RESILIENCE: AN EXAMINATION OF PROTECTIVE FACTORS AMONG AT-RISK YOUTH IN AN EDUCATIONAL SETTING

by

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Abstract

Adolescence can be a time of turmoil, and for a young person faced with adverse situations or at-risk of various adverse situations, this time can be even more difficult to be successful. How is it that some youth can overcome these adversities and lead successful lives? These youth are also known to have resilience. The present research examined the effects of protective factors on youth at-risk in an educational setting. Seventy-seven youth between the ages of 14-19 from non-mainstream educational settings completed questionnaires examining the role of perceived parenting style, academic self-efficacy, and social support on academic success. It was hypothesized that for at-risk youth who report their parents in being authoritative in their parenting style there would be a significant positive correlation between academic self-efficacy, social support and academic success. It was also hypothesized that at-risk males would score higher than at-risk females on academic self-efficacy. The final hypothesis was that at-risk females would score higher than at-risk males on social support. Through correlation analysis and one-way analysis of variance (ANOVA), the results indicated that at-risk youth who report their parents as being authoritative in their parenting style felt they had more people to rely on for support and felt more successful in their academic studies than at-risk youth who did not report their parents as authoritative in parenting style. The results also indicated at-risk females reported more people they could rely on for support than at-risk males. Post hoc analysis on gender differences indicated all females scored significantly higher than all males on grade percentage, and at-risk males were significantly more satisfied with their support than at-risk females. Other post hoc analyses are discussed, along with descriptive statistics and implications for future direction.
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Chapter 1: Introduction

I close my eyes when I get too sad; I think thoughts that I know are bad;
Close my eyes and I count to ten; Hope it’s over when I open them.
I want the things that I had before; Like a Star Wars poster on my bedroom door;
I wish I could count to ten; Make everything be wonderful again.
Hope my mom and I hope my dad; Will figure out why they get so mad;
Hear them scream, I hear them fight; They say bad words that make me wanna cry.
Close my eyes when I go to bed; And I dream of angles who make me smile;
I feel better when I hear them say; Everything will be wonderful someday...

Everclear, 2000

To some people these lyrics are just a song; to others it is a way of life. For most of these people this way of life is not their choice and many of them have little control of what happens to them as they grow up, nonetheless they are faced with these adverse conditions and are forced to live with them. I have spent the past eight years working with young people who are continually faced with issues such as abuse, neglect, pregnancies, isolation, drugs and alcohol use, mis-conduct, school suspensions and youth dropping out of school. Some of these youth disappear to the Downtown East Side of Vancouver; some of them continue their lives struggling to stay afloat. There are, however, some youth who exceed any and all expectations despite the adverse situations they are faced with. They grow up living life successfully regardless of the unfavorable conditions from their past. These youth are referred to as being resilient.

Today researchers still question, “How do they do it?” What is it within these youth that enable them to succeed? How is it that some youth are labeled resilient while others are not? According to Clark (1995), 25% of youth between the ages of 10-17 are at risk of having multiple problem behaviors. Further, another 25% get involved with these behaviors to some extent but not to the same degree as the above group. Finally, Clark reports the other 50% of youth lead successful lives with support from the school, family and the community.
Research on resilience has been continually growing since the early 1950's when resilient children were described as being “invincible” (Werner, 1993) and resistant to damage (Rutter, 1993). Currently resilience is not seen as a personal characteristic, but rather a description of a person’s ability to cope successfully despite being faced with a difficult situation (Masten & Reed, 2002). There are two types of factors that can increase or decrease resilient outcomes, protective factors and risk factors. Protective factors are factors that moderate the effects of an individual’s vulnerability (Masten, Best & Garmezy, 1990). Risk factors are characteristics of a person and or their surrounding environment, which relate to an increased chance of maladaptive outcome (Compas, Hinden & Gerhardt, 1995). These protective factors and risk factors can be placed into one of three categories; personal factors, family factors and environmental factors (Rutter, 1990).

