no statistically significant difference between mean pretest and posttest BES-2 Behavior Quotient and subscale scores - (a) Learning problems; (b) Interpersonal difficulties; (c) Inappropriate behaviors; (d) Unhappiness/Depression; (e) and Physical symptoms/Fears) for rural male secondary students with EBD participating in OASIS.

Importance of the Study

The results of this study can be communicated to others who need more data and information, based on standards such as No Child Left Behind Act (2001), Georgia Department of Education's Performance Goals for Students with Disabilities (2003), and post secondary information, concerning providing services to secondary students with EBD in the public schools. The techniques used in OASIS were analyzed and reported so administrators may develop effective interventions for secondary students with EBD.

According to the literature (Nelson, 2000), negative interactions and less exposure to the curriculum tend to worsen the achievement for students with EBD. This lack of improvement in behavior has kept them in self-contained EBD classrooms for many years, thus contributing to their isolation, lack of academic and social behavioral achievement, as well as to teacher burn-out. Nelson (2000) claimed that teacher recruitment and retention might be eased if practitioners were prepared to use best practices. He reported Lipsey's (1991) meta-analyses of over 800 studies, involving students with EBD, show the largest effect sizes for (a) social skills training, (b) behaviorally-based interventions, and (c) academic curricular restructuring. These same meta-analyses found that interventions with the smallest effect sizes for this population were: (a) psychotherapy, and (b) punishment strategies, which beyond a few exemplary special education programs for students with EBD, are the major interventions attempted (Nelson, 2000).

OASIS, based on research-based practices, is an exemplary special education program that meets the academic and social behavioral needs of secondary students with EBD. Using a psychoeducational model, OASIS combines an affective and academic curriculum. This is accomplished through more effective instruction e.g., direct instruction, tutoring, social skills instruction, and the teaching of problem solving strategies. Secondary students with EBD are taught problem solving strategies that help them cope with both academic and social behavioral problems. The analysis and results of this study is important, since the superintendent of this school system received a letter

(Love & Pickens, Personal Communication, December 8, 2003) from the Georgia Department of Education recognizing this school system for its exemplary work with exceptional students (Appendix A). The school system in the study was recognized as one of the highest performing systems in the state in the following areas: decreasing the drop-out rate of students with disabilities, increasing the percentage of students with disabilities who earn a regular education diploma, decreasing the performance gap between students with and without disabilities on statewide achievement tests, and improving the performance of students with disabilities on statewide achievement tests (Love, 2003). The special education director of the school system noted that interventions included in the OASIS program facilitated this achievement. Therefore, it is important to implement this study so that the results of the evaluation of OASIS can be reported to administrators. The findings can be used to determine and continue the increase in academic and social behavioral achievement of secondary students with EBD.

Limitations

The following limitations are noted for this study:

1. Due to the limited sample size, generalization is limited to similar settings with similar students.
2. The sample is limited to secondary male students with EBD.

Definitions

The following definition was used in this study:

Emotional and behavior disorder - The definition is stated in the Georgia state regulations and rules for exceptional children as described below:

“An emotional and behavior disorder is an emotional disability characterized by the following:

- (I) An inability to build or maintain satisfactory interpersonal relationships with peers and/or teachers. For preschool-age children, this would include other providers.
- (ii) An inability to learn which cannot be adequately explained by intellectual, sensory or health factors.
- (iii) Consistent or chronic inappropriate type of behavior or feelings under normal conditions.
- (iv) Displayed pervasive mood of unhappiness or depression.
- (v) Displayed tendency to develop physical symptoms, pains or unreasonable fears associated with personal or school problems.

A student with EBD is a student who exhibits one or more of the above emotionally based characteristics of sufficient duration, frequency and intensity that it/they interfere(s) significantly with educational performance to the degree that provision of special education services is necessary...The student's difficulty is emotionally based and cannot be adequately explained by intellectual, cultural, sensory or general health factors." (Georgia Department of Education Division for Exceptional Students, 2000, p.19).

Independent Variable

The independent variable for this study was the OASIS program. The researcher was the special education teacher for the students participating in the OASIS program. OASIS was created to provide comprehensive services to secondary students with EBD attending a rural public school. OASIS, based on a psychoeducational model, offers integrated comprehensive services for secondary students with EBD. In order to provide comprehensive services, OASIS focused on providing services to students such as individualized education programs, related services, services to families, teachers, administrators, as well as the curriculum (affective and academic).

The goal of OASIS is to improve the social-behavioral and academic achievement of secondary students with EBD. Its' affective component uses a behavioral cognitive training model, which teaches students to manage negative emotions more effectively

through a process of rational thinking. This is based on Rational Emotive Behavior Therapy (Ellis, 1962). OASIS uses Rational Emotive Behavior Therapy (REBT) because it is: (a) cognitive – in order to change students’ irrational thoughts and beliefs; (b) behavioral – when students thoughts and beliefs change, their behavior changes; ©) psycho-educational - methods used are the same ones educators use to teach new skills in school, such as modeling and structured learning. OASIS increases secondary students with EBD academic achievement through restructuring the curriculum e.g., reteaching students skills and concepts via the OASIS paraprofessional or EBD teacher; individualized modifications from the students’ IEP, supporting instruction in the general education classes, and collaborating with general education teachers, etc. Decisions for secondary students with EBD are made on an individualized basis according to their IEPs.

Dependent Variables

The dependent variables for this study were the academic achievement and social behavioral achievement of the secondary students with EBD participating in OASIS. Specifically, the dependent variables included:

- a. Academic
 - I. Report card grades (GPA)
 - ii. Number of students graduating from high school
 - iii. Woodcock Johnson Achievement Tests (Standard Batteries – (a) Letter-Word Identification; (b) Passage Completion; ©) Calculation; (d) Applied Problems; (e) Dictation; (f) Writing Samples; (g) Science; (h) Social Studies; and (I) Humanities)
 - iv. WRAT – III R (a) Word Identification (Reading), (b) Spelling, and ©) Math Calculation (Arithmetic).
- b. Social Behavioral
 - I. Attendance (Number of days present out of 180 days)
 - ii. Number of discipline referrals

- iii. Walker McConnell Scale of Social Competence and School Adjustment – Adolescent Version total and subtest scores (a) Self Control; (b) Peer Relations; (c) School Adjustment; and (d) Empathy).
- iv. BES – 2 (Behavior Quotient/total score and subscale scores (a) Learning problems; (b) Interpersonal difficulties; (c) Inappropriate behaviors; and (d) Unhappiness/Depression; (e) Physical symptoms/Fears).

Justification of the Study

There is a paucity of research on effective programs for secondary students with EBD. A study of the literature indicated that there was limited research in the area of integrated comprehensive services for secondary students with EBD in the public schools. Kauffman (1999) and Nelson (2000) claimed that little thought and few resources have gone into teaching appropriate behavior to students with EBD. Nelson (2000) reported that educators generally wait until the students' problems become well-established and less responsive to intervention. The usual response by school personnel is a punitive reaction to the students' challenging behaviors (Goldstein, et al., 1998; Nelson, 2000). Nelson (2000) concluded that teaching behavior to students is the responsibility of all educators.

Another justification for the study is that the related services component (e.g. counseling) of IDEA (1997) has been one of the most difficult requirements in providing a free, appropriate, public education (FAPE) for students with EBD (Maag & Katsiyannis, 1996). The authors provided recommendations to schools for providing counseling services to students with EBD served under IDEA (1997). The analysis of the impact of OASIS on the academic and social behavioral achievement of secondary students with EBD can expand the body of research-based literature in this area.

Organization of the Study

Chapter 1 included the foundation for the study with a background and statement of the problem, the purpose of the study, questions to be answered, importance of the study, and assumptions and limitations. Chapter II presents a theoretical, interactive model, description of the areas identified in the model and how they interact, and a brief review of the literature regarding program planning for students with emotional behavioral disorders. A description of the intervention program (OASIS), the research design, instrumentation, and data collection procedures are presented in Chapter III. Chapter IV describes the findings of the study. Chapter V summarizes the study and present conclusions and recommendations based on the findings.

CHAPTER II

REVIEW OF SELECTED LITERATURE

Empirical and theoretical literature in several areas related to secondary students with EBD was reviewed. Data base searches included the on-line catalogue of the University of Georgia Library (GALILEO, EBSCO, Psychology and Behavioral Sciences Collection, ERIC, Dissertation Abstracts International, and Psychlit). In addition, reference lists and bibliographies of readings were searched for in other relevant literature. Descriptors included emotional and behavior disordered, emotional disordered, behavior disordered, high school programs, and psycho-educational models. This chapter is organized into the following sections: Need for the study, including federal legislation; federal, state, and local regulations and policy; the presentation of a theoretical and conceptual framework; the characteristics of a psycho-educational curriculum in a public school (including academic and affective instruction); integrated comprehensive services; as well as recommendations from the literature for program planning for secondary students with EBD. A summary concludes the chapter.

Need for the Study

An obligation of state government is the provision of educational services to all children. As a result of federal and state legislation in Georgia (Georgia Department of Education A Plus – Education Reform Act as Amended, 2003; Georgia Department of Education Division for Exceptional Students, Georgia’s Ten Performance Goals for Students with Disabilities, 2003; No Child Left Behind Act, 2001), state and local boards of education are charged with the responsibility of developing and implementing policies for providing education. Local school systems (LSS), boards of education, administrators,

teachers, and other personnel develop and implement local policies. LSS employees meet guidelines specified by judicial decisions, federal/state/local legislation, federal/state/local regulations, and formal and informal policy. These broad areas affect program planning for all students in public schools, including students with disabilities.

During the 1997 reauthorization of IDEA, it was recognized that individuals with disabilities receiving appropriate services should be prepared to become functioning members of society. Nevertheless, secondary students with EBD are the least successful students in our public schools (Armstrong, Dedrick, & Greenbaum, 2003; Kauffman, 1989; Leone, McLaughlin, & Meisel, 1992). Studies indicate that of students enrolled in special education, those identified as having EBD have one of the lowest rates of promotion and the highest rates of dropout, exiting prior to graduation (Anderson, 2001; Hallahan & Kauffman, 1991; U. S. Department of Education, 1994). Further, only children identified as having multiple handicaps or deaf and blind are educated in more restrictive settings than students with EBD (Shapiro, et al., 1999). Secondary students with EBD, compared to their peers without EBD, have poorer social skills, lower academic achievement, and higher incidences of psychiatric conditions (Kauffman, 1989).

Students with disabilities such as LD exhibit characteristics that are similar to students with EBD (Handwerk & Marshall, 1998). Researchers (Handwerk & Marshall, 1998) investigated the behavioral and emotional problems of children with LD, SED, and LD/SED, using the Teacher Report Form (TRF) and Child Behavior Checklist (CBCL). The sample consisted of 357 students (217 with LD, 72 with SED, and 68 with SED/LD, ages 6 to 18 (mean age = 11.5). The students with SED were rated more impaired than the students with LD on all TRF scales except Attention Problems, and on three of the eight CBCL syndrome scales. The children with SED differed from those with LD mainly in terms of severity of problems, not with respect to type of problem (Handwerk & Marshall, 1998).

The characteristics of secondary students with EBD have been associated with lower high school graduation rates, limited post-secondary participation, fewer employment opportunities, less financial independence, and more limited interpersonal relationships (Armstrong, et al., 2003). Armstrong, et al. concluded that there is a need to provide comprehensive and integrated services that promote development of social behavioral skills associated with successful transition to adulthood for secondary students with EBD. Cheney and Barringer (1995) recommended that school programs for students with EBD include (a) academic learning that is challenging and relevant to the learner, (b) be coordinated with mental health services, and (c) involve parents in their children's education.

Leone, et al., (1992) reported that within the past several years several national commissions, reports, and studies have recommended changes in the public school system in the United States (e.g., "America 2000" Choice Plan, 1991). These recommendations ranged from an overhaul of the curriculum to reorganization of the manner in which schools deliver services to students and the ways in which decisions are made. They included the effect school reform proposals and pilot restructuring efforts had on students with disabilities. The authors examined school restructuring, national education goals, and opportunities to improve the quality of education for secondary students with EBD. Their discussion involved an analysis of reform proposals, with an assumption that changes in school structure have real implications for secondary students with EBD and the programs that serve them (Leone, et al., 1992).

Currently, states that accept federal funds are also mandated to follow the federal law, No Child Left Behind Act of 2001 (NCLB), which represents the most significant amendments to the Elementary Secondary Education Act, 1966 (ESEA). NCLB (2001) is reported on the Georgia Department of Education Web site (2003) to include accountability for improving student achievement, increased flexibility and local control, expanded parental options, and data-driven, research-informed instruction. To meet the

100% proficiency goal of this reform act, each state must define Adequate Yearly Progress (AYP). AYP is a set of performance goals that establishes the minimum levels of improvement, based on student performance on state standardized tests; the goals which must be achieved within timeframes specified by the law.

The state assessment tool for secondary schools in Georgia is the Georgia High School Graduation Test (GHS GT). To determine the relative achievement levels of certain groups of students and hold schools accountable for closing achievement gaps, NCLB (2001) requires every school, school district, and state to sort, (i.e., disaggregate the average test results by the racial/ethnic category, disability, limited English proficiency, socioeconomic status, and gender) the data. To meet AYP, each school must have 95% participation or above on state assessments, must meet or exceed the State's annual measurable objective for proficiency, and at the secondary level, show an increase in its' graduation rate. These goals are for all students, including students with disabilities, e.g., secondary students with EBD.

Federal/state/local policies and regulations are constructed to implement federal law. For example, in May, 2003, superintendents and special education directors in Georgia received a memorandum that focused on the continuous improvement monitoring for special education. The GDOE is responsible for supervision and monitoring of compliance with the IDEA. Previous monitoring over the past 20 years had little impact on the actual outcomes for students with disabilities. Nationally, and in Georgia, school reform and improved results are a priority for most school systems. Therefore, the Division for Exceptional Students (DES) combined monitoring with school improvement in order to improve the results for students with disabilities.

For the continuous improvement monitoring process, Georgia has developed an overall goal and ten performance goals. The overall goal states:

“Ensure that all students with disabilities have available to them a free appropriate public education that emphasizes special education and related services designed to

meet their unique needs and prepares them for employment and independent living” (Georgia Department of Education, 2003).

Georgia’s ten performance goals for students with disabilities are:

1. Decrease the percentage of students with disabilities who drop out of school.
2. Increase the percentage of students with disabilities who earn a regular education diploma.
3. Decrease the gap in performance of students with and without disabilities on statewide achievement tests.
4. Increase the percentage of time students with disabilities receive instruction in the general education setting with appropriate supports and accommodations.
5. Increase the percentage of “highly qualified” personnel who teach students with disabilities.
6. Increase the percentage of students with disabilities who transition to their desired post-school outcome.
7. Increase the percentage of parents of students with disabilities who are active and satisfied participants in their child’s education.
8. Decrease the percentage of students with disabilities who are removed from school for disciplinary reasons.
9. Increase the percentage of young children who are receiving intervention services.
10. Decrease the disproportionate representation of students with disabilities to reflect the demographics of the general population (Georgia Department of Education, 2003).

These performance goals are directly correlated with the ten sections on the individual school system Profile Performance Results Data. The U.S. Office of Special Education Programs (OSEP) (U.S. Department of Education, 2004) is using continuous improvement to monitor the state for compliance with IDEA. As a statewide initiative, Georgia is urged to improve the goal for Least Restrictive Environment (LRE). The GDOE (2003) is requiring that all systems develop a plan to address improvement in serving students with disabilities in the LRE. In addition, systems must identify additional goals and develop improvement plans for each goal. For example, one improvement goal that has been identified in the school system in this study is for students with emotional behavioral disorders, learning disabilities, and mild intellectual disabilities to be included in the general education environment for at least 80% of instructional time. Increased segments spent in the general education curriculum have been directed by both Federal

(NCLB, 2001)) and state laws. Another goal chosen by this system is to increase the reading performance of students with disabilities on achievement tests. In addition, all students with disabilities (except for 1%), must take the required standardized tests. At the high school this is the Georgia High School Graduation Tests (GHS GT).

An important outcome for secondary students with EBD is to graduate and become functioning members of society. This has been problematic because students with EBD often experience severe interpersonal and academic problems which put them at risk for adjustment difficulties later in life (DiGangi & Maag, 1992; Kaufman, 1989). Since their behavior negatively impacts their academic achievement as well as their peers, the most prevalent service delivery option for students with EBD has been the self-contained classroom (Shapiro, et al., 1999). This has presented a significant challenge for school systems (e.g., Georgia's ten performance goals, GDOE, 2003), since public school educators are mandated to provide a free, appropriate, public education and related services in the least restrictive environment for secondary students with EBD.

According to data that included secondary students with EBD who participated in OASIS during the 2002-2003 school year, the public high school in this study was recognized by the GDOE (Love & Pickens, Personal Communication, December 8, 2003) for its exemplary work with exceptional students. For example, a reduced number of students with disabilities did not drop-out of school during the 2002-2003 school year. All secondary students with EBD that participated in OASIS graduated with a general high school diploma (two attended post-secondary education financed through vocational rehabilitation, and one is employed in the community). The ninth graders passed all of their classes, and decreased their segments in special education classes for the following year. OASIS, based on research-based practices, meets the academic and social behavioral needs of secondary students with EBD. OASIS uses a psycho-educational model which takes the perspective that discovering why secondary students with EBD behave as they do is including the acquisition of academic and social behavioral skills (Hallahan &

Kauffman, 1991). OASIS combines an affective and academic curriculum that is accomplished through effective instruction based on best practices, e.g., direct instruction, tutoring, social skills instruction, and the teaching of problem solving strategies.

Secondary students with EBD are taught problem solving strategies that help them cope with both academic and social behavioral problems. The results of these strategies are the focus of the letter of recognition from the Georgia Department of Education (Personal Communication, December 8, 2003).

The school system in the study was recognized as one of the highest performing systems in the state in the following areas: decreasing the drop-out rate of students with disabilities, increasing the percentage of students with disabilities who earn a regular education diploma, decreasing the performance gap between students with and without disabilities on statewide achievement tests, and improving the performance of students with disabilities on statewide achievement tests (Love & Pickens, Personal Communication, December 8, 2003). The special education director of this school system noted that interventions included in OASIS facilitated this achievement.

A Theoretical Model and Conceptual Framework

OASIS is a model of the interactive convergence of legislation, judicial decisions, policy, theory, and research which affect program planning for secondary students with EBD. Specialized programs have been designed in order to address the unique needs of these students.

Psychoeducational Model

OASIS was created to provide services to secondary students with EBD in a rural public high school. OASIS, based on a psychoeducational model, offers integrated comprehensive services for secondary students with EBD. OASIS focused on individualized education programs, families, teachers, administrators, related services, transition services, as well as the psycho-educational curriculum. The psycho-educational

curriculum component of OASIS, which includes both academic and affective instruction, makes this intervention unique in the public school setting.

OASIS has an educational format, using practical lessons founded on sound principles of learning and motivation, e.g., social and cognitive oriented theories. The academic and affective components of the curriculum are integrated, since they share several theoretical concepts, e.g., cognitive behavioral interventions, social learning theory, structured learning, etc. A teacher (certified in Behavior Disorders), along with a paraprofessional, was employed to teach secondary students with EBD. Individual counseling was available for each student in OASIS. The special education teacher provided instruction that followed the state curriculum, academic tutoring, social skills training, consultation with staff, parents and related personnel, and individual and group psycho-educational sessions with the students.

Academic Instruction

Secondary students with EBD can acquire various learning strategies and learn to use them independently to satisfactorily complete assignments in special and general education settings (Deshler, Ellis, & Lenz, 1996). Learning strategies place emphasis on the learner's cognitive processes e.g., a task-analyzed model that ensures that students acquire, master, and are able to use learning strategies in various environments (Deshler et al., 1996). One such learning strategy which is based on cognitive behavior modification, the Learning Strategies Curriculum, is available from the University of Kansas Center for Research on Learning (Ryan, 2001). Learning strategies have been influenced by various theories or approaches to learning and teaching, e.g., operant learning, cognitive behavior modification, a sociocultural theory of learning, and information processing and schema theory (Bos & Vaughn, 1994). These strategies for developing academic and cognitive skills for secondary students with EBD are explained in the following section and illustrated in Figure 1.

The Relationship Between Theory, Research, and Practice for a Psychoeducational Model OASIS (Opportunity and Success in School)				
Strategies for developing academic and cognitive skills in secondary students with EBD				
	Operant Learning	Cognitive Behavior Modification	Sociocultural Theory of Cognitive Development	Information Processing and Schema Theories
Theoretical Concept	Identifies observable behaviors and manipulates the antecedents, and consequences of these behaviors to change behavior	Integrates principles from: operant, social, and cognitive oriented theories	Importance of modeling, the use of language to facilitate learning, and learning is socially constructed.	One cognitive theory, attempts to describe how sensory input is perceived, transformed, reduced, elaborated, retrieved, and used.
Research	Principles of behavior modification Skinner (1953).	Bandura, 1977 Deshler, Ellis, & Lenz (1996) Deshler & Shumaker 1988 Goldstein, Glick, & Gibbs, 1998 Graham & Harris, 1989 Harris & Pressley, 1991 Meichenbaum, 1977, 1983 Luria, 1961 Vygotsky, 1962	Vygotsky, 1962, 1978 Englebert & Pallncsar, 1991 Moll, 1990	Brown, 1980 Flavell, 1976 Hunt, 1985 Neisser, 1976 Swanson, 1987
Practice	<u>Increasing desirable behaviors</u> Reinforcement positive, negative Secondary reinforcer praise, attention Shaping Premack Principle Group Contingencies Contingency contracting <u>Decreasing Undesirable Behaviors</u> Reinforcing Incompatible Behavior Punishment Peer Confrontation System <u>Stages of Learning</u> entry acquisition proficiency maintenance generalization application	<u>Strategy steps</u> Analysis of the task Analysis of the thinking process involved in performing the task Training that utilizes: <u>Modeling</u> self-instructional techniques evaluation of performance <u>Principles of CBM</u> Cognitive modeling Guided instruction <u>Self-instruction (Verbalization)</u> Overt self-instruction Covert self-instruction <u>Self-evaluation</u> : students judge the quality of their performance; self-reinforcement <u>Self-regulation</u> : the learner monitoring his/her own thinking strategies through language mediation (Reflective Thinking). problem solves, corrects	<u>Use of Resources</u> <u>Social Nature of Learning and Interactive Dialogue</u> Reciprocal teaching Cognitive Strategy Instruction In Writing (CSIW) <u>Scaffolded Instruction</u> adjustable and temporary support “zone of proximal development” <u>Instructional Implications::</u> Facilitate scaffolding and cooperative knowledge sharing among students and teachers within a context of mutual respect; Learning and teaching should be a meaningful embedded activity; Instruction should provide opportunities for mediated learning with the teacher guiding instruction within the students’ zones of proximal development.	Sensing; Sensory Store; Attention; Perception; Working Memory Long-Term Memory; and Schemas Executive Functioning or Metacognition <u>Teaching Implications:</u> Provide cues to students so they might be guided to the relevant task(s) or salient features of the task. Have students study the critical feature differences between stimuli when trying to perceive differences. Have the students use the context to aid in perception. Facilitate the activation of schemas and provide labeled experiences. Teach students to use memory strategies. Use organization techniques to assist students in organizing their long-term memories. Teach students to be flexible thinkers and how to solve problems, encouraging them to use executive functioning.

*dashed lines indicate that various practices (e.g., modeling, self-instruction, etc.) are used throughout the intervention.

Figure 1: The relationship between theory, research, and practice for a psychoeducational model; OASIS

Learning theorists adhering to the first model, operant conditioning, believe that behavior is learned and therefore, can be unlearned or replaced by new behaviors (Alberto & Troutman, 1990; Bos & Vaughn, 1994). Operant learning focuses on identifying observable behaviors and manipulating the antecedents and consequences of these behaviors to change behavior (DiGangi & Maag, 1992). These strategies are often used when a teacher evaluates a student using a functional behavioral analysis (Alberto & Troutman, 1990; Cooper, 1987). When utilizing operant learning principles during academic instruction, the students' behavior is controlled by the consequences that follow (Bos & Vaughn, 1994; Cooper, Henon, & Heward, 1987). Skinner (1953) referred to this type of voluntary behavior as operant behavior and is a response to the environment (Alberto & Troutman, 1990). For example, a teacher can decide which consequences would follow a math performing behavior in order to maintain or increase its occurrences. When a student completes an assignment with an 80 percent or better accuracy, an external reward may be earned such as five minutes of a favorite activity. For some students, reinforcement is a means of increasing a desirable behavior, e.g., academic achievement. Secondary reinforcers, such as praise and attention, are strategies frequently used by teachers (Bos & Vaughn, 1994). Shaping a student's behavior is utilized by reinforcing responses that closely approximate the target response, e.g., increasing the amount of math problems completed accurately. Other practices, based on operant learning, that may be used to increase student achievement are the Premack Principle, group contingencies, and contingency contracting (Bos & Vaughn, 1994).

Techniques for decreasing undesirable behaviors include extinction, reinforcing incompatible behaviors, punishment, and time-out. Extinction and reinforcing incompatible behaviors are more likely to produce the desired behavior than punishment or time-out (Bos & Vaughn, 1994). Teachers may use planned ignoring as a form of extinction. In order to increase the effectiveness of ignoring it can be paired with reinforcing an incompatible behavior (Bos & Vaughn, 1994). For example, a teacher can

ignore a student's talking, while reinforcing the student to verbally respond correctly to the teacher's questions. These management plans are implemented, monitored, and controlled exclusively by the teacher (DiGangi & Maag, 1992).

The principles of operant learning can be applied through stages of learning. Bos and Vaughn (1994) explained the stages of learning in the following manner. The stages of learning are the levels that a student may go through in acquiring proficiency in learning. The first stage, entry, is the level of performance that the student is presently exhibiting. During the second stage, acquisition, the components of the target behavior are sequenced into teachable elements. Each teachable element is taught to mastery through a high rate of reinforcement, shaping, and consistent use of cues. Proficiency occurs when the target behavior is performed with high accuracy. The goal is for the behavior to be maintained at the target level of accuracy and proficiency with intermittent reinforcement and reduction in teacher assistance. The next stage is generalization, in which the target behavior transfers across settings, persons, or materials. At the final stage, application, the student extends and utilizes the skills in new situations. In summary, the principles of operant learning are applicable for both instructional and classroom management purposes (Bos & Vaughn, 1994). The stages of learning are appropriate for both academic and affective instruction, as well as Georgia's new curriculum - Georgia Performance Standards (GPS) (Georgia Department of Education, 2004).

The second model, cognitive behavior modification (CBM) integrates ideas from operant, social, and cognitive learning theories. The principle is that cognitive behavior (thinking processes) can be changed (Bos & Vaughn, 1994; Deshler, et al., 1996). This model of teaching and learning incorporates several of the principles of operant learning. However, additional techniques are included when the goal of instruction is to change the way the student thinks. This approach includes an analysis of the task as well as an analysis of the thinking processes involved in performing the task. CBM utilizes modeling, self-instructional techniques, and evaluation of performance (Meichenbaum, 1977;

Novaco, 1975). Brigham (1992) claimed that self-management procedures are effective because they allow students to analyze and modify their own environment to affect their own behavior.

The following learning and teaching principles are associated with CBM: cognitive modeling; guided instruction; self-instruction; self-evaluation; and self-regulation (Bos & Vaughn, 1994; Carr & Punzo, 1993; Deshler, et al., 1996; Harris, 1986; Hughes, Ruhl, & Misra, 1989; Lazarus, 1993; Maag, Reid, & DiGangi, 1993; Maag, Rutherford, & DiGangi, 1992; Prater, Hogan, & Miller, 1992; Smith, Nelson, Young, & West, 1992; Stevenson & Fantuzzo, 1986). For example, a teacher is using cognitive modeling when thinking aloud to the students. Another principle, guided instruction, occurs when the teacher guides the students through a reading task by telling them the steps in the process as they read. When students use language to guide their performance, they are using self-instruction. Overt self-instruction is talking aloud, while covert self-instruction is thinking to yourself. An example of using self-instruction is when a student talks or thinks through the steps in an algebra equation. Self-evaluation refers to making judgments concerning the quality or quantity of one's performance. Self-regulation refers to the student monitoring his or her thinking strategies through language mediation. Self-regulation also occurs when the student uses strategies in order to correct a learning problem. For example, after reading a paragraph a student may be instructed to say the main ideas to him or herself. If the student could not give the main idea, a corrective strategy might be to go back and reread the first sentence of the paragraph in order to remember the main idea (Bos & Vaughn, 1994).

Social learning theory (Bandura, 1977) has also influenced cognitive behavior modification. A major assumption of social learning theory is that affective, cognitive, and behavior variables interact in the learning process (Bos & Vaughn, 1994; Deshler, et al., 1996). The notion that we learn from watching others is another assumption that comes from social learning theory (Bandura, 1977). In social learning theory the importance of

modeling is emphasized in relation to social behaviors (e.g., cooperative behaviors). In CBM, modeling has been expanded to include cognitive modeling. CBM, influenced by cognitive theory and training, explicitly teaches problem solving and relies on principles of self-regulation and self-evaluation (Bos & Vaughn, 1994).

The third model, a sociocultural theory of learning (Vygotsky, 1978), emphasizes the social nature of learning and encourages interactive discussions between students and teachers. An important theoretical concept regarding social interactions is the premise that language plays an important role in learning (Bos & Vaughn, 1994; Vygotsky, 1978). During these discussions the teacher is encouraged to use the students' base of knowledge and to provide the needed support for the student to acquire new strategies, skills, and knowledge. This type of instruction is referred to as scaffolded instruction (Bos & Vaughn, 1994; Deshler, et al., 1996). Vygotsky (1978) described learning as occurring in the "zone of proximal development" or the distance between the actual developmental level as described by independent problem solving and the level of potential development as determined through problem solving under adult guidance or during collaborative learning with peers. It is important when promoting students' development that the teacher relinquishes control of the strategies to the students (Bos & Vaughn, 1994; Deshler, et al., 1996). Bos and Vaughn (1994) described the instructional implications for the sociocultural theory as follows: "(1) Instruction is designed to facilitate scaffolding and cooperative knowledge sharing among students and teachers within a context of mutual respect and critical acceptance of others' knowledge and experiences; (2) Learning and teaching should be a meaningful, socially embedded activity; (3) Instruction should provide opportunities for mediated learning with the teacher or expert guiding instruction within the students' zones of proximal development" (Bos & Vaughn, p.51).

The fourth model, information processing and schema theories, are cognitive theories that attempt to explain how information is received, transformed, retrieved, and expressed. The key elements are sensing, sensory store, attention, perception, memory,

and executive functioning or metacognition (Bos & Vaughn, 1994; Deshler, et al., 1996). Psychologists and educators studying information processing attempt to understand how thinking processes operate to allow humans to complete complex cognitive tasks such as summarizing a chapter in a textbook, solving math problems, and writing an essay. The information processing model focuses on an interactive role between the teacher and the student. The main focus is on activating prior background knowledge from the student, relating new learning to information the learner already has learned, and maintaining the student as an active learner who thinks about how he or she thinks, studies, and learns (Bos & Vaughn, 1994).

According to schema theory, knowledge is organized into schemas (Deshler, et al., 1996). These higher-order cognitive structures assist in understanding and recalling events and information. It is schemas that allow us to make inferences about occurring events. One of the roles of schemas is to provide an account of how prior knowledge interacts with new information (Bos & Vaughn, 1994; Deshler, et al., 1996). Bos and Vaughn (1994) explained that Bartlett (1932) argued that memory is not just recalling, but is reconstructive. For example, when comprehending and recalling information, our prior knowledge interacts with incoming information, and changes the information to fit with prior knowledge. In this way, the new knowledge is reconstructed in relation to our schemas. In summary, understanding and memory do not simply reflect a rote recall process but a reconstructive process, resulting in the interaction of a learner's schemas with the new information (Bos & Vaughn, 1994).

The specific processes in the information processing system are controlled and coordinated by executive functioning or metacognition (Brown, 1980; Flavell, 1976). Metacognition consists of the following components: (1) An awareness of what skills, strategies, and resources are needed to perform a cognitive task; (2) The ability to use self-regulatory strategies to monitor the thinking process and to understand corrective

strategies when needed (Bos & Vaughn, 1994). Metacognition is similar to the concepts of self-evaluation and self-regulation in the CBM learning process.

Information processing and schema theories have educational implications for students with EBD (Bos & Vaughn, 1994). Several implications are as follows: (1) Provide cues to students so they might be guided to the relevant features of the task(s) (e.g., raised voice, repetition); (2) Have students study the critical feature differences between stimuli when trying to perceive differences; (3) Have the students use the context to aid in perception; (4) Facilitate the activation of schemas and provide labeled experiences; (5) Teach students to use memory strategies; (6) Use organization techniques to assist students in organizing their long term-memories; (7) Teach students to be flexible thinkers and how to solve problems, encouraging them to use executive functioning (Bos & Vaughn, 1994).

The four models (operant learning theory, cognitive behavior modification, sociocultural theory of learning, and information processing and schema theories) discussed above are integrated into both the academic and affective curriculum of OASIS. The relationship between theory, research, and practice for a psycho-educational model regarding the affective curriculum is discussed in the following section.

Affective Instruction

The affective component of the curriculum uses a behavioral cognitive training model, which teaches students to manage negative emotions more effectively through a process of rational thinking (Ellis, 1962; Ellis, 2001; Ellis & Bernard, 1983; Novaco, 1975). The role of parents and teachers has been recognized along with the importance of assessing the students' cognitions, emotions, and behaviors (Ellis & Bernard, 1983). As a background to the following discussion of cognitive restructuring applied to the problems of secondary students with EBD, a brief historical overview of cognitive-behavior therapy (CBT) and rational-emotive behavior therapy (REBT) is presented.

Adler, one of the first cognitive therapists, realized the importance of using cognitive approaches in the school system during the 1920's (Ellis & Bernard, 1983). Additional sources of influence that underlie cognitive restructuring emerged later. For example, in the 1950's Ellis analyzed psychological maladjustment in terms of cognitive distortion and by advocating an action-oriented educational method of therapy, Rational Psychotherapy (RT) (Ellis & Bernard, 1983). In the mid-1960's, Beck formulated an approach to the treatment of depression that also emphasized the role of cognitive interpretation and faulty thinking patterns (Alford & Beck, 1997; Beck, 1976). Based on these developments, advances in other branches of cognitive psychology such as information processing, (Piaget, 1965) and proponents of self-control in the behavior therapy movement acknowledged that individuals mediate their environment (Bandura, 1973, 1977).

Since the late 1960's, many professionals in the field, such as Bandura (1973, 1977), Kendall (1991), Luria (1961), Meichenbaum (1977), Novaco (1975), Spivack, Platt, and Shure (1976), Vygotsky (1962), along with Ellis (1962, 2001) and Beck (1976), developed the theoretical and practical school of cognitive-behavior therapy (CBT). These theories emphasized cognitive structuring as learning processes. During the 1970's researchers published empirical studies concerning the utility of Rational Emotive Therapy (RET) and CBT, e.g., Cognitive Therapy and Research, in 1977 (Ellis & Bernard, 1983).

At this time, there were few published materials that illustrated how a specific cognitive approach could be used as part of an affective education or developmental counseling program (Ellis & Bernard, 1983). One publication of this type, Bernard and Joyce (1984), presented practical guidelines and techniques for illustrating how RET and allied cognitive-behavioral approaches can be employed with students to resolve a variety of childhood problems as well as indirectly with parents and teachers. There was evidence that cognitive restructuring could be effectively used to alleviate the emotional distress and enhance the behavioral functioning of students (Ellis & Bernard, 1983).

