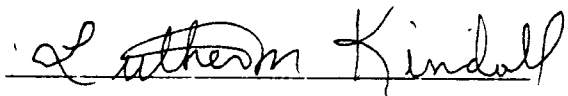
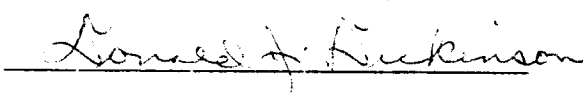


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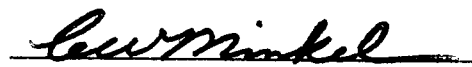
I am submitting herewith a thesis written by Lisa Jean White entitled "The Coping Strategies of Children Subjected to Corporal Punishment and the Related Effects of Caregiver Involvement." I have examined the final copy of this thesis for form and content and recommend that it be accepted in partial fulfillment of the requirements for the degree of Master of Science, with a major in Educational Psychology.


Dianne Whitaker, Major Professor

We have read this thesis
and recommend its acceptance:

Accepted for the Council:


Associate Vice Chancellor and
Dean of The Graduate School

**THE COPING STRATEGIES OF CHILDREN SUBJECTED
TO
CORPORAL PUNISHMENT AND THE RELATED
EFFECTS
OF CAREGIVER INVOLVEMENT**

A Thesis
Presented for the
Master of Science
Degree
The University of Tennessee, Knoxville

Lisa Jean White
August 1996

DEDICATION

This thesis is dedicated to my parents

Mr. Frederick C. White Jr.

and

Mrs. Ann C. White

ACKNOWLEDGMENTS

I have been so fortunate to be a student at the University of Tennessee. The students and faculty in the Psychoeducational Studies Unit have made my experience here so enjoyable. The learning experience has been invaluable. I have grown personally and academically during the past year as a result of this experience.

I am grateful to my Thesis Committee, Dianne Whitaker, Donald Dickinson and Luther Kindall for their support. I am especially grateful to Dianne Whitaker for her knowledge, her time and her guidance. It has been a pleasure having you as my Major Professor.

Abstract

The purpose of this study was to examine the consequences of corporal punishment and the effects of caregiver involvement on maladaptive and adaptive coping of children. There were twenty-five participants from the third through the seventh grades. Participants were randomly selected from three participating school systems and randomly selected from the classroom's of participating teachers. Two scales were used for data collection, the *Home Environment Profile* and the *Academic and Social Coping Inventory*. No significant relationships were found between the frequency of punishment and adaptive or maladaptive coping in academic or social situations. Correlational analyses found a positive correlation between corporal punishment and maladaptive academic ($r = .2708$) and maladaptive social ($r = .3644$) coping strategies. However, corporal punishment also slightly correlated with adaptive academic ($r = .1232$) and adaptive social ($r = .2692$) coping strategies. A negative correlation was found for caregiver involvement and adaptive academic ($r = -.3923$) and adaptive social ($r = -.3879$) coping strategies and a positive correlation with maladaptive academic ($r = .3383$) and maladaptive social ($r = .4559^*$, $p < .05$) coping strategies. Overall, corporal punishment in this study was not associated with the maladaptive social and academic coping strategies of children. Caregiver involvement, as defined by this study, was associated with increased maladaptive coping of children and not increased adaptive coping.

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Chapter I

Introduction

Statement of Problem and Purpose

Research shows that corporal punishment places a child at risk for social and cognitive maladjustment (Hughes, 1993; Hyman, 1993; Simons, Johnson and Conger, 1994; Straus, 1991; Straus and Donnelly, 1993). Nevertheless, many people support spanking and every state in the United States gives parents the right to use it. The purpose of this study is to examine the social and cognitive consequences of corporal punishment and to investigate the effects of caregiver involvement in relationship to these consequences.

For this research, corporal punishment will be defined as spanking. Consequences will be defined in terms of their effect on adaptive coping or maladaptive coping. Adaptive coping is characterized by a problem solving approach to problems. Maladaptive coping is characterized by behaviors which may overcome the immediate problem, but which lack a plan to solve the problem in the future. Withdrawal, oppositional behavior, displacement of anger, and projection of blame are examples of maladaptive coping (Dickinson, 1993). Caregiver will be defined as the person primarily responsible for care of the child. Caregiver involvement will be defined as the amount of time spent talking to the child, going to a movie, watching television with them, or participating in some other activity with the child.

Straus (1994) labels the reasons for public support of spanking as "myths". Some of the myths are:

- ... spanking is the most effective form of discipline
- ... spanking is a necessary last resort in disciplining
- ... occasional spanking will not harm a child
- ... without spanking, children will be out of control
- ... caregivers use spanking only for serious problems
- ... caregivers stop spanking when a child reaches adolescence.

One objective of this study is to substantiate the illegitimacy of these ideas.

Hypotheses

My first hypothesis is that corporal punishment has a negative impact on academic and social coping of children through the increased use of maladaptive coping. My second hypothesis is that positive caregiver involvement and interaction with children increases the likelihood that they will use adaptive coping strategies. My third hypothesis is that caregiver involvement prevents the manifestation of negative social and cognitive functioning of children. The literature review discusses the widespread use of corporal punishment, the negative consequences of corporal punishment, and caregiver involvement in relationship to these consequences.

Research Questions

- 1) What are the effects of corporal punishment, defined as spanking, in relationship to the four major coping strategies?
- 2) Will increased caregiver involvement, defined as amount of time spent talking to the child, going to a movie, watching television with them, or participating in some other activity with the child, have an effect on which coping strategies the child uses.

Chapter II

Review of the Literature

Corporal Punishment is Widespread

The use of corporal punishment is widespread in the United States (Hemenway, Solnick and Carter, 1994; Knutson and Selner, 1994). A recent study of American caregivers found that over 90% had received corporal punishment and 88% approved of it as a form of discipline (Buntain-Ricklefs, 1994). Straus (1991) found that most Americans believe there are times when corporal punishment is necessary. Furthermore, caregivers are not the only advocates of corporal punishment; 59% of pediatricians and 70% of all physicians believe that corporal punishment is a permissible form of discipline (Benthall, 1991). Many school teachers and administrators also believe corporal punishment is necessary at times (Catron and Masters, 1993).

Affects on Social and Cognitive Functioning

Corporal punishment plays a role in the socialization of children. Data supports the idea that various negative emotional and behavioral consequences are associated with corporal punishment including delinquency and psychological maladjustment (Simons et al, 1994). One type of psychological maladjustment that children may experience as a result of corporal punishment is rejection (Rohner, Kean and Cournoyer, 1991). Straus and Donnelly (1993) found a correlation between the use of corporal punishment and later violent behavior. The consensual finding throughout studies of corporal punishment is that corporal punishment

carries with it the consequence of aggressive behavior (Simons et al, 1994). Other studies have linked corporal punishment to teen delinquency, social withdrawal, emotional problems, maladaptive processing of social information, delayed moral development, spouse abuse, child abuse, crime and violence (Buntain-Ricklefs, 1994; Carey, 1994), as well as to the development of psychiatric disorders and alcoholism (Straus and Kantor, 1994).