Early research was conducted to increase understanding of the concept of resilience, yet many questions still remain unanswered. Clark (1995) suggests that since positive adaptation cannot be predicted by just the presence of protective factors, researchers need to examine the relationship between these factors and the individuals’ outcome to gain a better awareness of the impact of the protective factors. Resilient children do not have any unique characteristics or qualities, rather they have taken in or incorporated resources that reflect basic protective systems in development (Masten & Coatsworth, 1998).

Resilience can be defined in many ways and researchers have noted that resilience can vary from one person to the next, it can vary within a person over different periods of time, and it can vary in the different aspects of a person’s life (Hunter & Chandler, 1999; Kinard, 1998). Thus resilience is a construct that is very broad and becomes difficult to conceptualize and operationalize. Narrowing resilient outcomes allows researchers to focus on the targeted area and remove any broad generalization. Educational resilience is a
relatively new term that includes an increased chance of educational success when faced with adverse situations and experiences (Wang, Haertel & Walberg, 1997a). According to Clark (1995), “The impact the school can have on adolescents is positive or negative, depending on whether it promotes the development of risk factors or protective factors” (p. 9). That is, the youth’s perception of the school’s supportiveness directly affects the educational experience.

The following research examines resilience in adolescence, particularly the relationship between specific protective factors and English grade achievement in adolescents in non-mainstream education settings. Analysis focuses on the relationship between academic self-efficacy, perceived parenting styles, and social support with English grade achievement. The research begins with a review of the literature examining the origins and history of resilience. The focus of this is on the founding studies of resilience and the researchers’ contributions to the literature. Specifically, the review of research focuses on an in-depth review of Werner’s (1982) well known study of the children in Kauai, Hawaii. To increase the understanding of key concepts and ideas, a deeper examination into the meaning of resilience and educational resilience is presented. This is followed by a review of the existing research, and parameters for the current research.

**General Research Question**

To better understand resilience in adolescence, the researcher proposes to answer the following questions:

1. To what extent does perceived parenting style, academic self-efficacy, and social support serve as protective factors for adolescents at-risk in an educational setting?

2. How do the results vary across gender?
Chapter 2: Review of the Literature

The following chapter covers a review of the literature. Included is an in-depth review of the history of resilience including some of the founding research on the topic of risk and resilience. There is also a through examination of the concept of resilience specifically by looking at its definition, how it is operationalized and previous research on resilience. Finally this chapter reviews some of the programs that have been implemented based on resilience research.

History of Resilience

Although the concept of resilience was not initially introduced until the 1950’s, there were many studies prior to this that illustrated findings relevant to the concept of resilience (Cicchetti & Garmezy, 1993). More specifically, studies on poverty, trauma and schizophrenia showed key findings relevant to the construct of resilience (Cicchetti & Garmezy, 1993). In fact, much of the research on schizophrenia focused on understanding maladaptive behavior, and those who demonstrated adaptive patterns were described as “atypical” with little attention devoted to them. As time passed, researchers came to understand the importance of studying these atypical individuals with adaptive functioning. When examining the current studies on resilience, the investigations are similar in that they focus on people who are at-risk in a way that makes them vulnerable. However, the focus has shifted to those who demonstrate adaptive patterns rather than those who demonstrate maladaptive patterns.

One study in particular is now known as the gateway to research on resilience. In 1955 a team of psychologists, sociologists and other healthcare providers began a longitudinal study of the development of 698 babies through their childhood and into adulthood (Werner, 1993). The study took place in Kauai, which is an island in Hawaii. The
goals of their study were “a) to document, in the natural history fashion, the course of all pregnancies and their outcomes in the entire island community until the surviving offspring had reached adulthood and b) to assess the long-term consequences of perinatal complications and adverse rearing conditions on the individuals’ development and adaptation to life” (Werner, 1993, p. 503). Werner, who played a key role in this research, followed the individuals from pre-natal until they were in their early 30’s. The children’s physical, intellectual, social development, including the presence of physical handicaps, and learning or behavior problems were all assessed as part of the study.