While RET is considered a cognitive method, there are some conceptual distinctions. The RET and the CBT approach can be classified together since each defines emotional disorders and behavioral maladjustment in terms of cognitive-mediational dysfunctions (Ellis & Bernard, 1983) who explained the differences as follows:

“The main difference between CBT and RET is that CBT does not attempt to modify the overall philosophy and assumptive world of clients through the use of disputational methods. CBT is more problem-focused (or behavior-focused) and defines goals of treatment in terms of specifiable behavior change. RET views problem behavior (and emotions) as symptomatic of an underlying belief system that constitutes the core of maladjustment....But the basic goal of RET and CBT remains the same: helping youngsters with emotional and behavioral problems to internalize a philosophy of life/cognitive strategy that is more rational and realistic than the one they commonly abide by when they get into difficulties” (Ellis & Bernard, p.9).

RET is cognitive, emotive, and behavioral in its methods. It emphasizes that humans, especially when they acquire language and internalized speech, almost never experience pure thoughts, feelings, or actions. Their thinking, emoting, and behaving interact, so that their ideations influence their feelings and behaviors; their emotions influence their thoughts and behaviors; and their behaviors influence their thoughts and feelings (Ellis & Bernard, 1983).

Cognition can be defined in the following ways: (1) Cognitive events refer to thoughts and images occurring in the individual's stream of consciousness; (2) Cognitive processes include ways in which external stimuli are appraised and transformed (Ellis & Bernard, 1983); (3) Cognitive structure is the organizing aspect of thinking that seems to monitor and direct the strategy, route, and choice of thoughts (Meichenbaum, 1977). Meichenbaum's (1977) description of cognitive structure is similar to meaning making structures of cognition, termed schemas (Alford & Beck, 1997).

A conception of cognition that aides in clarifying the role of cognition in human emotion and behavior is referred to as inner-speech (Bernard & Joyce, 1984; Luria, 1961; Vygotsky, 1962) self-talk, automatic thoughts, covert self-instructions, private thought, primal whispers, etc. (Alford & Beck, 1997). Inner speech serves two distinct functions:

(1) an instrumental and cognitive self-guiding function, e.g., to plan a course of action; (2) an affective function, e.g., when individuals use inner speech to tell themselves how they are feeling about what they are planning or have done. The affective-instrumental distinction is important since differing cognitive approaches tend toward either emotional or behavioral changes that are not differentiated by clients (Ellis & Bernard, 1983).

Ellis (2001) changed the name rational-emotive therapy (RET) to rational emotive behavior therapy (REBT) in 1993. In REBT, “rational” meant cognition that is effective or self-helping, not merely cognition that is empirically and logically valid (Ellis, 2001). The name RET omitted the behavioral aspect of Ellis’ model. REBT is one of the most behaviorally oriented of the cognitive-behavior therapies e.g., homework assignments, verbal rethinking leads to changed motor behavior and leads to changed ideation (Ellis, 2001). REBT has always viewed cognition, emotion, and behavior as holistically integrated and therefore multimodal in its therapy techniques (Ellis, 2001). In REBT the three modalities (cognition, emotion, and behavior) help individuals make emotional and behavioral changes.

In REBT, the terms belief and belief system refer to that aspect of human cognition that is responsible for the mental health of the individual (Ellis & Bernard, 1983). Beliefs, a central construct of REBT, were described by Ellis (2001) as follows:

“Thus, REBT theorizes that most clients have somewhat similar Irrational Beliefs (IBs), especially the three major absolutistic musts that frequently plague the human race: (a) “I must achieve outstandingly well in one or more important respects or I am an inadequate person!” (b) “Other people must treat me fairly and well or they are bad people!” ©) “Conditions must be favorable or else my life is rotten and I can’t stand it!” When one, two, or three of these are strongly and consistently held, people tend to make themselves emotionally and behaviorally disturbed” (Ellis, 2001, p.61).

OASIS uses a cognitive, behavioral treatment based on Rational Emotive Behavior Therapy (Ellis, 1962, 2001; Ellis & Bernard, 1983) along with other allied cognitive-behavioral therapies. OASIS uses REBT because it is: (a) cognitive - in order to change students’ thoughts and beliefs; (b) behavioral - when students thoughts and

beliefs change, their behavior changes; ©) psycho-educational – focuses on teaching academics and behavior by means of methods that educators use to teach new skills in school (e.g., the four models of learning theories discussed above).

In order to be effective in increasing students' social behavioral achievement, OASIS is based on theory and research from various areas illustrated in Figure 2: (a) cognitive-behavioral such as the concept of “irrational belief systems” (Beck, 1976; Ellis, 1962, 2001; Ellis & Harper, 1975; Maultsby, 1984); (b) structured learning, social learning theory (Bandura, 1973) and modeling and self-reinforcement (Goldstein, et al., 1998); ©) anger control training and verbal mediation, such as self instructional statements (Feindler, 1991; Feindler & Ecton, 1986; Goldstein, et al., 1998; Little & Kendall, 1979; Luria, 1961; Meichenbaum, 1977; Meichenbaum & Goodman, 1969; Novaco, 1975; Vygotsky, 1962; Vygotsky, 1978); and (e) moral reasoning (Colby, 1978; Damon, 1980; Kohlberg, 1978; Kohlberg & Candee, 1984; Kohlberg & Higgins, 1987; Piaget, 1965).

The cognitive behavioral concept, REBT focuses on irrational beliefs that the adolescent has about his/her own self-worth. REBT was taught by using Ellis' ABC model (Ellis, 1962) to show students how their feelings and behavior are impacted through their irrational thinking. The following is an explanation of some of the essential components of the affective curriculum portion of OASIS.

OASIS utilized self-instruction (e.g., overt and covert self-instructions) that the students may use to mediate their irrational thinking, guiding them in appropriate behavior (Meichenbaum, 1977). Self-reinforcement is taught in order to offset a dependency on an external system of rewards. Students reinforce their own performances through self-evaluation (Goldstein, et al., 1998). In addition, modeling (Meichenbaum, 1977) has been incorporated into this program (e.g., modeling on the part of the teacher, students, while some of the models are fictional characters from *Whispering Shadows*, *The Anger Inside*, *To Kill a Mockingbird*, etc). OASIS, when utilizing characters from literature or

	The Relationship Between Theory, Research, and Practice for a Psychoeducational Model OASIS (Opportunity and Success in School)			
	Affective Program Design Characteristics - a comprehension integrated intervention*			
	Cognitive/Behavioral	Structured Learning	Anger Control Training	Moral Reasoning
Theoretical Concepts	Rational Emotive Therapy: ABC Relationship "irrational belief systems"	Social Learning Theory Direct Instruction	Verbal mediation, self-control process Prescriptive Interventions	Developmental Stages of Moral Reasoning Cognitive Distortions
Research	Alford & Beck, 1997 Beck, 1976 Bernard & Joyce, 1984 Corey, 1990 Ellis, 1962; 2001 Ellis & Bernard, 1983 Ellis & Harper, 1975 Ellis & Tafrate, 1997 Ellis & Wilde, 2002 Glasser, W., 1965 Glasser, N., 1989 Graham, 1998 Kendall, 1991 Maultsby, 1984 Meichenbaum, 1977 Reinecke, Dattilo & Freeman, 1996 Spivack, Platt, & Shure, 1976 Zarb, 1992	Bandura, 1973 Goldstein, 1988 Goldstein, Glick, & Gibbs, 1998 Goldstein & McGinnis, 1993 Mayo & Waldo, 1994	Ellis & Tafrate, 1997 Feindler, 1991 Feindler & Ecton, 1986 Feindler, Marriott, & Iwata, 1984 Goldstein, Glick, & Gibbs, 1998 Little & Kendall, 1979 Luria, 1961 Meichenbaum, 1977 Meichenbaum, 1985 Meichenbaum & Goddman, 1969 Novaco, 1975 Vygotsky, 1962, 1978 Wilde, 1996	Damon, 1988 Dewey, 1954 Duska, 1975 Goldstein, Glick, & Gibbs, 1998 Kohlberg, 1969, 1973, 1984 Kurtines & Gewitz, 1987 Piaget, 1965 Rest, 1979 Rich & DeVitis, 1985 Schrader, 1990 Wren, 1991 Yochelson & Samenow, 1976, 1977
Practice	REBT/Counseling: teach ABC model A - I have a thought B - My thought causes a feeling C - I act as a result of these thoughts and feelings Treatment Goals as IEP goals Modeling Self-instruction to mediate irrational thinking Reinforcement Cognitive problem solving Social skills Anger control Moral ed.	Structured learning or a skill-step approach is a systematic technique for teaching an extended curriculum of interpersonal skills, aggression management, and related skills to students lacking in those competencies. Integrates skill-step approach with scripting.	Systematic approach to teaching awareness of activators of anger A - What led up to it? B - What did you do? C - What were the consequences? Hassle Log; triggers; cues, and anger reducers Reminders Angry Behavior Cycle Rehearsal Review Self-evaluation Self-talk Relaxation strategies	Employs dilemma discussion groups to assist students in placing a high value on prosocial skills acquired in structured learning and anger control training. Goal - to increase the moral stage of the adolescent.

*dashed lines indicate that various practices (e.g., modeling, self-instruction, etc.) are used throughout the intervention.

Figure 2. The relationship between theory, research, and practice for a psycho-educational model: OASIS

videos, serves as an effective strategy to address emotional issues in the lives of secondary students (Hebert & Kent, 2000). For example, secondary students identify with a character from a story and reflect on that identification resulting in emotional growth. This type of interaction with a novel that results in affective growth is referred to as bibliotherapy (Adderholdt-Elliot & Eller, 1989; Hynes & Hynes-Berry, 1986). In summary, the teaching and learning strategies discussed and used in OASIS are designed to be effective in working with groups of secondary students with EBD (Elkin, 1983; Vernon, 1983).

Structured Groups

Since secondary students are sensitive to the opinions of their peers, the psycho-educational model uses the principles of group therapy as one intervention modality. Participants have certain rights and they should be made aware of these rights (Corey, 1990). For example, if full confidentiality cannot be guaranteed, group members need to be made aware of the limits of confidentiality that exist. Theories such as behavioral therapy, rational-emotive behavior therapy (REBT), and reality therapy, may be applied to structured groups (Cory, 1990).

According to Corey (1990), group counseling is suited for secondary students because it gives them a place to express conflicting feelings, explore self-doubts, and come to the realization that they share these concerns with their peers. The author wrote:

A group allows adolescents to openly question their values and to modify those that need to be changed. In the group, adolescents can learn to communicate with their peers, can benefit from the modeling provided by the leader, and can safely experiment with reality and test their limits. (Corey, 1990, p.9).

As mentioned above, the group structure can be used with several counseling theories. In addition, structured groups can be centered on a specific theme such as training students in social skills (Goldstein, 1988; Goldstein, et al., 1998; Goldstein, & McGinnis, 1997); anger-control groups (Goldstein, 1988; Goldstein, et al., 1998); moral education (Goldstein, 1988; Goldstein, et al., 1998; Goldstein & McGinnis, 1997); and

adventurous activities groups (Forgan & Jones, 2002; Gillis & Bonney, 1986 in Corey, 1990; Little & Greene, 1984; Rohnke, 1984). An important component of group work consists of challenging and exploring beliefs about situations (Ellis & Bernard, 1983). Corey (1990) explained that emotionality is related to successful outcomes when it is accompanied by cognitive learning or cognitive restructuring. He wrote:

This cognitive component includes explaining, clarifying, interpreting, providing the cognitive framework needed for change, formulating ideas, and making new decisions. Groups offer members many opportunities to evaluate their thinking and to adopt constructive beliefs in place of self-limiting ones. This process of cognitive restructuring forms a central role in several therapeutic approaches, including Adlerian groups, transactional analysis, cognitive-behavioral groups, and rational-emotive group therapy. (Corey, 1990, p. 123).

Various counseling theories, such as cognitive-behavioral, REBT, and reality therapy can be integrated according to the needs of the group (Corey, 1990).

Cognitive-behavioral

A basic assumption of the behavioral perspective is that all problematic behaviors, cognitions, and emotions have been learned and that they can be modified through new learning. Since behavioral group counseling is considered a form of education, group leaders perform teaching functions (Corey, 1990). Group leaders or teachers observe behavior in order to determine the conditions that are related to the problems and the conditions that facilitate change. Many of the techniques used by groups, such as REBT and reality therapy share the assumption of group therapy as an educational process (Corey, 1990).

Group leaders who use a behavioral perspective utilize a wide assortment of interventions that are derived from social-learning theory (Bandura, 1977), such as reinforcement, modeling, shaping, cognitive restructuring, desensitization, relaxation training, coaching, behavioral rehearsal, stimulus control, and discrimination training. In discussing the social learning that occurs in therapy through modeling and imitation, Bandura (1977) suggested that most of the learning that takes place through direct

experience can also be acquired by observing the behavior of others. According to Bandura (1977), one of the processes by which group members learn new behavior is by imitation of the social modeling provided by the group leader. Role modeling is one of the most powerful teaching tools. Group counseling offers members a variety of social and role models to imitate. The modeling is performed by both the leader and the participants (Corey, 1990). Modeling is useful in teaching participants how to make more constructive self-statements and change cognitive structures. Additional intervention procedures are reinforcement, both social reinforcement and self-reinforcement; contingency contracts and behavior rehearsal. Behavior rehearsal, which is a gradual shaping process, coaching, and feedback, is a useful technique in teaching social skills (Goldstein, 1988; Goldstein, et al., 1998; Goldstein & McGinnis, 1997; Mayo & Waldo, 1994). Behavioral procedures such as modeling and rehearsal are used to restructure cognitions (Goldstein, et al., 1998).

Cognitive restructuring is an effective process of identifying and evaluating one's cognitions, understanding the behavioral impact of irrational thoughts, and learning to replace these cognitions with appropriate thoughts (Corey, 1990). Group members frequently reveal self-defeating thoughts and irrational thinking. Ellis (1962, 2001) and Ellis and Harper (1975) have described ways in which to identify self-defeating thinking, methods of undermining irrational thinking, and methods of learning how to substitute rational thoughts in place of irrational thoughts.

Stress management training can also be facilitated through group work. The goal of stress management is to educate students about its effects and to teach them various intrapersonal and interpersonal skills to use as coping strategies. This basic assumption is as follows: How we appraise events in life (including how we think, feel, and act) determines whether stress will affect us positively or negatively. This cognitive behavioral approach to stress management groups stems from the principles and procedures of Ellis's (1962; 2001) REBT, Beck's (1976) cognitive therapy, and Meichenbaum's (1977, 1985) cognitive-behavioral approach. Meichenbaum's (1985) stress management training has

been used for target problems and populations such as adolescents with anger-control problems. His cognitive-behavioral approach to anger management has been integrated into several published programs e.g., Goldstein's (1998) Aggression Replacement Training. Behavior therapy emphasizes the roles of cognitive and social-learning factors (Bandura, 1977; Meichenbaum, 1977, 1985). The cognitive-behavioral model, which uses techniques such as role playing, coaching, guided practice, modeling, and feedback (Goldstein, 1988; Goldstein et al., 1998; Goldstein & McGinnis, 1997; Mayo & Waldo, 1994) may be included with other theoretical orientations (Corey, 1990).

Rational Emotive Behavior Therapy

Ellis (Ellis & Bernard, 1983) found a basis for his clients' emotional and behavioral difficulties in the way they responded to and interpreted reality. During the mid-1950s, he stressed rational therapy or the cognitive element in counseling. Later, he included both a cognitive and behavioral dimension (Ellis, 1962, 2001; Ellis & Harper, 1975). REBT may be considered a form of cognitively oriented behavioral therapy. It has evolved into a comprehensive approach that emphasizes thinking, judging, deciding, and doing (Corey, 1990). REBT holds that feeling, thinking, and behaving continually interact and influence one another (Ellis, 1962, 2001; Nichols, 1999). According to Ellis (1962, 2001), emotional disturbance is initiated and perpetuated by a self-defeating belief system based on irrational beliefs. These self-defeating beliefs are maintained by the illogical statements that people continually make to themselves.

Since REBT emphasizes cognitive restructuring, it is often conducted in a group setting (Corey, 1990; Ellis & Bernard, 1983). Many REBT practitioners use group techniques including audiovisual presentations, bibliotherapy, videos, programmed instruction, and other teaching methods (Corey, 1990), e.g., cognitive behavior modification, modeling, schema theories. The group members support one another during the learning process (Ellis, 2001). With over 40 years of experience in conducting REBT groups, Ellis believed that a group process is effective in helping participants make

constructive personality and behavior changes (Corey, 1990; Ellis & Bernard, 1983).

Various disorders such as anxiety, depression, anger, poor interpersonal skills, etc. can be treated in REBT groups. REBT utilizes a wide range of cognitive, emotive, and behavioral interventions, during both group and individual sessions (Ellis & Bernard, 1983).

Ellis's A-B-C theory of personality and emotional disturbance is central to REBT theory and practice. According to Ellis (1962), the way that one reacts to conditions around us, rather than the conditions themselves is what leads to the teaching of rational thinking. The A-B-C theory claims that when people have an emotional reaction at C (the emotional Consequence), after an activating event that occurred at A, it is not the event itself (A) that causes the emotional state ©). Although the event (A) may contribute to ©), it is the belief system (B), or the beliefs that people have about the event that primarily creates ©). Ellis (1962, 2001) claimed that since people can think, they can train themselves to change or eliminate their self-defeating beliefs, by seeking help, individual or group therapy, reading REBT books, or listening to tapes, etc. When students gain understanding of the A-B-C theory, they are ready to scientifically dispute these beliefs and values (D). This process of disputation involves three other D's: (1) detecting irrational beliefs and seeing that they are illogical, (2) debating these irrational beliefs and showing oneself how they are unsupported by evidence, and (3) discriminating between irrational thinking and rational thinking (Ellis, 2001; Ellis & Bernard, 1983). After (D), comes (E), or the effect of disputing – getting rid of irrational beliefs and self-defeating thoughts. This is the point of acquiring a more rational and realistic philosophy of life (Ellis, 2001; Ellis & Bernard, 1983).

In teaching the A-B-C-D-E theory of REBT, students are taught that no matter how they acquired their irrational beliefs (e.g., “shoulds”, “oughts”, and “musts”), they have the power to surrender their self-defeating beliefs (Ellis, 2001, Nichols, 1999). Group members are shown ways to apply the A-B-C-D-E theory to their own problems (Nichols, 1999). When disputing the three D's (detecting, debating, and discriminating), REBT

teachers or therapists demonstrate how such ideas bring about unnecessary disturbances. REBT teachers persuade students to surrender these dysfunctional beliefs and also teach them to realistically challenge the irrational thinking of other group members (Nichols, 1999).

REBT employs additional strategies such as coping self-statements of both internal and external speech (Meichenbaum, 1977; Vygotsky, 1962, 1978). In addition, REBT utilizes such psycho-educational methods such as reading books based on REBT (e.g., Ellis & Tafrate, 1997; Friedberg, Mason, & Fidelo, 1992; Greenberger & Padesky, 1995; Kerr, 1987; Nichols, 1999; Nichols & Shaw, 1999; Padesky & Greenberger, 1995; and Vernon, 1989). These materials are suitable for group work in the public schools (Nichols, 1999; Nichols & Shaw, 1999).

In addition, students in REBT groups may be given cognitive homework assignments, which consist of ways of applying the A-B-C-D-E theory to relevant problems. There are many published forms available for these purposes (e.g., Friedberg, et al., 1992; Goldstein et al., 1998; Goldstein & McGinnis, 1997; Greenberger & Padasky, 1995; Kerr, 1987; Nichols, 1999; Vernon, 1989). Using forms, students write down activating events and consequences such as self-defeating behavior and irrational beliefs. The use of forms also gives students opportunities to write down appropriate alternatives. A major tenet in REBT is that unless participants put their philosophical restructuring to the test of practice, the effects will not maintain (Corey, 1990). Behaviorally oriented homework assignments include bibliotherapy, relaxation practice, written A-B-C-D-E analyses, etc. These assignments may be implemented during group sessions or on an individual basis.

REBT uses behavioral strategies such as reinforcement and consequences as a goal to teach students methods of self-management (Meichenbaum, 1977, 1985). Students' success is illustrated in how well they can take charge of their life beyond the group

sessions, e.g., in their general education classes, unstructured times, and in the community. REBT helps secondary students with EBD to effectively manage their lives (Corey, 1990).

Role playing (Goldstein, 1988; Goldstein, et al., 1998; Goldstein & McGinnis, 1997; Mayo & Waldo, 1994) and modeling (Goldstein, 1988; Goldstein et al., 1998; Goldstein & McGinnis, 1997; Nichols, 1999) are additional examples of cognitive-behavioral methods used in REBT groups. In an REBT group, role playing involves a cognitive evaluation (Goldstein et al., 1998; Goldstein & McGinnis, 1997; Meichenbaum, 1977, 1983). Ellis (in Corey, 1990) believed that role playing is more effective if it involves a cognitive restructuring of the attitudes revealed by the experience.

The learning that occurs through modeling and imitation is similar to that achieved through role playing (Corey, 1990). Bandura (in Cory, 1990) explained that the theory and practice of social modeling and imitative learning is related to behavioral change. For example, when students configure their behavior after those they perceive as models (Corey, 1990; Ellis, 2001; Nichols, 1999), they can bring about changes in their thinking, feeling, and behaving. Since modeling involves a cognitive component, Ellis (in Corey, 1990) said that “when people explicitly perceive how they can use modeling, they can more easily and intensively help themselves than when they have little or no awareness of using imitation” (Ellis, 1979, p.131).

Skill training in specific skills, such as social skills (Goldstein, 1988; Goldstein et al., 1998; Goldstein & McGinnis, 1997; and Mayo & Waldo, 1994), is also employed in REBT group work. For example, students practice various social skills, e.g., Dealing with someone else’s anger (Goldstein et al., 1998), within the group and receive feedback (Goldstein et al., 1998; Goldstein & McGinnis, 1997. Members receive feedback on how well they followed the steps in performing a certain social skill, or on irrational thinking, self-defeating statements, and behaviors. Using this feedback, group members practice new behaviors based on revised thoughts (Corey, 1990).

REBT group work is effective because other members may challenge student's rigid thinking. Students may surrender their ineffective ways of thinking when they are confronted by both the group leader and their peers. They observe others in the group effectively using REBT cognitive methods (modeling) and are encouraged to apply these methods to their own problem solving strategies (Corey, 1990).

Reality Therapy

Although Glasser has written little on group counseling, (Corey, 1990), reality therapy has much to offer groups of parents and groups composed of secondary students with EBD in the public schools. Some documented successes where reality therapy was utilized in groups were the Ventura School for Girls, Harrington's work at the Los Angeles Veterans' Administration Hospital, and Mannering's work at the Western State Hospital in Washington (Glasser, 1965).

Reality therapy (Glasser, 1965) focuses on solving problems and on coping with the demands of reality in society. Asked to identify their needs and wants, clients evaluate their behavior, formulate a plan for change, commit themselves to their plan, and follow through with their commitment. The goal is for clients to gain control (Glasser, 1989) over their lives. One of Glasser's (1965, 1989) assumptions is that any change in one's identity is contingent on behavioral change. Reality therapy has commonalities with cognitive-behavioral therapy and REBT since it stresses present behavior.

According to Glasser (1965), the basic human needs are relatedness and respect. He further explained that one satisfies these needs by doing what is realistic, responsible, and right. One of the tenets of reality therapy is that people get into emotional binds when their problem is a failure at the interpersonal, social level of human functioning. Glasser (1965) claimed that reality therapy is educational and is readily applicable by classroom teachers. One of the advantages of the group approach is that it encourages the development of righteousness or morality, responsibility, and realism. Glasser (1965) explained that people suffer emotionally because they are unable to fulfill their essential

needs. No matter what behavior is chosen to fulfill their needs, all emotionally disturbed people share a common characteristic; they deny the reality of the world around them. It is not enough to help a person face reality; the person must also learn to fulfill his/her needs (Glasser, 1965). Expanding on his earlier theory, Glasser (in Corey, 1990) identified four essential psychological needs: (1) belonging; (2) power; (3) freedom; (4) fun – and the physiological need for survival. In the 1980's, Glasser added control theory into the practice of reality therapy. Control theory is an explanation of how and why we behave or how we attempt to satisfy these basic needs (Glasser, 1989). Glasser stated:

“The core of reality therapy is the idea that, regardless of what has happened or what we are doing, we choose all that we do with our lives and are responsible for those choices” (Glasser, 1989, p.xiv).

He continued to explain that when clients understand this they no longer try to avoid responsibility. Instead they are willing to put in the effort to learn more responsible choices (Glasser, 1989). According to Glasser's (1989) control theory, we always have control over what we do. In the context of understanding our behavior, the following four components were included: (1) doing (active behaviors such as talking); (2) thinking (voluntary thoughts and self-statements); (3) feeling (such as anger, joy, depression, anxiety); and (4) physiology (such as sweating, headaches or other psychosomatic complaints). Glasser's control theory shares with cognitive-behavioral therapy and REBT in that in order to change a behavior, it is also necessary to change what we are doing and thinking. Similarly with REBT, reality therapy also has the assumption that a feeling can not be changed independently from what we are doing or thinking. According to the reality therapy model, if we change the doing component, we cannot avoid changing the thinking, feeling, and physiological components (Glasser, 1989). Another similarity with other cognitive behavioral models (e.g., REBT) is getting clients to evaluate their behavior. According to Glasser (in Corey, 1990), the core of reality therapy is to ask clients to make the following evaluation: “Does your present behavior have a reasonable chance of getting you what you want now, and will it take you in the direction you want

to go?” (in Corey, 1990, p.462). This is similar to various cognitive problem solving assignments used in cognitive-behavioral therapy, such as REBT. For example, the “Getting a problem under control” worksheet (Nichols, 1999) also asks students: “What do I want that I don’t have now?” In addition, the worksheet has students predict consequences, costs, and payoffs for their behaviors. Unless students judge their own behavior, they will not change (Corey, 1990). After making these value judgments, students can determine what may be contributing to their failures and what changes they can undertake to achieve success.

Planning for responsible behavior is an important component of changing failing behavior. This teaching skill provides students with new information and helps them discover more effective ways of getting their needs met (Glasser, in Corey, 1990). A plan that fulfills wants and needs is central to effective group counseling (Corey, 1990). The process of creating and carrying out plans enables people to gain effective control over their lives. Corey (1990) added that because of its focus on the perceptual and behavioral systems, reality therapy is considered a cognitive-behavioral approach.

In summarizing various group theories and techniques, Corey (1990) recommended that group leaders understand the relationship between techniques and theoretical concepts. He explained that leaders must be aware of why they are using certain methods and they must have an idea of the outcome. In addition to having a justification for using certain group techniques, leaders must continually assess their effects (Corey, 1990).

Dilemma Discussion Groups

The group structure for dilemma discussions is a method to teach secondary students with EBD how to think about moral issues, to problem solve moral situations that do not have clear-cut solutions, and to use principles of fairness and justice in their interaction with others (Duska & Whelan, 1975; Goldstein, 1988; Goldstein, et al., 1998; Oser, 1984). Moral development occurs through maturation, education, and socialization.

Socialization is the process in which an individual acquires the knowledge, skills, and behavior that will make him or her an adequate member of society (Rich & DeVitis, 1985). The social interaction and social context of the dilemma discussion groups is necessary for moral development (Duska & Whelan, 1975; Power & Reimer, 1978). This method is predominately the product of Kohlberg's work that complemented and expanded Piaget's (Duska & Whelan, 1975; Rest, 1979; Rich & DeVitis, 1985) cognitive developmental approach to moral development (Goldstein, 1988).

Dilemma discussion groups include the following goals: (1) Increasing the moral reasoning stage of the adolescent (Power & Reimer, 1978); (2) helping the adolescent use recently learned and more advanced reasoning skills in everyday life (Gibbs, 1987), and (3) the development of empathy and mutual respect, e.g., expanding an individual's perspective through taking other viewpoints (Duska & Whelan, 1975; Power & Reimer, 1978). These goals are achieved through peer group discussions concerning a variety of moral dilemmas (Blatt, Colby, & Speicher, 1974; Gibbs, 1988, in Goldstein, 1988; Goldstein, et al., 1998; Kohlberg's Moral Judgment Situations, in Duska & Whelan, 1975; Piaget's Stories of Moral Judgment, in Duska & Whelan, 1975) and the reasoning underlying various behavioral choices in these moral situations (Gerson & Damon, 1978). Videos, such as *On the Waterfront*, can also be used for the purpose of dilemma discussion groups (Duska & Whelan, 1975). Students also use published dilemmas or videos as springboards for discussing their own issues that are relevant to their lives (Gibbs, 1987). Through this form of social interaction, students are exposed to different ways of thinking about moral issues (Duska & Whelan, 1975), just as they are exposed to different ways of thinking in their other cognitive-behavioral groups.

The educational applications of the theory have been used to promote classroom discussions of moral issues to stimulate moral growth, and to restructure the school environment (Rich & DeVitis, 1985). The goal of the discussion groups was to arouse cognitive conflict among participants and expose them to moral reasoning of a stage

higher than their own (Duska & Whelan, 1975; Goldstein, 1988; Rich & Devitis, 1985). Separate courses were not proposed, e.g., discussions of this type could take place in social studies classes, etc. (Rich & Devitis, 1985).

Kohlberg's Just Community, which was run as a direct democracy (Rest, 1979; Rich & Devitis, 1985), applied his approach in the public schools (Kohlberg & Higgins, 1987; Rich & Devitis, 1985) in an effort to develop responsible moral action as well as improving moral reasoning. By the second year of the Just Community, students learned to take an active role in dealing with school problems (Rich & Devitis, 1985). Responsible moral behavior is not only a function of individual psychological disposition, such as moral judgments of rightness, but also of shared group norms and a sense of community; it is the moral component of school climate or group character (Kohlberg & Higgins, 1987). Kohlberg's work in the schools was an attempt to integrate the affective, cognitive and action/behavioral features of moral learning (Kohlberg & Candee, 1984), requiring the students' social engagement in the schools (Oser, 1990; Rich & DeVitis, 1985). The development of Just Communities was one of the most important fundamentals for school reform in the 1980's (Oser, 1990).

During dilemma discussions, students were asked to explain the reasoning leading to the position they have chosen. In this way, group members were exposed to different stages of moral reasoning. These are different rationales underlying behavioral choices made by students operating at different levels of moral reasoning. Exposure to "advanced" (usually one stage higher than the student's own reasoning stage) reasoning stages creates confusion known as "cognitive conflict" that may contribute to the students' attainment of a higher level of moral reasoning as a means of resolving conflict (Duska & Whelan, 1975; Goldstein, 1988; Goldstein, et al., 1998). Exposure to more advanced reasoning stages also offers students an opportunity to "try on" the role of another person (Duska & Whelan, 1975).

In summary, there are at least three basic principles involved in enhancing moral reasoning development that form the basis for the specific procedures used in dilemma discussion groups. They are as follows: (1) Exposure to the next higher stage of moral reasoning; (2) inducement of confusion over genuine moral dilemmas, (3) opportunity to take on the role of another person. Dilemma discussion groups can be applied to many moral issues, including the values of life, property, the law, truth, affliction, authority, contracts, conscience, and punishment (Goldstein, 1988; Goldstein et al., 1998).

When applied in the school setting, this method must not involve indoctrination or the teaching of any specific values or beliefs (Duska & Whelan, 1975; Goldstein, 1988). Kohlberg (1978) revised his belief concerning indoctrination claiming that moral education can be in the form of advocacy or indoctrination without violating the child's rights, as long as teacher advocacy is democratic, recognizing the shared rights of teachers and students. Kohlberg's findings showed universal stages of moral development and generated a philosophy of moral education designed to stimulate moral development rather than teach fixed moral rules (Rich & DeVitis, 1985). There are three premises that are included in the dilemma discussion groups. First, the teacher should never attempt to force students to accept his or her personal values. This method is aimed at helping students to develop effective problem-solving skills that adolescents may need in order to find their own solutions to moral conflicts that they may encounter during their lives (Duska & Whelan, 1975; Goldstein, 1988).

Second, dilemma discussion groups do not only provide opportunities to clarify values. Students are asked to defend the reasoning underlying their position in relation to how consistent their rationale is with principles of fairness and justice. While rationales will vary, one aim of this method is to help students develop flexible reasoning processes that can be adapted to various situations (Goldstein, 1988).

Third, the group is not a form of behavioral therapy in which emotional conflicts are revealed or specific behaviors are changed. Instead, these groups remain focused on

the discussion of moral issues by using specific, sequential procedures. Discussion focuses on the examination of moral reasoning in relation to moral issues (Goldstein, 1988).

For educational purposes, morality is conceptualized as a system of conduct based on moral principles, such as principles of right conduct in behavior, justice, fairness, equality, and respect (Rich & DeVitis, 1985). It is also useful to think about morality in terms of the processes involved. Moral education refers to instruction in moral rules of conduct for the purpose of developing appropriate character traits and ethical behavior, e.g., instruction may be systematically planned moral education programs in schools (Rich & DeVitis, 1985). Morality involves the following skills and values: (1) thinking or reasoning (problem solving, decision making) in a rational way; (2) showing an awareness of, and consideration, of others as well as oneself, e.g., mutuality (Rich & DeVitis, 1985); and (3) behaving constructively, i.e., in ways that benefit both self and others, during problematic interpersonal situations. Thus, morality involves cognitive (thinking), affective (feeling), and behavioral (doing) as interrelated components (Goldstein, 1988).

The basis for dilemma discussion groups can be found in cognitive developmental theory (Duska & Whelan, 1975; Goldstein, 1988). This theory focuses on cognition; particularly the way people think or reason about laws, rules, and principles over the course of their development. The content of moral cognitions involves what one is thinking or actually saying (i.e., opinions). In contrast, the structure of moral reasoning involves how one is thinking or the process of thinking (i.e., what underlies one's words). This distinction implies that while the content of the individual's reasoning may vary from situation to situation, the structure remains relatively constant over different moral dilemmas for a person at a given level of moral reasoning. For example, the structure of moral reasoning will be fairly similar for a person whether he/she is reasoning about the value of life or property. It also implies that while the content may be similar between lower and more advanced reasoners, the reasoning process will be different (Goldstein, 1988).

A moral situation involves a conflict in which at least two conflicting interests or values are evident. These situations often involve, but are not limited to, conflicts concerning legal/societal norms or relating to the needs of others (e.g., stealing in order to save someone's life). The concept of moral issues or moral norms relates to the distinction that has already been made between content versus structure of thought. Moral issues relate to the content of the individual's moral reasoning rather than how the person reasons (structure). Specifically, moral issues involve "the values the person is reasoning about" (Arbuthnot & Faust, 1981, p.68). These moral issues include life, property, truth, affiliation, authority, law, contract, conscience, and punishment (Goldstein, 1988).

The cognitive theory of moral reasoning proposes six stages of moral development (Duska & Whelan, 1975; Goldstein, 1988; Goldstein, et al., 1998; Rest, 1979; Rich & DeVitis, 1985). These six stages represent different ways of thinking and reasoning about moral issues that emerge during the course of an individual's life span (Duska & Whelan, 1975; Goldstein, 1988; Rich & DeVitis, 1985). Movement through these stages may occur in a predictable and invariant sequence (i.e., movement from Stage 1 to Stage 2 to Stage 3, etc.). Later stages represent more complex and abstract ways of reasoning about moral issues. The theory also suggests that the moral structures of the earlier stage serve as the foundation for the development of the moral structure of the next stage i.e., hierarchical integration (Goldstein, 1988; Rest, 1979; Rich & DeVitis, 1985). In addition, each stage is believed to reflect an organized way of thinking about moral issues (structured whole). However, while movement through the stages occurs in an invariable sequence and hierarchical order (Goldstein, 1988; Rest, 1979; Rich & DeVitis, 1985), the theory also maintains that an individual does not reason at only one stage in all situations. Rather, people are seen as primarily reasoning at one stage (dominant stage) and secondarily at adjacent stages, either one stage below or above the predominant stage (Goldstein, 1988). This idea of primary and secondary stage reasoning has important implications because the

teacher may detect some variability in an individual's responses across different moral dilemmas (e.g., Stage 1 reasoning on one moral dilemma and Stage 2 on another).