There are various theories as to why corporal punishment often leads to negative consequences. One theory is that punishment may lead children to attribute external causes for conflict, which then can result in aggressive behavior. In addition, physical punishment communicates the idea that aggression resolves conflict (Simons et al, 1994) affecting the child's expectations for conflict resolution. Some researchers posit that the more maladaptive the processing style, the more aggressive children will be toward peers (Weiss, Dodge, Bates and Pettit, 1992). Probably as a result of their poor coping skills, children who experience corporal punishment receive less acceptance from peers and peer groups (Kennedy, 1992). This leads to further conflict and isolation.

Social Learning Theory states that children learn through modeling other's behavior (Kaplan, 1992). A child's observation of caregiver punishment will lead to the child's adoption of the beliefs, even if the assimilation is subconscious. If a behavior is seen often and if the person modeling the behavior is perceived as a person of status, such as a caregiver, then a child is likely to imitate the behavior. Bandura (1986)

further states that for children to develop morally and socially they must take increasing responsibility for their behavior. Corporal punishment precludes their ability to do this, as it omits the opportunity for problem solving.

Caregiver-child relationships also influence the cognitive abilities of children. Communication which is restrictive and controlling has consistently been shown to negatively impact the cognitive abilities of children in their first two years of life (Olson, Bates and Kaskie, 1992). Furthermore, research suggests the cognitive performance of a child at age two is reflective of later cognitive ability (Olson et al, 1992) and the quality of caregiver-child communication may be related to the cognitive ability and performance for an extensive period of time. In contrast, caregiver-child interaction which contains frequent interactive verbal communication seems to play a positive role in the cognitive performance of children ages six to eight and the positive verbal stimulation has been correlated with the cognitive competence of toddlers. In addition, the positive, affectionate style of caregiver communication appears to foster motivation and persistence in problem solving. Hence, the caregiver style of interaction may be an accurate predictor of long-term cognitive ability (Olson et al, 1992).

Corporal punishment has also been studied in relationship to cognitive functioning (Olson et al, 1992; McLeod, Kruttschnitt and Dornfeld, 1994). The use of corporal punishment seems to interfere with the active problem solving abilities of the child. A six year longitudinal study found that children of mothers who used a restrictive teaching style incorporating

corporal punishment displayed decreased cognitive ability (Olson et al, 1992). It is hypothesized that the child's negative perception of the caregiver-child interaction may cause anxiety and produce cognitive distress (McLeod et al, 1994)

Caregiver Involvement

Caregiver-child relationships have important implications for children's social and cognitive long-term functioning. Olson (1992) recognizes caregiver-child relationships as essential components of development and adaptive coping. Similarly, Carey (1994) cites caregiving as one of the most important jobs.

Simons et al. (1994) found caregiver support and involvement to be more predictive of negative outcomes than type of punishment alone. It may not be the corporal punishment itself, but the lack of involvement and consistency that accompanies it that place a child at risk for problem behaviors. In some cases when corporal punishment is the discipline of choice caregivers withdraw all support. This prevents an emotional bond from developing between the caregiver and the child (Simons et al, 1994).

In summary, the more caregivers fail to be consistent, caring and supportive the less likely their children are to conform to caregiver standards. However, the more caregivers are consistent, caring and supportive the more likely their children are to conform to caregiver standards, regardless of whether they use corporal punishment (Olson et al, 1992).

Chapter III

Methods

Participants

Participants were recruited from school systems in Greeneville, Tennessee; Knoxville, Tennessee; and Kingston, Tennessee. The 1990 Census report was used as a reference for test standardization. Students were selected randomly by the use of a table of random numbers.

Once a school was selected, 10 teachers were chosen for the study. Five students were selected randomly from each teacher's class in order to provide a representative sample across classrooms and schools. The sample consists of the 3rd through 7th grade students.

"Contact" people were obtained from names of those interested in a related presentation given at a Conference for the National Association of School Psychologists (NASP). In addition to sending these "contact" people a copy of the presentation paper, they were also sent the research materials

Instruments

Home Environment Profile (HEP)- Developed by Dickinson (1996), a seventy-seven item five point Likhert type scale measuring parenting styles and social monitoring, discipline, nurturing, problem solving and self-management, beliefs and attitudes, and home-study conditions. (Appendix) Test-retest reliabilities for the HEP range from .78 to .88. There are no validity studies for the HEP (Cupp, 1993).

The Academic and Social Coping Inventory (ASCI)- Twenty item scale measuring the coping skills of children in grades 1-9. The scale is designed to classify children's coping styles as adaptive or maladaptive. (Appendix) Test-retest reliability of the ASCI was .80. Internal consistency for the coping scales ranged from .42 to .98 (Cupp, 1993).

Procedure

A "participant" letter was first sent requesting the school to participate in this study. A coordinator at the school was then selected upon agreement to participate. Next, permission was obtained from the school's Superintendent. Following approval, the coordinator was sent instructions outlining how to collect the data. The volunteer teachers rated five randomly selected students using the ASCI and asked these children's parents to complete the HEP.

The materials were analyzed through the use of student identification numbers and no names were used. Participation of both parents and teachers was anonymous. Informed consent forms were signed by parents who were provided with a phone number if they had any questions or comments. Participants were able to terminate their participation at any time during the study. Approval for research of human subjects was received from The University of Tennessee Committee on Research Participation.

This study utilized item numbers 48 and 49 from the Home Environment Profile. (Appendix) Categories of maladaptive and adaptive social and cognitive consequences were extracted from the ASCI data on coping styles. (Appendix)

Chapter IV

Results

There was no significant relationship between the frequency of spankings and maladaptive or adaptive coping in social or academic situations. Corporal punishment was positively correlated with maladaptive academic ($r = .2708$) and maladaptive social ($r = .3644$) coping strategies. However, Corporal punishment was also slightly correlated with adaptive academic ($r = .1232$) and adaptive social ($r = .2692$) coping strategies. One reason for the finding may be that nearly all the participants used corporal punishment to a greater or lesser extent. A negative correlation was found for caregiver involvement and adaptive academic ($r = -.3923$) and adaptive social ($r = -.3879$) coping strategies and a positive correlation with maladaptive academic ($r = .3383$) and maladaptive social ($r = .4559^*$, $p < .05$) coping strategies. In other words, caregiver involvement did not increase children's use of adaptive coping strategies nor was it shown to prevent the manifestation of maladaptive coping.

Table A.1 shows the correlational analyses of the four major coping strategies with respect to corporal punishment and caregiver involvement. These results indicate a trend that the more caregivers used corporal punishment, the more children used maladaptive coping strategies in academic and social situations. However, the results found that increased caregiver involvement was associated significantly with maladaptive social coping.