The study began by following and documenting pregnant women in Kauai in 1955. Through documentation, the researchers looked at the children’s level of vulnerability (Werner, 1993). That is, they examined the children’s susceptibility to negative outcomes after being exposed to various risk factors. Risk factors included perinatal stress, poverty, parental psychopathology and disruptions of the family unit. More specifically the longitudinal study examined the impact of biological and psychological risk factors, stressful life events and protective factors on the development of these individuals (Werner). These participants were examined at birth, infancy, early and middle childhood, late adolescence and adulthood. As the study continued, the researchers looked at resilience in children who were able to successfully cope despite the risk factors present (Werner). According to Werner, about one third of these children were designated as high-risk based on the risk factors presented above. Two out of three children as described in this high-risk group had four or more cumulative risk factors by the age of two and had severe learning or behavior problems by the time they were ten. They also were more likely to have mental health problems, delinquency records, and/or teenage pregnancies by the time they were 18. The
other third of the "high-risk" group developed into competent, confident, and caring young adults (Werner & Smith, 1982; Werner, 1989).

There was a total of 72 youth who were labeled resilient (Werner, 1989). These youth differed from the high-risk group in many ways including individually, within the family, and externally from the family. As reported by Werner, these youth elicited a positive response from others right from the beginning. As infants, these young people were described as being “active”, “affectionate”, “good natured”, and “easy to deal with”. Additionally, resilient infants demonstrated temperamental characteristics that elicited positive attention from family members and strangers. As these resilient young people became toddlers, they were more advanced in communication, locomotion, and self-help skills.

During the 10-year follow-up the researchers noted that compared to at-risk non resilient children, the resilient children were reported to get along better with their peers, had better reasoning and reading skills, and often used whatever skills they had effectively (Werner, 1989). These resilient children also showed better perceptual-motor coordination than the high-risk children who developed serious coping difficulties (Werner & Smith, 1982).

At the 18-year follow-up these resilient youth were described to have an internal locus of control, a positive self-concept and good verbal communication skills (Werner & Smith, 1982; Werner, 1989). Additionally, the resilient girls were described as being more assertive, achievement orientated and independent than youth who developed coping problems (Werner, 1989). Resilient girls also were more likely to assume childcare responsibilities of their siblings with greater responsibility and competence than the youth that developed coping difficulties (Werner & Smith, 1982). Further, the mother’s employment outside the home led to competence and independence among resilient girls,
but led to coping difficulties and delinquencies among teenage boys. The presence of a
father in the home was very important to resilient boys and not as important to resilient girls.
Alternately, family discord was more disruptive for boys than for the girls. Resilient boys did
well in poor homes especially if the family had some structure, little crowding, little family
discord, and if the father was present in the household.

In examining protective qualities in resilient youth, only one in five had contact with
community agencies, compared to three out of four of the high-risk youth with problems.
Resilient youth turned to peer friends for informal support first, then to older friends, then
parents, ministers, and finally teachers (Werner & Smith, 1982). Resilient youth had families
with consistent rules that are regularly enforced; they expressed a positive attitude toward
school, more active social life, a positive self-concept, and a higher degree of self-esteem.

While growing up, these resilient youth lived in families with four or less children,
there were at least two or more years between them and their next sibling, few had a
prolonged separation between them and their primary caregiver, and they had a close bond
with at least one caregiver (Werner, 1989). One of the strongest variables positively
associated with adaptive functioning as an adult was the education level of the opposite sex
parent (Werner, 1993). Resilient children who were accepted tended to be more self-reliant
than were children who were rejected (Werner & Smith, 1982). Resilient adolescents also
scored higher than youth with serious behavior difficulties in responsibility, socialization,
communality, achievement via conformance and femininity on the California Psychological
Inventory (Werner & Smith). The resilient youth found emotional support outside their
families, they had at least one but usually several close friends and some had a teacher as a
role model or confidant for them. Extracurricular activities were also an important aspect in
the resilient youth’s lives. According to Werner and Smith, resilient youth believed they had more control over their environment than youth with serious coping difficulties.