Cognitive developmental theory proposes that changes that emerge in moral development reflect changes in the student's thought structure (reasoning process changes). This moral advancement is induced by cognitive conflict (Goldstein, 1988). The concept of cognitive conflict is essential to the dilemma discussion groups (Duska & Whelan, 1975; Goldstein, 1988; Goldstein, et al., 1998). Cognitive development theory proposes that through the student's interactions with others, he/she is exposed to situations in which moral values conflict and appropriate rules for behavior are unclear. Repeated exposure to these value-conflictual situations leads to the student's cognitive conflict (Duska & Whelan, 1975; Goldstein, 1988; Goldstein et al., 1998). Students experiment with alternate means of reasoning as an effort to resolve their cognitive conflict. Their alternative ways of reasoning are usually reflective of the next or higher stage of moral judgment. The dilemma discussion groups expose students both to the limitations of their current reasoning process and to alternative ways of thinking about situations (Goldstein, 1988; Goldstein et al., 1998).

It is important to understand the student's social perspective as well as Kohlberg's Six Stages of Moral Development (Duska & Whelan, 1975; Rest, 1979). Social perspective refers to a person's perception "of the relationship of self to others, or the self-to society's rules and regulations" (Arbuthnot & Faust, 1981, p.121) and is included in the response.

Kohlberg's Six Stages of Moral Development are categorized into three levels: Level I – Preconventional; Level II – Conventional; Level III – Postconventional, or Principled (Duska & Whelan, 1975, Goldstein, 1988; Rest, 1979). The major orientation of the Stage 1 reasoner is that of punishment and obedience. At this stage, the student views morality as a number of defined rules established by powerful people. These rules

are not seen as having any relation to society (Rich & DeVitis, 1985). The social perspective of students at this stage is egocentric and narrow (Goldstein, 1988).

The major orientation of the Stage 2 reasoner is that of instrumental relativism (i.e., individualism, instrumental purpose, and exchange). Stage 2 reasoning is primarily characterized by the idea that one will meet the needs of others only when doing so also meets one's own needs (Rich & DeVitis, 1985). The social perspective of the Stage 2 reasoner involves the recognition that one's personal views may differ from other people's positions and that these other people may also perceive situations differently from each other. Relationships are generally seen in dyadic terms, with moral reasoning reflecting individual rather than group concerns. The primary characteristic of Stage 2 reasoning is the idea that one will meet the needs of others when doing so also meets one's own needs (Goldstein, 1988).

The major orientation of the Stage 3 reasoner is that of interpersonal concordance, such as mutual interpersonal expectations, relationships, and interpersonal conformity. Individuals at this stage determine what is right by following the "Golden Rule" principle of doing unto others what you would want them to do unto you. Stage 3 reasoners have developed the capacity for reciprocal perspective-taking, that is, the ability to view an action from another person's point of view. This characteristic can be observed during dilemma discussion groups (Goldstein, 1988; Rich & DeVitis, 1985). The form of egocentrism of Stage 3 is in seeking to gain approval from legitimate authority figures, e.g., the righteousness of a behavior is determined by whether it results in approval. Therefore, what is worthy is defined externally (Goldstein, 1988; Rich & DeVitis, 1985). Concerns about society beyond the immediate social group have not yet emerged. The social perspective of the Stage 3 reasoner involves an understanding of the "group good" and the ability to take other's perspective (Goldstein, 1988).

The major orientation of the Stage 4 reasoner is involved with considerations about law and order, the social system, and conscience. There is a desire to maintain order

and law in the larger society, as well as meeting one's obligations to society in an effort to prevent social disorder. For example, the individual behaves in a manner that facilitates the functioning of the entire society. The Stage 4 reasoner also uses a legal position to determine what is acceptable or unacceptable. However, they obey because laws are made by society and must be upheld out of respect and fairness to all members of society (Goldstein, 1988). Stage 4 reasoners hold that strict standardization of the law is needed to maintain equality and order (Goldstein, 1988, Rich & DeVitis, 1985). The social perspective of the Stage 4 individual is characterized by the realization that all people including oneself, are needed for the successful functioning of the larger society (Goldstein, 1988). It is this focus on the "social good" that differentiates Stage 4 from Stage 3 reasoners, whose focus is on the "group good" (Goldstein, 1988). While dyadic or small group relationships are still seen as important, the social perspective evolves to encompass the meaning and impact these relationships, and people in general, have on the entire society. People are not seen only as sharing a relationship, but as sharing a society (Goldstein, 1988).

As the Stage 4 individual develops he or she begins to question the underlying principles used in establishing laws (Goldstein, 1988; Rich & DeVitis, 1985). Contradictions between legal laws and moral laws including the injustice of some legal laws become evident in the advanced Stage 4 reasoner. This awareness marks the movement to Stage 5 reasoning. Stage 5 reasoning emphasizes law, but involves a realization that most values are relative and a belief in some non-relative values that must be upheld in any society. The social perspective recognizes that moral and legal points of view sometimes conflict (Goldstein, 1988).

Stage 6 reasoning emphasizes universal principles of justice, equality, and dignity over law. The social perspective of this stage is that the rational individual recognizes the nature of morality or the fact that individuals are ends in themselves and must be treated as such (Goldstein, 1988). Judgments at Stage 6 are attained by very few individuals (Colby,

1978; Goldstein, 1988; Kohlberg, 1978; Rest, 1979; Rich & DeVitis, 1985). Therefore, Stage 6 was revised as a theoretical construct and may be viewed as an elaboration of Stage 5 (Kohlberg, 1978; Colby, 1978). Due to these findings, Goldstein (1988) predicted that during dilemma discussion groups teachers may not observe many secondary students with EBD above the Stage 4 reasoning level.

Program Planning

Program planning for secondary students with EBD requires an assessment of the service delivery system's characteristics and resources in addition to an assessment of parent and staff variables. This context may limit the professional time and resources allocated to a psycho-educational program. Although REBT is applicable within an individual consultation and/or group format (Ellis & Bernard, 1983), practical considerations might determine which format is selected. McInerney (1983) preferred structured, time-limited group counseling in combination with brief individual consultation. The author claimed that:

“A realistic appraisal of the limits of the service provided will help parents, other staff, and the therapist to set realistic goals and expectations. In addition, it can be used to develop guidelines for referral to other therapeutic resources, such as mental health clinics or private practitioners, where appropriate. None of us can be or do everything for everyone. This is particularly true of those of us employed within public settings, such as schools or treatment centers, where funding is limited” (p.395).

Ellis (2001) stated that REBT and CBT are suited for school programs. This is because they are didactic forms of therapy (Ellis, 2001), and studies have shown that their methods can be taught to large and small groups in the classroom setting (Bernard & Joyce, 1984; Ellis & Bernard, 1983; Nichols, 1999; Vernon, 1989). The potential use of REBT and CBT in the school system is applicable, since the majority of children, adolescents, and adults receive schooling of some sort and relatively few of them receive any amount of affective or emotional education (Ellis, 2001). Beginnings in this direction have been made in educational programs on personal growth and development, most of

which are cognitive-behavioral (Ellis, 2001). Ellis (2001) predicted that these programs will continue to expand, so that within the next decade or two few high school and college graduates will fail to acquire affective or emotional education along with their academic and vocational learning. Recommendations for program planning, using the REBT approach in the schools, have been presented ((Bernard & Joyce, 1984; Ellis, 2001; Ellis & Bernard, 1983; McInerney, 1983; Nichols, 1999; Vernon, 1983, 1989). The following discussion includes a brief review of the research concerning program planning, in general, for secondary students with EBD.

A review of the literature revealed that there are interventions for secondary students with EBD, but they are often not implemented in the public schools (e.g., psycho-educational centers, residential facilities, alternative schools). Results that have been identified came mainly from short term research studies. However, there are some research and best practices available for working with secondary students with EBD. During this portion of the review, sources are categorized by types of services and their potential outcomes that are integrated in OASIS, e.g., academic and affective instruction, services to families, teachers and other personnel supports, related services, transition services, and students' outcomes. Program planning for OASIS follows the IDEA and is illustrated in Figure 3 titled, Needs of Secondary Students with EBD.

OASIS includes a psychoeducational program that integrates academic and affective instruction. Secondary students with EBD were taught appropriate behavior through their special education teacher. Students also received academic instruction from their special and general education teachers. During the affective curriculum, social skills training and counseling were based on Ellis' REBT model and other allied cognitive behavioral models. Through offering group or individual counseling during the school day, OASIS utilized related services in a unique manner at the public school level. Students, who required counseling in order to benefit from an appropriate education, had the opportunity to meet with a school psychologist or other qualified staff for individual

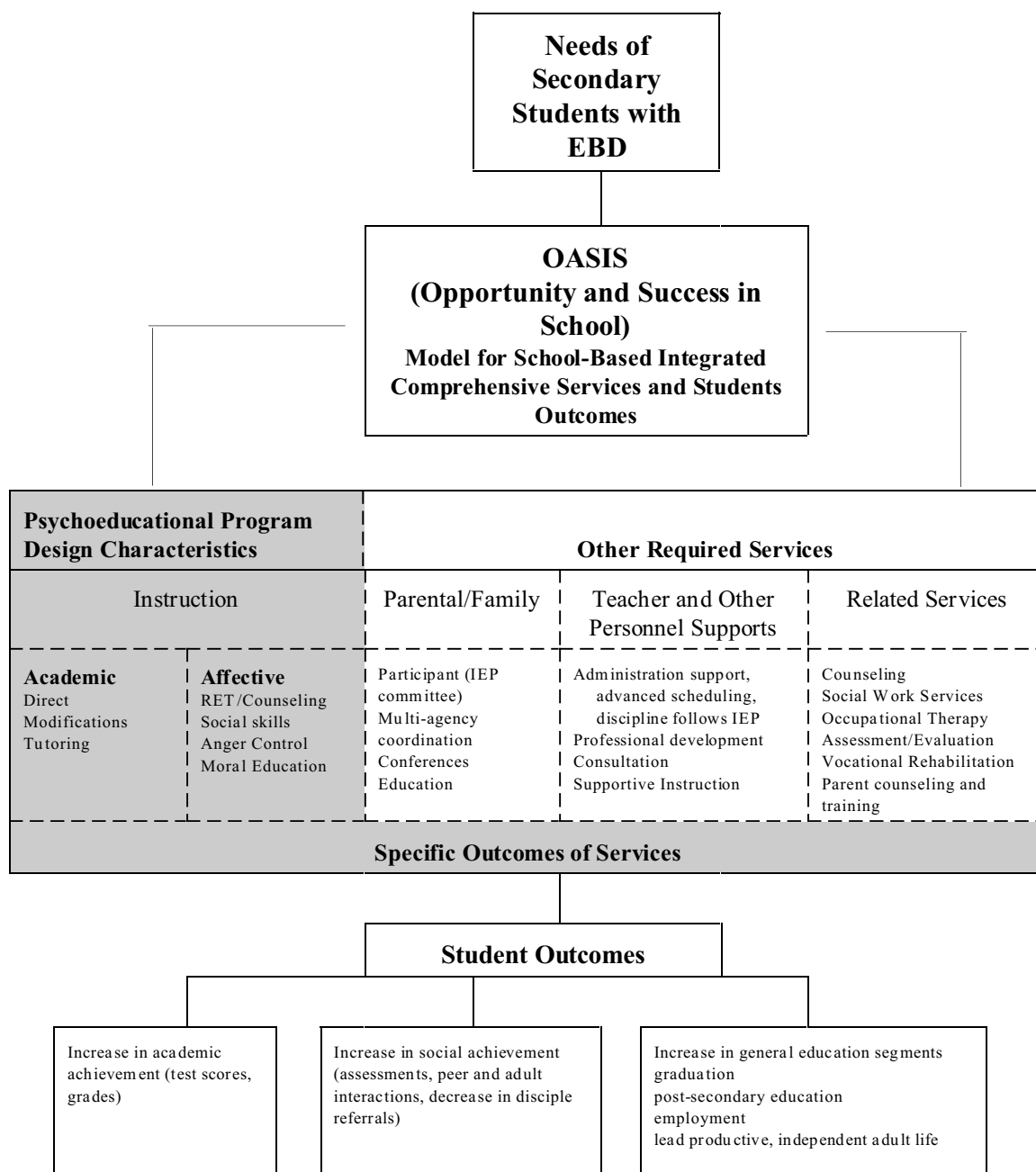


Figure 3: Needs of Secondary Students with EBD

consultations, during the 2002-2003 school year. The following year, students were provided with on- site counseling services through special education staff and other qualified school personnel. The purpose of this related service and special education service is to enable secondary students with EBD to succeed academically and to become functioning members of society. The affective curriculum taught by a teacher certified in EBD with the addition of counseling as a related service follows the 1997 reauthorization of the Individuals with Disabilities Education Act (IDEA).

In order to be in compliance with IDEA, educators of secondary students with EBD have traditionally been involved with other agencies such as the juvenile justice system, mental health, and vocational rehabilitation. Quinn and McDougal (1998) presented a comprehensive intervention for this population of students. They discussed mental health initiatives that consisted of school-based best practices, individualized care, stakeholder collaboration, intensive service coordination, and family centered services. The authors reported that serving students with EBD successfully within their local schools required consistent application of known best practices in academic instruction and behavior management. They organized the various competencies into the following categories: diagnostics and classification, screening and assessment for planning and evaluation of services, appropriate application of behavioral and cognitive/behavioral interventions (i.e. social learning theory), facets of instruction associated with high rates of student learning, crisis management, interdisciplinary collaboration, and family involvement. The authors recommended that these seven categories of school-based competency, illustrated in Figure 4, be applied to address the needs of students with EBD.

The literature consisted of discussions that included several of the categories mentioned by Quinn and McDougal (1998) as well as other factors involved in program planning for secondary students with EBD. Kutash, Duchnowski, Sumi, Rudo, and Harris (2002) evaluated a school-based program for students with EBD and concluded that the role of the school is the primary provider of mental health services for this population of

Needs of Secondary Students with EBD						
Seven Categories of School-based best practices in academic instruction and behavior management						
(1)	(2)	(3)	(4)	(5)	(6)	(7)
Diagnostics and classification	Screening and assessment	Behavioral and cognitive/behavioral intervention	Academic instruction high rates of learning	Crisis management	Interdisciplinary collaboration	Family Involvement
Definition of EBD	Planning and evaluation	Conceptual models of EBD	Strategies for effective instruction	Competency in interventions	Models	Parents as decision-makers
Federal Definition IDEA State National Mental Health & Special Education Coalition DSM-IV Statistically derived classifications School classification teacher related & peer related (Walker) Classification schema	operationalizing definitions systematic screening prereferral assistance formal evaluation sources (teachers, related service personnel, parents, students) of data data analysis evaluation procedures	operant conditioning defining behaviors functional analysis strengthening behaviors weakening behaviors data collection self-management social learning theory social skills training cognitive strategies problem solving stress management	cognitive strategies task analyzed model learning strategies that are relevant to learner (Deshler, Ellis & Lenz, 1996)	<u>Counseling LSI- Life space intervention multi-theoretical approach</u> cognitive, behavioral, psychoeducational <u>Phases of acting out:</u> calm, trigger, agitation, acceleration, peak, deescalation, recovery (Walker)	<u>Collaborative Consultation Model:</u> Problem solving stages-establishing team goals identifying problems developing interventions selecting & implementing an intervention evaluation interventions follow-up activities <u>School Personnel Problem Solving</u> providing support facilitating others success information giving providing solutions <u>Interactive Teaming</u> collaboration around activities related to providing special services e.g., referral, screening, IEPs, etc.	<u>Techniques:</u> Developing empathy for the parents' perspective; Listening skills that enhance the quality of verbal interactions; using techniques that nurture trust; providing reassurance; involving parents fully in planning conferences
Implications for interventions	Procedures that correspond with the federal definition/provide instructional relevant information	Individualizing interventions for students	Characteristics of a learning strategy is its emphasis on the learner's cognitive processes.	Crisis used to teach new prosocial behaviors.	Interactive process generating solutions; fluid, flexible roles; skills of team members used in planning and delivering services	To provide parents with the opportunity to become fully informed, decision-making members of their children's service teams.

Figure 4: Categories of school-based best practices in academic and behavior management for secondary students with EBD (Quinn & McDougal, 1998).

students. Results from their study revealed that students were not receiving related services from community mental health services due to barriers imposed by managed care. In addition, mental health services were supplied during the school day by the school staff. According to IDEA, schools are mandated to supply related services including mental health services in order to support the special education needs of students with EBD. Although there have been some programs created to serve the needs of students with EBD, the system has never become complete nor comprehensive in all districts (Lourie & Hernandez, 2003). Consequently, it is necessary to have an effective program for secondary students with EBD at the public school level, in addition to collaboration with outside systems, in order to improve students' outcomes.

Farmer, Farmer, and Gut (1999) recommended that school-based interventions for students with EBD should not only focus on the behavior of the student. These authors claimed that the research on social cognitive processes supported interventions that focused on reframing students' social-cognitive processes, helping them to develop prosocial goals as well as problem solving strategies. They added that social contextual factors that support aggressive and disruptive behavior must also be taken into consideration.

Nelson (2000) stressed the importance of teacher preparation in the use of effective practices from the literature. The author reported the results of meta-analyses of over 800 studies, generated by Gottfredson (1997) and Lipsey (1991) that indicated that the largest effect sizes were for social skills training, behaviorally-based interventions, and academic curricular restructuring. Nelson (2000) concluded that teaching behavior is the responsibility of all educators.

While some reviews have shown that the effectiveness of social skills training is limited (Erdley & Asher, 1999; Mathur & Rutherford, 1996; Zaragoza, Vaughn, & McIntosh, 1991), Quinn, Kavale, Mathur, Rutherford, and Forness (1999) reported that many programs designed for students with EBD included a social skill-training

component. They described the following components of social skill training: Selecting or prioritizing critical social skills that need improvement; describing and modeling these skills; having the student practice these skills; providing feedback and reinforcement during practice; and identifying a variety of social situations in which the skill might be useful. In order to determine the effectiveness of the interventions, the authors analyzed the results from research that investigated the effects of social skills interventions for students with EBD. Using meta-analysis, the researchers synthesized the findings from 35 studies that investigated the effects of social skill interventions for these students. The pooled mean effect size (ES) was 0.199, from which the average student with EBD would be expected to gain an eight-percentile rank on outcome measures after participating in a social skill training program. Studies were further grouped and analyzed according to different variables (e.g., similarities of the intervention, characteristics of participants, and assessment procedures). The researchers found slightly greater ESs for interventions that focused on teaching and measuring specific social skills (e.g., cooperating, or social problem solving) compared to broad measures of social behavior. These four aggregated areas of problem behavior (family relations, school social behavior, social communication, and disruptive behavior) produced mean ESs below the overall mean ES of 0.199. The authors addressed several pertinent issues for reviewing the results of this research synthesis. The poor outcomes may indicate the failure of group-based interventions to address the variation and severity in the types of social skill deficits evidenced by individual students. In addition, the authors pointed out that the duration of most research studies was short in relation to the severity of the problems and that teaching those skills relevant to the individual in a natural setting had more social validity. They concluded that their results suggested that social skill training should be refined and customized rather than eliminated.

According to Farmer, et al. (1999), interventions that include social skills training for students with EBD must address multiple factors such as changing the student's

behavior through reframing the beliefs and values of the entire social context. These interventions should be based on functional assessments (Farmer, et al.) and address the student's behaviors that elicit maintaining responses from the environment, as well as the factors in the environment that maintain the behavior. For students with severe problem behavior more intensive direct interventions are also necessary, e.g., counseling, cognitive-behavioral problem solving, and crisis management, such as life space intervention (Kamps et al., 1999).

Other Required Services

Parental/Family

Kauffman and Hallahan (1993) explained that parents and those responsible for teaching the student must be the primary decision makers. IDEA encourages parental input through such due process rights as including parents as members of their child's IEP committee. This is explained in the procedural protections that are included in the IDEA. These due process procedures exist in order to protect the rights of children with disabilities. They also include parents as decision makers in their child's educational process. Notice and hearing rights are continuously provided throughout the special education process from initial identification and eligibility through completion or determination of ineligibility. A document that describes these procedural rights must be given to parents.

Schrag (1993) stated that the focus of special education is on programming for individual student needs and systematic involvement of parents. Teachers should maintain open channels of home-school communication and talk with parents periodically (Goodlad, 1993). Lovitt (1993) recommended that teachers understand the importance that parents play in their children's education. Similarly, one of Georgia's state performance goals is to increase the percentage of parents of students with disabilities who are active participants in their child's education.

Is also important for secondary students with EBD to be active participants in their IEP process. Secondary students who participated in the IEP and placement planning process increased their motivation and ability to advocate for themselves within the school environment (Shoho & Katims, 1997; Van Reusen & Bos, 1994). Murray (1993) claimed that the priorities of both parents and students must be considered when making decisions about where students will spend their instructional time. In summary, it is important for educators of secondary students with EBD to involve both the students and their parents in the delivery of services

In addition to parents' rights to be informed participants in the educational programming of their child, parents may have other needs. According to Swan and Morgan (1993), parents of children with disabilities vary in their personal resources, family support systems, educational backgrounds, literacy levels, socioeconomic status, and their abilities to cope with the unique needs of their children. For example, family risk factors for students with EBD may include family history of mental illness, involvement with the court system, and substance use (Robertson, Bates, Wood, Rosenblatt, Furlong, Casas, & Schwier, 1998). Parent activities and services can be represented along a continuum and may include: (1) Parent involvement; (2) parent information; (3) parent education; (4) parent training; and (5) parent support. Services are provided to parents according to their needs at the time (Swan & Morgan, 1993).

Teacher and other Personnel Supports

Administrative and consultative support is essential for special education and general education teachers when implementing services for secondary students with EBD in the public schools. As mentioned earlier, educational reform includes goals to increase the general education segments for students with disabilities. Shapiro, et al., (1999) discussed ways to facilitate inclusion of students with EBD into general education classrooms. The authors, citing a national survey of school administrators by Grosenick, George, George, and Lewis (1991), reported that over 75% of the 192 districts that

responded indicated that the most prevalent service delivery option for students with EBD was the self-contained classroom. Through a review of the literature, they further claimed that 53.7% of students classified as EBD were being educated in settings that removed the student for over 60% of the time from the general education setting. The authors also noted that most general education teachers were concerned about the lack of teacher preparation for teaching students with EBD. In addition, the authors claimed that the following interventions were effective when addressing the needs of students with EBD: Modeling, self-control, social skills training, problem-solving training, counseling, peer tutoring, cooperative learning, and self-management. The authors emphasized that on-going consultative support was critical for general education teachers when implementing services for students with EBD within general education settings.

The researchers (Shapiro, et. al., 1999) reported the outcomes of their three-year project. Their study examined the impact of an experiential in-service program and consultation process in facilitating the inclusion of students with EBD into general education settings. A total of 25 school districts were randomly assigned to one of three conditions. Participants from one group of districts received an intensive experiential in-service program followed by six to eight weeks of on-site consultation to help implement specific intervention strategies learned through the in-service for enhancing inclusionary practices for students with EBD. Participants in the second group also received the in-service, but their consultation was delayed by six to eight weeks. During that time, they were instructed to also implement the interventions for targeted students. The third group served as a wait list control. Results showed that immediate implementation of the consultation process were needed for districts to implement learned interventions effectively. Findings of the study emphasized the importance of consultation and support services to general education staff for enhancing effective inclusionary practices for students with EBD.

Cheney and Barringer (1995) surveyed general education teachers' knowledge and skills when educating students with EBD in inclusive settings. Results showed that the teachers viewed themselves as having little confidence for working with academic and behavioral challenges that these students presented. For example, they rated themselves as having little or only some competence at using materials that promote social development, strategies that reduce aggression, basic counseling or problem-solving skills, and strategies for crisis prevention or intervention. The results of a study conducted by Van Reusen, Shoho, and Barker (2002) supported earlier findings that positive teacher attitudes about including and teaching students with EBD in general education classrooms appear related to the levels of special education training, knowledge, and experience in teaching students with EBD. Martin and Wienke (1998) conducted a study concerning the training of general education teachers through a graduate program in the area of behavior disorders. Using video disc technology combined with practice experiences, one of their findings was that developing clinical problem-solving skills was a desirable outcome of the program. Training recommendations from Muscott (1997) were that both general and special educators and other professionals who work with students with EBD receive training in managing students' anger as well as defusing conflict. He added that secondary students with EBD required unique and creative packages of curriculum and management supports.

Administrative support is also necessary when scheduling secondary students with EBD into the appropriate classes (Hughes, Cihak, & Alberto, 2002). Advanced scheduling is needed for secondary students with EBD, so that they can receive placement in class segments according to their IEP. Advanced and flexible scheduling must be supported by administrators for these students scheduled in classes along the continuum. For example, after completing the special education schedule, administrators should pair the special education paraprofessionals or special education teachers scheduled to provide supportive instruction with a general education teacher in the appropriate class on the master schedule before scheduling the rest of the general education classes (Hughes, et al., 2002;

Machtinger, 2003). One of the reasons that this is necessary is to extend support for secondary students with EBD, as well as their general education teachers.

Related Services

Some of the various related services included in the IDEA are as follows:
[Transportation, and such developmental, corrective, and other supportive services (including speech-language pathology and audiology services, psychological services, physical and occupational therapy, recreation, including therapeutic recreation, social work services, counseling services, including rehabilitation counseling, orientation and mobility services, and medical services, (except that such medical services shall be for diagnostic and evaluation purposes only) as may be required to assist a child with a disability to benefit from special education, and includes the early identification and assessment of disabling conditions in children. 20 U.S.C. § 1401 (1997).

Maag and Katsiyannis (1996) claimed that the related services component of the *IDEA* has been one of the most difficult requirements in providing a free appropriate public education (FAPE) for students with disabilities, although it has considerable legal precedent (*Irving Independent School District v. Tatro*, 468 U.S. 883 (1984); *Cedar Rapids v. Garret F.*, 526 U.S. 66 (1999)). These court cases were associated with health related services for children with disabilities. In *Cedar Rapids v. Garret F.*, 526 U.S. 66 (1999), the court applied the two-part test established in *Tatro* in order to establish whether a school district must provide requested health services as related services if (1) the requested “supportive services” are necessary for the child to benefit from special education; and (2) the services are not excluded as “medical services” that would require the services of a physician for other than diagnostic or evaluation purposes (Dayton, 2002). According to the *Tatro* test, the services were necessary for the student to benefit from special education services.

Maag and Katsiyannis (1996) added that a related service that is receiving increasing attention for students with EBD is counseling. Counseling services may be necessary for secondary students with EBD to benefit from special education services. Counseling services are defined (IDEA, 1997; Georgia Department of Education, 2000) as services provided by qualified social workers, psychologists, guidance counselors, or other

qualified personnel. Related services also include school health services, social work services in schools, and parent counseling and training. Parent counseling and training may include direct, consultative, or group counseling or training. The objectives are as follows: (1) To assist parents in understanding the special needs of their child; (2) provide parents with child development information; (3) help parents to acquire the necessary skills in order to support the implementation of their child's IEP (Georgia Department of Education, 2000). Examples of additional relevant related services for students with emotional and behavioral disorders and their families are psychological services, rehabilitation counseling, and social work services (Georgia Department of Education, 2000).

Transition Services

Transition from school to work, independent living, or post-secondary education is generally more difficult to obtain for students with disabilities than their non-disabled peers. Therefore in 1990, the IDEA was amended to require the provision of "transition services" for students with disabilities. The IEP for each student, beginning at age 14 (or younger) includes a statement of the transition service needs of the student in the IEP that focuses on the student's courses of study, e.g., participation in advanced-placement courses or a vocational education program (Georgia Department of Education Division for Exceptional Students, 2000). For each student at age 16 (or younger) a statement of transition services includes: (1) a statement of interagency responsibilities; (2) a coordinated set of activities for a student designed within an outcome-oriented process, that promotes movement from school to post-school activities (e.g., postsecondary education, vocational training, integrated employment, supported employment, continuing and adult education, adult services, independent living, or community participation; (3) the coordinated set of activities is based on the student's needs, including preferences and interests. The coordinated set of activities include instruction, related services, community experiences, and the development of employment and other post-school living objectives,

and, if appropriate, the acquisition of daily living skills and functional vocational evaluation. The student's transition plan for services is reviewed and updated at least annually. The participating agency responsible for providing transition services is a state or local agency (other than the local school system) that is financially and legally responsible for providing transition services (Georgia Department of Education Division for Exceptional Students, 2000). The state vocational rehabilitation agency is responsible for providing or paying for any transition service for secondary students with EBD participating in OASIS, since these students meet the eligibility criteria for that agency. For example, the vocational rehabilitation counselor offers job training, tuition for post-secondary schooling, or vocational assessments, based on the needs, preferences, and interests of the individual student. During their junior year, students served in OASIS begin the initial process for receiving services from a vocational rehabilitation counselor.

The cost to society is great when schools and communities fail to improve the behaviors of secondary students with EBD. In 1991, the Joint Economic Committee estimated that providing for dropouts and their families cost each taxpayer more than \$800 annually (Ryan, 2001). Secondary students with EBD are more likely to become productive, independent adults, if they receive education and services that meet their needs. Findings from the seven-year longitudinal National Adolescent and Child Treatment Study (Armstrong, et al., 2003) recommended that there is a need to provide comprehensive and integrated services that promote development of social-adaptive skills. Services designed to improve social-adaptive skills were associated with successful transition to adulthood for secondary students with EBD.

Evaluation and Students' Outcomes

Many assessment tools (e.g., BES-2, Walker-McConnell Scale of Social and School Adjustment) exist for screening, evaluative, or intervention purposes for secondary students with EBD. Dunlap and Child (1996) generated a study to examine the status of experimental research on interventions designed to modify behaviors of students with

EBD. The authors surveyed twelve journals published between 1980 and 1993 to explore possible trends in five descriptive dimensions of the research, including subject characteristics, settings, research design, dependent variables, and independent variables (interventions). In addition, the database was examined to determine whether interventions were based on individualized processes of assessment. The results showed negligible trends. Few studies reported interventions that were individualized on the basis of assessment data. The authors' discussion addressed the general status of intervention research and the need for applied research.

When planning a program, it is important that an evaluation system is built into the treatment program (Huberty, Quirk, & Swan, 1973). Periodic assessment of progress and the utilization of objective or quasi-objective data for making informed decisions are both qualities of a constructive evaluation system and an experiential program (Huberty et al., 1973). When evaluating a comprehensive program for at risk high school students, Dugger and Dugger (1998) recommended the following methods of evaluation: (1) description of the program, including the characteristics and treatment; (2) examination of measures of achievement through pre and post-tests; and (3) t-test results on pre/post test comparisons. Perry (2001) claimed that evidence generated from an instructional program evaluation process indicated that this is a valuable process which can be used to enhance instructional programs. The author added that the implementation of an evaluation process is one method to use within an accountability process.

Similarly, Friedman (2002) claimed that results and performance accountability are necessary when implementing a program. He added that the measures must focus on customer results, not just effort. Friedman's four quadrant model identified quantity and quality of input/effort and output/effect. The types of measures found in each quadrant answer "What we did"; "How well we did it"; and "Is anyone better off?" The last question includes the following: (1) "In what ways could clients be better off as a result of

getting this service? (2) How we would know if they were better off in measurable terms?” (Friedman, 2002, p.63).

Examples that may be included in the first quadrant, “What we did or how much we do” are number of students served, subcategories of students, what activities were performed, etc. The adjacent quadrant, “How well we did it” includes measures for the information in the first quadrant and may be converted to a measure such as percent. The bottom two quadrants report client outcomes and may be expressed in numbers and percent. Friedman’s (2002) model for Performance Measures may be applied to an experiential program in the public schools. The lower portion of Figure 3 (p. 52) is based on Friedman’s (2002) model for identifying outcomes. He recommended looking at the data that has been collected in order to identify ways in which clients are better off. Friedman (2002) suggested that pre and post testing can be used to show improvement over time in skills, knowledge or behavior. When discussing accountability, Friedman (2002) explained, that the results or outcomes are conditions of well-being for children and families (e.g., children succeeding in school). In conclusion, Friedman stated that, “Results and indicators are about the ends we want for children and families. And strategies and performance measures are about the means to get there” (Friedman, 2002, p.70).

Graduation and Competency Exams

An example of a student outcome is high school graduation. Graduation from high school is both a desired outcome and a change of placement for secondary students with EBD. Generally, the student completes the IEP in order to be eligible for graduation. Depending on the type of diploma (general education or special education), the student may be required to pass competency exams (e.g., GHSGT) in order to meet graduation requirements. Courts have upheld competency exam requirements, for most students with disabilities. However, students must be given notice of the general contents of the test

along with an opportunity to learn the material. See *Brookhart v. Illinois State Board of Education*, 697 F.2d 179 (7th Cir. 1983).

Summary

OASIS is the model derived from the literature, best-practices, and research. This psycho-educational model was presented as a way for those responsible for educational planning to conceptualize program planning for secondary students with EBD in the public schools. This planning involves the interaction of judicial decisions, legislation, regulations, policy, theory, and research. A review of the literature regarding students with EBD combined with research in the areas of learning theories, cognitive behavioral models, psycho-educational models, high school programs, and program evaluation has been used as a basis for recommendations. Knowledge about program planning and education in general should be used as a foundation and integrated with specific research related to secondary students with EBD. This approach will allow for a broad array of knowledge and research in order to meet the needs of secondary students with EBD along with the legal requirements.

CHAPTER III

METHODOLOGY

This chapter specifies the procedures that were used to gather and analyze data. The following sections include a description of the treatment intervention, research design, population and sample, instrumentation, data collection, data analysis, and a summary of areas and methods for data collection.

Purpose of Study

The purpose of this study was to investigate the impact of an integrated comprehensive psychoeducational program, Opportunity and Success in School (OASIS), on the social, behavioral, and academic achievement for secondary students with EBD attending a rural public school. OASIS was developed to educate these students and used cognitive restructuring as an integral part of the treatment. These methods with consultation and collaboration among teachers, administrators, parents, and other related personnel involved in the education of the students in OASIS were studied. This study will determine the impact of OASIS on these students to increase their essential behavioral and academic skills which enabled them to continue their education successfully. In addition, follow-up information was gathered to investigate the transition and post-secondary accomplishments of seniors who exited the program through graduation.

The background, development, current conditions and interactions of individuals, groups, and organizations were studied. This was coupled with a one-group design in order to determine and compare academic achievement and social behavioral achievement. School records were also analyzed to determine students' increase in academic and social behavioral achievement.

Research Question and Null Hypotheses

The research question was formulated based on a review of the literature, teaching experience, and clinical work with secondary students who have EBD. The research question and null hypotheses were as follows:

Research Question: Can secondary rural male students' with EBD participation in OASIS increase their academic achievement and appropriate social behavioral achievement at a public high school?

Null Hypotheses:

- Ho 1: There is no statistically significant difference between mean pretest and posttest report card grades (GPA) for rural male secondary students with EBD participating in OASIS.
- Ho 2: There is no statistically significant difference between mean pretest and posttest number of students graduating for rural male secondary students with EBD participating in OASIS.
- Ho 3: There is no statistically significant difference between mean pretest (during the fall) and posttest means (during the spring) on the Woodcock-Johnson Tests of Achievement (Standard Batteries) - (a) Letter-Word Identification; (b) Passage Completion; (c) Calculation; (d) Applied Problems; (e) Dictation; (f) Writing Samples; (g) Science; (h) Social Studies; and (I) Humanities) scores for rural male secondary students with EBD participating in OASIS.
- Ho 4: There is no statistically significant difference between mean pretest and posttest WRAT3 test scores - (a) Word Identification (Reading), (b) Spelling, and (c) and Math Calculation (Arithmetic) for rural male secondary students with EBD participating in OASIS.
- Ho 5: There is no statistically significant difference between mean pretest and posttest number of school days present for rural male secondary students with EBD participating in OASIS.