Table A.2 shows the means and standard deviations for the participant responses to frequency of corporal punishment used as discipline and frequency of caregiver involvement.

Chapter V

Discussion

The results of this study offer support for only one of my three hypotheses. The findings suggest that corporal punishment has a negative impact on the social and academic functioning of children as a consequence of maladaptive coping. This supports the conclusions of prior research that corporal punishment increases a child's risk for maladjustment (Simons et al, 1994; Rohner et al, 1991; Straus, 1991). It is also probable that the use of corporal punishment stifles the autonomy and social competence of the child. Corporal punishment prevents the child from practicing problem solving skills, thus preventing the development of self-esteem and social skills and instead contributing to the development of low self-esteem, helplessness and maladaptive social coping strategies. Caregiver involvement may also inhibit autonomy and social competence if it is directive in nature. For example, if children are given lists of "don'ts" but no help in problem solving skills, they cannot develop independent coping strategies.

The findings did not support the second hypothesis that increased caregiver involvement increases the likelihood that children use adaptive coping strategies. Likewise, no support was found for the third hypothesis that caregiver involvement prevents the manifestation of maladaptive social and academic coping strategies. In fact, caregiver involvement was

positively correlated to maladaptive social coping. One possible explanation for this unexpected finding is that a caregiver may spend a large amount of time with a child, but the interaction may be poor or nonexistent. For example, some caregivers may consider being in the same room doing a different activity than the child as spending time together. However, this type of non interaction would not necessarily promote adaptive social coping strategies. It also makes sense that any poor caregiver practices would continue during time spent together. In addition, children with problematic behaviors may demand more caregiver attention. This attention would most likely be focused on the problem behavior rather than the development of adaptive social coping skills. Therefore, the assumption that increased caregiver involvement would be positive based on its definition, may have been incorrect. Increased time spent together may actually reinforce negative behaviors and negative reactions, thus perpetuating the maladaptive coping strategies of the child. A third explanation may be that the question did not adequately differentiate between caregivers in terms of time. It may be that differences are apparent only at the extremes of the scale.

Recommendations

Caregivers are in need of effective discipline techniques. With the growing trend of single parent families and full-time working caregivers, there is less time to spend with children modeling correct behaviors. Children are often confused and misled by ineffective discipline, such as

corporal punishment, which has been shown in this study to be detrimental to the coping skills of children. Caregivers continue the use of corporal punishment because they have not been taught other ways of disciplining their child. Unfortunately the physical exertion of spanking relieves caregiver frustration and temporarily stops the offensive behavior (Carey, 1994). The recommendation for primary prevention and early intervention is one possible solution to breaking this cycle of corporal punishment (Brendtro and Long, 1994). This is a recommendation to intervene before problems occur, or even before the child is born. In 1990, Straus and Smith made reference to "the cycle of violence hypothesis". Research shows that individuals who are subjected to corporal punishment as children are at risk for using corporal punishment on their children (Straus and Donnelly, 1993; Straus and Smith, 1990). Several possibilities exist for ways to break this cycle.

Attitudes influence how adults feel about the appropriateness of corporal punishment. Cognitive-behavioral approaches can be utilized to test the legitimacy of caregiver attitudes and beliefs (such as without spanking children will be out of control), and to assist them in generating alternative possibilities for discipline (Dickinson, 1993). For example, a caregiver who believed their child would be out of control without spanking can test this belief and use an alternative discipline to see if the child is actually out of control.

Adults should realize there is no justification from research for using corporal punishment to discipline children. It is the responsibility of the adult to guide and teach the child. Misbehavior can be seen as an opportunity to help children learn from their mistakes by teaching them

problem solving and self-control (Block, 1994). This idea is promoted in Applied Humanism. Hall (1992) discusses how the Humanistic approach to behavior management is able to gently teach appropriate behavior and foster positive, healthy relations.

Children are not the only ones who can benefit from teaching. Caregivers can also benefit from being taught. In response to the increasing amount of research on caregiver involvement, parent workshops have been implemented in some communities. Parenting is a difficult responsibility for which there is usually no formal training. There are many parent training programs available. For example Gordan's (1973) Parent Effectiveness Training has been in use for many years. Another program is one designed by Dickinson (1993). The Discipline Workshop for parents is a part of numerous parent training workshops called "Workshops that Work for Parents". There are four simple rules caregivers are given:

- 1) Negotiate Rules
- 2) Negotiate Consequences
- 3) Be Consistent in Enforcing Rules and Consequences
- 4) Use Effective Consequences

After the presentation of the rules, a video is shown, workshop leaders role-play use of the rules, and then caregivers are invited to role-play.

The last recommendation is for the laws to be modified. We all have a commitment to the well-being of children. Laws should be enacted to prohibit the use of corporal punishment, corporal punishment should be

clearly defined and educators should be retrained on how to discipline children (Hyman, 1993).

Implications for Future Research

There are various implications for future research from this study. Caregiver variables such as socioeconomic level, level of caregiver stress, and caregiver age need to be investigated in terms of the impact of corporal punishment. Another study might compare the coping strategies of children disciplined with corporal punishment to the coping strategies of children disciplined in another way, for example by using time-out. Moreover, phenomenological studies of individual perceptions of caregivers and children of corporal punishment have yet to be done. Studies should also be conducted after parenting workshops on the impact of caregiver involvement, which presumably would become more positive and be more likely to model adaptive coping skills. In-depth longitudinal studies are also needed to investigate and support the current findings that suggest corporal punishment leads to maladaptive coping. At the present time research shows that corporal punishment can have harmful consequences. Future research will lend additional support for the movement to abolish its use. It is hoped that the findings extrapolated from this study will add to this body of knowledge and contribute to discouraging caregivers from using corporal punishment as a form of discipline. This study also contributes to the knowledge about caregiver involvement, although replicated studies are needed before these unexpected findings are conclusive.

In conclusion, corporal punishment in this study associated with the maladaptive social and academic coping strategies of children. Caregiver

involvement as defined by this study was associated with increased maladaptive coping of children and did not increase adaptive coping. It also did not prevent maladaptive coping in the presence of the use of corporal punishment.

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APPENDIX

Table 1

Correlational Analyses of Corporal Punishment and Caregiver Involvement
as Related to the Four Major Coping Strategies

	<u>Coping Strategies</u>			
	MalAc	MalSoc	AdAc	AdSoc
Corporal Punishment	.2708	.3644	.1232	.2692
Caregiver Involvement	.3383	.4559 *	-.3923	-.3879

* $p < .05$

Table 2

Mean Scores of Corporal Punishment and Caregiver Involvement

	Mean	Standard Deviation
Corporal Punishment	3.80	1.22
Caregiver Involvement	4.12	.93

n=25

Home Environment Profile (HEP)

Donald J. Dickinson

The HEP measures the parenting styles of School and Social Monitoring, Discipline, Nurturing, Problem Solving and Self-Management, Beliefs and Attitude, and Home -Study Conditions.