According to Werner (1989, 1993), the 30-year follow-up had two main objectives. The first was to trace long-term effects of stressful life events and secondly to examine the long-term effects of protective factors in childhood and adolescence on their adult coping. This follow-up study was conducted using semi-structured interviews and records from the community (Werner, 1993). Werner (1989, 1993) found that many of the stressful life events that increased the chances of a criminal record or a broken marriage by age 30 took place in infancy and early childhood. Individuals from the resilient group were highly achievement oriented and many continued with education beyond high school. At the 30-year follow-up, only four of the resilient subjects were not employed full time, and three quarters of the resilient individuals were satisfied with their current job. When interviewed, the majority of the resilient men and women described personal competence and determination to be their most effective resource in coping with stressful life events, and they valued the support of a spouse or mate. Most resilient individuals wanted permanency and security in an intimate relationship or marriage and had high hopes and expectations for their offspring (Werner, 1993). Resilient individuals reported that they worked hard at being good, effective parents and wanted the best for their children. Three out of four resilient individuals felt they detached themselves emotionally when experiencing difficulties with their mothers. Almost all resilient individuals who married had a good relationship with their in-laws and used them as emotional support. Finally three out of four resilient men and women consider themselves “happy” or “satisfied” with their current status in life.

Werner (1989) emphasized that both vulnerability and resiliency can change over time. That is, just because someone appears vulnerable in one part of life or seems resilient
at a particular point in time it does not mean that person will always be vulnerable in a particular aspect, nor does it mean that person will always be resilient. A person may overcome some vulnerabilities but become more vulnerable in other areas. Alternatively, a person may demonstrate resilience at one point in life but not another. The following outlines three main types of protective factors: attributes within the individual, ties within the family, and external support systems. In Werner and Smith’s follow-up study in 1982, she noted a change in perspective from a linear approach in resilience to a transactional model (Werner & Smith, 1982). That is, rather than focusing on aspects of a child’s life which are independent of each other when measuring resilience, the focus shifts to a dynamic process where the aspects are interdependent with each other. Werner (1989) summarizes by explaining that an individual's ability to cope depends on a balance between risk factors, stressful life events and protective factors. This means that as risk factors and stressful life events increase, an individual needs to increase protective factors to keep things balanced.

Some implications from her longitudinal study, Werner and Smith (1982) suggested the following. She felt there was a need to better understand the positive effects of the presented variables on “resiliency” and “invulnerability”, to understand the consequences of sibling care taking and the role of grand parenting as a protective factor. Other family factors that needed consideration include the role of alternate caregivers, the study of family size, birth order, and parental age of both the mother and father.

Since the 1950’s with Werner’s longitudinal research on Kauai children, many other researchers began investigating the concept of resilience and its effects on individuals in various situations. Earlier studies focused on the different qualities and characteristics of resilient children such as self-esteem, and autonomy (Luthar, Cicchetti & Becker, 2000).
However, later research began to broaden and include attributes of the individuals, families and social environments. Additionally, there was a shift from focusing on the negative factors of the "at-risk" population to focusing on more protective factors of this population (Cicchetti & Garmezy, 1993).

In the early 80's Harbison (1983) reviewed a number of studies that focused on children from Northern Ireland. This area was referred to as "cauldron of turmoil" due to the continuing violence, inter-communal tensions and ethnic conflict (Harbison). When examining the risk factors, Harbison noted that in 1975 over 30% of the children lived in low income families, one in seven houses were considered statutorily unfit, one third of families experienced serious overcrowding and two-fifths of children lived in homes that had an insufficient number of bedrooms. Harbison’s review also explained that over a quarter of the secondary schools were too small to provide the students with educational choice. Finally, about 75% of students who finished high school and did not further their education were unable to obtain a job. As Harbison has described, these children had experienced significant amounts of risk and vulnerability.

In examining the performance and successes of these youth, for the most part the children from Northern Ireland have been able to succeed despite vulnerability. For example, at the primary level the students from Northern Ireland achieved higher test scores in 12 of 13 areas when compared to all of Ireland; they also scored higher than the mean in reading tests when compared to other regions (Harbison, 1983). At a secondary level these youth achieved above the level of most English regions in educational standards. Further, conflict in the community had little impact on how these youth viewed themselves, and overall the negative aspects of life in Northern Ireland had little impact of the children’s understanding of their social world. Harbison (1983) concluded that problems were there in
the province, yet the children appeared to be coping and adjusting to the situations better than children did in other multi-deprived communities.