- Ho 6: There is no statistically significant difference between mean pretest and posttest number of discipline referrals for rural male secondary students with EBD participating in OASIS.
- Ho 7: There is no statistically significant difference between mean pretest and posttest Walker-McConnell Scale of Social Competence and School Adjustment total and subtest scores (a) Self Control; (b) Peer Relations; ©) School Adjustment; and (d) Empathy for rural male secondary students with EBD participating in OASIS.
- Ho 8: There is no statistically significant difference between mean pretest and posttest BES-2 Behavior Quotient and subscale scores - (a) Learning problems; (b) Interpersonal difficulties; ©) Inappropriate behaviors; (d) Unhappiness/Depression; (e) and Physical symptoms/Fears) for rural male secondary students with EBD participating in OASIS.

Independent Variable

OASIS was created to provide comprehensive services to secondary students with EBD in a rural public school. OASIS, based on a psychoeducational model, offers integrated comprehensive services for secondary students with EBD. In order to provide comprehensive services, OASIS focused on providing services to students such as individualized education programs, related services, services to families, teachers, administrators, as well as the curriculum (affective and academic).

The goal of OASIS is to improve the social behavioral and academic achievement for secondary students with EBD. Its affective component uses a behavioral cognitive training model, which teaches students to manage negative emotions more effectively through a process of rational thinking. This is based on Rational Emotive Behavior Therapy (REBT). OASIS uses REBT because it is: (a) cognitive - in order to change students' irrational thoughts and beliefs; (b) behavioral - when students thoughts and beliefs change, their behavior changes; ©) psychoeducational - methods used are the same ones educators use to teach new skills in school, such as modeling and structured learning.

OASIS is an educational format, using practical lessons founded on sound principles of learning and motivation, such as cognitive behavior modification, sociocultural theory of cognitive development, and information processing and schema theories. A teacher certified in the area of EBD along with a paraprofessional are employed to work with secondary students with EBD. During the 2002-2003 school year, a retired school psychologist was hired to provide individual counseling sessions, as a related service, for students in OASIS. The special education teacher provided social skills instruction, cognitive behavioral training, academic tutoring, consultations with staff, parents and related personnel. The above services were continued during the 2003-2004 school year, excluding the individual counseling provided by the school psychologist. When necessary, individual counseling was offered to students from qualified school staff, such as the school counselor. However, this was predominately crisis counseling, as opposed to weekly scheduled appointments, as arranged during the 2002-2003 school year.

In order to be effective in increasing students' achievement, OASIS is based on research from various areas: (a) social learning theory; (b) moral development; (c) verbal mediation, such as self instructional statements; (d) modeling and self-reinforcement; and (e) the concept of "irrational belief systems". REBT focuses on irrational beliefs that the adolescent has about his/her own self-worth. REBT was taught by using Ellis' ABC model to show students how their feelings and behavior are impacted through their irrational thinking. Refer to Figures 1 and 2 in Chapter 2 for illustrations depicting the relationship between theory, research, and practice.

The essential affective components of OASIS were:

- a. Rational Emotive Behavior Therapy (REBT) utilizes the following ABC relationship: (A) First, I have a thought about something; (B) Then, my thought causes a feeling; (C) Then, I act as a result of these thoughts and feelings. These elements are taught as interrelated strands. The goal is for

students to gain knowledge of the ABC's in order to increase academic and social behavioral achievement.

- b. **Structured Learning** - Structured Learning or a skill-step approach is a systematic technique for teaching interpersonal skills, aggression management, and related skills to students lacking in those competencies. Stemming from social learning theory, it provides adolescents with alternative behavior to aggression and irresponsible behavior. OASIS integrates the skill-step approach with a scripting technique. Scripting provides structured activities suitable for students with self-control problems. This type of direct instruction helps secondary students with EBD practice and learn appropriate social skills.
- c. **Anger Control Training (ACT)** - Anger control training is a systematic approach to teaching awareness of the activators of anger. Developed from research, ACT provides students with the means to learn self-control when their anger is aroused.
- d. **Moral Reasoning** - Moral reasoning employs dilemma discussion groups to assist adolescents in placing a high value on prosocial skills that they acquire during structured learning and anger control training. The goal is to increase the moral reasoning stage of the adolescent, while treating the students' cognitive distortions.

OASIS utilized self-instruction which emphasized the overt and covert self-instructions that the students may use to mediate their irrational thinking, guiding them in appropriate behavior. Self-reinforcement is taught in order to offset a dependency on an external system of rewards. Students reinforce their own performances through self-evaluation. In addition, modeling has been incorporated into this program (e.g., modeling on the part of the teacher, students, while some of the models are the characters portrayed in the lessons, i.e. *Whispering Shadows* (Nichols, 1999), *The Anger Inside*

(Nesbitt,1990), *To Kill a Mockingbird* (Lee, 1960), etc. Utilizing characters from literature or videos, serves as an effective strategy to address the emotional issues of secondary students (Hebert & Kent, 2000). For example, the students identify with a character from a story and reflect on that identification resulting in emotional growth. This type of interaction with a novel that results in affective growth is referred to as bibliotherapy (Adderholdt-Elliot & Eller, 1989; Hynes & Hynes-Berry, 1986).

OASIS contains two major components: the academic and the affective. The affective curriculum is integrated with academics. Therapeutic involvement can range from formalized approaches including individual conferencing, group counseling, crisis intervention, to a generalized therapeutic approach provided through modeling appropriate roles by the EBD teacher and para-professional. For example, OASIS uses group meetings as a way for students to problem solve and learn new strategies. The classroom becomes a therapeutic vehicle for behavior change.

Academically, OASIS focuses on students' gaining knowledge and achieving in their content area subjects. All courses follow the state curriculum of Georgia. The goal is to increase secondary students' academic achievement in their course grades, state mandated tests (e.g. GHSGT), and standardized achievement tests. The EBD teacher and paraprofessional facilitate these students academic achievement through individual or group tutoring, re-teaching of skills, support in their general education classrooms or additional help in the EBD classroom. Academic assistance is administered according to the individual needs of the students in OASIS.

In addition these students have several vocational options to choose from such as the vocational courses offered through the school, training in prevocational skills through the affective curriculum (e.g., social skills), community based instruction (CBT), service learning within the school (e.g., peer tutoring, helping office staff), and services provided by local training agencies, such as the Division of Rehabilitative Services and Jobs for Georgia Graduates (JGG). While the counselor from Rehabilitative Services met with the

juniors and seniors weekly, the representative from JGG is based within the school full time.

Instructional Materials

OASIS uses a published program, *Clear Thinking, talking back to whispering shadows: A psychoeducational program for preteens, teens, & young adults* (Nichols, 1999) to guide the affective curriculum. The author suggested additional books that follow this cognitive behavioral model. A variety of materials are beneficial when planning interventions according to the individual needs of the students. Various books and resources are used in OASIS to reinforce or expand on Nichol's (1999) cognitive behavioral psychoeducational program. They are listed in the resources section of the Appendices (Appendix B). The goal of the affective curriculum is to teach cognitive behavioral problem solving strategies, anger management, social skills, and moral reasoning to secondary students with EBD in order to increase their social behavioral and academic achievement.

Clear Thinking (Nichols, 1999) was chosen as the published program to guide the curriculum because it is easily integrated with other well-known research based published programs. Nichol's (1999) psychoeducational model was developed from a therapeutic curriculum in use for more than ten years in hospital school programs for students with emotional and behavioral problems. Currently, it is used successfully in public school classrooms, alternative schools, counselors' offices, as well as residential settings (e.g., Child and Adolescent Psychiatry Service, University of Iowa Hospitals and Clinics). The two companion books, *Clear Thinking* and *Whispering Shadows*, along with their suggested related resources, provide the teacher with a comprehensive instructional package.

The *Clear Thinking* book is the instructor's guide and offers step-by-step lesson plans, additional worksheets for student practice (that are not included in the student text), and additional ideas for working with students with EBD. *Whispering Shadows* is the

illustrated student workbook that accompanies the *Clear Thinking* text. The student text makes abstract principles accessible to students with its sixth-grade reading level and culturally diverse drawings. The material can be presented as a complete program, short course, or selected topics. Due to this format, the material integrates well with other published programs and may be individualized according to the needs of the students. The author suggests various sources that relate to the topics, readings, and references that specify the research that supports the program. The cognitive problem solving skills are taught as the central element in this cognitive restructuring program in order to correct cognitive errors, teach emotional control, and help secondary students with EBD effectively cope with their difficulties.

The purpose of the affective curriculum of OASIS is to teach secondary students with EBD how to change their minds about themselves, each other, and the world. The rationale is that if teachers can help them restructure their distorted thinking, then they also help them to behave appropriately. Nichol's book (1999) is based on the work of cognitive therapists: Beck (Cognitive Therapy), Ellis (Rational Emotive Behavior Therapy), Maultsby (Cognitive Behavioral Therapy) and others. Nichols (1999) approach adapts their techniques to fit the needs and abilities of secondary students with EBD. The content consists of issues that are relevant to secondary students, while ideas are characterized with pictures and captions. Below is an example of how cognitive restructuring is explained in Nichol's book, using braided rope as a metaphor for thinking, feeling, and doing:

“If we don't think clearly about our thoughts, feelings, and actions, when something bad happens, we feel snarled up and miserable. We can learn to untangle what we think, what we feel, and what we do. We think about each strand separately. Then we braid them into a strong, smooth rope that pulls us to personal power.” (Nichols, 1999).

Clear Thinking was designed to be used in classrooms and is based on skills that teachers use every day, e.g., modeling, self-evaluation, etc.. In the same way that teachers instruct students to solve percentage problems with modeling and scaffolding, they can

teach problem-solving skills by using simple problems rather than complicated real-life ones. This is a critical element in the program, since it is important to start with the simple problems in order to build on students' problem solving skills. Formal training in counseling is not needed to effectively use the program; therefore it can be used by teachers in the classroom.

Clear Thinking is research-based and evolved over ten years' development. It is used in hospital school programs (e.g., Child & Adolescent Psychiatry Service at the University of Iowa Hospitals and Clinics) for secondary students with EBD. It is also used in at-risk programs, high school social skill classes, corrections education, and counselors' offices. Students are taught basic thinking skills of how to:

- Clear away dark thinking habits, the beliefs and perceptions that mislead and disturb them;
- Challenge dark thinking by saying new things to themselves and visualizing themselves managing their anger, anxiety, and fear;
- Think consequently, planning how to gain what they want and need in ways that will help them avoid trouble;
- Understand the brain, to use its creative thinking power to regulate the intensity of their strong survival emotions;
- Think analytically, demanding evidence that what they believe is true and worth believing. (Nichols, 1999, p. 10)

Self-defeating beliefs and cognitive distortions are personalized as characters called the *Whispering Shadows*. Students learn strategies for discrediting the *Shadows* with words *Clear Thinkers* and *Star Thinkers* say. These techniques help students reinterpret events so they seem manageable. They learn to guide themselves with constructive thoughts. Students realize that what they do has results. Their behavior influences people and events, resulting in costs and payoffs. The costs and payoffs of their actions lead to more thoughts and feelings. By the end of the *Clear Thinking Program*, the think, feel,

and do strands are pictorially connected in a circle. The circle containing think, feel, do is completed. Although the *Clear Thinking Program* is based on Ellis' ABC's, this approach is easier for secondary students with EBD to understand because it is less abstract (e.g., use of *Whispering Shadows* characters).

A sample problem solving worksheet (Getting a problem under control) from *Clear Thinking* that guides the students through the stages of problem solving is provided in Appendix C. This worksheet is a problem solving format that helps students realize the costs and payoffs of their behavior. It also provides a model and a practice session for problem solving for secondary students with EBD. It is one of several activities that are used in the affective curriculum portion of OASIS. An explanation of the components of "Getting a problem under control" follows:

1. Name the problem. This requires recognizing problems, many of which are interpersonal. Instead of becoming upset with how things are, students learn to identify the solvable problem in a bad situation.
2. Ask: What do I want that I don't have now? Think: If I want something, I have to do something. These prompts help in defining the problem. Unless the student is willing to do something different, he or she is not ready to make a plan and solve a problem.
3. Consider the possibilities. This prompts alternative thinking. Students with poor problem-solving skills are apt to think of only one way to handle a situation. The teacher can model brainstorming as a technique in finding alternative solutions.
4. Circle a choice. Predict its consequence. This teaches consequential thinking and the relative values of the proposed are evaluated. Another worksheet, the Cost/Payoff chart is included as the initial tool to teach this skill. An example is in Appendix C. According to Nichols (1997), cost/payoff analysis needs to be learned as a separate skill before it is

incorporated into the full problem solving sequence. This exercise allows students to work on impulse control and delayed gratification to gain a more positive long-term payoff. It is important for students to think ahead not only to legal consequences, but also to emotional and social ones. This process provides practice in causal thinking, having perspective, as well as in consequential thinking. Teaching students to predict the social, emotional, and behavioral costs and payoffs of problem solutions is an important problem solving strategy.

5. Is it likely to make things better? Is it honorable or safe? This component teaches standards for judging the merits of a solution – effectiveness, fairness, and safety.
6. If I did my choice, what's the worst that could happen? This question facilitates self-talk, helping students to alleviate their anxiety about trying a new solution to a problem. In order to encourage positive possibilities, the teacher asks the same question about the best that could happen if the proposed solution were tried.
7. Is it worth a try? Yes, I'll make a plan and do it. No, I'll make a choice with longer, stronger payoffs. This is the planning portion of the activity.

The worksheets are a means of introducing thinking steps and providing examples for real life experiences. Since problems are usually emotionally charged, students are taught to use their thoughts as a way to control their emotions. They also are taught physical skills for managing their physiological stress reactions, such as deep breathing.

Another published worksheet that is used is an anger log (Lions-Quest, 1995). It is used to discuss the interactions of characters in stories, TV shows, and movies. Through the use of anger logs, secondary students with EBD are taught to explore the cognitive errors that interfere with clear thinking (for fictional characters and for themselves). They also discuss moral dilemmas and consider other people's problems from different points of

view. Moral dilemmas can be found in published programs such as Aggression Replacement Training and in books or movies (e.g., *Raisin in the Sun*, *To Kill a Mockingbird*, *Gentleman's Agreement*, *The Autobiography of Miss Jane Pittman*, etc.).

The *Whispering Shadows*, included in the Clear Thinking program, are sixteen cognitive caricatures that personify secondary students' (with EBD) most common thinking errors. The *Whispering Shadows* help these students understand abstract ideas. Once students have identified the Shadows that make up their dark thinking they can confront them with new thoughts and words. The purpose of the *Whispering Shadows* "whispering" self-defeating beliefs is so these students can recognize their own automatic thoughts. Then, they are taught new words to use to "talk back" to the *Shadows* as a way to challenge their own thinking errors. Students learn to replace their thinking errors with clear thinking. The names and illustrations of the *Whispering Shadows* are provided in the Appendix D.

Subsequently, the students in OASIS are introduced to the *Clear Thinkers* and *Star Thinkers* who argue with the *Shadows*. They teach students words and models for disputing the *Shadows* automatic thoughts. The purpose of the *Clear Thinkers* and *Star Thinkers* is to supply students with new words. They model the arguments that are taught to quiet the *Whispering Shadows*. Each *Whispering Shadow* has both its own *Clear Thinker* and *Star Thinker* to model rational and constructive thinking. Their thoughts replace dark thinking and "shadow whispers". These are also referred to as automatic or irrational thoughts. The *Clear Thinkers* and *Star Thinkers* are used as models for clear thinking. They are drawings of young people of various cultures and stand for intelligent thought, proper judgment, and the ability to plan and reach goals. Pictorial examples of the *Clear Thinkers* and *Star Thinkers* are also provided in Appendix D.

As mentioned previously when describing OASIS, the affective curriculum uses *Clear Thinking* (Nichols, 1999) as its primary published program. Nichols (1999) encourages the use of additional supporting resources. In addition to *Clear Thinking*

(which is based on the principles of REBT), OASIS also integrates other published programs. One example is, Aggression Replacement Training, a therapeutic intervention composed of three components: structured learning, anger control training (ACT), and moral reasoning. OASIS has expanded the components of Aggression Replacement Training (ART) with similar materials published by Lions-Quest (1995), Scripting, (Mayo & Waldo, 1994), and others. The following is an explanation of the affective and academic interventions utilized in OASIS in addition to the *Clear Thinking* program.

Rational Emotive Behavior Therapy

Ellis (1979) claimed that some of the irrational beliefs that individuals continually internalize eventually lead to self defeat. The REBT model is as follows: A (activating event); B (belief); C (emotional and behavioral consequence); D (disrupting intervention); E (effect).

Structured Learning

Structured learning is a systematic, organized psychoeducational intervention designed to teach prosocial behaviors in interpersonal life skills. It provides secondary students with EBD with alternative behavior to aggression and irresponsible behavior. *Skillstreaming the Adolescent* (Goldstein & McGinnis, 1997) and *Scripting* (Mayo & Waldo, 1994) may be used with *Aggression Replacement Training* (Goldstein, et al., 1998).

Anger Control Training (ACT)

Anger Control Training (ACT) is a systematic approach to teaching awareness of the activators of anger. It teaches the inhibition of anger, aggression, and anti-social behavior (Goldstein, et. al., 1998).

Moral Reasoning

Moral reasoning is designed to assist adolescents in placing a high value on prosocial skills that they acquire in structured learning and anger control training (Goldstein, et. al., 1998).

The Group

Since adolescents are sensitive to their peers and have a need to belong, OASIS uses the principles of group therapy as an intervention (Cory, 1990). Specific group building activities are addressed in *Aggression Replacement Training* (Goldstein, et al., 1998) and Lions-Quest (1995).

Academics

While providing instruction in academic areas, interventions are implemented so that students can learn to improve their behavior within the school environment. An individualized program of instruction is developed for each student receiving services through OASIS. The academic curriculum includes direct instruction following Georgia's state curriculum and/or academic tutoring in order to support students taking classes in the general education setting. In addition to providing special education services to students, general education teachers receive support from the EBD teacher and paraprofessional. This may range from direct services within the general education setting to consultations with teachers and students. Evaluation, an important component to the learning process, is used to provide feedback to the student or to make modifications during the educational programming. For example, weekly progress reports are submitted to the general education teachers in order to obtain information about secondary students with EBD who are taught in the general education setting. An example of the weekly progress report is provided in Appendix E.

Leadership Support

Advanced scheduling of students with EBD is critical in determining the number of special education or inclusion segments for students. Support from administrators is also necessary with regard to restructuring the curriculum and discipline procedures (e.g., behavior intervention plans as part of the IEP).

Dependent Variables

In order to reduce bias in evaluating the program, a multiple measures approach was used that was a quantitative method incorporating various academic and social behavioral assessments. School records and instruments were used to measure academic and social behavioral achievement of students participating in OASIS. The dependent variables for this study were the academic achievement and social behavioral achievement of the secondary students with EBD participating in OASIS. Specifically, the dependent variables included:

- c. Academic
 - I. Report card grades (GPA)
 - ii. Number of students graduating from high school
 - iii. Woodcock Johnson Achievement Tests (Standard Batteries – (a) Letter-Word Identification; (b) Passage Completion; ©) Calculation; (d) Applied Problems; (e) Dictation; (f) Writing Samples; (g) Science; (h) Social Studies; and (I) Humanities)
 - iv. WRAT – III R (a) word identification (reading), (b) spelling, and ©) math calculation (arithmetic).
- d. Social Behavioral
 - I. Attendance (Number of days present out of 180 days)
 - ii. Number of discipline referrals
 - iii. Walker McConnell Scale of Social Competence and School Adjustment – Adolescent Version total and subtest scores (a) Self Control; (b) Peer Relations; ©) School Adjustment; and (d) Empathy)
 - iv. BES – 2 (Behavior Quotient and subscale scores (a) Learning problems; (b) Interpersonal difficulties; ©) Inappropriate behaviors; (d) Unhappiness/Depression; and (e) Physical symptoms/Fears).

Academic Achievement

Two individual tests used to assess academic achievement in special education are the achievement portion of the Woodcock-Johnson Psycho-Educational Battery – Revised (McLoughlin & Lewis, 1994) and the Wide Range Achievement Test 3.

Woodcock-Johnson Psycho-Educational Battery – Revised

These tests of achievement are norm-referenced and focus on academic achievement. The standard batteries were administered for the purposes of this study. The Woodcock-Johnson Psycho-Educational Battery – R Tests of Achievement is designed to provide information about four areas of the curriculum: reading, mathematics, written language, and knowledge. The standard battery contains the following 9 subtests: (1) Letter-Word Identification; (2) Passage Completion; (3) Calculation; (4) Applied Problems; (5) Dictation; (6) Writing Samples; (7) Science; (8) Social Studies; and (9) Humanities.

The psychometric characteristics of the *Woodcock-Johnson – R* are reported in the *Woodcock – Johnson Technical Manual* (McGrew, Werder, & Woodcock, 1989). Internal consistency, as measured by the split-half method appears adequate for all subtest and cluster scores. Test-retest reliability is adequate for standard battery subtest and cluster scores. The reliabilities are generally in the high .80s and the low .90s for the tests and in the mid .90s for the clusters (Woodcock & Mather, 1989).

Content validity is the extent to which the content of a test represents the domain of content that it is designed to measure. The items were designed to be comprehensive in both content and difficulty in order to cover a wide range of ability. The tests provide a sampling of skills from simple to complex that relate to academic skills and knowledge (Woodcock & Mather, 1989, 1990).

Results of three studies of the *Woodcock-Johnson – R*'s concurrent validity with other measures of achievement are summarized in the technical manual (McGrew, Werder, & Woodcock, 1991). Across the three studies, moderate correlations were found between

the *Woodcock-Johnson – R* cluster scores and results of corresponding subtests on other measures. For example, correlations for the Broad Reading cluster was .883 with PIAT- R Total Reading and .865 with WRAT-R Reading. Those for the Broad Mathematics cluster were .688 with PIAT- R Mathematics and .641 to .705 with WRAT-R Arithmetic. It is important to note that according to Woodcock & Mather (1989), the standard deviations of scores in the concurrent validity studies are less than the 15 points associated with the general population. As a result of this, the correlations reported in the studies somewhat underestimate the true correlations in the general population (Woodcock & Mather, 1989).

Construct validity of the Tests of Achievement is supported by data showing systematic patterns of difference between various samples of students such as identified as mentally retarded, learning disabled, normal, and gifted. The reliability and validity characteristics of the *Woodcock-Johnson – R* meet basic technical requirements for both individual placement and programming decisions. In general, the psychometric quality of the *Woodcock-Johnson – R* is high.

Wide Range Achievement Test 3 (WRAT3)

This individually administered achievement test is designed to measure achievement in the basic academic coding skills of word recognition, spelling and arithmetic computation. This test provides norms based upon age and based upon grade. The WRAT3 also provides standard scores for the purpose of comparison. Alternate form correlations offer one look at the reliability of this instrument. The WRAT3 was constructed with an alternate form for each of the academic coding tests, BLUE and TAN (e.g., pre and posttests). For reading there is a range of correlations over the 23 age groups of .87 to .99 with a median correlation of .92. Spelling has a range of correlations of .86 to .99 with a median of .93. The Arithmetic range is .82 to .99 with a median of .89. The total sample (N = 4433) correlations on raw scores for Reading, Spelling, and Arithmetic are .98, .98 and .98 respectively. The alternate form correlations for the

WRAT3 substantiate the reliability of the instrument (Wilkinson, 1993). Test-retest reliability for the age group participating in the comparison and sample group is approximately .93 for reading, .93 for spelling, and .88 for mathematics. The content validity is also noted in the administration manual which states that the subtests are constructed to give direct measurement of the variables being studied. The WRAT3 intends to measure the basic academic skills of word recognition (reading decoding), spelling from dictation (written encoding), and arithmetic computation. Construct validity through various factors such as the Person and Item Separation Indices of the Rasch analysis are predicted to be high. Item difficulty was studied using the Rasch model, and analysis results indicate that the items on each subtest represent a range from easy to difficult (McLoughlin & Lewis, 1994). In addition, according to the manual, the WRAT3 can be used for the assessment of students receiving or not receiving special education services. Since academic skills are positively associated with cognitive ability, the WRAT3 test generally has a high correlation with the Verbal Scale of standardized tests of intelligence. The WRAT3 scores show moderate to high correlations with other standardized tests of academic achievement. Wilkinson (1987) as reported in (McLoughlin & Lewis, 1994) presented results of one unpublished study of concurrent validity. Correlations between WRAT-R subtests and achievement clusters for the Woodcock-Johnson Psycho-Educational Battery ranged from .69 to .84 for percentile ranks, .70 to .85 for standard scores, and .29 to .64 for grade equivalents. However, it should be noted that there is only limited information on concurrent validity, especially with the performance or non-verbal portions on standardized intelligence tests (McLoughlin & Lewis, 1994).

Social Behavioral

When assessing problem behavior it is important to know the following: (1) How many contexts there are in which the problematic behavior occurs; (2) If it is restricted to one or a small number of contexts; (3) If it is probably under environmental control and

could be modified using environmental changes; and (4) If it is generalized across many contexts. Problem behavior may be assessed, either singly or in combination, using rating scales, observational procedures, self-report measures, or interview techniques. There are two primary reasons to assess behavior: (1) Some disabilities are defined, in part, by inappropriate behavior; and (2) For intervention purposes. The Walker McConnell Scale of Social Competence and School Adjustment (w-M) and the Behavior Evaluation Scale -2 (BES-2) were the two instruments that were used for the assessment of behavior in this study.

Walker-McConnell Scale of Social Competence and School Adjustment

The *Walker-McConnell Scale of Social Competence and School Adjustment* (Walker & McConnell, 1995) is a teacher report measure used as a pre- and posttest to evaluate change in student behavior. The Walker-McConnell scale has been found to reliably measure children's behaviors related to school adjustment and the adolescent version is appropriate for use with students in grades 7-12. The Adolescent Version contains four, analytically derived, sub-scales (Self Control, Peer Relations, School Adjustment, and Empathy) totaling 53 items across the four sub-scales. The four subscale scores are combined for a total score. This 53 item 5-point Likert-type rating scale relies on teacher ratings of the frequency with which social skills are estimated to occur for each student rated. The 53 items require about 10 minutes to complete for each student.

Item-total correlations for total score and for the subscales ranged from $r = .50$ to $.80$ levels of magnitude. This indicates acceptable levels of item-validity indices for the total score and each of the subscales (Walker and McConnell, 1995). Test-retest reliability over a five-week period for at risk and behavior-disordered children (K-12) were $.83$ for Self-Control; $.82$ for Peer Relations; $.83$ for Peer Relations; $.76$ for School Adjustment; and $.83$ for Empathy. Test-retest correlations over a one month period for 50 regular middle school students were $.85$, $.90$, $.89$, $.87$, and $.89$ (in the same order). Walker and McConnell (1995) stated that these test-retest stability estimates are acceptable for the

purpose for which the scale was designed. Internal consistency showed alpha coefficients ranging from .89 (Empathy) to .98 (total scale score) and indicate substantial internal consistency for the total score and subscales. Inter-rater reliability is .53 between teachers and classroom aides. There is evidence of item, concurrent, and discriminant validity.

Walker and McConnell (1995) stated the following:

The Adolescent Version of the Walker-McConnell scale has been correlated with the following instruments to establish its concurrent validity: (a) the School Social Behavior Scales (SSBS) (Merrell, 1994); (b) the Social Skills Rating System (SSRS) (Gresham & Elliott, 1990); and (c) the Behavior Rating Profile (Hammill & Brown, 1985). Walker & McConnell, 1995, p. 24.

In terms of discriminate validity, the Adolescent Version has been used with the following target populations that would be expected to differ from normal students and from each other. These are learning disabled (LD) in self-contained and resource rooms, residential, severely emotionally disturbed (SED) students, youth on parole or probation, and normal, non-referred students. Walker and McConnell (1995) reported that the Empathy subscale discriminated the antisocial and at-risk subjects at statistically significant levels ($p < .01$). The instrument appears to achieve acceptable technical adequacy for the purposes for which it was designed (Walker & McConnell, 1995).

Behavior Evaluation Scale – 2 (BES – 2)

The BES-2 may be used for purposes such as screening, assessing, diagnosing, contributing to the development of individual education programs for students receiving special education services, documenting progress resulting from behavioral interventions, and collecting data for research (McCarney & Leigh, 1990). The BES-2 provides educationally relevant information about the behavior of secondary students with EBD. The BES-2 consists of the following five subscales: (1) Learning problems; (2) Interpersonal Difficulties; (3) Inappropriate Behaviors; (4) Unhappiness/Depressions; and (5) Physical Symptoms/Fears. The composite standard score, or Behavior Quotient, is computed by adding the standard scores from the five subscales. The Behavior Quotient

represents a global index of a student's behavior across all areas measured. The Behavior Quotient is based upon a scale with a mean of 100 and a standard deviation of 15.

Internal consistency reliability and test-retest reliability were investigated during the development of the BES-2. The coefficient alpha procedure was used to measure reliability in terms of overlapping variance among scales. The coefficients obtained for each of the five subscales were as follows: 20 of the 24 coefficients were .90, while the remaining four coefficients were around the .80 level. These results provide evidence of the internal consistency of the BES – 2 (McCarney & Leigh, 1990). Test-retest reliability was found to be more than adequate. Spearman correlation coefficients computed between the two sets of obtained scores for each of the five subscales and for the total scale all exceeded or rounded to .90. All were significant at the .001 level.

Validity pertains to the extent to which an instrument measures what it purports to measure. Content validity was established by the process employed to construct the scale. All items on the final scale were considered appropriate by at least 95% of the respondents (McCarney & Leigh, 1990). Concurrent criterion-related validity was correlated between the BES-2 results and scores obtained from the Teaching Rating Scale of the *Behavior Rating Profile* (BRP) (Brown & Hammill, 1978). The correlation between the BES-2 and the BRP Teacher Rating Scale was .76 ($p < .01$). Construct validity was strong since 69 of the 76 items (91%) correlated highly with their assigned subscales. This supports the fact that items within subscales are measuring the same constructs (McCarney & Leigh, 1990).

Research Design

The approach to this study was action research. The design was a pretest-posttest design study (Cambell & Stanley, 1963) using multiple or repeated measures. This approach and design shows a comparison of academic and social behavioral achievement, the dependent variables, for one group of secondary students with EBD during the 2002-2003 and 2003-2004 school years. Observations were conducted at varying times, in

different settings, and involved different people which resulted in several factors affecting these students' academic and social behavioral achievement. The value of this approach is that it provided multiple sources of data for the researcher to utilize in analyzing the program.

The measures included a comprehensive description of the program or independent variable (e.g., eligibility criteria, program procedures, treatment strategies and techniques, follow-up of students subsequent to graduation, etc.); observations of student schedules; analysis of documents (e.g., student files); analysis of student achievement data in multiple areas; and follow-up of students who either remained in the program during the second year or completed the program through graduating high school. Data were analyzed using the one-group pretest – posttest design (Cambell & Stanley, 1963). This method was used to compare data in order to make conclusions about factors that affect academic achievement and social behavioral achievement for secondary students with EBD in this sample. In addition, descriptive statistics (range, mean, standard deviation, frequencies/%), inferential statistics (dependent one tailed t-tests) and appropriate nonparametric statistics were used to analyze the data. Outcome variables were measured using descriptive statistics for Group Two, the three students who participated in OASIS for two consecutive school years.

The one tailed dependent t-test was used to test the null hypotheses for the school years 2002-2003 and 2003-2004. Although the researcher wanted to be able to detect any statistically significant gains, the level of significance chosen was .01 for this test in order to be conservative. This was due to the large amount of data that was generated by a small sample, $N = 10$. Therefore, the probability of error was 1:100.

In addition, nonparametric methods may be used in the case of studying the mean of a non-normal population using a small sample of data (Weinberg & Goldberg, 1990). When the sample is very small, as in this study, there is no way to test the assumption that the variable is normally distributed. Therefore, the researcher had a need for statistical

procedures that allow for the processing of data from small samples. Nonparametric methods do not rely on the estimation of parameters (such as the mean or the standard deviation) describing the distribution of the variable of interest in the population. Nonparametric statistics are less statistically powerful than their parametric counterparts. Therefore, since the researcher is concerned with detecting even small effects, much care will be made when choosing the test statistic. In this case it will be beneficial to wait until the data is compiled.

Population and Sample

The population is all students with EBD that ever attended this rural high school. The study was composed of one sample with similar characteristics (due to eligibility). This sample consisted of 10 students and included students from various grade levels who participated in OASIS for one school year, either during the 2002-2003 or 2003-2004 school years. The three students, who participated in OASIS for two consecutive school years (2002-2003 and 2003-2004), were evaluated using descriptive statistics (range, mean, and standard deviation). Decisions for services were made by the IEP committee according to the individual needs of the student. Table 1 illustrates the organization of the two samples and their corresponding years of participation in OASIS. Consistent within the group were that students received 50 minutes of social skills training per day with the same teacher certified in EBD. Students attended additional classes through the resource program, or classes in the general education environment. Students received academic tutoring and support in the general education environment from a paraprofessional and/or the EBD teacher. In addition, all students were monitored through weekly written teacher progress reports in order for the EBD teacher to obtain information concerning the students' academic and social behavioral achievement on a weekly basis. The information from these progress reports were used to collaborate with general education teachers, students, and parents in order for the secondary students with EBD to increase their academic and social behavioral achievement. If students were not achieving, additional

Table 4. Samples for the 2002-2003 and 2003-2004 school years for OASIS

Samples 2002-2003 and 2003-2004 School Years OASIS (Opportunity and Success in School)			
Group 1 (Related Samples)		Group 2	
	Sample 1/pretest 2002-2003 & 2003-2004	Sample 2/posttest 2002-2003 & 2003-2004	Three students participating during 2002-2003 & 2003-2004
<i>n</i> = 10 (total)	10 pretest means for each dependent variable	10 posttest means for each dependent variable	3 pretest and posttest means for each dependent variable
<i>Grade Range</i>	Grades 9 th and 12 th	Grades 9 th and 12 th	Grade 10

interventions were implemented. When students were achieving, they received praise from the EBD teacher, their general education teachers, and intermittently from administrators.

Also consistent within the group, was that students receiving services from OASIS received counseling, as a related service, with the program psychologist during the 2002-2003 school year and through special education and other qualified school staff during the 2003-2004 school year.

Group One

Ten male students with EBD participated in OASIS for one school year. Four ninth graders ranging in age from 14 to 16 during the 2002-2003 school year received services for students with EBD based upon having met federal and state eligibility criteria. Generally, the student must exhibit an affective disorder and/or adaptive behavior that significantly interferes with his/her learning and/or social function for eligibility. Three of the students were served by the same EBD teacher during four segments daily in a rural high school in Northeast Georgia. One of the ninth graders was served similarly for three

segments with the same EBD teacher. These students received one segment of social skills training and one hour of counseling per week with the program psychologist. During the remainder of the day, the students attended either a resource class, or one to three classes in the general education environment as stated in their IEPs. Students were monitored during their time in the general education environment through weekly progress reports, observations by the EBD teacher or paraprofessional and teacher consultations.

In addition to the four male ninth grade students, three twelfth grade Caucasian males participated in the program for one school year. The twelfth grade students received one segment of social skills training, counseling one hour per week with the program psychologist, and attended either all or most classes in the general education environment. These students were also monitored during their time in the general education environment through weekly progress reports, observations, and teacher consultations. The seniors were served through one segment of social skills for their primary exceptionality (EBD). They also attended one resource class in the special education environment for Literature and Composition, while attending five classes in the general education environment. In addition, the three seniors graduated with general high school diplomas and were studied through follow-up techniques.