Instructions

1. Using pen or pencil, circle the answer to each question that comes *closest* to being accurate for you. Try to answer all the questions. **If you can not answer a question, leave the item blank.**
2. If you have more than one child, answer the questions for the child whose teacher sent you the questionnaire. Only one member of the family need complete the questionnaire; however it is possible for more than one person to assist in answering.
3. When you have completed the questionnaire, please place it in the enclosed self-addressed envelope and mail to The University of Tennessee. Remember, as your identity is coded, we have no way of reminding you to complete the questionnaire. Therefore, please answer the questions and mail to us as soon as possible. The results may serve as a basis to help children learn and cope more effectively in school. **Do not put your name or your child's name or address on this questionnaire.**

Results

The 20 participating school systems will be notified of the results of the research in the fall of 1996, or spring or 1997. We will ask them to announce the results to the local newspapers. In addition, we will encourage the school systems to use the results to train parents in those areas which make a difference in how children cope and learn at school. Please feel free to write us for the results of this research.

Questions?

If you have any questions call your project coordinator or any of the following researchers at The University of Tennessee:

Dr. Donald J. Dickinson, Dr. Dianne Whitaker, Mary Corneilus, Maripat Gettlefinger, or Lisa Griffin at 615-974-8145

Code Number _____

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The Home Environment Profile (HEP)

1. Last week, I talked with my child about everyday things such as friends, television programs, hobbies, and activities Almost never 2 3 times 4 5 or more 2. This week, how many times did you NOT wait for a problem to happen before discussing proper conduct, being fair and considerate None 1 time 2 times 3 times 4 or more 3. When I am around my child, my moods are the same Almost never 1/4 of time 1/2 of time 3/4 of time Almost always 4. My highest educational expectation for my child is Graduate School College Tech/Voc Sch High School Less than HS 5. In the past month how many times have you made out a schedule of things you must do during the day and put them in priority? None 1 2 3 4 or more 6. I follow an established routine (time for bed, time for eating, etc.) Almost always 3/4 of time 1/2 of time 1/4 of time Almost never 7. In the past week, I talked to my child about what he/she is studying 4 or more 3 2 times 1 None 8. In the past three years, how often did you contact your school when you thought your child's progress was not satisfactory. 6 or more 5 3-4 1-2 None 9. When I am around my child I am in a happy, pleasant, or friendly mood. Almost never 1/4 of time 1/2 of time 3/4 of time Almost always 10. My family helps each other to solve problems by talking, making plans, and supporting each other to follow the plans Almost never 1/4 of time 1/2 of time 3/4 of time Almost always 11. In the past year, how many times have you made an agreement to give your child a tangible reward, such as money, for good performance in school? None 1-2 3-4 5 6 or more 12. I believe that my child's performance in school is based mostly on: Effort & work habits Persistence Teacher factors Intelligence Luck 13. In the past week, when helping your child make a decision, how often have you discussed the advantages and disadvantages? None 1 2 3 4 or more 14. When I punish for something very serious, I use long lasting and strong punishers (not spankings) Almost never 1/4 of time 1/2 of time 3/4 of time Almost always 15. When you correct your child, how often do you give the child an activity that keeps him/her from getting into difficulty again? Almost always 3/4 of time 1/2 of time 1/4 of time Almost never	16. How often are you willing to negotiate a time and place for your child to study? Almost never 1/4 of time 1/2 of time 3/4 of time Almost always 17. I am as polite to my child as I am to my friends, coworkers and others Never 1/4 of time 1/2 of time 3/4 of time Almost always 18. This past week, how often did an adult in your family behave unpredictably to your child? 4 or more 3 2 times 1 None 19. The number of hours I read (to myself) at home this past week was 7 or more 5-6 3-4 1-2 Less than 1 20. I believe that I can accomplish almost anything by proper planning and hard work Strong disagree Disagree Neutral Agree Strongly agree 21. My child's closest friend has been in trouble at school or with the law during the last year None 1 time 2 times 3 times Don't know 22. I look at my child's homework to make certain it is completed and correct Almost always 3/4 1/2 of time 1/4 of time Almost never 23. Yesterday how many times did you compliment, support, encourage, praise, or show affection to your child? None 1 2 times 3 4 or more 24. My child has someone available to help with homework and studying for tests Never 1/4 of time 1/2 of time 3/4 of time Almost always 25. This past week, how often have you used such things as time-out, TV restrictions, or the taking away of privileges in order to punish your child if he/she misbehaved? None 1-2 3-4 5 6 or more 26. In the past week, I have talked to my child about his/her interests None 1-3 4-5 times 6-7 8 or more 27. Yesterday, I knew where my child was Almost always 3/4 of the time 1/2 of time 1/4 of time Almost never 28. I have an organization to my household (place for things, what is first priority, etc.) Almost always 3/4 of time 1/2 of time 1/4 time Almost never 29. This last year, my child's closest friend make about what kinds of grades in school As Bs Cs Ds Don't know 30. How many times this past month have you used your child's ideas to help resolve a dispute? None 1 2 3 4 or more 31. During the past week, my child studied at the same time every day Almost never 2 times 3 times 4 times 5 or more 32. How many household responsibilities (like making up the bed) have you given to your child? None 1 2 3 4 or more
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33. This past week, when I said I was going to punish my child, I follow through and did it Almost never 1/4 of time 1/2 of time 3/4 of time Almost always	49. Last week how many hours did you spend talking, going to a movie, watching television, or doing some other activity with your child? Less than 1 hr 1-2 3-4 5-6 7 hrs or more
34. How often are you able to immediately stop inappropriate behavior once it has started (e.g. children pinching each other or children starting to rough house)? Almost always 3/4 of time 1/2 of time 1/4 of time Almost never	50. In the past week, how often did you communicate with other family members about problems in such a way that the discussion increased tension in the family? None 1 time 2 times 3 times 4 or more times
35. Yesterday, about how many times did you correct your child or complain about his/her behavior? 4 or more 3 2 1 None	51. I have taken part in a self-improvement program this past 6 months (such as a church retreat, education course, crafts workshop, exercise program etc.) None 1 2 programs 3 4 or more
36. I make sure my child studies in a quiet place away from such distractions as people, television, radio, etc. Almost never 1/4 of time 1/2 of time 3/4 of time Almost always	52. My child has a voice in making or changing the rules for his/her behavior in our home Never 1/4 of time 1/2 of time 3/4 of time Almost always
37. In the past month how often have you used punishment to get your child to do better in school? None 1 2 times 3 4 or more	53. I am involved in activities such as hobbies, social/church organizations, community group and or recreation during the past month None 1 2 times 3 4 or more
38. I know what my child's homework assignment is Never 1/4 time 1/2 of time 3/4 time or more Almost always	54. I get my child materials, tools, equipment, and/or books to support his/her interest Almost never Christmas or birthdays 3-6 times a year 7-8 times a year Almost every month
39. In the last year, how often have you offered your child incentives for good work at school on a short-term basis (next tests, homework for the week). 6 or more 4-5 3-4 1-2 None	55. The last time my child studied, I made certain that he/she was actually studying by checking on him/her during study time No checking 1-2 check 3-4 checks 5 checks or more Not necessary to check
40. In the past week, I have explained to my child how I do such things as planning meals, balancing a check book or budget, fixing the car, etc. Never 1 2 times 3 4 or more	56. I give short, rather than long lectures to my child when he/she does something wrong Almost never 1/4 of the time 1/2 of time 3/4 of time Almost always
41. The number of hours I watch television at home each day is 6 or more 1-2 4-5 hrs 2-3 1 or less	57. When my child does something I don't like (like not hanging up coat), I calmly explain to my child what he/she did that was wrong Almost never 1/4 of time 1/2 of time 3/4 of time Almost always
42. Last week, how many times did you make a favorable comment to your family about your job, home, or life? None 1 2 3 4 or more	58. How often are you able to keep your child busy or occupied when the two of you go places with attractive nuisances or peers who can lead your child to mischief? Almost never 1/4 of time 1/2 of time 3/4 of time Almost always
43. The adult members of our family agree on discipline Almost never 1/4 of time 1/2 of time 3/4 of time Almost always	59. My child knows what his/her punishment will be when he/she does something wrong Almost never 1/4 of time 1/2 of time 3/4 of time Almost always
44. I think I am a major influence in my child's progress at school Strongly disagree Disagree Neutral Agree Strongly agree	60. Yesterday how many times did you give in to your child's demands? 4 or more 3 2 1 None
45. What is the percentage of errors your child should make in order for him/her to learn effectively? 20% or more 15% 10% 5% Less than 5%	61. The number of books I have given or read to my child this last month is 4 or more 3 2 1 None
46. How often have you discussed the day's events with your child at the dinner table this past week? 7 or more 5-6 3-4 1-2 None	62. I have used yelling, name calling, or threats to punish my child in the past two days 4 times or more 3 2 1 None
47. When correcting a mistake (like in math), how many chances do you give your child to correct the mistake before showing or telling how to get the answer 4 or more 3 2 1 None	
48. I use spankings to discipline my child when his/her misbehavior is serious Almost always 3/4 of time 1/2 of time 1/4 of time Almost never	