As the construct of resilience continued to grow, developmental psychologists began to incorporate the concept of resilience in their research (Cicchetti & Garmezy, 1993). As described by Cicchetti and Garmezy, developmental psychologists believe that understanding normal development is important in understanding the deviations to normal development. That is, in identifying atypical behaviors, researchers must first of all understand what is typical. Furthermore, it was not until the developmental perspective played a more prominent role that the interest in the study of resilience really began to grow (Cicchetti & Garmezy, 1993).

**Resilience**

**Defining Resilience.** Over the past decade resilience has been defined in many ways. The more research that is presented in literature, the more definitions exist. When the notion of resilience first came about, the term “invulnerable” was used in research to define resilience. This implied that children or individuals who were invulnerable were completely resistant to damage in all situations and this was an unchangeable intrinsic factor within an individual (Rutter, 1993). However, resilience is not a clear-cut topic with a construct that is easy to measure. In fact, people who are resilient can express their resilience in various ways. For example, one adolescent may be resilient by personally detaching themselves from a negative situation while the next may be able to show resilience by staying and dealing with the situation.

Based on research over the past three decades, Masten and Reed (2002) define resilience as “a class of phenomena characterized by patterns of positive adaptation in the context of significant adversity or risk” (p. 75). As part of their definition, two judgments are
made. One judgment is that the person is ok or better than ok and two, that there have been experiences that act as a threat to a good outcome. In defining and assessing good outcomes, many researchers define resilience as successfully attaining age-related standards in terms of developmental stages (Masten & Reed, 2002). At each stage of development behaviors can be expressed as positive or negative and the young person is able to promote or impair health as a result (Hunter & Chandler, 1999). Werner (1989, 1993) describes resilience as a balance between the stresses and vulnerabilities and the protective factors in an individual's life. Thus as an individual's stresses increase, so must the protective factors in order to keep a balance in life. Hunter and Chandler (1999) interviewed adolescents to get a better understanding of their definition of resilience. The adolescents from their study described resilience as their sense of invincibility and it meant being insular, disconnected, self-reliant and self-protective with no one to depend on or trust but themselves. To these adolescents' being resilient meant surviving (Chandler & Hunter, 1999).

The construct of resilience includes an individual's active process to bring new experiences, feelings and expectations to influence the way the surrounding environment is interpreted (Egeland, Carlson & Sroufe, 1993). Egeland et al. further define resilience as successfully using both internal and external resources to overcome negative situations. As suggested in Hunter and Chandler (1999), the literature describes a resilient individual as someone who has a healthy sense of self, is more self-efficacious, bold, determined and more able to find meaning in life than youth who are not considered resilient. According to Rutter (1993), having a success in one arena allows for people to feel more positive about themselves and have a greater likelihood of success in other areas later in life. Werner (1989) and Werner and Smith (1982) describe resilient children as having higher levels of autonomy, independence, empathy, task orientation and curiosity. Children are referred to as resilient if
they can overcome impairment in normal development, deficits in self-esteem, depression, delinquency, attachment, personality and sexuality disorders which are part of the long term effects of child maltreatment and abuse (Jew, Green & Kroger, 1999). Resilience has also been defined as “the process of, capacity for or outcome of successful adaptation despite challenging or threatening circumstances” (Masten et al., 1990, p. 426). Kinard (1998) describes three types of resilience, positive outcomes despite high-risk environments, competent functioning when faced with acute or chronic life stresses, or recovery from trauma.

Even though many of the definitions described have similar ideas, they all vary slightly and there are many ways in which resilience is defined. For the purpose of this research, resilience will be referred to as “a dynamic process encompassing positive adaptation within the context of significant adversity” (Luthar et al., 2000, p. 543). Based on this definition there are two conditions. The first condition is that the person is exposed to a significant threat or severe adversity (Luthar et al.). The second condition as described by Luthar et al. is that the person achieves positive adaptation despite the threat of adversity.