Three ninth grade students participated in OASIS during the 2003-2004 school year. These students resembled the characteristics of the students who participated in OASIS during the 2002-2003 school year due to their eligibility for EBD. The three ninth grade Caucasian males ranged from 14 to 15 years of age. These students received one segment of social skills training, monitoring through weekly progress reports, academic tutoring for their general education classes, and teacher consultation. The ninth graders had regular contact with the program's EBD teacher, one segment per day during social skills class. Students received group instruction, as well as individual psychoeducational conferencing as needed, with the EBD teacher during this segment. Students received additional services through the resource program, as well as attended classes in the general

education environment. These students were served through special education services for three or four segments, but with different teachers. Due to the seven class periods in this school system, when the number of special education segments is more than three, the student is considered to be served through the self-contained program.

Group Two: Students' participating for two years

Three Caucasian males participated in OASIS during two consecutive school years (2002-2003, as ninth graders and 2003-2004, as tenth graders). These students had one segment of social skills class with the EBD teacher, as well as the opportunity for individual psychoeducational conferencing with the EBD teacher or other qualified school staff (e.g., school counselor). They continued to be monitored through weekly progress reports and received academic tutoring when needed. One of the students attended an additional class in the resource program and attended five classes in the general education environment. Another student attended an additional two classes in the resource program and attended four classes in the general education environment. The third student attended an additional three classes in the resource program and attended two classes in the general education environment. One of the students from the first school year moved to another school system during the first quarter of the second year of the program.

All students who participated in the program received similar services through OASIS. Students participated in social skills classes, received cognitive behavioral instruction, and received counseling as a related service. However, students who participated in OASIS during the 2002-2003 school year received individual counseling from a school psychologist one hour per week in addition to the other components of OASIS. All secondary students participating in OASIS had contact with the EBD teacher at least one segment per day, through their social skills class. They received additional services through special education, and attended classes in the general education environment. The major components of each year of the program are compared in Table 2.

Educational placement for each of the students was an IEP team decision. Members of the team may be parents, general education teachers, counselors, administrators, special education teachers, school psychologists, speech and language pathologists, other related services personnel, or members of the medical profession. Federal laws such as IDEA mandate that teams make the following decisions; (1) Evaluation of students for placement in special education and related services; (2) Formulation of Individualized Education Programs (IEPs); (3) Evaluation of IEPs; (4) Reevaluation of special education placement. According to state and federal law, the decision for a reevaluation must be determined every three years by members of the IEP committee.

Table 2. A Comparison of Techniques Used in OASIS During 2002-2003 and 2003-2004 School Years

	2002-2003	2003-2004
Instruction	3 to 4 segments with same EBD teacher Self-contained program, Resource program 6:1 ratio students to teacher 1 full time paraprofessional Social skills training 1 paraprofessional Inclusion support 1 paraprofessional	1 segment with same EBD teacher Self-contained program Resource program Ratio students to teacher varies Paraprofessional-part time Social skills training 1 paraprofessional Inclusion support 1 paraprofessional
Affective	REBT model Social skills training Anger management Dilemma debates Cognitive behavioral problem solving Teacher consultation Related staff consultation Parent consultation Weekly progress report Individual conferencing with EBD teacher Weekly individual counseling With psychologist	REBT Model Social skills training Anger management Dilemma debates Cognitive behavioral problem solving Teacher consultation Related staff consultation Parent consultation Weekly progress reports Individual conferencing with EBD teacher <u>No</u> weekly individual counseling with psychologist

	Academic	State Curriculum Individualized instruction Modifications from IEP Reteaching Remediation Tutoring from EBD teacher/ paraprofessional peers Teacher consultation Weekly progress report	State Curriculum Individualized instruction Modifications for IEP Reteaching Remediation Tutoring from EBD teacher/ paraprofessional peers Teacher consultation Weekly progress report
Discipline	Minor rule violations	Conferencing with EBD teacher Group discussion BIP	Conferencing with EBD teacher Group discussion BIP
	School Rule violations	Discipline referral to assistant principal School step system Warning ISS Home placement no more than 10 day OSS	Discipline referral to assistant principal School step system Warning ISS Home placement no more than 10 days OSS
Teacher Certification		Emotional/Behavioral Disordered Learning Disabled Leadership Interrelated Special Education General Education	Emotional/Behavioral Disordered Learning Disabled Leadership Interrelated Special Education General Education
Training		Masters Level in EBD/LD Three years experience teaching at Psychoed Center One year collaborating with psychologist	Masters Level in EBD/LD Three years experience teaching at Psychoed Center
Administration		Principal Assistant Principal Special Education Director Superintendent	Principal Assistant Principal Special Education Director Superintendent

Since all the students had been evaluated through psychological testing, each had recent intelligence test scores. The students' full scale IQ ranged from the borderline to average range. Three of the students were diagnosed with a language disability in reading

and writing. Several of the students presented with language deficiencies, but did not meet state criteria for a specific learning disability (SLD). All of the participants had been in special education since elementary school and all had been in self-contained classes for EBD for at least a year prior to participating in OASIS. Three of the participants had been retained during elementary school. Students were selected for this study as both a sample of convenience (as part of the requirements for the Ed.D. degree), by their EBD teacher, and because their EBD teacher, department head, special education director, school administrators, and parents believed that participation in OASIS might improve these students' academic and social behavioral achievement. County, school, and parental permission was obtained for each student's participation through the IEPs. A copy of the school system's letter is in Appendix F. Approval from their teacher's university institutional review board was also obtained.

Although the participants came from mixed economic backgrounds, most qualified for reduced or free school meals. All participants shared similar emotional and behavioral characteristics, but varied on intelligence tests and achievement tests.

Impact of Race and Gender

The participants, previously mentioned in this study, were selected for convenience and shared relevant characteristics (e.g., males, EBD). Secondary students with EBD that participated in OASIS were males. This is consistent with the majority of students receiving services for EBD in the literature (Callahan, 1994; McIntyre & Tong, 1998; Cluett, Fornes, Ramey, Ramey, Hsu, Kavale, & Gresham, 1998; Quinn, et. al., 1999; Shapiro, et. al., 1999). Singh & Billingsley (1996) discussed that 60% to 76% of all students receiving special education services are male (UD DOE, 1992). In research summarized by Farmer, et. al., (1999), school based interventions have been implemented with African-American and mixed race students with EBD. In addition, two psychoeducational interventions (anger management and goal setting) were studied with 53 males and 41 females (McWhirter, 1999). McWhirter's sample also included two

African-Americans, two Hispanics, and one Native American student. According to the literature (McIntyre & Tong, 1998; Callahan, 1994) there are a disproportionate number of males, many from low SES backgrounds, in programs for students with EBD. This is consistent with the small sample in this study.

Data Collection and Analysis Procedures

Pre and post-testing was conducted during the 2002-3 and 2003-4 school years using the following instruments: *Woodcock-Johnson – R*; *WRAT3*; *Walker-McConnell Adolescent Version*; and *the BES-2*. Students were assessed during the fall of the school year and again during the spring. They were assessed for social behavioral achievement after attending school for 30 school days. Students were administered the academic achievement tests as quickly as possible upon participating in OASIS. Students' post-test information for both academic and social behavioral achievement was used to assess their present level of performance, their academic and social behavioral gains, and to make informed decisions for the following school year.

A comprehensive review of documents from the program (e.g., data from the students' school records such as report cards, discipline referrals, IEPs, teacher progress reports, school wide rules and procedures, treatment strategies and techniques, follow-up of students subsequent to completion of the program through graduation, staffing follow-up of students during their second year of the program, etc.). Analysis of additional documents (e.g., student files, program progress reports and logs, etc.) was conducted along with analysis of student achievement data in multiple areas, and follow-up of students who have completed the program through graduation. A synthesis of these data provided conclusions regarding factors that affect academic and social behavioral achievement, as well as the impact of staff, parent(s) and interagency interactions, and errors in thinking for students with emotional and behavioral disorders at the local high school level. Areas and methods for data collection are summarized in Table 3.

Table 3. Areas and Methods of Data Collection for OASIS (2002-3 and 2003-4 school years)

AREA	METHOD
Academic Achievement	Case Studies
Test Scores	
<i>WJ-R</i>	One-group pre/post tests
Broad Reading	Dependent t-tests
Broad Mathematics	Observation
Broad Written Language Skills	Document Analysis
<i>WRAT3</i>	
Word Recognition	
Arithmetic Computation	
Spelling	
Grades	
Graduation	Document Analysis
Social Behavioral Achievement	
<i>W-m</i>	One-group pre/post tests
Self Control	Dependent t-tests
Peer Relations	Observation
School Adjustment	Document Analysis
Empathy	
Total Score	
<i>BES-2</i>	One-group pre/post tests
Learning Problems	Dependent t-tests
Interpersonal Difficulties	Observation
Inappropriate Behaviors	Document Analysis
Unhappiness/Depression	
Physical Symptoms/Fears	
Behavior	
Behavior Quotient	
Psychological	Document Analysis
Psychological Evaluation	
Behavior	One-group pre/post tests
Discipline Referrals	Dependent t-tests
Attendance	Observation
Teacher Records	Document Analysis
IEP Goals/Objectives	
Segments in General Ed.	
Counseling	
Problem solving worksheets	
Collaborators	
Special Education Director	Document Analysis
Department Head	
Program Psychologist	
Administrators, Teachers	
Related personnel, parents	

Summary

The purpose of OASIS was to expand the continuum of services for secondary students with EBD. These services offered a therapeutic, educational environment. This type of environment facilitated these students' social, emotional, and academic growth, and enabled them to reach their highest potential in order to become productive contributing members of society. The purpose OASIS was to expand the continuum of services offered to secondary students with EBD at a public rural school, through implementing an integrated academic and affective curriculum. OASIS addressed the problem for these students in the area of academic achievement, as well as social behavioral and life skills.

CHAPTER IV

RESULTS

The purpose of this study was to investigate the impact of an integrated comprehensive psychoeducational program, Opportunity and Success in School (OASIS), on the social, behavioral, and academic achievement for secondary students with EBD attending a rural public school. This study will determine the impact of OASIS on these students to increase their essential social behavioral and academic skills which enabled them to continue their education successfully. In addition, follow-up information was gathered to investigate the transition and post-secondary accomplishments of seniors who exited OASIS through graduation.

Research Question and Null Hypotheses

The research question was formulated based on a review of the literature, teaching experience, and clinical work with individuals who have EBD. The research question and null hypotheses were as follows:

Research Question: Can secondary rural male students' with EBD participation in OASIS increase academic and appropriate social behavioral achievement at a public high school?

Null Hypotheses:

Ho 1: There is no statistically significant difference between mean pretest and posttest report card grades (GPA) for rural male secondary students with EBD participating in OASIS.

Ho 2: There is no statistically significant difference between mean pretest and posttest number of students graduating for rural male secondary students with EBD participating in OASIS.

- Ho 3: There is no statistically significant difference between mean pretest (during the fall) and posttest means (during the spring) on the Woodcock-Johnson Tests of Achievement (Standard Batteries) - (a) Letter-Word Identification; (b) Passage Completion; ©) Calculation; (d) Applied Problems; (e) Dictation; (f) Writing Samples; (g) Science; (h) Social Studies; and (I) Humanities) scores for rural male secondary students with EBD participating in OASIS.
- Ho 4: There is no statistically significant difference between mean pretest and posttest WRAT3 test scores - (a) Word Identification (Reading), (b) Spelling, and ©) and Math Calculation (Arithmetic) for rural male secondary students with EBD participating in OASIS.
- Ho 5: There is no statistically significant difference between mean pretest and posttest number of school days present for rural male secondary students with EBD participating in OASIS.
- Ho 6: There is no statistically significant difference between mean pretest and posttest number of discipline referrals for rural male secondary students with EBD participating in OASIS.
- Ho 7: There is no statistically significant difference between mean pretest and posttest Walker-McConnell Scale of Social Competence and School Adjustment total and subtest scores (a) Self Control; (b) Peer Relations; ©) School Adjustment; and (d) Empathy for rural male secondary students with EBD participating in OASIS.
- Ho 8: There is no statistically significant difference between mean pretest and posttest BES-2 Behavior Quotient and subscale scores - (a) Learning problems; (b) Interpersonal difficulties; ©) Inappropriate behaviors; (d) Unhappiness/Depression; (e) and Physical symptoms/Fears) for rural male secondary students with EBD participating in OASIS.

Population and Sample

The population was all students with EBD that ever attended this rural high school. The study was composed of one sample with similar characteristics (due to eligibility). This sample consisted of 10 students with EBD from various high school grade levels who participated in OASIS for one school year, either during the 2002-2003 or 2003-2004 school years. Information is also provided that included the three students, who participated in OASIS for two consecutive school years (2002-2003 and 2003-2004). An overview of the statistical tests conducted in this study is depicted in Table 4. The remainder of the chapter provides detailed results of the study.

Group One: Students Participating in OASIS

During One School Year

Quantitative measurement, descriptive statistics (range, mean, and standard deviation), and inferential statistics (paired or dependent t-tests) for pre and posttests were used to investigate the research questions. The multiple measures approach combined methods such as observations and physical evidence to study the program (Denzin, 1970). By combining methods, the investigator was able to examine the intervention from multiple perspectives.

Data Analysis

All statistical analyses were calculated using the Statistical Package for Social Sciences (SPSS). The statistical test used to test the null hypotheses was the paired t-test. This t-test is used when comparing the means of the same group at two different points in time on the same dependent variable. The research hypotheses was directional, requiring a one-tailed test, i.e., gains were projected based on the research hypotheses. The degrees of freedom were 9 ($-1 = 10-1 = 9$). The level of significance was set at $\alpha = .01$, since the sample was small with a large number of statistical tests. In order for the findings to be statistically significant, $p \leq .01$.

Table 4. Summary of findings for academic and social behavioral gains for Group One, students who participated in OASIS during one school year.

DEPENDENT VARIABLES		NS = Not statistically significant * = $p \leq .01$	
N = 10			
<i>(Academic)</i>		<i>(Social Behavioral)</i>	
1. Report Card Grades (GPA)	NS	5. Number of Days Present	NS
2. Number of Students graduating with a general education diploma	100% (3/3)	6. Number of Discipline Referrals	NS
3. Woodcock-Johnson Tests of Achievement (Standard Battery)		7. Walker-McConnell Scale of Social Competence and School Adjustment	
(a) Letter-Word Identification	NS	(a) Subscale 1: Self-Control	*
(b) Passage Completion	NS	(b) Subscale 2: Peer Relations	*
(c) Calculation	NS	(c) Subscale 3: School Adjustment	*
(d) Applied Problems	*	(d) Subscale 4: Empathy	*
(e) Dictation	NS	(e) Total Score	*
(f) Writing Samples	NS	8. Behavior Evaluation Scale-2 (BES-2)	
(g) Science	NS	(a) Subscale 1: Learning Problems	*
(h) Social Studies	NS	(b) Subscale 2: Interpersonal Difficulties	*
(i) Humanities	NS	(c) Subscale 3: Inappropriate Behavior	*
4. Wide Range Achievement Test3		(d) Subscale 4: Unhappiness/Depression	*
(a) Reading	*	(e) Subscale 5: Physical Symptoms/Fears	*
(b) Spelling	NS	(f) Quotient/Total Score	*
(c) Arithmetic	NS		

The rejection region and the critical t-value were determined prior to analysis (Weinberg & Goldberg, 1990). The critical value was 2.821 ($t_{\alpha,01} \geq 2.821$). Therefore the rejection region for the one-tailed test was: $t \geq 2.821$.

Findings

Report card grades (GPA)

Ho 1: There is no statistically significant difference between mean pretest and posttest report card grades (GPA) for rural male secondary students with EBD participating in OASIS.

Descriptive statistics for Group One's pre test for report card grades were as follows: range = 78 – 91; mean = 83.5, and standard deviation = 4.9. Descriptive statistics for this group's posttest were as follows: range = 80 – 91; mean = 86.1, and standard deviation = 3.8. In general, these grade point averages demonstrated that the students were achieving academically. Descriptive statistics for the students' report card grades (GPA) are presented in Table 5.

Paired t-test results for students participating in OASIS for one school year are presented in Table 6. The t-value for report card grades (GPA) (posttest – pretest) = 2.48. Since 2.48 is slightly less than the critical t-value of 2.821 ($t_{\alpha,01} = 2.821$), it does not fall in the rejection region. The p value of .02 is not less than .01, demonstrating that these findings support the null hypothesis that the means of the posttest were not statistically higher than the pretest for report card grades (GPA). However, the students' grade point averages showed that they were achieving academically (i.e, 83.5, 86.1, 88.5, 86.9). The students also received credits for all of their courses and were promoted to the next grade. In conclusion, there were no decreases between the posttest and pretest mean GPAs. The students' grades increased, they demonstrated continued improvement for one year.

Table 5. Report card (GPAs) pre and posttest results for students' participation during one school year in OASIS.

	Pre	Post
Range	78-91	80-91
Mean	83.5	86.1
Sd	4.9	3.8

Table 6. Results of paired t-tests for report card grades (GPA) for students' participation during one school year in OASIS.

* = significant ($p \leq .01$); NS = Not statistically significant

t-Test (1-tailed)

Paired Samples Test

Paired Differences			
	t	df	Sig. (1-tailed)
Pair 1 Report Card Grades posttest- Report Card Grades pretest	2.48	9	0.02 NS

Number of Students Graduating

Ho 2: There is no statistically significant difference between mean pretest and posttest number of students graduating for rural male secondary students with EBD participating in OASIS.

The three seniors from Group One, who participated in OASIS during one school year, each graduated with a general education diploma with a vocational seal. This is noteworthy since, 100% of the seniors who participated in OASIS graduated with a general education diploma. Information was obtained through follow-up procedures (i.e., through emails with students and their vocational rehabilitation counselor). Findings were that one graduate attended post-secondary school at North Georgia Technical College, another attended Warm Springs Institute of Rehabilitation, while the third was gainfully employed in the community. The previous year, before the intervention, one student with EBD graduated with a general education diploma with a vocational seal, one with a special education diploma, and one withdrew from high school during his senior year. While it is the goal for students with EBD to graduate with a general education diploma and either receive postsecondary instruction or gain employment, it is difficult to prove that this occurred due to the students' participation in OASIS. Although the students from the previous year were similar in intelligence and characteristics, they were not the same students as demonstrated through the pre and posttests with the other dependent variables. The only hypotheses that can be accepted or rejected are the ones that use the pre and posttest inferential tests (paired t-tests). Possibly, the number of t-tests that were significant and supported the research question had a positive impact on the number of students from Group One who graduated with a general education diploma with a vocational seal.

Woodcock- Johnson Tests of Achievement (Standard Batteries)

Ho 3: There is no statistically significant difference between mean pretest (during the fall) and posttest means (during the spring) on the Woodcock-Johnson Tests of

Achievement (Standard Batteries) - (a) Letter-Word Identification; (b) Passage Completion; (c) Calculation; (d) Applied Problems; (e) Dictation; (f) Writing Samples; (g) Science; (h) Social Studies; and (I) Humanities) scores for rural male secondary students with EBD participating in OASIS.

Students' academic achievement was also assessed using the pretest and posttest mean scores for the Woodcock-Johnson Tests of Achievement (Standard Batteries). Descriptive statistics for the students in Group One, who participated in OASIS for one school year, are presented in Table 7. The greatest mean differences between posttests and pretests were reflected in the following subtests: Calculation (24), Applied Problems (25), Dictation (26), and Science (30). The pre and posttest means respectively for these tests were as follows: Calculation (24.0 and 28.0), Applied Problems (37.3 and 41.3), and Dictation (29.5 and 32.2). In relation to the above tests there was an increase in the standard deviation posttest values for Calculation (from 6.5 pretest to 10.7 posttest), Applied Problems (from 4.2 pretest and 6.4 posttest), and Dictation (5.8 and 6.5). According to the standard deviation values, there was the largest spread in the Calculation scores. The greatest mean increases in grade equivalent (GE) and age equivalent (AE) scores respectively were in Passage Completion (6.9, 9.2 and 12.0, 14.6) and Applied Problems (6.8, 9.4 and 12.2, 14.6). In addition the following subtests demonstrated posttest grade equivalent scores at the high school level: Passage Completion (9.2); Applied Problems (9.4); and Social Studies (10.4).

The t-value for the Subtest 25 – Applied Problems (posttest – pretest) = 4.00. Since 3.4 > than the critical t-value of 2.821 ($t_{\alpha, .01}$), it falls within the rejection region ($p = .004$ is $< .01$). The findings for this subtest, demonstrated that there was a statistically significant higher mean for the posttest than the mean for the pretest for Group One. In other words, a one-tailed dependent t-test yielded statistically significant group differences in Applied Problems (subtest 25). However, no statistically significant mean differences were found for the other subtests for the Woodcock-Johnson Tests of

Table 7. Woodcock-Johnson pre and post-test results for students' participation during one school year in OASIS.

<i>Group One participating one year</i>		<i>Descriptive Statistics for Woodcock-Johnson Tests of Achievement</i>											
		Pre	Post			Pre	Post			Pre	Post		
<u>Letter- Word Identification</u>	Range	27-52	28-51			Range	30-43	33-51		Range	24-35	25-38	
	Mean	42.6	43.6			Mean	37.3	41.3		Mean	29.8	30.8	
	Sd	9.4	8.2			Sd	4.2	6.4		Sd	4.5	4.7	
	GE	5.8	6.2			GE	6.8	9.4		GE	9.2	10.4	
	AE	11.2	11.7			AE	12.2	14.6		AE	14.4	15.9	
<u>Passage Completion</u>	Range	17-33	20-39			Range	17-36	21-46		Range	20-35	20-37	
	Mean	26.1	28.7			Mean	29.5	32.2		Mean	27.6	28.6	
	Sd	5.8	5.7			Sd	5.8	6.5		Sd	5.9	4.8	
	GE	6.9	9.2			GE	3.7	4.1		GE	7.9	8.5	
	AE	12.0	14.6			AE	9.0	9.6		AE	13.6	14.0	
<u>Calculation</u>	Range	12-31	14-53			Range	5-22	11-26		Range	20-37	21-36	
	Mean	24.0	28.0			Mean	14.5	15.8		Mean	28.6	28.2	
	Sd	6.5	10.7			Sd	6.0	5.1		Sd	5.9	4.8	
	GE	5.6	6.7			GE	3.3	3.6		GE	5.8	7.5	
	AE	11.0	12.2			AE	8.8	9.1		AE	11.2	12.1	
		<u>Applied Problems</u>				<u>Dictation</u>				<u>Humanities</u>			
		<u>Science</u>				<u>Writing Samples</u>				<u>Social Studies</u>			

Achievement. Table 8 continues the Paired Samples Test for the Woodcock-Johnson Tests of Achievement (Standard Batteries 22-30).

Given, the small sample size and an alpha level of .01 it was encouraging that findings showed that Group One demonstrated a statistically significant gain in their ability in abstract thinking and problem solving in the Applied Problems subtest. This subtest does not reflect recall of facts, since students must use their prior knowledge to solve new problems. While not statistically significant, Passage Completion subtest 23 and the Science subtest 30 resulted in t-values of 2.2 and 2.5, which is consistent with the descriptive statistics for these tests. According to the descriptive statistics, the three students who participated in OASIS for two consecutive years demonstrated their greatest mean gains in the subtest 22 - Letter Word Identification (pretest 43 and posttest 47) and Subtest 29 - Humanities (pretest 24.3 and posttest 29).

Wide Range Achievement Test3

Ho 4: There is no statistically significant difference between mean pretest and posttest WRAT3 test scores - (a) word identification (reading), (b) spelling, and ©) math calculation (arithmetic) for rural male secondary students with EBD participating in OASIS.

Descriptive statistics for Group One for the Reading Sub-test of the WRAT3 for the pre and posttests respectively were as follows: range (22-42; 22-48); mean (33 and 36.8); standard deviation (7.2 and 8.6); and grade equivalent scores (GE 4.0 and GE 6.0). Gains were reflected in the differences between the pre and posttest means and grade equivalent scores, i.e gains of two grade levels. Some variation in scores was also represented in the range and standard deviation of the pre and posttests for this subtest. For the Spelling Sub-test, descriptive statistics for the pre and posttests respectively were as follows: range (20-37; 20-38); mean (26.3 and 28.5); standard deviation (5.4 and 5.9); and grade equivalent scores (GE 3.0 and GE 4.0). Slight gains were reflected in the differences between the pre and posttest means and grade equivalent scores, i.e, gains of

Table 8. Results of paired t-tests for the Woodcock-Johnson Tests of Achievement for students participation during one school year in OASIS.

* = significant ($p \leq .01$); NS = Not statistically significant

	Paired Differences					t	d f	Sig. (1-tailed)
	Mean differences	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference				
				Lower	Upper			
Pair 1 WJ22 post-WJ22 pre Letter Word Identification	1.10	2.56	.809	-2.93	.73	1.4	9	0.103 NS
Pair 2 WJ23 post-WJ23 pre Passage Completion	2.60	3.81	1.20	-5.32	.12	2.2	9	0.029 NS
Pair 3 WJ24 post-WJ24 pre Calculation	4.00	8.70	2.75	-10.2	2.22	1.5	9	0.09 NS
Pair 4 WJ25 post-WJ25 pre Applied Problems	4.00	3.74	1.18	-6.7	-1.3	3.4*	9	0.004*
Pair 5 WJ26 post-WJ26 pre Dictation	2.70	4.47	1.42	-5.90	.50	1.9	9	0.045 NS
Pair 6 WJ27 post-WJ27 pre Writing Samples	1.30	4.69	1.48	-4.66	2.06	.88	9	0.202 NS
Pair 7 WJ28 post-WJ28 pre Social Studies	1.00	2.40	.760	-2.72	.72	1.3	9	0.111 NS
Pair 8 WJ29 post-WJ29 pre Humanities	1.00	3.53	1.12	-3.52	1.52	.90	9	0.197 NS
Pair 9 WJ30 post-WJ30 pre Science	2.90	3.64	1.15	-5.50	-.30	2.5	9	0.117 NS

one grade level. The range and standard deviation for both pretest and posttest were smaller than for the reading subtest, indicating less variation in scores. However, students in Group One did not demonstrate any gains in the differences in their pretest and posttest scores for the arithmetic subtest. For example, the mean for the pretest was 32.1 with a GE of 5 and the mean for the posttest was 31.9 also with a GE of 5. Descriptive statistics

for the Wide Range Achievement Test 3 (WRAT) for Group One, students participating in OASIS for one school year, are reported in Table 9.

The t-value for difference in reading (posttest – pretest) = 2.89. Since $2.89 >$ than the critical t-value of 2.821 ($t_{9,.01}$), it falls within the rejection region. In addition, the p value of .01 is $<$ to .01, demonstrating that these findings reject the null hypothesis for reading. The mean of the posttest was statistically significantly higher than the mean of the pretest for the Reading Sub-test. Therefore, the research question for the reading subtest for the WRAT3 is supported for students in Group One. Findings for the spelling and arithmetic subtests were not statistically significant. The t-value for difference for spelling (posttest – pretest) = 1.87. Since 1.87 is less than the critical t-value of 2.821, it does not fall in the rejection region. In addition, the p value of .05 is not less than .01, demonstrating that these findings support the null hypothesis that the mean of the posttest was not statistically higher than the mean of the pre-test for spelling. Findings may not have resulted in statistical significance due to the small sample size (10) and the conservative level of significance (.01). The students in Group One gained one grade level in spelling. The t-value for difference for arithmetic (posttest – pretest) = -.112. Since -.112 is less than the critical t-value of 2.821, it does not fall in the rejection region. In addition, the p value of .46 is not less than .01, demonstrating that these findings support the null hypothesis that the mean of the posttest was not statistically higher than the mean of the pre-test for arithmetic. The students in Group One's means for both the pre and posttest (32.1 and 31.9) resulted in a grade equivalency score of 5.0. Table 10 portrays

Table 9. Wide Range Achievement Test 3 pre and posttest results for students' participation during one school year in OASIS.

		Pre	Post
<u>Reading</u>	Range	22-41	22-48
	Mean	33.0	36.8
	Sd	7.2	8.6
	GE	4.0	6.0
<u>Spelling</u>	Range	20-37	20-38
	Mean	26.3	28.5
	Sd	5.4	5.9
	GE	3.0	4.0
<u>Arithmetic</u>	Range	24-37	22-40
	Mean	32.1	31.9
	Sd	4.6	6.1
	GE	5.0	5.0

Table 10. Results of paired t-tests for the Wide Range Achievement Test3 for students' participation during one school year in OASIS.

* = significant ($p \leq .01$); NS = Not statistically significant

Paired Differences								
	Mean differences	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference		t	df	Sig. (1-tailed)
Pair 1 WRAT Reading post-WRAT Reading pre	3.80	4.16	1.32	-6.77	-.83	2.89*	9	0.01*
Pair 2 WRAT Spelling post-WRAT Spelling pre	2.20	3.71	1.17	-4.85	.45	1.87	9	0.05 ns
Pair 3 WRAT Arithmetic post-WRAT Arithmetic pre	-.20	5.63	1.78	-3.83	4.23	-.112	9	0.46 ns

that the paired t-test analysis for the reading, spelling, and arithmetic subtests for the WRAT3.

Attendance (Number of days present)

Ho 5: There is no statistically significant difference between mean pretest and posttest number of school days present for rural male secondary students with EBD participating in OASIS.

The high school where the study took place operates on a 180 day school calendar. Students are required to undergo an appeal process if they have accrued more than 20 absences in a full year class and more than 10 in a semester class. Unless medical documentation is provided, students generally will not earn credit if they have more than 20 absences. Descriptive statistics for Group One for the pre test was as follows: The range was 126 – 180; the mean was 162.8, and the standard deviation was 14.6. Descriptive statistics for the post test were as follows: range 155 – 180; mean = 170.4, and the standard deviation was 8.1.

It is important to note that the mean for the posttest was 170.4 out of a maximum of 180 days. The standard deviation for the pre test for Group One was 14.6. This indicated that there was a large variation within the data. This variation is also supported by the range for the pre test. The standard deviation for the posttest for Group One was 8.1. The range for the posttest indicated that there was less variation for the number of days that students attended. The highest number of days was 180 (perfect attendance) for both the pretest and posttest for Group One. There was an increase from 126 to 155 for the lowest number of days attended for Group One, as indicated in the range. In addition, all of the participants earned credit for all of their courses. Descriptive statistics for the number of days present for Group One are illustrated in Table 11.

The t-value for difference in number of days present (posttest - pretest) = 2.56. Since 2.56 is slightly less than the critical t-value of 2.821 ($t_{\alpha,01} = 2.821$), it does not fall in the rejection region. The p value of .02 is not less than .01, demonstrating

Table 11. Attendance (Days Present) pre and posttest results for students' participation during one school year in OASIS.

	Pre	Post
Range	126-180	155-180
Mean	162.8	170.4
Sd	14.6	8.1

that these findings support the null hypothesis that the mean of the posttest was not statistically significantly higher than the mean of the pre-test for the number of days present in school. While not statistically significant, there was an increase in the number of days present. Findings may not have resulted in statistical significance due to the small sample size of 10, the conservative level of significance of .01, and the large variation in data for Group 1. Also, one member within the group had perfect attendance for the entire school year (for the pre and posttest). Additional considerations for number of days present for both Group 1 and for students participating during two consecutive years were conferred in the discussion of the descriptive statistics. Since most students that participated in OASIS improved their number of days present in school, as indicated in the descriptive statistics, practical significance was demonstrated. The results of the paired samples test for number of days present for Group One is depicted in Table 12.

Discipline Referrals

Ho 6: There is no statistically significant difference between mean pretest and posttest number of discipline referrals for rural male secondary students with EBD participating in OASIS.

This high school operates on a step system, where severity or number of discipline referrals may result in the student's recommendation to attend school in an alternative setting. Steps 1-3 respectively (warning, parent contact, lunch or after school detention)

are handled through the classroom teachers. Steps 4-10 respectively are one to five days of ISS, followed with a number of up to 10 days of out of school suspension and are assigned by the assistant principle. When evaluating the group's pre and posttest mean differences for this dependent variable, the researcher looked for a decrease in the number of discipline referrals.

Results demonstrated a decrease in Group One's mean from 5.80 to 1.50. Descriptive statistics for the pre test was as follows: The range was 0 – 16; the mean was 5.8, and the standard deviation was 6.8. Descriptive statistics for the posttest was as follows: range 0 – Table 12. Results of paired t-tests for number of days present for students' participation during one school year in OASIS.

* = significant ($p \leq .01$); NS = Not statistically significant

t-Test (1-tailed)

Paired Samples Test

Paired Differences			
	t	df	Sig. (1-tailed)
Pair 1 Number of days present posttest - Number of days present pretest	2.56	9	0.02 NS

6; mean = 1.5, and the standard deviation was 2.3. The range and the standard deviation indicated that there was little variation in the number of discipline referrals for students in Group One. It is important to note that the mean for the posttest was 1.5 for the number of discipline referrals for the school year. Descriptive statistics for number of discipline referrals for Group One are depicted in Table 13.

For this dependent variable, the researcher used the critical t for the one-tailed test and looked for decreases in the number of discipline referrals for this group of students. The critical value was to be 2.821 ($t_{\alpha,01} = 2.821$). Therefore the rejection region for the

one-tailed test was: $t \geq 2.821$. The t value for difference in number of discipline referrals (posttest-pretest) was 2.11. Since 2.11 is less than 2.821, it does not fall in the rejection region, demonstrating that these findings support the null hypothesis that the difference in the mean of the posttest was not statistically significantly lower than the mean of the pre-test for number of discipline referrals. The p value of .03 is not less than .01, also demonstrating that these findings support the null hypothesis. While not statistically significant, there was a decrease in the mean number of discipline referrals (posttest – pretest). Findings may not have resulted in statistical significance due to the small sample size and the conservative level of significance of .01. However, it is important to note that the intervention began on the first day of school and continued without interruption for the students participating in OASIS. The low number of discipline referrals, in addition to a decrease in the number of discipline referrals, is worth mentioning for secondary students with EBD. The paired samples test for number of discipline referrals is portrayed in Table 14.

Table 13. Number of discipline referrals pre and post-test results for students' participation during one school year in OASIS.

	Pre	Post
Range	0-16	0-6
Mean	5.8	1.5
Sd	6.8	2.3

Table 14. Results of paired t-tests for number of discipline referrals for students' participation during one school year in OASIS.

* = significant ($p \leq .01$); NS = Not statistically significant

t-Test (1-tailed)

Paired Samples Test

Paired Differences			
	t	df	Sig. (1-tailed)
Pair 1			
Number of discipline referrals posttest - Number of discipline referrals pretest	-2.11	9	0.03 NS

Walker-McConnell Scale of Social Competence and School Adjustment –
Adolescent Version

Ho 7: There is no statistically significant difference between mean pretest and posttest Walker-McConnell Scale of Social Competence and School Adjustment total and subtest scores (a) Self Control; (b) Peer Relations; (c) School Adjustment; and (d) Empathy for rural male secondary students with EBD participating in OASIS.

Students were observed in the classroom, by each of their teachers, in order to obtain pre-test and posttest measures for the following Walker- McConnell subscales (Subscale 1: Self-Control; Subscale 2: Peer Relations; Subscale 3: School Adjustment; Subscale 4: Empathy; and the Total Scores. Descriptive statistics for the Walker-McConnell Scale of Social Competence and School Adjustment for the students in Group One, participating in OASIS for one school year, are reported in Table 15. Descriptive statistics for Group One for the pre-test for Subscale 1: Self-Control were as follows: The range was 22-45; the mean was 33.4; the standard deviation was 7.5; the scaled score (SS) was 8, and the percentile score (PR) was 28.2. Descriptive statistics for the posttest for Self-Control were as follows: The range was 37-52; the mean was 42.9;

the standard deviation was 4.9; the scaled score (SS) was 10, and the percentile score (PR) was 50.8. There was less variation in the posttest scores, as indicated in the range and standard deviation. In addition, gains were reflected in the differences between the posttest and pretest mean, scaled scores, and percentile rank for this subscale.