63. My child has such learning aides as a computer, typewriter, dictionary, encyclopedia, calculator and reference material

None 1 2 3 4 or more

64. In the past year, of the times you have given your child rewards to do something, how often did he/she still did not produce?

Almost always 2/4 1/2 of time 1/4 None

65. When I have a problem to solve, I first identify the problem, then develop a plan, and follow the plan to see if the problem is solved

Almost never 1/4 of time 1/2 of time
3/4 of time Almost always

66. In the last week, how many times did you let your child hear you "gripe" about your job or household work

None 1 2 times 3 4 or more

67. When my child does good work at school, I praise him/her

Almost always 3/4 1/2 of time 1/4 Almost never

68. In the past week, how often have you compromised with your child when the two of you had a disagreement

None 1 2 times 3 4 or more

69. Yesterday, how many times did you check to see what your child was watching on television

None 1 2 times 3 4 or more

General Information

70. From birth through age 5, my child was in day-care how many years?

4 or more 3 2 yrs 1 None

71. My general level of stress is

Very high high average low Almost none

72. The highest educational level that I have completed is:

Elementary level or less Junior high school High school
College Graduate school

73. Our yearly total income is closest to:

Below 10,000 10- 25,000 26,000- 40,000
41,000 - 55,000 56,000 and above

74. My marital status is:

Divorced Separated Unwed Married
Widowed

75. My age when my child was born was:

15 or younger 16-18 19-22
23-25 26 or older

76. Which best describes you?

Mother Father Sister/Brother Grandparent
Foster parent Stepparent Guardian

77. How many people live in your house

2 3 4 5 6 or more

Aug95

Teacher's Questionnaire

Date _____

Teacher Number _____ School Number _____

Student Code _____

1.1 Student Gender Male Female

1.2 Student's Grade 3 4 5 6 7 8

1.3 Ethnicity Afro-American Asian-American Native -American
Caucasian Hispanic Other _____

1.4 Rate the student's achievement (based on test scores).
Poor Below average Average Above average Excellent

1.5 Rate the student's attractiveness
Not attractive Below average Average Above average Very attractive

1.6 If the student is *certified* a special student, please specify the nature of the condition

Learning Disabled Emotionally disturbed Physically handicapped

Attention Deficit Gifted Other _____

The Academic and Social Coping Inventory (ASCI)

Jann D. Cupp

Donald J. Dickinson

Purpose

This inventory is designed to assess school-based coping skills for children in grades 1-9. In order to be as practical as possible, the items and coping styles in this inventory are taken from actual classroom situations. The ASCI measures how well children cope with academic and social problems which they encounter in the schools. The ASCI provides information on the Academic and Social Coping of children, including four adaptive and four maladaptive styles. The ASCI can serve as a curriculum for teaching adaptive coping as each situation (item) can be used as a hypothetical scenario to directly teach effective coping. (See the ASCI handbook for specifics on teaching coping strategies.)

Instructions

1. Read the 20 ASCI situations a week or two before rating the students. Observe the students on the 20 situations to see how the children cope.
2. It should require no longer than 15 minutes to rate the first student and no more than 10 minutes for each of the remaining students. After rating the first student, you need read only the underlined portion of the situation to recall all the item. Doing this will save you time.
3. If you can not answer an item, leave it blank.
4. Please rate each item by indicating the extent to which the student engages in the specific coping behavior. Rate your responses on a scale of 1 to 5: 1 = never occurs, 2 = seldom occurs, 3 = occasionally occurs, 4 = frequently occurs, 5 = always occurs. Please note that the specific coping behaviors are only examples, and the students need only do "such things as" the indicated examples.

Example:

1. When/if the student makes a mistake, he/she:
 - a. 1 Isolates him/herself.
 - b. 1 Cries.
 - c. 1 Works on another task unrelated to the task at hand or laughs about it.
 - d. 4 Blames others.
 - e. 2 Asks for help with the problem or seeks support.
 - f. 3 Identifies, defines, or clarifies the problem.
 - g. 3 Investigates alternatives or tries new ideas to solve the problem.
 - h. 4 Follows through with the plan to solve the problem and changes plan when necessary.

Simply rate each blank 1-5. For example, Johnny never isolates himself, so choice a. is marked 1. He never cries or does anything unrelated, so choice b. and c. are also 1. He frequently blames others, so d. is marked 4. He seldom asks for help so this is marked 2 ... and so on.