Descriptive statistics for Group One for the pre-test for Subscale 2: Peer Relations were as follows: The range was 29-55; the mean was 41.6; the standard deviation was 9.7; the scaled score (SS) was 6, and the percentile score (PR) was 13.6. Descriptive statistics for the posttest for Peer Relations were as follows: The range was 39-67; the mean was 52.4; the standard deviation was 7.5; the scaled score (SS) was 9, and the percentile score (PR) was 37.1. Again, there was less variation in the posttest scores, as indicated in the range and standard deviation. In addition, gains were reflected in the differences between the posttest and pretest mean, scaled scores, and percentile rank for this subscale.

Descriptive statistics for Group One for the pre-test for Subscale 3: School Adjustment were as follows: The range was 31-58; the mean was 46; the standard deviation was 9.3; the scaled score (SS) was 8, and the percentile score (PR) was 30.2. Descriptive statistics for the posttest for Peer Relations were as follows: The range was 48-68; the mean was 57; the standard deviation was 6.4; the scaled score (SS) was 13, and the percentile score (PR) was 80.4. There was also less variation in the posttest scores, as indicated in the range and standard deviation. In addition, gains were reflected in the differences between the posttest and pretest mean, scaled scores, and percentile rank for this subscale.

Descriptive statistics for Group One for the pre-test for Subscale 4: Empathy were as follows: The range was 9-20; the mean was 14.8; the standard deviation was 3.4; the scaled score (SS) was 8, and the percentile score (PR) was 27.3. Descriptive statistics for the posttest for Empathy were as follows: The range was 12-27; the mean was 17.9; the standard deviation was 3.9; the scaled score (SS) was 9, and the percentile score (PR) was 38.5. There was little variation in the pre and posttest scores, as indicated in the range and

standard deviation for each. In addition, slight gains were reflected in the differences between the posttest and pretest mean, scaled scores, and percentile rank for this subscale.

Descriptive statistics for Group One for the pre-test for the Total Score were as follows: The range was 99-175; the mean was 134; the standard deviation was 27; the scaled score (SS) was 85, and the percentile score (PR) was 18.6. Descriptive statistics for the posttest for the Total Score were as follows: The range was 141-207; the mean was 170; the standard deviation was 19; the scaled score (SS) was 98, and the percentile score (PR) was 42.4. Although still high, there was less variation in the posttest scores, as indicated in the range and standard deviation. In addition, gains were reflected in the differences between the posttest and pretest mean, scaled scores, and percentile rank for

the Total Score. Generally, posttests for the subscales and the total scores were slightly below average, average, or slightly above average.

Paired t-test analysis revealed significant differences between the means of the pre and posttests for the four subscales and the total scores as presented in Table 16. In order to demonstrate statistically significant results the t- value needs to be $>$ than the critical t of 2.821, with $p < .01$. The following are the paired t-test results for each of the Walker-McConnell subscales and the total scores:

- a) The t-value for difference in Subscale 1: Self Control (posttest-pretest) = 4.21. Since 4.21 is $>$ than the critical t-value of 2.821 ($t_{\alpha,.01} = 2.821$), it falls within the rejection region. The p value of .001 is less than .01. Therefore, the null hypothesis was rejected for Subscale 1: Self-Control. Since the mean of the posttest was statistically significantly higher than the mean of the pre-test, the research question was supported for Self-Control.
- b) The t-value for difference in Subscale 2: Peer Relations (posttest-pretest) = 4.80. Since 4.80 is $>$ than the critical t-value of 2.821 ($t_{\alpha,.01} = 2.821$), it falls within the rejection region. The p value of .0005 is less than .01. Therefore, the null hypothesis was rejected for Subscale 2: Peer Relations. Since the mean of the posttest was statistically significantly higher than the mean of the pretest, the research question was supported for Peer Relations.
- c) The t-value for difference in Subscale 3: School Adjustment (posttest-pretest) = 5.67. Since 5.67 is $>$ than the critical t-value of 2.821 ($t_{\alpha,.01} = 2.821$), it falls within the rejection region. The p value of .0000 is less than .01. Therefore, the null hypothesis was rejected for Subscale 3: School Adjustment. Since the mean of the posttest was

Table 16. Results of paired t-tests for Walker-McConnell Scale of Social Competence for students' participation during one year in OASIS.

* = significant ($p \leq .01$); NS = Not statistically significant

t-Test (1-tailed)

Paired Samples Test

Paired Differences			
	t	df	Sig. (1-tailed)
Pair 1 WM 1 post - WM 1 pre (Subscale 1: Self-Control)	4.21*	9	0.001*
Pair 2 WM 2 post - WM 2 pre (Subscale 2: Peer Relations)	4.80*	9	0.0005*
Pair 3 WM 3 post - WM 3 pre (Subscale 3: School Adjustment)	5.67*	9	0.0000*
Pair 4 WM 4 post - WM 4 pre (Subscale 4: Empathy)	2.85*	9	0.0095*
Pair 5 WM 5 post - WM pre (Total Score)	4.81*	9	0.0005*

statistically significantly higher than the mean of the pre-test, the research question was supported for School Adjustment.

- d) The t-value for difference in Subscale 4: Empathy (posttest-pretest) = 2.85. Since 2.85 is > than the critical t-value of 2.821 ($t_{\alpha, .01} = 2.821$), it falls within the rejection region. The p value of .0095 is less than .01. Therefore, the null hypothesis was rejected for Subscale 4: Empathy. Since the mean of the posttest was statistically significantly higher than the mean of the pre-test, the research question was supported for Empathy.
- e) The t-value for difference in the Total Score (posttest-pretest) = 4.81. Since 4.81 is > than the critical t-value of 2.821 ($t_{\alpha, .01} = 2.821$), it falls within the rejection region. The p value of .0005 is less than .01. Therefore, the null hypothesis was rejected for the Total Score. Since the mean of the posttest was statistically significantly higher than the mean of the pre-test,

the research question was supported for the Total Score.

According the above findings all of the subscales and the Total Score were found to be statistically significant. Therefore, the null hypotheses were rejected for these tests and the research question was accepted for the Walker-McConnell Scale of Social Competence and School Adjustment for the students in Group One participating in OASIS.

The Behavior Evaluation Scale-2

Ho 8: There is no statistically significant difference between mean pretest and posttest BES-2 Behavior Quotient and subscale scores - (a) Learning problems; (b) Interpersonal difficulties; ©) Inappropriate behaviors; (d) Unhappiness/Depression; (e) and Physical symptoms/Fears) for rural male secondary students with EBD participating in OASIS.

Similarly as with the Walker-McConnell Scale, students were observed in the classroom, by each of their teachers, in order to obtain pretest and posttest measures for the following Behavior Evaluation Scale-2 (BES-2) subscales (Subscale 1: Learning Problems; Subscale 2: Interpersonal Difficulties; Subscale 3: Inappropriate Behavior; Subscale 4: Unhappiness/Depression; Subscale 5: Physical Symptoms/Fears and the Quotient/Total Scores. When converting raw scores to subscales, higher raw scores convert to lower standard scores (SS) and percentile ranks (PR) indicating poor performance. Conversely, lower raw scores convert to higher standard scores (SS) and percentile ranks (PR), denoting more appropriate behavior. However, quotients or total scores were calculated as total scale quotients. Therefore, the higher the quotient (total score), the better the students' performance or gains. Standard scores ranging 8-12 and 90-110 are considered average. Descriptive statistics for the BES-2 for the students participating in OASIS for one school year are reported in Table 17. Standard scores ranging from 6-7 and quotient/total scores ranging from 80-89 are considered below

average. While standard scores ranging from 8-12 and quotient/total scores ranging from 90-110 are considered average.

Descriptive statistics for Group One for the pre-test for Subscale 1: Learning Problems were as follows: The range was 63-140; the mean was 101; the standard deviation was 26.5; the scaled score (SS) was 7, and the percentile score (PR) was 16. Descriptive statistics for the posttest for Learning Problems were as follows: The range was 45-110; the mean was 75; the standard deviation was 20; the scaled score (SS) was 9, and the percentile score (PR) was 37. Variation decreased slightly in the posttest scores, as indicated by the range and standard deviation. In addition, gains were reflected in the differences between the posttest and pretest mean, scaled scores, and percentile rank for this subscale.

Descriptive statistics for Group One for the pre-test for Subscale 2: Interpersonal Difficulties were as follows: The range was 73-180; the mean was 119.5; the standard deviation was 31.7; the scaled score (SS) was 6, and the percentile score (PR) was 9. Descriptive statistics for the posttest for Interpersonal Difficulties were as follows: The range was 62-120; the mean was 79.5; the standard deviation was 16.3; the scaled score (SS) was 8, and the percentile score (PR) was 25. Again, there was less variation in the posttest scores, as indicated by the range and standard deviation. In addition, gains were reflected in the differences between the posttest and pretest mean, scaled scores, and percentile rank for this subscale.

Descriptive statistics for Group One for the pre-test for Subscale 3: Inappropriate Behavior were as follows: The range was 107-220; the mean was 164.1; the standard deviation was 38.0; the scaled score (SS) was 7, and the percentile score (PR) was 16. Descriptive statistics for the posttest for Inappropriate Behavior were as follows: The range was 96-145; the mean was 110.6; the standard deviation was 15.1; the scaled score (SS) was 8, and the percentile score (PR) was 25. There was also less variation in the posttest scores, as indicated by the range and standard deviation. In addition, gains were

Table 20. Behavior Evaluation Scale-2 pre and post-test results for students' participation during one school year in OASIS.

		Pre	Post			Pre	Post
<u>Learning Problems</u>	Range	63-140	45-110	<u>Unhappiness/ Depression</u>	Range	69-159	54-98
	Mean	101	75		Mean	108.5	73.8
	Sd	26.5	20.0		Sd	24.8	12.8
	SS	7	9		SS	6	8
	PR	16	37		PR	9	25
<u>Interpersonal Difficulties</u>	Range	73.180	62.120	<u>Physical Symptoms/ Fears</u>	Range	47-105	40-80
	Mean	119.5	79.5		Mean	81.1	56
	Sd	31.7	16.3		Sd	19.4	12.0
	SS	6	8		SS	6	7
	PR	9	25		PR	9	16
<u>Inappropriate Behavior</u>	Range	107-220	96.145	<u>Quotient/ Total Score</u>	Range	66-96	81-103
	Mean	164.1	110.6		Mean	78.0	93.1
	Sd	38.0	15.1		Sd	8.2	7
	SS	7	8		PR	7	32
	PR	16	25				

reflected in the differences between the posttest and pretest mean, scaled scores, and percentile rank for this subscale.

Descriptive statistics for Group One for the pre-test for Subscale 4:

Unhappiness/Depression were as follows: The range was 69-159; the mean was 108.5; the standard deviation was 24.8; the scaled score (SS) was 6, and the percentile score (PR) was 9. Descriptive statistics for the posttest for Unhappiness/Depression were as follows: The range was 54-98; the mean was 73.8; the standard deviation was 12.8; the scaled

score (SS) was 8, and the percentile score (PR) was 25. There was less variation in the posttest scores, as indicated by the range and standard deviation. In addition, gains were reflected in the differences between the posttest and pretest mean, scaled scores, and percentile rank for this subscale.

Descriptive statistics for Group One for the pretest for Subscale 5: Physical Symptoms and Fears were as follows: The range was 47-105; the mean was 81.1; the standard deviation was 19.4; the scaled score (SS) was 6, and the percentile score (PR) was 9. Descriptive statistics for the posttest for Physical Symptoms and Fears were as follows: The range was 40-80; the mean was 56; the standard deviation was 12; the scaled score (SS) was 7, and the percentile score (PR) was 16. There was less variation in the posttest scores, as indicated by the range and standard deviation. In addition, gains were reflected in the differences between the posttest and pretest mean, scaled scores, and percentile rank for this subscale.

Descriptive statistics for Group One for the pre-test for the Quotient/Total Score were as follows: The range was 66-96; the mean was 78; the standard deviation was 8.2; the scaled score (SS) was 78, and the percentile score (PR) was 7. Descriptive statistics for the posttest for the Quotient/Total Score were as follows: The range was 81-103; the mean was 93.1; the standard deviation was 7; the scaled score (SS) was 93, and the percentile score (PR) was 32. Although there was little variation in the pretest scores, there was even less variation in the posttest scores, as indicated by the range and standard deviation. In addition, gains were reflected in the differences between the posttest and pretest mean, scaled scores, and percentile rank for the Total Score. Generally, posttests for the subscales were slightly below average or average. However, the posttest Total Score (93) was within the average range of 90-110.

Paired t-test analysis revealed significant differences between the means of the pre and posttests for the five subscales and the quotient/total scores as presented in Table 18. In order to demonstrate statistically significant results the t- value needs to be $>$ than the

critical t of 2.821, with $p < .01$. The following are the paired t -test results for each of the BES-2 subscales and the quotient/total scores:

- a) The t -value for difference in Subscale 1: Learning Problems (posttest-pretest) = 4.21. Since 4.21 is $>$ than the critical t -value of 2.821 ($t_{\alpha, .01} = 2.821$), it falls within the rejection region. The p value of .0015 is less than .01. Therefore, the null hypothesis was rejected for Subscale 1: Learning Problems. Since the mean of the posttest was

Table 18. Results of paired t -tests for the Behavior Evaluation Scale-2 for students' participation during one school year in OASIS.

* = significant ($p < .01$); NS = Not statistically significant

**t-Test (1-tailed)
Paired Samples Test**

Paired Differences			
	t	df	Sig. (1-tailed)
Pair 1 BES 1 post - BES 1 pre (Subscale 1: Learning Problems)	4.09*	9	0.002*
Pair 2 BES 2 post - BES 2 pre (Subscale 2: Interpersonal Difficulties)	7.03*	9	0.000*
Pair 3 BES 3 post - BES 3 pre (Subscale 3: Inappropriate Behavior)	5.09*	9	0.0005*
Pair 4 BES 4 post - BES 4 pre (Subscale 4: Unhappiness/Depression)	6.48*	9	0.0000*
Pair 5 BES 5 post - BES 5 pre (Physical Symptoms Fears)	5.76*	9	0.0000*
Pair 6 BES 6 post - BES 6 pre (Quotient/Total Score)	9.97*	9	0.0000*

statistically significantly higher than the mean of the pretest, the research question was supported for Learning Problems.

- b) The t-value for difference in Subscale 2: Interpersonal Difficulties (posttest-pretest) = 7.03. Since 7.03 is > than the critical t-value of 2.821 ($t_{\alpha,.01} = 2.821$), it falls within the rejection region. The p value of .0000 is less than .01. Therefore, the null hypothesis was rejected for Subscale 2: Interpersonal Difficulties. Since the mean of the posttest was statistically significantly higher than the mean of the pre-test, the research question was supported for Interpersonal Difficulties.
- c) The t-value for difference in Subscale 3: Inappropriate Behavior (posttest-pretest) = 5.10. Since 5.10 is > than the critical t-value of 2.821 ($t_{\alpha,.01} = 2.821$), it falls within the rejection region. The p value of .0005 is less than .01. Therefore, the null hypothesis was rejected for Subscale 3: Inappropriate Behavior. Since the mean of the posttest was statistically significantly higher than the mean of the pre-test, the research question was supported for Inappropriate Behavior.
- d) The t-value for difference in Subscale 4: Unhappiness/Depression (posttest-pretest) = 6.48. Since 6.48 is > than the critical t-value of 2.821 ($t_{\alpha,.01} = 2.821$), it falls within the rejection region. The p value of .0000 is less than .01. Therefore, the null hypothesis was rejected for Subscale 4: Unhappiness/Depression. Since the mean of the posttest was statistically significantly higher than the mean of the pre-test, the research question was supported for Subscale 4.
- e) The t-value for difference in Subscale 5: Physical Symptoms/Fears (posttest-pretest) = 6.48. Since 6.48 is > than the critical t-value of 2.821 ($t_{\alpha,.01} = 2.821$), it falls within the rejection region. The p value of .0000 is less than .01. Therefore, the null hypothesis was rejected for Subscale 5: Unhappiness/Depression. Since the mean of the posttest was statistically

significantly higher than the mean of the pre-test, the research question was supported for Subscale 5.

- f) The t-value for difference in the Quotient/Total Score (posttest-pretest) = 9.97. Since 9.97 is > than the critical t-value of 2.821 ($t_{\alpha,.01} = 2.821$), it falls within the rejection region. The p value of .0000 is less than .01. Therefore, the null hypothesis was rejected for the Quotient/Total Score. Since the mean of the posttest was statistically significantly higher than the mean of the pretest, the research question was supported for the Quotient/Total Score.

According to the above findings all of the subscales and the Quotient/Total Score were found to be statistically significant. Therefore, the null hypotheses were rejected for these tests and the research question was accepted for the BES-2 for the students in Group One participating in OASIS.

Group Two (n = 3): Students Participating in OASIS

During Two Consecutive School Years

Quantitative measurement, descriptive statistics (range, mean, and standard deviation), for pre and posttests were used to investigate the research question. This approach was used to calculate the outcome variables for this group.

The presentation of these descriptive results is in the same order as the hypothesis for Group 1 (except the graduating seniors). No inferential analyses were possible because of the very small sample size (n = 3).

Report card grades (GPA)

The mean pretest and posttest outcome variables for report card grades (GPA) for rural male secondary students with EBD participating in OASIS are described below.

Descriptive statistics for the students that participated in OASIS for a second year were: pretest: range = 84 – 91; mean = 88.5, and standard deviation = 3.6. Descriptive statistics for the student's posttest were as follows: range = 84 – 91; mean = 86.9, and

standard deviation = 4.0. In general, these grade point averages demonstrated that the students were achieving academically. Descriptive statistics for these student's report card grades (GPA) are presented in Table 19.

Woodcock- Johnson Tests of Achievement (Standard Batteries)

The mean pretest (during the fall) and posttest means (during the spring) outcome variables for the Woodcock-Johnson Tests of Achievement (Standard Batteries) - (a) Letter-Word Identification; (b) Passage Completion; (c) Calculation; (d) Applied Problems; (e) Dictation; (f) Writing Samples; (g) Science; (h) Social Studies; and (i) Humanities) scores for rural male secondary students with EBD participating in OASIS are described in the following section.

Students' academic achievement was also assessed using the pretest and posttest mean scores for the Woodcock-Johnson Tests of Achievement (Standard Batteries). Descriptive statistics for the three students who participated in OASIS for two consecutive years are presented in Table 20. Although the sample was not large enough to test for statistically significant results, the greatest mean differences were between the pre and post test Woodcock-Johnson Humanities subtest 29. The mean pre-test scores were raw score = 24.3; GE = 6.2; AE = 11.8. The range was 21 -27 with a standard deviation of 3.1. The mean post test scores were mean = 29; GE = 8.5; AE = 14-0. The range was 24 -32 with a standard deviation of 4.4. The Letter-Word Identification subtest 22 showed the second greatest mean differences were between the pre and posttests. The mean pre-test scores were raw score = 43; GE = 5.8; AE = 11.2. The range was 28 -51 with a standard deviation of 13. The mean post test scores were mean = 47; GE = 7.6; AE = 13-0. The range was 32 -55 with a standard deviation of 13. According to the standard

Table 19. Report card (GPAs) pre and post-test results for students' participation during two consecutive school years in OASIS.

	Pre	Post
Range	84-91	84-91
Mean	88.5	86.9
Sd	3.6	4.0

deviation scores and the range of these two subtests, there was less variation within the Humanities subtest.

According to the descriptive statistics, the three students who participated in OASIS for two consecutive years demonstrated their greatest mean gains in the subtest 22 - Letter Word Identification (pretest 43 and posttest 47) and Subtest 29 - Humanities (pretest 24.3 and posttest 29).

Wide Range Achievement Test 3

The mean pretest and posttest outcome variables for the WRAT3 test scores - (a) word identification (reading), (b) spelling, and ©) math calculation (arithmetic) for rural male secondary students with EBD participating in OASIS are analyzed in the following section.

Descriptive statistics for the Wide Range Achievement Test 3 (WRAT) for the students participating in OASIS for two consecutive school years are reported in Table 2. Slight gains were demonstrated in both reading and arithmetic. The mean pretest score in reading was 27.7 and the posttest score was 31.3. The GE scores were 2.0 and 3.0 respectively. Although there were some differences between the posttest and pretest means, these scores were well below grade level for high school students. It is interesting to note that while the differences between posttest and pretest means were minimal for the Spelling Sub-test, the grade equivalency scores for both pre and posttest were at the high school level (9.5), which is close to grade level for tenth grade students.

Table 20. Woodcock-Johnson pre and posttest results for students' participation during two school years in OASIS.

		Pre	Post			Pre	Post			Pre	Post
<u>Letter-Word Identification</u>	Range	28-51	32-55	<u>Applied Problems</u>	Range	34-37	31-38	<u>Social Studies</u>	Range	26-30	25-29
	Mean	43	47		Mean	35.7	35.7		Mean	27.7	27.7
	Sd	13	13		Sd	1.5	4.0		Sd	2.1	2.3
	GE	5.8	7.6		GE	6.3	6.3		GE	6.9	6.9
	AE	11.2	13.0		AE	11.8	11.8		AE	12.5	12.5
<u>Passage Completion</u>	Range	20-30	21-31	<u>Dictation</u>	Range	21-34	17-38	<u>Humanities</u>	Range	21-27	24-32
	Mean	25.7	27.0		Mean	29.7	31.0		Mean	24.3	29.0
	Sd	5.1	5.3		Sd	7.5	12.1		Sd	3.1	4.4
	GE	6.9	7.6		GE	3.7	3.9		GE	6.2	8.5
	AE	12.0	13.0		AE	9.0	9.3		AE	11.8	14.0
<u>Calculation</u>	Range	14-23	13.-24	<u>Writing Samples</u>	Range	12-14	13-16	<u>Science</u>	Range	25-28	23-30
	Mean	17.7	19.7		Mean	12.7	14.5		Mean	27.0	27.0
	Sd	4.7	5.9		Sd	1.2	1.5		Sd	1.7	3.6
	GE	4.3	4.7		GE	5.1	5.9		GE	5.3	5.3
	AE	9.8	10.1		AE	11.2	12.5		AE	10.8	10.8

Attendance (Number of days present)

The mean pretest and posttest outcome variables for number of school days present for rural male secondary students with EBD participating in OASIS are described below.

Findings were reported for the three students who participated in OASIS for a second consecutive school year. Descriptive statistics for the pre test was as follows: The range was 155 – 176; the mean was 166, and the standard deviation was 10.5. Descriptive statistics for the post test was as follows: range 165 – 173; mean = 169.3, and the standard deviation was 4.04.

There was a slight increase in the mean, during the second year. It is important to note that the means for both post tests were 170.4 (Group One) and 169.3 (Group Two) out of a maximum of 180 days. The standard deviation for the pretest for Group Two

Table 21. Wide Range Achievement Test 3 pre and post-test results for students' participation during Two school years in OASIS.

		Pre	Post
<u>Reading</u>	Range	20-32	24-36
	Mean	27.7	31.3
	Sd	6.7	6.4
	GE	2.0	3.0
<u>Spelling</u>	Range	22-48	22-49
	Mean	38.7	39.3
	Sd	14.5	15.0
	GE	HS/9.5	HS/9.5
<u>Arithmetic</u>	Range	22-25	25-30
	Mean	24.0	38.0
	Sd	1.7	2.7
	GE	2.0	3.0

was 10.5. This indicated that there was a large variation within the data. This variation is also supported by the range for the pre test. However, the standard deviation for the posttest for Group Two was 4.0. The range for the posttest also indicated that there was less variation for the number of days that students attended. In addition, all of the participants earned credit for all of their courses. Descriptive statistics for the number of days present for Group Two are included in Table 225.

Discipline Referrals

The mean pretest and posttest outcome variables for number of discipline referrals for rural male secondary students with EBD participating in OASIS are explained in the following section.

When evaluating this group's pre and posttest mean differences for this outcome variable, the researcher looked for a decrease in the number of discipline referrals. Findings were reported for the three students who participated in OASIS for a second consecutive school year. Descriptive statistics for the pretest was as follows: The range was 0 – 3; the mean was 1.3, and the standard deviation was 1.5. Descriptive statistics for the posttest was as follows: range 0 –1; mean = 0 .3, and the standard deviation was 0.57. The range and the standard deviation indicated that there was little variation in the number of discipline referrals for the students who participated during two consecutive school years. In addition, there was a slight decrease in the mean. It is important to note that the mean for this posttest was 0.3 for the number of discipline referrals for the second school year. Descriptive statistics for number of discipline referrals for Group Two are depicted in Table 22.

Table 22. Attendance (Days Present) pre and post-test results and number of discipline referrals pre and post-test for students' participation during two consecutive school years in OASIS.

		Pre	Post
<u>Attendance</u> (Days Present)	Range	155-176	165-173
	Mean	166	169.3
	Sd	10.5	4.0

		Pre	Post
<u>Discipline</u> <u>Referrals</u> (Number	Range	0-3	0-1
	Mean	1.3	0.3
	Sd	1.5	0.6

Walker-McConnell Scale of Social Competence and School Adjustment –
Adolescent Version

The mean pretest and posttest outcome variables for the Walker-McConnell Scale of Social Competence and School Adjustment total and subtest scores (a) Self Control; (b) Peer Relations; (c) School Adjustment; and (d) Empathy for rural male secondary students with EBD participating in OASIS are portrayed below.

Students were observed in the classroom, by each of their teachers, in order to obtain pre-test and posttest measures for the following Walker-McConnell subscales (Subscale 1: Self-Control; Subscale 2: Peer Relations; Subscale 3: School Adjustment; Subscale 4: Empathy; and the Total Scores. Descriptive statistics for the Walker-McConnell Scale of Social Competence and School Adjustment for the students in Group Two, participating in OASIS for two school years, are reported in Table 23. In addition, gains were reflected in the differences between the posttest and pretest mean, scaled scores, and percentile rank for this subscale.

Descriptive statistics for these students for the pre-test for Subscale 1: Self-Control were as follows: The range was 22-30; the mean was 26.2; the standard deviation was 4.4; the scaled score (SS) was 6, and the percentile score (PR) was 12.4. Descriptive statistics for the posttest for Self-Control were as follows: The range was 38-47; the mean was 41.5; the standard deviation was 4.9; the scaled score (SS) was 10, and the percentile score (PR) was 50.8. Variations in the pre and posttest scores, as indicated in the range and standard deviation were minimal. However, gains were reflected in the differences between the posttest and pretest mean, scaled scores, and percentile rank for this subscale.

Descriptive statistics for students participating during two years for the pre-test for Subscale 2: Peer Relations were as follows: The range was 29-40; the mean was 36.0; the standard deviation was 6.3; the scaled score (SS) was 5, and the percentile score (PR) was 7.9. Descriptive statistics for the posttest for Peer Relations were as follows: The range

Table 23. Walker-McConnell pre and posttest results for students' participation during two school years in OASIS.

		Pre	Post			Pre	Post
<u>Self-Control</u>	Range	22-30	38-47	<u>Empathy</u>	Range	9-13	12-19
	Mean	26.2	41.5		Mean	11.5	15.6
	Sd	4.4	4.9		Sd	1.9	3.5
	SS	6	10		SS	6	8
	PR	12.4	50.8		PR	11.0	27.3
<u>Peer Relations</u>	Range	29.40	45.53	<u>Total Score</u>	Range	105-133	150-185
	Mean	36.0	49.7		Mean	116.8	165.3
	Sd	6.3	4.5		Sd	14.8	17.8
	SS	5	8		SS	78	96
	PR	7.9	25.5		PR	8.9	38.2
<u>School Adjustment</u>	Range	35-52	48.68				
	Mean	42.8	58.4				
	Sd	8.5	10.0				
	SS	8	11				
	PR	30.2	58.5				

was 45-53; the mean was 49.7; the standard deviation was 4.5; the scaled score (SS) was 8, and the percentile score (PR) was 25.5. There was less variation in the posttest scores, as indicated in the range and standard deviation. In addition, gains were reflected in the differences between the posttest and pretest mean, scaled scores, and percentile rank for this subscale.

Descriptive statistics for these students for the pretest for Subscale 3: School Adjustment were as follows: The range was 35-52; the mean was 42.8; the standard deviation was 8.5; the scaled score (SS) was 8, and the percentile score (PR) was 30.2. Descriptive statistics for the posttest for Peer Relations were as follows: The range was

48-68; the mean was 58.4; the standard deviation was 10; the scaled score (SS) was 11, and the percentile score (PR) was 58.5. There was more variation in the posttest scores, as indicated in the range and standard deviation. However, gains were reflected in the differences between the posttest and pretest mean, scaled scores, and percentile rank for this subscale.

Descriptive statistics for these second year students for the pre-test for Subscale 4: Empathy were as follows: The range was 9-13; the mean was 11.5; the standard deviation was 1.9; the scaled score (SS) was 6, and the percentile score (PR) was 11.0. Descriptive statistics for the posttest for Empathy were as follows: The range was 12-19; the mean was 15.6; the standard deviation was 3.5; the scaled score (SS) was 8, and the percentile score (PR) was 27.3. There was little more variation in the posttest scores, as indicated in the range and standard deviation for each. However, variation was minimal for both pre and posttest scores. In addition, slight gains were reflected in the differences between the posttest and pretest mean, scaled scores, and percentile rank for this subscale.

Descriptive statistics for these students for the pre-test for the Total Score were as follows: The range was 105-133; the mean was 116.8; the standard deviation was 14.8; the scaled score (SS) was 78, and the percentile score (PR) was 8.9. Descriptive statistics for the posttest for the Total Score were as follows: The range was 150-185; the mean was 165.3; the standard deviation was 17.8; the scaled score (SS) was 96, and the percentile score (PR) was 38.2. Although still high, there was more variation in the posttest scores, as indicated in the range and standard deviation. Gains were reflected in the differences between the posttest and pretest mean, scaled scores, and percentile rank for the Total Score. Again, posttests for the subscales and the total scores were slightly below average, average, or slightly above average.

The Behavior Evaluation Scale-2

The mean pretest and posttest outcome variables for the BES-2 Behavior Quotient and subscale scores - (a) Learning problems; (b) Interpersonal difficulties; ©)

Inappropriate behaviors; (d) Unhappiness/Depression; (e) and Physical symptoms/Fears) for rural male secondary students with EBD participating in OASIS are described in the following section.

Likewise, as with the Walker-McConnell Scale, students were observed in the classroom, by each of their teachers, in order to obtain pre-test and posttest measures for the following Behavior Evaluation Scale-2 (BES-2) subscales (Subscale 1: Learning Problems; Subscale 2: Interpersonal Difficulties; Subscale 3: Inappropriate Behavior; Subscale 4: Unhappiness/Depression; Subscale 5: Physical Symptoms/Fears and the Quotient/Total Scores. When converting raw scores to subscales, higher raw scores convert to lower standard scores (SS) and percentile ranks (PR) indicating poor performance. Conversely, lower raw scores convert to higher standard scores (SS) and percentile ranks (PR), denoting more appropriate behavior. However, quotients or total scores were calculated as total scale quotients. Therefore, the higher the quotient (total score), the better the students' performance or gains. Standard scores ranging 8-12 and 90-110 are considered average. Descriptive statistics for the BES-2 for the students participating in OASIS for two school years are reported in Table 24. Standard scores ranging from 6-7 and quotient/total scores ranging from 80-89 are considered below average. While standard scores ranging from 8-12 and quotient/total scores ranging from 90-110 are considered average.

Descriptive statistics for these students for the pre-test for Subscale 1: Learning Problems were as follows: The range was 59-89; the mean was 73.9; the standard deviation was 14.7; the scaled score (SS) was 8, and the percentile score (PR) was 25. Descriptive statistics for the posttest for Learning Problems were as follows: The range was 62-88; the mean was 77.5; the standard deviation was 13.6; the scaled score (SS) was 8, and the percentile score (PR) was 25. Variations in the pre and posttest scores, as indicated in the range and standard deviation were minimal. Gains were not found in the

differences between the posttest and pretest mean scores, the scaled scores, or percentile ranks for this subscale.

Descriptive statistics for students participating during two years for the pre-test for Subscale 2: Interpersonal Difficulties were as follows: The range was 64-85; the mean was 77.6; the standard deviation was 11.6; the scaled score (SS) was 8, and the percentile score (PR) was 25. Descriptive statistics for the posttest for Peer Relations were as follows: The range was 63-89; the mean was 78.4; the standard deviation was 13.9; the scaled score (SS) was 8, and the percentile score (PR) was 25. There was an increase in variation in the posttest scores, as indicated by the range and standard deviation. Gains were not found in the differences between the posttest and pretest mean scores, scaled scores, or percentile ranks for this subscale.

Descriptive statistics for these students for the pre-test for Subscale 3: Inappropriate Behavior were as follows: The range was 75-112; the mean was 97.1; the standard deviation was 19.3; the scaled score (SS) was 9, and the percentile score (PR) was 37. Descriptive statistics for the posttest for Inappropriate Behavior were as follows: The range was 87-128; the mean was 110.7; the standard deviation was 20.9; the scaled score (SS) was 6, and the percentile score (PR) was 9. There was more variation in the posttest scores, as indicated by the range and standard deviation. In addition, gains were not found in the differences between the posttest and pretest mean, scaled scores, and percentile ranks for this subscale.

Descriptive statistics for these second year students for the pre-test for Subscale 4: Unhappiness/Depression were as follows: The range was 57-85; the mean was 71.8; the standard deviation was 14; the scaled score (SS) was 8, and the percentile score (PR) was 25. Descriptive statistics for the posttest for Unhappiness/Depression were as follows: The range was 64-95; the mean was 79.8; the standard deviation was 15.6; the scaled score

Table 24. Behavior Evaluation Scale-2 pre and posttest results for students' participation during two school years in OASIS.

<u>Learning Problems</u>		Pre	Post	<u>Unhappiness/ Depression</u>		Pre	Post
	Range	59-89	62-88		Range	57-85	64-95
	Mean	73.9	77.5		Mean	71.8	79.8
	Sd	14.7	13.6		Sd	14.0	15.6
	SS	8	8		SS	8	8
<u>Interpersonal Difficulties</u>	PR	25	25	<u>Physical Symptoms/ Fears</u>	PR	25	25
	Range	64-85	63-89		Range	91-99	85-98
	Mean	77.6	78.4		Mean	94.0	90.8
	Sd	11.6	13.9		Sd	4.5	6.6
	SS	8	8		SS	5	5
<u>Inappropriate Behavior</u>	PR	25	25	<u>Quotient/ Total Score</u>	PR	4	4
	Range	75-112	87-128		Range	91.99	85-98
	Mean	97.1	110.7		Mean quotient	94.0	90.8
	Sd	19.3	20.9		Sd	4.5	6.6
	SS	9	6		PR	34	25
	PR	37	9				

(SS) was 8, and the percentile score (PR) was 25. There was a little more variation in the posttest scores, as indicated in the range and standard deviation for each. Gains were not found in the differences between the posttest and pretest mean scores, the scaled scores, or percentile ranks for this subscale.

Descriptive statistics for students participating for two years for the pretest for Subscale 5: Physical Symptoms/Fears were as follows: The range was 91-99; the mean

was 94; the standard deviation was 4.5; the scaled score (SS) was 5, and the percentile score (PR) was 4. Descriptive statistics for the posttest for Physical Symptoms/Fears were as follows: The range was 85-98; the mean was 90.8; the standard deviation was 6.6; the scaled score (SS) was 5, and the percentile score (PR) was 4. There was a little more variation in the posttest scores, as indicated in the range and standard deviation for each, but variation was minimal for both pre and posttests. Slight gains were found in the differences between the posttest and pretest mean scores, but not in the scaled scores, or percentile ranks for this subscale.