Code Number _____

Remember: 1 = never occurs 2 = seldom occurs 3 = occasionally occurs 4 = frequently occurs 5 = always occurs

Academic Coping

1. When/if the student makes a low score, he/she does such things as:
 - ___ Withdraws, has nothing to do with others.
 - ___ Pouts, cries, throws temper tantrum, or refuses to do work.
 - ___ Works on another task completely unrelated to the problem (e.g., drawing instead of working math problems) or makes light of the situation.
 - ___ Blames others for his/her low score.
 - ___ Asks the teacher or peers to help find ways to improve performance on the task and/or seeks support.
 - ___ Asks what he/she did wrong.
 - ___ Develops such strategies as rereading, being prepared, or using reference material.
 - ___ Follows a plan he/she has developed to solve the problem and changes plan if necessary.
2. When/if student is asked to make an oral reading/presentation and is not successful because he/she is not prepared, he/she does such things as:
 - ___ Runs away or isolates him/herself.
 - ___ Cries, strikes out at peers, or makes angry statements.
 - ___ Performs some other task which has nothing to do with the oral presentation or jokes about it.
 - ___ States that his/her mistake was someone else's fault.
 - ___ Seeks advice from the teacher or peers on how he/she may improve his/her presentations in the future and/or seeks understanding.
 - ___ Asks what was wrong with the presentation.
 - ___ Considers other strategies such as note taking, practice, outlining, or focusing on the content of presentations and not on his/herself.
 - ___ Follow through with a plan for improving his/her future presentations and changes plan when appropriate.
3. When/if the student has a large amount of work to do in short period of time, he/she does such things as:
 - ___ Runs away from the task or becomes withdrawn and quiet.
 - ___ Acts angry, frightened, frustrated, refuses to work, or makes "smart" remarks.
 - ___ Starts working on a task/activity which has not been assigned or laughs it off.
 - ___ States that other student(s), teacher, or parents are keeping him/her from completing work on time.
 - ___ Asks the teacher or other students for ideas or assistance in completing the work on time and/or seeks support.
 - ___ Determines what has to be done and the time left to do it.
 - ___ Develops other strategies such as time management and/or developing priorities to meet the goal.
 - ___ Follows the steps of a plan to get the job done on time and corrects plan when necessary.
4. When/if faced with an assignment that requires a novel and creative effort, the student does such things as:
 - ___ Sits by him/herself without responding.
 - ___ Appears angry or frustrated.
 - ___ Begins tasks which are unrelated to the assignment or talks way out of assignment.
 - ___ States that someone else is keeping him/her from doing a good job or that instructions are not clear.
 - ___ Asks for advice or ideas on how to complete the assignment and/or encouragement.
 - ___ Asks for clarification of the assignment.
 - ___ Considers other strategies such as reference materials, ideas from others, or starts with a small step.
 - ___ Follows a plan to complete the tasks and changes strategy when plan does not work.
5. When/if the student is faced with an assignment that requires independent work, he/she does such things as:
 - ___ Withdraws from the task or daydreams.
 - ___ Cries or appears frightened, hesitant, or angry.
 - ___ Does something completely different or jokes about the situation.
 - ___ Accuses someone else of interference.
 - ___ Asks the teacher or others for advice on how best to approach the task alone and/or seeks encouragement.
 - ___ Identifies what must be done in order to work independently.
 - ___ Develops a strategy that allows the student to complete independent work (working away from others, avoiding distractions, etc.).
 - ___ Implements the plan for independent work and modifies when necessary.
6. When/if the student is faced with repeated failure (several assignments in a row, consistently low grades, etc.), he/she does such things as:
 - ___ Isolates him/herself from the rest of the class.
 - ___ Shows anger, frustration, or refuses to work.
 - ___ Works on tasks completely unrelated to assignments or makes the failure seem unimportant.
 - ___ Claims that others are at fault for his/her failure.
 - ___ Admits the problem and seeks advice for correcting the problem and/or seeks support.
 - ___ Determines what he/she did wrong.
 - ___ Develops strategies such as rereading, listing assignments, and checking work.
 - ___ Follows the plan designed to solve the problem and modifies when it fails.
7. When/if the student is confronted for failing to turn in homework, he/she does such things as:
 - ___ Avoids the teacher or peers.
 - ___ Cries or becomes angry.
 - ___ Does other work unrelated to the assignment or makes light of the situation.
 - ___ Makes up excuses (blames others, "the dog ate it," etc.).
 - ___ Seeks help from the teacher or others and/or encouragement.
 - ___ Identifies things that prevent him/her from doing homework.

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- ___ Constructs such strategies as listing homework assignments, using reminders to keep track of homework, etc.
- ___ Follows through with a plan to solve the problem and corrects plan when necessary.

8. When/if the student receives criticism over an assignment from the teacher, he/she does such things as:

- ___ Goes off by him/herself, sits alone, and refuses to talk.
- ___ Becomes angry, acts hurt, cries, or throws a tantrum.
- ___ Ignores the teacher and continues working on an unrelated task and jokes about the criticism.
- ___ Blames others or the task for the problem.
- ___ Asks for suggestions from the teacher on how to improve and/or seeks sympathy.
- ___ Asks the teacher the reason for the criticism.
- ___ Plans to do such things as clarifying assignments, showing neater work, or turning work in on time.
- ___ Implements plan to avoid criticism and changes strategies when appropriate.

9. When/if the student is given an unexpected assignment, like a surprise test for which he/she is not prepared, he/she does such things as:

- ___ Withdraws, tries to avoid the test quietly.
- ___ Cries, throws a tantrum, or becomes hostile.
- ___ Performs some other task (e.g., sharpens pencil, tries to work on other assignment) or makes fun of the assignment.
- ___ States that he/she cannot comply due to outside interference or blames others.
- ___ Asks the teacher for advice on how to be ready for the unexpected assignment or test and/or seeks encouragement.
- ___ Asks teacher for clear instructions.
- ___ Develops a plan for completing the task, such as focusing on only the first question and not the full test or first locating a question he/she can answer.
- ___ Takes the test in a way that indicates a thought-out plan and modifies plan when not effective.

10. When/if the student is confronted with a task he/she does not understand, he/she does such things as:

- ___ Withdraws from the situation.
- ___ Cries or gets angry.
- ___ Tries to become involved in a different task or pokes fun at the value of the task.
- ___ Blames others for his/her own lack of understanding.
- ___ Asks teacher or peers for help in understanding the task and/or seeks compassion.
- ___ Focuses step-by-step on what the instructions say.
- ___ Develops a strategy for comprehending the task, like re-reading instructions, looking up definitions, etc.
- ___ Follows the plan he/she has devised and modifies when appropriate.

Social Coping

1. When/if the student fails to get his/her own way when sharing or playing, he/she does such things as:

- ___ Sulks, pouts, isolates him/herself, or refuses to participate.
- ___ Throws a tantrum, cries, whines, or argues.
- ___ Gets involved in something unrelated or different or makes

light of the situation.

- ___ Blames someone else for not being able to get his/her way.
- ___ Asks teacher or peers for alternative ways in which he/she may participate appropriately and/or seeks support.
- ___ Determines whether it is reasonable to have his/her own way in this situation.
- ___ Considers other alternatives to solve the problem, such as waiting turn, focusing on positive aspects of cooperation, etc.
- ___ Executes a plan to solve the problem and modifies plan when not effective.

2. When/if the student is not selected for an activity or game, he/she does such things as:

- ___ Becomes withdrawn and sits by him/herself.
- ___ Gets mad, breaks things, stomps, etc.
- ___ Performs some other task or laughs it off.
- ___ Tells others it is their fault he/she was not selected.
- ___ Asks teacher (or others) what he/she can do to be selected and/or seeks condolence.
- ___ Determines why he/she was not selected.
- ___ Develops alternatives for being selected next time such as raising hand, practicing the required skills, being nice to others, etc.
- ___ Follows through with ideas on improving chances of being selected or dealing with not being chosen and develop new plan when first plan is not effective.

3. When/if the student receives punishment in front of others, he/she does such things as:

- ___ Runs off, sulks away from others, or withdraws.
- ___ Shows anger, strikes out physically, or cries.
- ___ Does something that makes no sense, given the situation (laughs, combs hair, etc.) or engages in an unrelated activity.
- ___ Puts the blame on someone else (teachers, parents, peers, society, etc.).
- ___ Seeks teacher or student advice in preventing the situation from occurring again and/or seeks sympathy.
- ___ Clarifies why he/she received the punishment.
- ___ Considers strategies to prevent punishment by using self-talk, planning, and environmental cues to control behavior.
- ___ Follows plan in preventing the situation from occurring again and modifies plan when appropriate.

4. When/if the student is forced to work or play with other student(s) he/she clearly does not like, he/she does such things as:

- ___ Leaves the situation and goes off to be by him/herself.
- ___ Fusses, complains, insults others, or throws a tantrum.
- ___ Tries to perform some other task, associates with a different group, or makes the best of it by kidding others.
- ___ Makes excuses or accusations as to why he/she cannot work or play with the student or blames others.
- ___ Asks the teacher or peers for advice on how to handle this situation constructively and/or seeks support.
- ___ Verbalizes why he/she dislikes the other student and determines whether these dislikes have a factual basis.
- ___ Considers recognizing positive attributes of the student he/she

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is forced to play with and considers how to deal with prejudices and to not make general statements about others, etc.

___ Follows through with a plan to deal with the problem, and uses new strategy when first strategy does not work.

5. When/if the student is placed in an embarrassing situation, such as trips or falls down in front of others, he/she usually does such things as:

- ___ Isolates him/herself from others, covers face, hides, etc.
- ___ Show anger or cries.
- ___ Says something or does something unrelated to the situation or laughs at him/herself.
- ___ Blames someone else for the event leading to the embarrassment.
- ___ Goes to the teacher or others to seek advice on how to handle embarrassment and/or seeks condolence.
- ___ Determines why he/she is embarrassed and if this is normal.
- ___ Develops a strategy to react without defensiveness or calling additional attention to the offense.
- ___ Follows through with such strategies and changes plan when appropriate.

6. When/if the student is called a name, teased, picked on by other student(s), or drawn into a fight, he/she does such things as:

- ___ Goes off by him/herself or avoids others.
- ___ Gets angry, strikes other students, cries, or pouts.
- ___ Performs some unrelated task (e.g., drawing, studying) or talk about other things.
- ___ Blames others for the teasing or fighting.
- ___ Asks the teacher for ideas to deal with the difficulty and/or seeks sympathy.
- ___ Seeks clarification as to why he/she is being picked on or teased.
- ___ Develops such strategies as being socially positive, remaining calm, asking the offender to stop, or getting others to help with conflict resolution.
- ___ Follows a plan to deal with the situation and uses new strategies when first one fails.

7. When/if the student is faced with an inconvenience, like noise in the lunchroom, loss of recess time, wait time for computer, or long lines, he/she does such things as:

- ___ Withdraws.
- ___ Gets extremely upset, acts angry, or cries.
- ___ Exhibits "silly" behavior, performs some task unrelated to the inconvenience or find humor in the situation.
- ___ Blames the teacher or others for the inconvenience.
- ___ Talks to others about the situation and gains ideas for dealing with the inconvenience like remaining calm, talking with the others, etc.
- ___ Finds out why the inconvenience has happened.
- ___ Develops a plan like starting earlier to avoid lines or asking teacher or principal for student input in solving problem etc.
- ___ Implements a plan designed to stop or prevent the inconvenience and modifies plan when necessary.

8. When/if the student gets his/her feelings hurt, or is exposed to sad or disruptive experiences (such as an injury or death of a friend, unhappy life experiences, etc.) he/she does such things as:

- ___ Becomes withdrawn and self-isolated.
- ___ Seems inconsolable, cries excessively, or strikes out violently.
- ___ Acts as if it really does not matter, performs unrelated tasks or changes the subject.
- ___ Blames others (teachers, society, etc.) for the problem.
- ___ Seeks help in finding alternatives and advice for addressing the experience, such as talking with a counselor, etc. and/or seeks compassion.
- ___ Seeks help from others as to why the hurtful experiences are occurring.
- ___ Develops a plan to eliminate the hurtful or disruptive experience, etc.
- ___ Follows through with the plan to deal with the situation and modifies when necessary.

9. When/if the student has peer pressure to do something against the school rules, such as running in the hall, defacing school property, skipping class, using tobacco, etc. he/she:

- ___ Refuses to discuss the situation and retreats.
- ___ Becomes aggressive or belligerent.
- ___ Gets involved in another task or sidetracks the conversation.
- ___ Blames others (teacher, principal, etc.), for letting such things happen or blames unfair rules.
- ___ Asks parents, teacher, or others how to deal with peer pressure and/or seeks understanding.
- ___ Attempts to understand the situation by asking such things as "Why/how did they pressure me?"
- ___ Develops a plan to deal with peer pressure by saying "No" in a positive way or developing other friendships.
- ___ Follows the plan by doing such things as being positive, yet rejecting peer pressure, and uses new plan when necessary.

10. When/if the student is without friends, he/she does such things as:

- ___ Avoids the other students.
- ___ Insults, ridicules, or fights other students.
- ___ Performs an unrelated task or makes light of not having friends.
- ___ Blames others for the difficulty.
- ___ Asks peer or others how to deal with the lack of cooperation and/or seeks support.
- ___ Identifies whether or not the problem is with him/herself.
- ___ Identifies ways to approach students, making eye contact, sustaining conversation by asking questions, etc.
- ___ Follows through with the plan and modifies strategies when not effective.