Descriptive statistics for these students for the pretest for the Total Score were as follows: The range was 91-99; the mean was 94; the standard deviation was 4.5; and the percentile score (PR) was 34. Descriptive statistics for the posttest for the Total Score were as follows: The range was 85-98; the mean was 90.8; the standard deviation was 6.6; and the percentile score (PR) was 25. There was little variation in the posttest scores, as indicated by the range and standard deviation. Gains were not found in the differences between the posttest and pretest mean scores or percentile ranks for the Total Score. The posttests for the subscales were as follows: average for Learning Problems, Interpersonal Difficulties, and Unhappiness/Depression; below average for Inappropriate Behavior; and poor for Physical Symptoms/Fears. The total pre and posttest scores fell within the average range of 90-110.

Summary

The purpose of this chapter was to analyze data in order to investigate the impact of a psychoeducational program, OASIS, on the academic and social behavioral achievement for secondary students with EBD attending a rural public school. Specifically, the analysis of the findings were to determine if the effect of OASIS on these students to increase their academic and social behavioral achievement which enabled them to continue their education successfully. In addition, all three of seniors who participated in OASIS

graduated with general education diplomas with a vocational seal and either attended post-secondary education or gained employment.

Academic Achievement

In general, some academic achievement increased for the students who participated in OASIS for one school year (Group One). Specifically, according to descriptive statistics, report card grades improved slightly, but results of the paired t-tests were not significant for Group One. Report card grades for Group Two, the three students who participated during two consecutive years did not increase. However, the mean report card grades (GPAs) for all the students ranged from 83.5 to 88.5. Thus, grades were maintained during both years. As mentioned previously, these grades may reflect the academic and social behavioral instruction that was provided through OASIS from the first day of school.

Students' academic achievement was also assessed using the pretest and posttest mean scores for the Woodcock-Johnson Tests of Achievement (Standard Batteries). Results from descriptive statistics indicated that some gains were reflected in the following subtests: Calculation, Applied Problems, Dictation, and Science for students in Group One. In addition, the following subtests demonstrated posttest grade equivalent scores at the high school level: Passage Completion, Applied Problems, and Social Studies. Descriptive statistics for Group Two denoted that the greatest mean gains were in the Letter Word and Humanities subtests. Findings from the paired t-test for Group One were significant for the Applied Problems subtest. This was noteworthy, since this subtest required abstract thinking, applying knowledge, and not simply recalling facts.

Descriptive statistics for Group One showed gains in reading and slight gains in spelling. Students participating for two years, Group Two, showed slight gains in both reading and arithmetic. Results of the paired t-tests for Group One were that statistically significant gains were found in reading.

Social Behavioral Achievement

Students demonstrated an increase in social behavioral achievement. The findings for descriptive statistics for both students in Group One and Group Two showed an increase in the number of days attended out of 180 school days. It is interesting to note that one student in Group One achieved perfect attendance and received recognition during Honors Night at the school. While, the t-test was not significant for number of days attending school, finding indicated practical significance.

Results of descriptive statistics for number of discipline referrals demonstrated a decrease for both Group One and Group Two. The mean posttests for number of discipline referrals were 1.5 and 0.3 respectively. However, the decrease in number of discipline referrals was not statistically significant for Group One. It is possible that since the intervention began on the first day of school, the mean number of discipline referrals were also low for the pretest. Again, the decrease in number of discipline referrals indicated practical significance.

Descriptive statistics for both Group One and for Group Two indicated an increase in social behavioral achievement on the Walker-McConnell Scale of Social Competence and School Adjustment. The paired t-test analysis revealed statistically significant differences between the means of the pre and posttests for the four subscales and the total scores for Group One.

Descriptive statistics for the Behavior Evaluation Scale-2 for Group One showed increases for the five subscales and the quotient/total score. However, the students who participated during two years (Group Two) maintained their scaled scores in Learning Problems, Interpersonal Difficulties, Unhappiness/Depression, and Physical Symptom/Fears, Inappropriate Behavior and the Quotient/Total Score. Paired t-test analysis revealed statistically significant differences between the means of the pre and posttests for the five subscales and the quotient/total scores for Group One. A summary of the inferential analyses for the dependent variables are depicted in Table 4. In general, the

analysis of the data reflected that the greatest gains for students that participated in OASIS were reflected in the social behavioral assessments.

CHAPTER V

SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

Introduction

This study was designed to examine if rural male students' with EBD participation in OASIS will increase their academic achievement and appropriate social behavioral achievement at a public high school. The intervention, OASIS, is based on research-based practices and is an exemplary special education program that meets the academic and social behavioral needs of secondary students with EBD. Using a psychoeducational model, OASIS combined an affective and academic curriculum. This was accomplished through effective instruction such as direct instruction, tutoring, social skills instruction, and the teaching of problem solving strategies. The goal of the intervention was to provide secondary students with EBD with the necessary skills to increase their academic and appropriate social behavioral achievement. The data focused on evaluating the effect of OASIS on several dependent variables that included the academic achievement and social behavioral achievement of the secondary students with EBD who participated in OASIS. This chapter includes a summary of the study. The conclusions section will summarize and discuss the findings of the research hypotheses tested in the study. The recommendations section will include inferences drawn from the findings of the study and practical applications of the research findings will be demonstrated. A brief conclusion and recommendations for future research will complete this discourse.

Summary

There is a paucity of research on effective programs for secondary students with EBD. A study of the literature indicated that there was limited research in the area of integrated comprehensive services for secondary students with EBD in the public schools. Kauffman (1999) and Nelson (2000) claimed that little thought and few resources have gone into teaching appropriate behavior to students with EBD. Nelson (2000) reported that educators generally wait until the students' problems become well-established and less responsive to intervention. The usual response by school personnel is a punitive reaction to the students' challenging behaviors (Goldstein, et al., Nelson, 2000). Nelson (2000) concluded that teaching behavior to students is the responsibility of all educators.

Another justification of the study is that the related services component (e.g. counseling) of IDEA (1997) has become one of the most difficult requirements in providing a free, appropriate, public education (FAPE) for students with EBD (Maag & Katsiyannis, 1996). The authors provided recommendations to schools for providing counseling services to students with EBD served under IDEA (1997). The analysis of the impact of OASIS on the academic and social behavioral achievement of secondary students with EBD can expand the body of research-based literature in this area.

The problem of this study is to improve the academic and social behavioral achievement for secondary students with EBD in the public schools. This is a problem because there are a limited number of effective models available. There are few studies about effective affective programs for secondary students with EBD in the public schools. In addition, there is a shortage of teachers who are effective in working with secondary students with EBD.

The purpose of this study was to investigate the impact of an integrated comprehensive psychoeducational program, OASIS, on the academic and social behavioral achievement of secondary students with EBD attending a public school. Additionally, follow-up information was gathered to investigate the transition and post-

secondary accomplishments of seniors who exited OASIS through graduation. Specific variables that were investigated included report card grades, number of students graduating, standardized test scores in academic areas, number of days present, number of discipline referrals, and scores on behavioral checklists. Data were gathered and analyzed in order to answer the research question: Can secondary rural male students' with EBD participation in OASIS increase their academic achievement and appropriate social achievement at a public high school?

The research design was post-hoc action research (program evaluation, using the pre and posttest) group case study focusing on the variables listed above. The independent variable was participation in OASIS; there were no control conditions. The data analysis was descriptive and inferential using range, mean, standard deviation (for Group One and Group Two), and the directional (positive) paired t-test for Group One.

The independent variable for this study was the OASIS program. The researcher is the special education teacher for the students participating in the OASIS program. OASIS was created to provide comprehensive services to secondary students with EBD attending a rural public school. OASIS, based on a psycho-educational model, offered integrated comprehensive services for secondary students with EBD. OASIS focused on providing services to students such as individualized education programs, related services, services to families, teachers, administrators, as well as the curriculum (affective and academic).

The goal of OASIS was to improve the social-behavioral and academic achievement of secondary students with EBD. Its' affective component used a behavioral cognitive training model, which taught students to manage negative emotions more effectively through a process of rational thinking. This is based on Rational Emotive Behavior Therapy (Ellis, 1962). OASIS used Rational Emotive Behavior Therapy (REBT) because it is: (a) cognitive – in order to change students' irrational thoughts and beliefs; (b) behavioral – when students thoughts and beliefs change, their behavior changes; ©) psycho-educational - methods used are the same ones educators use to teach new skills in

school, such as modeling and structured learning. OASIS increases secondary students with EBD academic achievement through restructuring the curriculum e.g., reteaching students' skills and concepts via the OASIS paraprofessional or EBD teacher; individualized modifications from the students' IEP, supporting instruction in the general education classes, and collaborating with general education teachers, etc. Decisions for secondary students with EBD are made on an individualized basis according to their IEPs.

The dependent variables for this study were the academic achievement and social behavioral achievement of the secondary students with EBD participating in OASIS.

Specifically, the dependent variables included:

- a. Academic
 - I. Report card grades (GPA)
 - ii. Number of students graduating from high school
 - iii. Woodcock Johnson Achievement Tests (Standard Batteries – (a) Letter-Word Identification; (b) Passage Completion; (c) Calculation; (d) Applied Problems; (e) Dictation; (f) Writing Samples; (g) Science; (h) Social Studies; and (I) Humanities)
 - iv. WRAT – III R (a) word identification (reading), (b) spelling, and (c) math calculation (arithmetic).
- b. Social Behavioral
 - I. Attendance (Number of days present out of 180 days)
 - ii. Number of discipline referrals
 - iii. Walker McConnell Scale of Social Competence and School Adjustment – Adolescent Version total and subtest scores (a) Self Control; (b) Peer Relations; (c) School Adjustment; and (d) Empathy)

- iv. BES – 2 (Behavior Quotient and subscale scores (a) Learning problems; (b) Interpersonal difficulties; (c) Inappropriate behaviors; (d) Unhappiness/Depression; and (e) Physical symptoms/Fears).

The population was all students with EBD that ever attended this rural high school. The study consisted of two mutually exclusive samples (Sample 1/pretest and Sample 2/posttest) for Group One. The total number of subjects was 10 males, ranging from 14 to 20 years of age. In addition, three students (Group Two) participated in OASIS during two consecutive years. Their outcome variables were calculated with descriptive statistics (range, mean, and standard deviation). The students who participated in OASIS during 2002-2003 and 2003-2004 were students who were eligible (met the criteria for EBD) for services under the Individuals with Disabilities Education Act of 1997. All students with EBD in the high school participated – none were excluded. The investigator was the special education teacher for these students. A letter of authorization was obtained from the school system's Superintendent and Special Education Director. Approval was also granted from the Institutional Review Board (IRB) of the University of Georgia for this research.

The research participants (students) participated in OASIS as an integral part of their Individualized Education required by the Individuals with Disabilities Education Act. OASIS was provided on a daily basis during the time that each student was educated during the two year period time period. The data were gathered as integral parts of instruction consistent with required data to be obtained as a part of the accountability requirements for local schools/school systems through *Georgia's A Plus Education Reform Act* and the federal *No Child Left Behind Act*.

The knowledge and skills learned by the participants through OASIS were targeted to increase the students' knowledge and skills in academic and social behavioral achievement in their local public school with anticipated generalization to their life spaces such that they could obtain jobs and/or pursue post-secondary educational experiences.

The results of this study can be shared with other educators serving similar students in Georgia and around the country to enhance their educational programs to increase the knowledge and skills (academics and social behavioral) for similar students with EBD. The students' participation in OASIS is consistent with the services specified in each student's Individualized Education Program which requires parental approval for participation (e.g., consent). The evaluation of this program was requested by the Superintendent and the Special Education Director.

Conclusions

This section will summarize and discuss the findings of the of the research hypotheses tested in the study. The following conclusions were formulated as a result of the findings of this study. Students' report grades reflected that both groups were achieving academically in the public high school and demonstrated practical significance. Factors that may have contributed to their academic achievement were also found in the literature, such as school based best practices and academic curricular restructuring (Cheney & Barringer, 1995; Nelson, 2000; Quinn & McDougal, 1998). In addition, OASIS utilized interventions, recommended by researchers (Farmer, et. al., 1999; Quinn, et. al., 1999) that focused on reframing students' social-cognitive processes, helping them to develop prosocial goals as well as problem solving skills. The three seniors in Group One benefitted from their participation in OASIS, since their outcomes were graduation and postsecondary education or employment.

The Woodcock-Johnson Tests of Achievement (Standard Batteries) was also used to assess the students' academic gains. Descriptive statistics for students in Group One indicated that the greatest mean differences between posttests and pretests were reflected in the following subtests: Calculation, Applied Problems, Dictation, and Science. In addition, a dependent t-test yielded statistically significant group differences in Applied Problems. This subtest does not reflect recall of facts, since students must use their prior knowledge to solve problems. Since Group One consisted of four ninth graders and three

seniors, the maturation level of the seniors may be reflected in the gains of this test. Also, students in Group One's posttest scores were at the high school level in the following subtests: Passage Completion, Applied Problems, and Social Studies.

According to the descriptive statistics, students in Group Two demonstrated gains in the following subtests: Letter Word Identification and Humanities, Passage Completion, Calculation, Dictation, and Writing Samples. However, Group Two students' scores remained below grade level. Students with EBD, may test below grade level because their emotional behavior problems hindered them from acquiring basic skills earlier during their education.

WRAT 3 achievement test scores indicated that students in both groups made gains in reading. In addition, students in both groups did not regress in their skills, but remained below grade level on all subtests with the exception of spelling for students in Group two. Perhaps these patterns of scores implied that these students were behind in their basic skills, but are making gains due to their participation in OASIS. Based on these findings, secondary students with EBD may require more time participating in an effective program such as OASIS in order to demonstrate greater or statistically significant academic gains. Researchers (Quinn et. a., 1999) pointed out that the duration of most research studies was short in relation to the severity of the problems of students with EBD.

According to descriptive statistics, students' participation in OASIS indicated an increase in number of days present for both Group One and Group Two. It is interesting to note that one of the ninth graders in Group One earned perfect attendance for the year. Since, results of the t-Test were not significant for Group One, findings support the null hypothesis that the mean differences between the posttest and pretest were not statistically significant. A possible explanation for this may be that the above mentioned student had perfect attendance and the sample was small. However, students who participated in OASIS demonstrated practical significance in their number of days present in school.

Several discipline referrals can result in students' lack of exposure to the curriculum resulting in poor academic achievement. Since data from this study has supported the literature that secondary students with EBD score below average on standardized tests, it is imperative for these students not to miss instructional time due to their inappropriate behavior. According to descriptive statistics both Group One and Group Two indicated a decrease in discipline referrals during the school year. Findings supported the null hypothesis that the mean differences between the posttest and pretest were not statistically significant. This may be due to the small sample size. However, practical significance was demonstrated. Teaching students appropriate behavior and problem solving strategies benefits their academic and social behavioral achievement more than punitive measures that decrease these students' instructional time. This has also been recommended by researchers (e.g., Goldstein, et. al., 1998; Nelson, 2000).

Students were observed in the classroom, by each of their teachers, in order to obtain pre-test and posttest measures for the following Walker- McConnell Scale of Social Competence and the BES-2. Gains were reflected in the differences between the posttest and pretest mean, scaled scores, and percentile rank for the subscales and the Total Score. Generally, posttests for the subscales and the total scores were slightly below average, average, or slightly above average.

Paired t-test analysis revealed statistically significant differences between the means of the pre and posttests for the four Walker McConnell Scale of Social Competence and the BES-2 for all of the subscales and the Total Score. Therefore, the null hypotheses were rejected for these tests and the research question was accepted for the Walker-McConnell Scale of Social Competence and School Adjustment for the students in Group One participating in OASIS.

In addition, students' number of days present and number of discipline referrals are compatible with these findings. It appears that the affective curriculum utilized in OASIS increased the appropriate social behavioral achievement for these students. These findings

support the social behavioral component of the research question and are congruent with the research (Armstrong, et. al., 2003; Cheney & Barringer, 1995; Farmer, et. al., 1999; Dutash, et. al., 2002; Leone, et. al., 1992; Lourie & Hernandez, 2003; Nelson, 2000; Quinn & McDougal, 1998; and Shapiro, et. al., 1999). A summary of the inferential analyses for the dependent variables are depicted in Table 4. In general, the analysis of the data revealed that the greatest statistically significant gains for students that participated in OASIS were reflected in the social behavioral assessments. In addition, practical significance was achieved as demonstrated by students' outcomes as a result of their participation in OASIS.

Implications for Program Planning

This section will present inferences drawn from the findings of the study. This section will also suggest how the information learned from this study might be useful in providing effective services to secondary students with EBD. Some increase in academic achievement was demonstrated for the students that participated in OASIS for one school year (Group One). Report card grades improved slightly for Group One, but did not increase for Group Two, the three students who participated during two consecutive years. However, the mean report card grades (GPAs) for all the students ranged from 83.5 to 88.5. The consistency of these ample grades may reflect the academic and social behavioral instruction that was provided through OASIS from the first day of school. According to the literature, Nelson (2000) reported Lipsey's (1991) meta-analysis of 800 studies. The largest effect size was shown for social skills training, behaviorally based interventions, and academic restructuring. It appears these factors, utilized in OASIS, facilitated students' academic achievement at the high school level. Specific types of academic curricular restructuring that appear to be effective with secondary students with EBD are supportive instruction through special education services, such as appropriate accommodations. It is important that students receive these services in order to succeed academically. A number of teachers, staff members, support personnel, and administrators

are involved in coordinating appropriate services for these students. For example, a teacher certified in EBD facilitates students social skills training, behaviorally based interventions (e.g., REBT), and academic curricular restructuring. Additional special education teachers, paraprofessionals, general education teachers, administrators, support personnel (e.g., counselors), parents, and the students are involved in increasing the achievement of secondary students with EBD. Administrative and consultative support is essential for special education and general education teachers when implementing services for secondary students with EBD in the public schools. Administrative support is also necessary when scheduling students with EBD into the appropriate classes (Hughes, et al., 2002; Machtinger, 2003). An important outcome for the seniors in Group One is that they benefited from these services (e.g., supportive instruction, social skills training, behavioral interventions, related services, etc.) and all three graduated from high school. Integrating these types of services into a program such as OASIS is effective for students with EBD.

Students' academic achievement was also assessed using the pretest and posttest mean scores for the Woodcock-Johnson Tests of Achievement (Standard Batteries). Results from descriptive statistics indicated that some gains were reflected in the following subtests: Calculation, Applied Problems, Dictation, and Science for students in Group One. In addition, the following subtests demonstrated posttest grade equivalent scores at the high school level: Passage Completion, Applied Problems, and Social Studies. Descriptive statistics for Group Two denoted that the greatest mean gains were in the Letter Word and Humanities subtests. Findings from the paired t-test for Group One were significant for the Applied Problems subtest. This was noteworthy, since this subtest required abstract thinking, applying knowledge, and not simply recalling facts.

Descriptive statistics for Group One, on the WRAT3, showed gains in reading and slight gains in spelling. Students participating for two years, Group Two, showed slight gains in both reading and arithmetic. Results of the paired t-tests for Group One were that statistically significant gains were found in reading.

It is important to note that academic gains were demonstrated for students in Group One and Group Two. This was demonstrated through pre and posttesting measures. Although achievement test scores indicated that students were below grade level on several subtests, they showed that they increased their academic achievement through pre and posttest measures. These points are important when planning effective programs for students with EBD. For example, since these secondary students were found to be behind grade level in their basic skills (e.g., writing, reading, and calculation), programs such as OASIS need to be implemented in the early grades. In addition, when planning a program such as OASIS it is imperative that an evaluation system be built into the intervention (Huberty et al., 1973). The following methods of evaluation are recommended: (1) description of the program, (2) examination of measures of achievement through pre and posttests, (3) t-tests results on pre and posttest comparisons (Dugger & Dugger, 1998). Friedman (2002) also suggested that pre and posttesting be used to show improvement overtime in skills, knowledge, or behavior. According to the literature (Perry, 2001) evidence generated from an instructional program process indicated that this is a valuable process which can be used to improve instructional programs. An important implication for effective program planning for secondary students with EBD, is that the implementation of an evaluation process is an excellent method to use with an accountability process. Data that demonstrates students' increase in academic achievement over time, is especially important when school systems are held accountable for the academic achievement of all students. This is another implication when demonstrating successful student outcomes, especially when secondary students with EBD generally scores below grade level on standardized tests. An essential implication is that without appropriate measures, effective programs may not be maintained for secondary students with EBD. By the same token, measures must focus on students' outcomes so that programs may be changed and improved in order to appropriately meet the needs of secondary students with EBD.

Students who participated in OASIS generally demonstrated an increase in social behavioral achievement. Descriptive statistics indicated that number of days present in school increased, while the discipline referrals decreased for students in Group One and Group Two. Descriptive statistics for both Group One and for Group Two indicated an increase in social behavioral achievement on the Walker-McConnell Scale of Social Competence and School Adjustment. The paired t-test analysis revealed statistically significant differences between the means of the pre and posttests for the four subscales and the total scores for Group One. While, descriptive statistics for the Behavior Evaluation Scale-2 for Group One showed increases for the five subscales and the Quotient/Total Score. However, the students who participated during two years (Group Two) maintained their scaled scores in Learning Problems, Interpersonal Difficulties, Unhappiness/Depression, and Physical Symptom/Fears. They showed appropriate behavioral decreases in the subscale – Inappropriate Behavior and the Quotient/Total Score. Paired t-test analysis revealed statistically significant differences between the means of the pre and posttests for the five subscales and the quotient/total scores for Group One. In general, the analysis of the data reflected that the greatest gains for students that participated in OASIS were reflected in the social behavioral assessments. These findings that resulted from students' participation in OASIS are supported by the literature (Armstrong, et al., 2003; Bernard & Joyce, 1984; Cheney & Barringer, 1995; Ellis & Bernard, 1983; Farmer, et al., 1999; Kutash, et al., 2002; Lourie & Hernandez, 2003; Maag & Katsiyannis, 1996; Nelson, 2000; Quinn & McDougal, 1998; Quinn, et al., 1999; Shapiro, et al., 1999). Studies have shown that REBT, which is utilized in OASIS, are suited for school programs and that their methods can be taught to large and small groups in the classroom setting (Bernard & Joyce, 1984; Ellis & Bernard, 1983; Nichols, 1999; Vernon, 1989). The potential use of REBT in the school system is applicable, since the majority of children, adolescents, and adults receive some kind of schooling and relatively few of them receive any amount of affective or emotional education (Ellis, 2001).

Since findings from this study indicated that an appropriate affective curriculum increased the social behavioral achievement of secondary students with EBD, it is important to integrate an affective component when planning programs for students with EBD. Researchers (Kutash, et al., 2002) evaluated a school-based program for students with EBD and concluded that the role of the school is the primary provider of mental health services for this population of students. Results from the study revealed that students were not receiving related services from community mental health services due to barriers imposed by managed care. On the other hand, Lourie and Hernandez (2003) claimed that it is necessary to have an effective program for secondary students with EBD at the public school level, in addition to collaboration with outside systems in order to improve students' outcomes. Similarly, students who participated in OASIS received affective instruction, counseling, and related services. An important related service offered to students participating in OASIS was provided by the Georgia Department of Labor (i.e., Vocational Rehabilitation Services). This service was important to the seniors in Group One who graduated. For example, one student received funds from Vocational Rehabilitation to attend North Georgia Technical College; another received post-secondary training at Warm Springs; and one was employed in the community. However, the principal affective component of OASIS was provided by in the school system.

The affective curriculum consisted of REBT, group and individual counseling, and instruction in social skills, anger control, and moral education. Findings from the current study indicated that the duration and various components of this affective curriculum increased the social behavioral achievement of students who participated in OASIS. This is supported in the literature. Researchers (Farmer, et al., 1999) recommended that school-based interventions for students with EBD should not only focus on the behavior of the student. These authors claimed that the research on social cognitive processes supported interventions that focused on reframing students' social-cognitive processes, helping them to develop prosocial goals as well as problem solving strategies. Similarly,

researchers (Quinn, et al., 1999) reported that many programs designed for students with EBD included a social skill training component. However, they found slightly greater effects for interventions that focused on teaching and measuring specific social skills such as cooperating or problem solving. In addition, the authors pointed out that the duration of most research studies was short in relation to the severity of the problems and that the skills taught should be relevant to the individual. Their results suggested, as with the current study, that social skill training should be customized to address the needs of the students. Similarly, researchers (Farmer, et al., 1999) reported that interventions that include social skills training for students with EBD must address multiple factors such as changing the students behavior through reframing the beliefs and values of the entire social context. For students with severe problem behavior intensive direct interventions are also necessary, e.g., counseling, cognitive-behavioral problem solving, and crisis management (Kamps, et al., 1999).

Recommendations for Further Research

This study has contributed to the knowledge of secondary students with EBD. The results of this study provide a data base for further research and future studies similar to this one. The research question and the findings concerning each of the dependent variables need to be explored further. The following recommendations were formulated as a result of conclusions drawn from this study in respect to the research questions and null hypotheses regarding program characteristics, student characteristics, and evaluative data:

1. A recommendation is to replicate to other public schools in order to utilize a larger sample in the study in hopes of obtaining more statistically significant findings in the area of academic achievement.
2. Findings from the current study demonstrated academic gains, although students were below grade level on many subtests of standardized tests. A recommendation is that a similar intervention to OASIS, that is appropriate for primary and elementary school children, be implemented and evaluated.

Researchers need to determine if students with EBD are on grade level during these grades. Follow-up studies can investigate the type of programs that are necessary for students with EBD to remain on grade level. This is important since, students with EBD will undergo years of standardized testing in order to advance to the next grade and ultimately to graduate from high school. Again, if the intervention is successful with students with EBD, it may be expanded to other students with disabilities such as SLD and ADHD.

3. A recommendation is to replicate to urban public schools in order to investigate the study with this population of students.
4. A recommendation is to replicate to larger schools or multiple systems in order to investigate the study with female students with EBD.
5. An increase in social behavioral achievement was statistically significant for the students in the current study. Therefore, another recommendation is to expand the study using students with additional exceptionalities that present with behavior that is negatively impacting their academic achievement, such as specific learning disabilities and attention deficit disorders, or other health impairments.
6. Since an increase in social behavioral achievement was statistically significant for the students in the current study, another study might determine if direct services to students from a school psychologist or counselor are necessary to obtain these results. A comparison study can investigate these components. It may be that a teacher with certification in EBD and training in the affective curriculum used in OASIS will replicate these results. This is important in terms of costs to the school system in a time of budget cuts. This affective curriculum may be included in staff training and institutions of higher education that train teachers. Since some

students with EBD are included in the general education classroom, all teachers would benefit from training in teaching students appropriate behavior.

7. Teachers certified in EBD can receive training from a psychologist. The study can be replicated utilizing OASIS without students receiving direct services to students from the psychologist. The psychologist would have the role of trainer and consultant. The benefits would be cost effective in dollars and would facilitate a multitude of effective programs in a school system or region for students with EBD.

In conclusion, this study can serve as a spring board for a number of studies that implement and evaluate programs for students with behavioral challenges.

Summary

This study investigated the impact of an integrated comprehensive psychoeducational program, OASIS, on the academic and social behavioral achievement of secondary students with EBD attending a public school. It contributes to the field of program planning for this population of students. This study is among the first to evaluate a program for secondary students with EBD, over two consecutive years. It is among the first to use pretest and posttest data gathered from both academic and social behavioral measures in order to determine if students' participation in OASIS increased their academic and appropriate social behavioral achievement. In addition, this study considered the effect of the academic and affective instruction, along with other required services on the outcomes of secondary students with EBD. The following student outcomes were measured: (1) Increase in academic achievement (i.e, test scores, grades); (2) Increase in social behavioral achievement (i.e, assessments, peer and adult interaction, decrease in discipline referrals); and (3) Increase in general education segments, graduation, post-secondary education, and employment. More studies such as this one should be conducted

in an effort to contribute to the field of knowledge about effective programs and outcomes for secondary students with EBD in the public schools.

REFERENCES

- Adams, J.F. (Ed.). (1968). *Understanding adolescence; current developments adolescent psychology*. Boston: Allyn and Bacon.
- Adderholdt-Elliot, M., & Eller, S. H.(1989). Counseling students who are gifted through bibliotherapy. *Teaching Exceptional Children*, 22(1), 26-31.
- Alberto, P.A., & Troutman, A. C. (1990). *Applied behavior analysis for teachers*. Columbus, OH: Merrill.
- Alford, B.A, & Beck, A. T. (1997). *The integrative power of cognitive therapy*. New York, NY: The Guilford Press.
- Anderson, J.A. (2001). A comparison of the academic progress of students with EBD and students with LD. *Journal of Emotional &Behavioral Disorders*, 9(2), 106-115.
- Arbuthnot, J., & Faust, A. (1981). *Teaching moral reasoning: Theory and practice*. New York: Harper & Row.
- Armstrong, K.H., Dedrick, R.F., & Greenbaum, P.E. (2003). Factors associated with community adjustment of young adults with serious emotional disturbance: A longitudinal analysis. *Journal of Emotional &Behavioral Disorders*, 11(2), 66-76.
- Bandura, A. (1973). *Aggression: A social learning analysis*. Englewood Cliffs, NJ: Prentice-Hall.
- Bandura, A. (1977). *A social learning theory*. Englewood Cliffs, NJ: Prentice-Hall.
- Bartlett, R.C. (1932). *Remembering*. Cambridge, Eng: Cambridge University Press.
- Bauer, S.R., Sapp, M., & Johnson, D. (2000). Group counseling strategies for rural at-risk high school students. *High School Journal*, 83(2), 41- 50.

- Beck, A.T. (1976). *Cognitive therapies and emotional disorders*. New York: New American Library.
- Bernard, M.E., & Joyce, M.R. (1984). *Rational-emotive therapy with children and adolescents*. US: John Wiley & Sons, Inc.
- Blatt, M., Colby, A., & Speicher, B. (1974). *Hypothetical dilemmas for use in moral discussions*. Cambridge, MA: Harvard University, Moral Education and Research Foundation.
- Bos, C.S., & Vaughn, S. (1994). *Strategies for teaching students with learning and behavior problem (3rd ed.)*. Needham Heights, MA: Allyn and Bacon.
- Brendtro, L.K., & Brokenleg, M. (1993). Beyond the curriculum of control. *Journal of Emotional and Behavioral Problems*, 1(4), 5- 11.
- Brigham, T.A., (1992). A brief commentary on the future of self-management interventions in education. *School Psychology Review*, 21(2), 264- 268.
- Brookhart v. Illinois State Board of Education, 697 F.2d 179 (7th Cir. 983).
- Brown, A.L. (1980). *Metacognitive development and reading*. In R.J. Spiro, B.C. Bruce, & W.F. Brewer (Eds.), *Theoretical issues in reading comprehension* (pp 453-482.) Hillsdale, NJ: Erlbaum.
- Bullis, M., & Bull, B. (1994). Identifying and assessing community-based social behavior of adolescents and young adults with EBD. *Journal of Emotional & Behavioral Disorders*, 2(3), 173- 184.
- Callahan, K. (1994). Wherefore art thou, Juliet? Causes and implications of the male dominated sex ratio in programs for students with emotional and behavioral disorders. *Education & Treatment of Children*, 17(3), 228- 243.
- Campbell, D., & Stanley, J. (1963). *Experimental and quasi-experimental designs for research*. Chicago: MA: Rand McNally.

- Carr, S.C., & Punzo, R.P. (1993). The effects of self-monitoring of academic accuracy and productivity on the performance of students with behavioral disorders. *Behavioral Disorders, 14*(2), 89- 98.
- Carter, J. (2003) Letter to Michele Morrison.
- Cavin, C. (1998). Maintaining sanity in an insane classroom: How a teacher of students with emotional disturbances can keep from becoming an emotionally disturbed teacher. *Education & Treatment of Children, 21*(3), 370- 384.
- Cedar Rapids v. Garret F., 526 U.S. 66 (1999).
- Center, D.B., & Steventon, C. (2001). The EBD Teacher Stressors Questionnaire. *Education & Treatment of Children, 24*(3), 323- 335.
- Cheney, D., & Barringer, C. (1995). Teacher competence, student diversity, and staff training for the inclusion of middle school students with emotional and behavioral disorders. *Journal of Emotional & Behavioral Disorders, 3*(1), 174- 182.
- Clees, T.J., (1994). Self-recording of students' daily schedules of teachers' expectancies: Perspectives on reactivity, stimulus control, and generalization. *Exceptionality, 5* (3), 113-129.
- Cluett, S.E., Forness, S.R., Ramey, S.L., Ramey, C.T., Hsu, C.C., Kavale, K.A., & Gresham, F.M. (1998). Consequences of differential criteria on identification rates of children with emotional disorders. *Journal of Emotional & Behavioral Disorders, 6*(3), 130- 140.
- Colby, A. (1978). *Evolution of a moral-development theory*. In W. Damon (Ed.), *Moral development* (pp. 89-104) San Francisco, CA: Jossey-Bass Inc.
- Cooper, J.O., Heron, T.E., & Heward, W. L. (1987). *Applied behavior analysis*. Columbus, OH: Merrill.
- Corey, G. (1990). *Theory and practice of group counseling (3rd ed.)*. Belmont, CA: Brooks/Cole-Wadsworth.

- Damon, W. (Ed.). (1978). *Moral development: New directions for child development*. San Francisco, CA: Josey-Bass Inc.
- Damon, W. (1980). *Structural-development theory and the study of moral development*. In M. Windmiller, H. Lambert, & E. Turiel (Eds.), *Moral development and socialization*. (pp. 35-68) Boston: Allyn and Bacon.
- Dayton, J. (2002). *Individuals with disabilities and the law*. In M.W. La Morte (Ed.), *School law: Cases and concepts – 7th ed.* (pp. 305-345) Boston: Allyn and Bacon.
- Deshler, D.D., Ellis, E.S., & Lenz, B.K. (1996). *Teaching adolescents with learning disabilities: Strategies and methods*. Denver, CO: Love.
- Dewey, J. (1952). *Democracy and education*. New York: Free Press (Original work published 1916).
- Dewey, J. (1966). *Experience and education*. New York: Collier (Original work published 1938).
- Dieker, L.A. & Murawski, W.W. (2003). Co-teaching at the secondary level: Unique issues, current trends, and suggestions. *High School Journal*, 86 (4), 1-13.
- DiGangi, S.A., & Maag, J.W. (1992). A component analysis of self-management training with behaviorally disordered youth. *Behavioral Disorders*, 17(4), 281-290.
- Dugger, J.M., & Dugger, C.W. (1998). An evaluation of a successful alternative high school. *High School Journal*, 81(4), 218-228.
- Dunlap, G., & Childs, K.E. (1996). Intervention research in emotional and behavioral-disorders – An analysis of studies from 1980-1993, 21(2), 125-136.
- Duska, R., & Whelan, M. (1975) *Moral development: A guide to Piaget and Kohlberg*. NY: Paulist Press.
- Elkin, A. (1983). *Working with children in groups*. In A.Ellis & M.E. Bernard (Ed.), *Rational-emotive approaches to problems of childhood* (pp. 485-507) New York, NY: Plenum Press.
- Ellis, A. (1962). *Reason and emotion in psychotherapy*. New York: Lyle Stuart.

- Ellis, A. (2001). *Overcoming destructive beliefs, feelings, and behaviors: New directions for rational emotive behavior therapy*. New York: Prometheus Books.
- Ellis, A., & Bernard, M.E. (1983). *Rational emotive approaches to the problems of childhood*. New York: Plenum Plus.
- Ellis, A., & Harper, R. (1975). *A new guide to rational living*. Englewood Cliffs, NJ: Prentice Hall.
- Ellis, A., & Tafrate, R.C. (1997). *How to control your anger before it controls you*. Secaucus, NJ: Birch Lane Press.
- Ellis, A., & Wilde, J. (2002). *Case studies in rational emotive behavior therapy with children and adolescents*. Upper Saddle River, NJ: Merrill Prentice Hall.
- Elementary and Secondary Education Amendments of 1966*, PL 89-750, 80 Stat. 1991 (1966).
- Epstein, M.H., & Quinn, K. (1996). Needs assessment of community-based services for children and youth with emotional or behavioral disorders and their families: Part I. A conceptual model. *Journal of Mental Health Administration*, 96(23), 418-431.
- Erdley, C.A., & Asher, S. R. (1999). A social goals perspective on children's social competence. *Journal of Emotional and Behavioral Disorders*, 7(3), 156-167.
- Farmer, T.W., Farmer, E.M.Z, & Gut, D. M. (1999). Implications of social development research for school-based interventions for aggressive youth with EBD. *Journal of Emotional and Behavioral Disorders*, 7(3), 130-136.
- Farrell, D.T., Smith, S.W, & Brownwell, M. T. (1998). Teacher perceptions of level system effectiveness on the behavior of students with emotional and behavioral disorders. *Journal of Special Education*, 32(2), 89-98.
- Feindler, E.L. (1991). *Cognitive strategies in anger control interventions for children and adolescents*. In P.C. Kendall (Ed.), *Child and adolescent therapy: Cognitive-behavioral procedures*. (pp. 66-93) New York: Guilford Press.

- Feindler, E.L., Marriott, S.A., & Iwata, M. (1984). Group anger control training for junior high school delinquents. *Cognitive Therapy and Research*, 8, 299-311.
- Feindler, E.L., & Ecton, R.B. (1986). *Adolescent anger control: Cognitive behavioral techniques*. New York: Pergamon.
- Flavell, J.H. (1976). *Metacognitive aspects of problem solving*. In L.B. Resnick (Ed.), *The nature of intelligence* (pp.231-235) Hillsdale, NJ: Erlbaum.
- Fore III, C., Martin, C., & Bender, W. N. (2002). Teacher burnout in special education: The causes and the recommended solutions. *High School Journal*, 86(1), 36-44.
- Forgan, J.W., & Jones, C. D. (2002). How experiential adventure activities can improve students' social skills. *Teaching Exceptional Children*, 34(3), 52-58.
- Frey, A., & Doyle, H. D. (2001). Classroom meetings: A program model. *Children and Schools*, 23(4), 212-223.
- Friedberg, R.D., Mason, C., & Fidalo, R.A. (1992). *Switching channels: A cognitive-behavioral work journal for adolescents*. Odessa, FL: Psychological Assessment Resources, Inc.
- Friedman, M. (2002). *Results and performance accountability, decision-making, and budgeting: Workshop materials*. Fiscal Policy Studies Institute, Santa Fe, New Mexico, 1-63. Retrieved November 23, 2002: from <http://www.resultsaccountability.com>; <http://www.raguide.org>
- Friedman, R. M. (2003). A conceptual framework for developing and implementing effective policy in children's mental health. *Journal of Emotional and Behavioral Disorders*, 11(1), 11-18.
- Georgia Department of Education (2003). *A Plus-Education Reform Act as Amended*.
- Georgia Department of Education (2003). *Georgia's Ten Performance Goals for Students With Disabilities*. Division of Exceptional Students.
- Georgia Department of Education Division for Exceptional Children (1992). *Resource Manual: Emotional and Behavioral Disorders*.

- Georgia Department of Education (2000). *Rules of the State Board of Education Pertaining to Special Education*, Division of Exceptional Students.
- Georgia Department of Education (2003). *Performance Goals for Students with Disabilities*.
- Georgia Department of Education (2004). *Georgia Performance Standards*.
- Gerson, R.P., & Damon, W. (1978). *Moral understanding and children's conduct*. In W. Damon (Ed.), *Moral development* (pp. 41-59) San Francisco, CA: Jossey-Bass Inc.
- Gibbs, J.C. (1987). *Social processes in delinquency: The need to facilitate empathy as well as sociomoral reasoning*. In W.M. Kurtines, & J.L. Gewirtz. (Eds), *Moral development through social interaction*. (pp.301-321) NY: John Wiley & Sons.
- Gibbs, J. C. (1988). *Small group sociomoral discussions: Problem situations for use with antisocial adolescents or preadolescents*. Unpublished manuscript, Ohio State University, Columbus. In A.P. Goldstein, *The prepare curriculum: Teaching Prosocial Competencies* (pp.349-366) Champaign, IL: Research Press.
- Gibbs, J. C., Granville, B.P., Goldstein, A.P., & Brendtro, L.K. (1997). Equipping youth to think and interact constructively. *Reclaiming Children and Youth*, 6(2), 120-126.
- Glass, J.S., & Shoffner, M.F. (2001). Adventure-based counseling in schools. *Professional School Counseling*, 5 (1), 42-48.
- Glasser, N. (1989). *Control theory in the practice of reality therapy*. New York: Harper & Row.
- Glasser, W. (1965). *Reality therapy, a new approach to psychiatry*. (1st ed.) New York: Harper & Row.
- Goldstein, A.P. (1988). *The prepare curriculum: Teaching prosocial competencies*. Champaign, IL: Research Press.

- Goldstein, A.P., Glick, B., & Gibbs, J.C. (1998). *Aggression replacement training: A comprehensive intervention for aggressive youth*. (revised ed.) Champaign, IL: Research Press.
- Goldstein, A.P., & McGinnis, E. (1997). *Skillstreaming the adolescent: New strategies and perspectives for teaching prosocial skills*. (revised ed.) Champaign, IL: Research Press.
- Goodlad, J.I. (1993). *Access to knowledge*. In J.I. Goodlad & T.C. Lovitt (Ed.), Integrating general and special education (pp. 1-22) New York, NY: Macmillan Publishing Company.
- Gottfredson, D.C. (1997). *School-based crime prevention*. In L. Sherman, D. Gottfredson, D. Mackenzie, J. Eck, P. Reuter, & S. Bushway (Eds.), Preventing crime: What works and what doesn't, what's promising. College Park, MD: Department of Criminology and Criminal Justice, University of Maryland.
- Gottlieb, J., & Gottlieb, B.W. (1991). Parent and teacher referrals for a psychoeducational evaluation. *Journal of Special Education*, 25(2), 155-167.
- Greenberger, D., & Padesky, C.A. (1995). *Mind over mood: Change how you feel by changing the way you think*. New York, NY: Guilford Press.
- Grosenick, J.K., George, N.L., George, M.P., & Lewis, T.J. (1991). Public school services for behaviorally disordered students: Program practices in the 1980's. *Behavioral Disorders*, 16, 87-96.
- Hallahan, D.P., & Kauffman, J.M., (1991). *Exceptional children: Introduction to special education*. (5th ed.) Englewood Cliffs, NJ: Prentice-Hall, Inc.
- Handwerk, M.L., & Marshall, R.M. (1998). Behavioral and emotional problems of students with learning disabilities, serious emotional disturbance, or both conditions. *Journal of Learning Disabilities*, 31(4), 327-338.

- Harris, K. (1986). Self-monitoring of attentional behavior versus self-monitoring of productivity: Effects on on-task behavior and academic response rate among learning disabled children. *Journal of Applied Behavior Analysis*, 19, 417-423.
- Hebert, T.P., & Kent, R. (2000). Nurturing social and emotional development in gifted teenagers through young adult literature. *Roeper Review*, 22(3), 167-171.
- Herbert, M. (1998). *Adolescent conduct disorders*. In P. Graham (Ed.), *Cognitive-behaviour therapy for children and families*. (pp. 194-213) UK: Cambridge University Press.
- Hernandez, M., & Hodges, S. (2003). Building upon the theory of change for systems of care. *Journal of Emotional and Behavioral Disorders*, 11(1), 19-26.
- Huberty, C.J., Quirk, J.P., & Swan, W.W. (1973). An evaluation system for a psychoeducational treatment program for emotionally disturbed children. *Educational Technology*, (May), 73-80.
- Hughes, C.A., Ruhl, K.L., & Misra, A. (1989). Self-management with behaviorally disordered students in school settings: A promise unfulfilled? *Behavioral Disorders*, 14, (4), 250-262.
- Hughes, M.A., Cihak, D.F., & Alberto, W. (2002). *An administrators guide to the instruction of students with disabilities in the least restrictive environment*. Prepared by: The Center for Collaborative Education, Georgia State Improvement Grant, The Department of Educational Psychology and Special Education, Georgia State University. (1-37) Web page address: [http:// www.doe.k12.ga.us](http://www.doe.k12.ga.us).
- Hynes, A.M., & Hynes-Berry, M. (1986). *Bibliotherapy: The interactive process*. Boulder, CO: Westview.
- Individuals with Disabilities Education Act (IDEA), PL 101-476, 104 Stat.1141. (1990). Formerly titled the Education for All Handicapped Children Act, originally enacted as PL 94-142, 89 Stat. 773 (1975).

- Individuals with Disabilities Education Act Amendments of 1997*, PL 105-17.
- Individuals with Disabilities Education Act Final Regulations of 1999*, PL 105-17.
- Irving Independent School District v. Tatro. 468 U.S. 883 (1984).
- Kamps, D., Kravits, T., Stolze, J., & Swaggart, B. (1999). Prevention strategies for at-risk students and students with EBD in urban elementary schools. *Journal of Emotional and Behavioral Disorders*, 7(3), 178-188.
- Kauffman, J.M. (1999). Comments on social development research in EBD. *Journal of Emotional and Behavioral Disorders*, 7(3), 189-192.
- Kauffman, J.M., (1989). *Characteristics of behavior disorders of children and youth*. (4th ed.) Columbus, OH: Merrill.
- Kauffman, J.M., & Hallahan, D.P. (1993). *Toward a comprehensive delivery system for special education*. In J.I. Goodlad & T.C. Lovitt (Ed.), *Integrating general and special education* (pp. 73-102) New York, NY: Macmillan Publishing Company.
- Kendall, P.C. (1991). *Guiding theory for therapy with children and adolescents*. In P.C. Kendall (Ed.), *Child and adolescent therapy: Cognitive-behavioral procedures*. (pp. 3-20) New York: Guilford Press.
- Kerr, R. (1987). *Positively! Learning to manage negative emotions*. Portland, ME: J. Weston Walch.
- Kohlberg, L. (1978). *Revisions in the theory and practice of moral development*. In W. Damon (Ed.), *Moral development* (pp. 83-87) San Francisco, CA: Jossey-Bass Inc.
- Kohlberg, L., & Candee, D. (1984) In Kurtines, W.M., & Gewirtz, J.L. (Eds.). *Morality, moral behavior, and moral development*. (pp.52-73) NY: John Wiley & Sons.
- Kohlberg, L., & Higgins, A. (1987) In Kurtines, W.M., & Gewirtz, J.L. (Eds.). *Moral development through social interaction*. (pp.102-128) NY: John Wiley & Sons.
- Kurtines, W.M., & Gewirtz, J.L. (Eds.).(1984). *Morality, moral behavior, and moral development*. NY: John Wiley & Sons.

- Kurtines, W.M., & Gewirtz, J.L. (Ed.).(1987). *Moral development through social interaction*. NY: John Wiley & Sons.
- Kutash, K., Duchnowski, A., Sumi,W.C., Rudo, Z., & Harris, K.M. (2002). A school, family, and community collaborative program for children who have emotional disturbances. *Journal of Emotional and Behavioral Disorders*, 10(2), 99-107.
- Lange, C.M. (1998). Characteristics of alternative schools and programs serving at risk students. *High School Journal*, 81(4), 183-198.
- Lazarus, B.D. (1993). Self-management and achievement of students with behavior disorders. *Psychology in the Schools*, 30, 67-74.
- Lee, H. (1960). *To kill a mockingbird*. New York, NY: Warner Books.
- Leone, P.E., McLaughlin, M.J., & Meisel, S.M. (1992). School-reform and adolescents with behavior disorders. *Focus on Exceptional Children*, 25, (1) 1-15.
- Lipsey, M.W. (1991). *The effect of treatment on juvenile delinquents: Results from metaanalysis*. In F. Losel, D. Bender, & T.Bliesener (Eds.), *Psychology and the law* (pp. 131-143) New York, NY: de Gruyter.
- Little, R., & Greene, K. (1984). *Skills for living program*. Newark, OH: Quest International.
- Little, V.L., & Kendall, P.C. (1979). *Cognitive-behavioral interventions with delinquents: Problem solving, role-taking, and self-control*. In P.C. Kendall & S.D. Hollan (Eds.), *Cognitive-behavioral interventions*. (pp.) New York: Academic.
- Lourie, I.S., & Hernandez, M. (2003). A historical perspective on national child mental health policy. *Journal of Emotional and Behavioral Disorders*, 11(1), 5-9.
- Lovitt, T.C. (1993). *Retrospect and prospect*. In J.I. Goodlad & T.C. Lovitt (Ed.), *Integrating general and special education* (pp. 253-274) New York, NY: Macmillan Publishing Company.
- Luria, A. R. (1961). *The role of speech in the recognition of normal and abnormal behavior*. New York: Liveright.

- Maag, J.W., & Katsiyannis, A. (1996). Counseling as a related service for students with emotional or behavioral-disorders: Issues and recommendations. *Behavioral Disorders, 21*(4), 293-305.
- Maag, J.W., Reid, R., & DiGangi, S.A. (1993). Differential effects of self-monitoring attention, accuracy, and productivity. *Journal of Applied Behavior Analysis, 26*, 329-344.
- Maag, J.W., Rutherford, R.B., Jr., & DiGangi, S.A. (1992). Effects of self-monitoring and contingent reinforcement on on-task behavior and academic productivity of learning disabled students: A social validation study. *Psychology in the Schools, 29*, 157-172.
- Maag, J.W., & Webber, J. (1997). Cognitive therapies: Past trends, current practices, and future directions. *Reclaiming Children and Youth, 6*(2), 70-74.
- Martin, S.M., & Wienke, W.D. (1998). Using cutting edge technology to prepare teachers to work with children and youth who have emotional/behavioral disorders. *Education & Treatment of Children, 21*(3), 385-396.
- Mathur, S.R., & Rutherford, R. B. (1996). Is social skills training effective for students with emotional or behavioral disorders? Research issues and needs. *Behavioral Disorders, 22*, 21-28.
- Maultsby, M.C. (1984). *Rational behavior therapy*. Englewood Cliffs, NJ: Prentice-Hall, Inc.
- Mayo, P., & Waldo, P. (1994). *Scripting: Social communication for adolescents*. (2nd ed.) Eau Claire, WI: Thinking Publications.
- McCarney, S. B. (1994). *Behavior Evaluation Scale-2*. Columbia, MO: Hawthorne Educational Services.
- McCarney, S. B., & Leigh, J.E. (1990). *Behavior Evaluation Scale-2*. Columbia, MO: Hawthorne Educational Services.

- McGrew, K.S., Werder, J. K., & Woodcock, R. W. (1989). *WJ-R technical manual*. Allen, TX; DLM Teaching Resources.
- McInerney, J.F. (1983). *Working with the parents and teachers of exceptional children*. In A. Ellis & M.E. Bernard (Eds). Rational emotive approaches to the problems of childhood. (pp. 387-413) New York: Plenum Plus.
- McIntyre, T., & Tong, V. (1998). Where the boys are: Do cross-gender misunderstandings of language use and behavior patterns contribute to the overrepresentation of males in programs for students with emotional and behavioral disorders. *Education and Treatment of Children*, 21(3), 321-332.
- McLoughlin, J.A., & Lewis, R.B. (1994). *Assessing special students* (4th ed.). New York, NY: Merrill.
- McWhirter, B. T. (1999). Effects of anger management and goal setting group interventions on state-trait anger and self-efficacy beliefs among high risk adolescents. *Current Psychology*, 18(2), 223-237.
- Meichenbaum, D.H. (1977). *Cognitive behavior modification: An integrative approach*. New York: Plenum.
- Meichenbaum, D.H. (1985). *Stress inoculation training*. New York: Pergamon Press.
- Meichenbaum, D.H., & Goodman, J. (1969). The developmental control by verbal operants. *Journal of Experimental Child Psychology*, 7, 533-565.
- Murray, L.B. (1993). *Putting it all together at the school level: A principal's perspective*. In J.I. Goodlad & T.C. Lovitt (Eds.), *Integrating general and special education* (pp. 171-201) New York, NY: Macmillan Publishing Company.
- Muscott, H.S. (2000). A review and analysis of service-learning programs involving students with emotional/behavioral disorders. *Education and Treatment of Children*, 23(3), 346-368.

- Muscott, H.S. (1997). Behavioral characteristics of elementary and secondary students with emotional/behavioral disabilities in four different cascade placements. *Education and Treatment of Children*, 20(3), 336-357.
- No Child Left Behind Act (NCLB), PL 107-110, Stat. 1425. (2001).
- Nelson, C.M. (2000). Educating students with emotional and behavioral disabilities in the 21st century: Looking through windows, opening doors. *Education and Treatment of Children*, 23(3), 204-225.
- Nesbitt, B., (1990). *The anger inside*. Ballwin, MO: Kids in Between, Inc.
- Nichols, P., (1999). *Clear thinking: Talking back to whispering shadows, a psychoeducational program for preteens, teens, and young adults*. Iowa City, Iowa: River Lights Publishers.
- Nichols, P., & Shaw, M. (1999). *Whispering shadows: Think clearly and claim your personal power*. Iowa City, Iowa: River Lights Publishers.
- Novaco, R.W. (1975). *Anger control: The development and evaluation of an experiential treatment*. Lexington, MA: Lexington Books.
- Oser, F.K. (1984). *Cognitive stages of interaction in moral discourse*. In Kurtines, W.M., & Gewirtz, J.L. (Ed.). *Morality, moral behavior, and moral development*. (pp.159-173) NY: John Wiley & Sons.
- Oser, F.K. (1990). *Principles of discourse underlying the just community approach to moral education are outlined in the context of a German school*. In Schrader, D. (Ed.). *The legacy of Lawrence Kohlberg*. (pp.81-88) San Francisco, CA: Jossey-Bass.
- Oshinsky, J. (1994). *Discovery journal*. Odessa, FL: Psychological Assessment Resources, Inc.
- Padesky, C.A., & Greenberger, D. (1995). *Clinician's guide to mind over mood*. New York, NY: Guilford Press.

- Piaget, J. (1997). *The moral judgment of the child*. (translated by Marjorie Gabain) New York: Free Press Paperbacks.
- Perry, J.C. (2001). Enhancing instructional programs through evaluation: Translating theory into practice. *Community College Journal of Research and Practice*, 25, 573-590.
- Power, C., & Reimer, J. (1978). *Moral atmosphere: An educational bridge between moral judgment and action*. In W. Damon (Ed.), *Moral development* (pp. 105-116) San Francisco, CA: Jossey-Bass Inc.
- Prater, M.A., Hogan, S., & Miller, S.R. (1992). Using self-monitoring to improve on-task behavior and academic skills of an adolescent with mild handicaps across special and regular education settings. *Education and Treatment of Children*, 15(1), 43-55.
- Quinn, K.P., & McDougal, J.L. (1998). A mile wide and a mile deep: Comprehensive interventions for children and youth with emotional disorders and their families. *School Psychology Review*, 27(2), 191-202.
- Quinn, M.M., Kavale, K.A., Mathur, S.R., Rutherford, Jr., R.B., & Forness, S.R. (1999). A meta-analysis of social skill interventions for students with emotional or behavioral disorders. *Journal of Emotional and Behavioral Disorders*, 7(1), 54-64.
- Rest, J.R. (1979). *Development in judging moral issues*. Minneapolis, MN: University of Minnesota Press.
- Rich, J.M., & DeVitis, J.L. (1985). *Theories of moral development*. Springfield, IL: Thomas.
- Robertson, L.M., Bates, M.P., Wood, H., Rosenblatt, J.A., Furlong, M.J., Casas, J.M., & Schwier, P. (1998). Educational placements of students with emotional and behavioral disorders served by probation, mental health, public health, and social services. *Psychology in the Schools*, 35(4), 333-345.

- Rock, E.E., Fessler, M.A., & Church, R.P. (1997). The concomitance of learning disabilities and emotional/behavioral disorders: A conceptual model. *Journal of Learning Disabilities*, 7(3), 245-263.
- Rohnke, K. (1984). *Silver bullets: A guide to initiative problems, adventure games, and trust activities*. Dubuque, IA: Kendall/Hunt.
- Ryan, A. K. (2001). *Strengthening the safety net: How schools can help youth with emotional and behavioral needs complete their high school education and prepare for life after school*. Burlington, VT: School Research Office, University of Vermont.
- Schrag, J.A. (1993). *Restructuring schools for better alignment of general and special education*. In J.I. Goodlad & T.C. Lovitt (Eds.), *Integrating general and special education* (pp. 203-227) New York, NY: Macmillan Publishing Company.
- Shapiro, E.S., Miller, D.N., Sawka, K., Gardill, M.C., & Handler, M.W. (1999). Facilitating the inclusion of students with EBD into general education classrooms. *Journal of Emotional and Behavioral Disorders*, 7(2), 83-93.
- Shoho, A.R., & Katims, D. S. (1997). Perceptions of alienation among students with learning disabilities in inclusive and resource settings. *High School Journal*, 81(1), 28-36.
- Shriner, J.G., & Yell, M.L. (1996). Legal and policy developments in the education of students with emotional/behavioral disorders. *Education and Treatment of Children*, 19(3), 371-385.
- Singh, K., & Billingsley, B. (1996). Intent to stay in teaching. *Remedial and Special Education*, 17(1), 37-47.
- Skinner, B. F. (1953). *Science and human behavior*. New York: Macmillan.
- Smith, D.J., Nelson, J.R., Young, K.R., & West, R.P. (1992). The effect of self-management procedure on the classroom and academic behavior of students with mild handicaps. *School Psychology Review*, 21(1), 59-72.

- Spence, S.H., & Donovan, C. (1998). *Interpersonal problems*. In P. Graham (Ed.), *Cognitive-behaviour therapy for children and families*. (pp. 194-213) UK: Cambridge University Press.
- Spivack, G., Platt, J.J., & Shure, M.B. (1976). *Problem solving approach to adjustment: A guide to research and intervention*. San Francisco, CA: Jossey-Bass Publishers.
- Stevenson, H.C., & Fantuzzo, J.W. (1986). The generality and social validity of a competency-based self-control training intervention for underachieving students. *Journal of Applied Behavior Analysis*, 19, 269-276.
- Swan, W.W., & Morgan, J.L. (1993). *Collaborating for comprehensive services for young children and their families: The local interagency coordinating council*. Baltimore: Paul H. Brooks Publishing Company.
- U.S. Department of Education. (1994). *Sixteenth annual report to Congress on the implementation of Public Law 94-142*. Washington, DC: U.S. GPO.
- U.S. Department of Education (2004). *U.S. Office of Special Education Programs (OSEP)*.
- Van Reusen, A.K., & Bos, C. S. (1994). Facilitating student participation in individualized education programs through motivation strategy instruction. *Exceptional Children*, 60, 466-475.
- Van Reusen, A.K., Shoho, A.R., & Barker, K. S. (2002). High school teacher attitudes toward inclusion. *High School Journal*, 84(2), 7-20.
- Vernon, A. (1983). *Rational emotive education*. In A.Ellis & M.E. Bernard (Eds.), *Rational-emotive approaches to problems of childhood* (pp. 467-483) New York, NY: Plenum Press.
- Vernon, A. (1989). *Thinking, feeling, behaving: An emotional education curriculum for children and adolescents*. Champaign, IL: Research Press.

- Vincent, A., & Meche, M.. (2001). The use of ethical dilemmas to contribute to the knowledge and behavior of high school students. *High School Journal*, 84(4), 50-57.
- Vygotsky, L.S. (1962). *Thought and language*. (E. Hanfmann and G. Vakar, eds. and trans.). Cambridge, MA: Massachusetts Institute of Technology Press.
- Vygotsky, L.S. (1978). *Mind in society: The development of higher psychological processes*. Cambridge, MA: Harvard University Press.
- Walen, S.R., DiGiuseppe, R., & Dryden, W. (1992). *A practitioner's guide to rational-emotive therapy*. New York: Oxford Press.
- Walker, H., & McConnell, S. (1995). *Walker-McConnell scale of social competence and school adjustment*. Austin, TX: PRO-ED.
- Walker, H., & McConnell, S. (1995). *Walker-McConnell scale of social competence and school adjustment, adolescent version: Technical manual*. San Diego, CA: Singular Publishing Group, Inc.
- Weinberg, S.L., & Goldberg, K.P. (1990). *Statistics for the behavioral sciences*. Cambridge: Cambridge University Press.
- Wilde, J. (1996). *Treating anger, anxiety, and depression in children: A cognitive-behavioral perspective*. Washington, DC: Accelerated Development, Inc.
- Wilde, J. (1992). *Rational counseling with school aged populations: A practical guide*. Muncie, IN: Accelerated Development, Inc.
- Wilkinson, G. S. (1993). *Wide Range Achievement Test3*. Wilmington, DE: Wide Range, Inc.
- Woodcock, R.W., & Johnson, M.B. (1989). *Woodcock-Johnson psycho-educational battery-Revised*. Chicago: Riverside.

- Woodcock, R.W., & Mather, N. (1989). *WJ-R tests of cognitive ability- Standard and supplemental batteries: Examiner's manual*. In R.W. Woodcock. & M.B. Johnson. Woodcock-Johnson psycho-educational battery-Revised. Chicago: Riverside.
- Yochelson, S., & Samenow, S.E. (1976). *The criminal personality: Vol.1*. A profile for change. New York: Jason Aronson.
- Zaragoza, N., Vaughn, S., & McIntosh, R. (1991). Social skills interventions and children with behavior problems: A review. *Behavioral Disorders, 16*, 260-275.

APPENDIX A

LETTER FROM GEORGIA DEPARTMENT OF EDUCATION



Georgia Department of Education
Office of the State Superintendent of Schools
Twin Towers East
Atlanta, Georgia 30334-5001

Kathy Cox
State Superintendent of Schools

www.doe.k12.ga.us
 (404) 656-2804 Fax (651) 8507

December 8, 2003

Dr. Jeffery Welch
 Superintendent
 Oglethorpe County School System
 P. O. Box 190
 Lexington, Georgia 30648

Dear Dr. Welch:

The Georgia Department of Education would like to recognize the Oglethorpe County School System for its exemplary work with exceptional students. Your system was recognized as one of the highest performing systems in the state in the following area(s): decreasing the drop-out rate of students with disabilities, increasing the percentage of students with disabilities who earn a regular education diploma, decreasing the performance gap between students with and without disabilities on statewide achievement tests, and improving the performance of students with disabilities on statewide achievement tests.

Your support for the efforts of your special education director and your school system's Stakeholders Group is sincerely appreciated. The lives of students with special needs will be enhanced due to those efforts. We look forward to your continued success in the education of students with disabilities.

Sincerely,

Ida H. Love, Ph.D.
 Deputy Superintendent
 Office of Curriculum and Instruction

Phil Pickens
 Director
 Division for Exceptional Students

IHL/PP:lr
 cc: Mr. James Carter

APPENDIX B
PROBLEM SOLVING ACTIVITIES



Getting a problem under control . . .

Name the problem:

Ask: "What do I want that I don't have now?"

Think: "If I want something, I have to **do** something." Consider the possibilities:

•
•
•
•
•
•

•
•
•
•
•
•

Circle a choice. Predict its consequences . . .

	NOW right this minute	LATER today or tomorrow	MUCH LATER next week, month, year . . .
COST			
PAYOFF			

So, is it likely to **make things better**? Yes ___ No ___ Is it **honorable**? Yes ___ No ___ **Safe**? Yes ___ No ___
If I did my choice, what's the worst that could happen?

How likely: how many chances out of 100 that the worst that **could** happen **would** happen? ____ /100
What would I **do** then?

What's the **best** that could happen? How likely?

So, is it **worth a try**? Yes ___ I'll make a plan and do it. No ___ I'll make a choice with longer, stronger payoffs.

<i>Think . . . Feel . . . Do</i>		
<i>Happening</i>		
<i>I think . . .</i>	<i>I feel . . .</i>	<i>I do . . .</i>

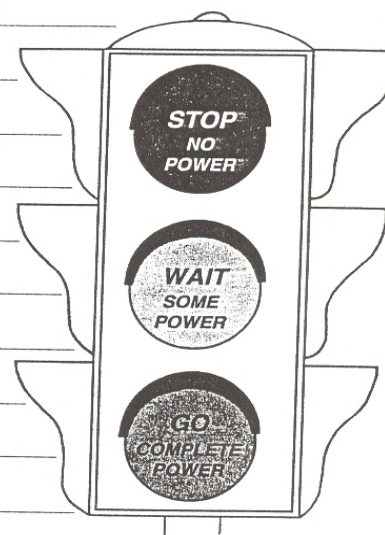
Topic

Power Lights

I have no power over . . .

I have some power over . . .

I have complete power to control . . .

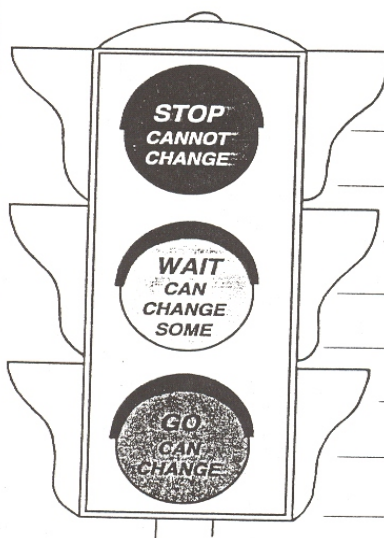


Topic

I have no power over . . .

I can influence . . .

I have personal power to control . . .



Costs / Payoffs				
Happening				
	NOW right this minute	LATER today or tomorrow	MUCH LATER next week, month, year, 5 years, 10 years	
 COSTS				
 PAYOFFS				

APPENDIX C
COGNITIVE CARICATURES

The Whispering Shadows personify the dark thoughts that are most troubling to adolescents and young adults.



The Prophet of Doom-
despair,
anxiety
suicidal
thinking



The Historian-
hopeless
beliefs that
there is no
escape from
the past



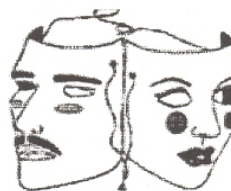
Envy Eyes-
jealousy that
destroys
self-
confidence
and
friendship



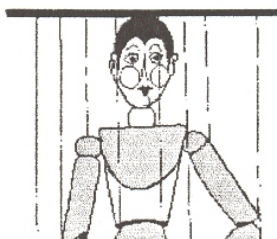
Mad Man-
anger, violent
relationships,
explosiveness



Mystic Mind Reader-
"knowing"
that people
think bad
things about
you



The Perfect Person-
perfectionism
trouble
accepting
limitations or
mistakes



The Puppet-
emotional
dependence,
helplessness,
passivity



The Spoiler- not
wanting to do
anything that
is hard or
unpleasant



The Brander-
branding
oneself or
others with
destructive
labels



The Fortune Teller-
being sure
that the future
is already set
for bad things
to happen



Slam, one
of the
**Slam Bam
Twins**-
hating other
people
because of
things *they*
do wrong



Bam, the
other **Slam
Bam Twin**-
hating oneself
because of
the things
one's own self
does wrong



**The
Magic
Thinker**-
believing
that only
other people
get in
trouble for
what they do



Atlas-
carrying the
burden of
everyone
else's
problems



Pious, the
**Who-Mee
Kid** who
never admits
a mistake



Pouts, the
**Who-Mee
Kid** who
says it's all
somebody
else's fault

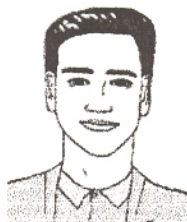
Clear Thinkers & Star Thinkers model calm and constructive thinking.



"**Clear Thinkers** recognize the self-talk that makes us miserable and demand evidence that what we believe is true. Their words are what we learn to think when we need to handle trouble and still feel OK."



"**Star Thinkers** help us realize what we really want and need and show us how to *make plans* to get there. Their words guide us and lead us to whatever we want our lives to be."



"**Clear Thinkers & Star Thinkers** are sharp, on top of things, winners. They are dreamers and planners. *They think what needs thinking and do what needs to be done.*"



APPENDIX D
PROGRESS REPORT

* Please send tests to my mailbox, missing assignments, or assignments that need assistance from special ed teacher. Thank you.

PROGRESS REPORT

STUDENT _____

CLASS/TEACHER _____

QUARTER _____

TEACHER CONTACT M. Morrison

Week #	OK (✓)	Problem (x)	* Comments/List: Missing work/ Problem(s), etc.
1			
2			
3			
4			
5			
6			
7			
8			
9			

APPENDIX E
PERMISSION LETTER

DEPARTMENT OF SPECIAL EDUCATION
OGLETHORPE COUNTY HIGH SCHOOL 749 ATHENS ROAD • LEXINGTON, GEORGIA • 30643
PHONE: 706-743-8124 • FAX: 706-743-3536

May 21, 2003

745 Riverbend Parkway
Athens, GA 30605
706-549-9551

Dear Mrs. Morrison,

The purpose of this letter is to request information concerning the effectiveness of the O.A.S.I.S. program offered through special education services during the school years 2002-03 and 2003-04. Since O.A.S.I.S. is focused on improving students' school related behavior and academic achievement, data to support both strands are desired. Please collect data on students' social/behavioral and academic gains utilizing the following information or assessment tools:

- Honor Roll
- Number One Club
- Report card grades
- Graduation rates and diploma types
- Decrease in discipline referrals
- Increase in the number of segments in general education classes for the 2003-4 school year (IEP Committee recommendations).
- Wide Range Achievement Test Scores (pre and post tests)
- Woodcock Johnson Achievement Test Scores (pre and post tests)
- Behavior Evaluation Scale (BES-2) (pre and post tests)
- Walker- McConnell Scale of Social Competence and School Adjustment
- Informal checklists and anecdotal information

Assessing students' progress and supporting gains with data helps to improve decision making in terms of instruction for students with disabilities. Thank you for evaluating the O.A.S.I.S. program.

Sincerely,


Mr. Jim Carter, Special Education Director


Mr. Wayne Cox, Superintendent

APPENDIX F
SELF EVALUATION FORM

Daily Grade Sheet: Circle the number of points earned. Name: _____
 Add the points to find your total number of points.

Subject: _____

Dates: _____

Items	Pts.	Mon.	Tues.	Wed.	Thurs.	Fri.
1. Agenda / Assignment sheet	25	25	25	25	25	25
2. Supplies						
• Book(s)	5	5	5	5	5	5
• Notes/Notebooks	5	5	5	5	5	5
• Worksheets	5	5	5	5	5	5
• Pen/pencil	5	5	5	5	5	5
• Paper	5	5	5	5	5	5
	25					
3. Class Agreements						
• Attentive Listening	5	5	5	5	5	5
• Appreciation	5	5	5	5	5	5
• Mutual Respect	5	5	5	5	5	5
• Right Topic	5	5	5	5	5	5
• Right to Pass	5	5	5	5	5	5
	25					
4. Time on Task						
• I entered the room before the tardy bell.	5	5	5	5	5	5
• I am seated at my desk, with my agenda book open to my assignment, supplies on my desk, while the teacher is taking the role.	8	8	8	8	8	8
• I worked on my assignment until the teacher gave permission to stop work.	8	8	8	8	8	8
• I completed this sheet and handed it in before the bell.	4	4	4	4	4	4
	25					
Total =	100					

Whenever a student's weekly grade is below 80%, this form will be sent home for the parent's signature and returned to the teacher on the next school day. Parent's Signature: _____

Weekly Total = _____

Weekly Average = _____