End of Academic/Social Coping Inventory (Short Form)

VITA

I plan to graduate with a Master's of Science degree with a major in Educational Psychology in August of 1996. In the fall of 1996 I will begin working on my Ph.D at the University of Massachusetts. My career aspirations involve researching, followed by consulting in the schools and possibly a faculty position. Ultimately, I would like to open my own school and base the curriculum on an innovative model representing alternative methods to education which would address the diverse population and the special needs of today's youth. My primary objective is to share and apply my knowledge to facilitate positive educational and personal experiences for children.

I began working on my degree in Spring of '95. My course content at the Master's level has provided me with both the knowledge and the practical experience necessary to be an effective School Psychologist. I have had training in prevention, assessment and intervention. The graduate courses I have completed have covered personality, human development, discipline, cognitive psychology, and statistics and research design to name a few. Throughout my graduate training I have maintained a 4.0/4.0 grade point average. Further, I completed a teaching practicum assisting with the instruction of experimental psychology. My particular research interests include cognitive development, social adjustment, family interventions and the academic and developmental learning consequences resulting from punitive discipline.

I chose the thesis option as opposed to the comprehensive examination for the experience of researching, writing and defending a thesis. This has served as preparation for completing the doctoral dissertation. My thesis is an investigation which examined the effects of punitive discipline on academic and social coping skills. The dependent variable was data extrapolated from the Home Environment Profile and the Academic Social Coping Inventory. These scales were developed at the University of Tennessee.

Various accomplishments throughout my academic history are reflective of my intent to succeed. Prior to college, I was awarded several honors. Among them, I was a member of the National Junior Honor Society; I was a recipient of the Jaycee's Hugh O'Brian Outstanding Sophomore Award; and I was a member of Who's Who Among American High School Students. Additionally, I was awarded first place in the 1985 Rhode Island Teen Scholarship Pageant; and I was a National Journalism Award Winner of the

United States Achievement Academy. I was extensively involved in extra curricular activities including co-editor of the class newspaper, Student Council Secretary, Varsity cheerleading, and softball.

Following high school I attended the University of Rhode Island. I earned a 3.7/4.0 grade point average my junior and senior years collectively and a 3.8/4.0 grade point average in psychology. The psychology department awarded me the Outstanding Senior Award which commended academic performance and contributions to the field of psychology.

As an undergraduate at the University of Rhode Island I completed three independent studies. Dr. Pamela Gibson, Ph.D, sponsored my first project which was a comparative review of theories regarding both the victims and the perpetrators of child sexual abuse. This article placed as a finalist for the Carpenter's Prize, an award which recognizes outstanding research projects of undergraduate psychology students. The second independent study was an opportunity to become more cognizant of the Diagnostic Statistical Manual III, revised edition (DSM III R). Dr. Eric Jolly, Ph.D, Assistant Dean of University College, sponsored this study which concentrated on schizophrenia, phobias and depression, respectively.

The third independent study examined attitudes and perceptions of AIDS and acquaintance rape among college women and men. The sponsor of this research was Dr. Lisa Harlow, Ph.D. These learning experiences were complemented by the three graduate level courses successfully completed as an undergraduate: The Teaching Practicum, Women and Mental Health, and Learning Disabilities: Assessment and Intervention.

My work experience began with a position as the Undergraduate Assistant in Student Life at the University of Rhode Island. I was responsible for administering and supervising the testing of students with learning disabilities and physical impairments.

Accordingly, my work with students continued when I began working for Career Services as the Coordinator of the first Mentor Program at the University of Rhode Island. My duties entailed interviewing and supervising the program which served special needs students.

Following these work experiences I then gained insight into the adolescent population as the Youth Employment Counselor at Warwick Community Action. My responsibilities consisted of developing

educational and vocational goals for a caseload of twenty-five adolescents all from economically disadvantaged families.

I then was employed by the Groden Center, INC. as a Treatment Coordinator to implement academic and behavioral programs for children. During this time, I created and organized a Social Skills Training Group for children with behavioral disorders. I facilitated this weekly group which addressed and worked to overcome many social barriers. After only three months I was promoted to Staff Training Coordinator providing on-line training to newly hired staff members. Shortly after I was promoted to Clinical Assistant to the Executive Director, Dr. June Groden, Ph.D. This position involved clinical duties, research assignments and supervising the treatment staff.

An amazing teaching position was then offered to me by the University of Rhode Island W. Alton Jones Campus. This was a fantastic learning experience for me, as well as my students. I taught local school groups educational programs centering around Rhode Island cultural history, agricultural sciences and small scale organic farming. Each day I independently planned and designed innovative and enjoyable lessons to teach the students. This was a valuable experience in alternative education. The position required living in the farmhouse and assisting with care of all farm animals and raising bed organic gardens.

In addition to paid employment, I have also learned through extensive volunteer positions and internships. I have provided group activities for Alzheimer's patients at the Coventry Health Center. At the Women's Resource Center I served as a Court Advocate assisting victims of domestic violence in obtaining restraining orders. At the Counseling & Intervention Center, along with a trained clinician, I conducted therapeutic groups for children from substance abusing parents.

Also demonstrative of my zeal, are my volunteer research assistantships. At Butler Hospital, a Brown University affiliated hospital, I provided chart reviews, data management, article reviews and library research as part of ongoing studies of bipolar affective disorder. This research is a NIMH-funded treatment study of bipolar disorder (Principle Investigator: Ivan Miller, Ph.D), and a longitudinal study of life events in bipolar disorder (Principle Investigator: Sherri Johnson, Ph.D). Consequently, I participated in a collaborative study of differences in life events, coping and depression with this team of researchers.

I was also granted the opportunity to work as a research assistant at Brown University School of Medicine. This entailed studying neuropsychological test development in a variety of psychiatric and neurologically-impaired populations (Principle Investigator: Robert Stern, Ph. D).

My most recent volunteer experience I earned credits toward my M.S. degree through an independent study Spring '95. I worked at a school in Tennessee, the Knoxville Adaptive Center. The school provides for the severe emotionally disturbed children in the community. Most of my time was spent observing. This experience presented me with a raw picture of the chaos children experience within the family unit. The school motto was "Reeducation". The behavioral intervention at KAC was conducted by the students themselves. They kept daily interval recordings and ratings of their own behavior. They were further required to monitor classmates' inappropriate behaviors. This peer monitoring proved to be more effective than teacher authority.

Due to the failure of mainstreaming after special facility treatment, the KAC set up "satellite classrooms" in the public schools. Therefore, those children improving to the point where mainstreaming is the next step, are transferred to a satellite classroom. They are then surrounded with positive role models, yet within the KAC classroom structure. Thus far, the program has been successful.

I am fortunate to have been a student at the University of Tennessee. The Psychoeducational Studies Unit is an excellent program. It is a program that integrates structure and flexibility; a program model that changes according to the needs of students and society. This program has offered me a great deal as a student and a professional. I am grateful to have been a part of new and challenging experiences such as conducting Parent Training Workshops and Presenting at the Tennessee Association for School Psychologists. Thank you for these opportunities. I have learned so much. Thank you to the faculty and students for your support and friendship.