There are many different criteria that can determine whether a person is resilient. According to Masten and Reed (2002), examples of criteria used include the presence of social and academic achievement, happiness or life satisfaction, absences of undesirable behavior, and successes at age related standards otherwise known as developmental tasks. Some researchers use the absence of negative outcomes as a criterion for resilience (Galambos & Leadbeater, 2000). Examples include a lack of a criminal record, the lack of mental health issues such as depression and/or anxiety, or the lack of access to community supports. Galambos and Leadbeater (2000) further argue the need for the use of more
positive criteria or outcomes. Other examples include a positive self-esteem, social maturity, positive coping strategies, positive peer networks, and healthy promoting behaviors.

It is important to note that adolescence is both a time of transition and the link between childhood and adulthood (Coleman & Roker, 1998). Additionally, depending on the adolescent's life circumstances, these transitions could have a greater or lesser effect on the young person. Thus the timing of the transition could have a critical effect on the young person.

As already shown above, many studies have also shown gender differences in their findings. For example, Rutter (1979, 1990) describes how boys are more likely than girls to develop emotional/behavioral difficulties when faced with family discord. Further, according to Rutter, males tend to be more vulnerable to a wide range of physical and psychosocial hazards. Being female and having an easy temperament reduces the level of risk and reduces her chances of developing maladaptive patterns (Rutter, 1990). However, girls seem more vulnerable than boys in terms of relational difficulties in that their emotions are more socially or interpersonally related (Call & Mortimer, 2001). Additionally girls tend to be more interpersonally sensitive, more dependent on others for self-image and self-esteem, and they tend to be more reactive than boys to ups and downs. Boys, on the other hand, are more activity and achievement based, and they appear less susceptible to evaluations from parents and peers. Girls tend to internalize problems resulting in depressed moods, and boys tend to externalize problems resulting in acting out behaviourally (Call & Mortimer, 2001; Clark, 1995). For example, as cited in Clark (1995), the Minnesota Adolescent Health Survey found adolescent girls to be more "quietly disturbed" and are more likely to report issues such as sexual and physical abuse, feeling emotional stress, poor body image, self-image, symptoms of disordered eating, and suicidal ideation. The survey also found that boys tend to "act out"
their behavior through delinquent acts, physical risks, unprotected sex, and alcohol and drug use.

Clark (1995) emphasizes the importance of understanding gender differences in an educational setting to assist teachers and school personal in best supporting the youth. Further, Clark suggests the focus should not be just on the youth themselves, but on their surrounding contexts such as family, friends, school and the community.

As children transition through developmental stages, their ability to cope changes as they grow. That is, a child may be seen as resilient during one developmental period, but not necessary during other developmental periods (Kinard, 1998). Additionally, Kinard also suggests that factors that enhance or reduce resilience also change over time. These factors are referred to as “protective factors” and “risk factors”. For example, academics may not be a risk factor for a child in elementary school, but things may change when the child enters high school.

Defining protective and risk factors. In understanding whether a person is resilient, researchers weigh the protective factors and the risk factors of the individual to make the determination. Just because an individual exhibits particular protective factors or lacks certain risk factors, it does not mean they are resilient (Masten et al., 1990). These factors are weighed against each other and are person and issue specific. For instance, extracurricular sports may be a protective factor for one person but not for the next. Likewise, one individual may show a particular risk factor and be greatly affected by it while another person may not find it an issue. As just described, protective and risk factors can have different weights for different people (Werner, 1993). For example, friends may be more important for one person and not as important to another.
According to Masten et al. (1990), protective factors moderate the effects of an individual's vulnerability. Compas et al. (1995) define protective factors as factors that interact with sources of risk to reduce the chance of maladaptive functioning. According to Werner as cited in Clark (1995), protective factors are “individual or environmental safeguards that enhance adolescents’ abilities to resist stressful life events while adapting to the situation and developing competence in dealing with it” (p. 4). Masten and Reed (2002) describe protective factors as qualities of a person or context that enhance positive outcomes under stressful situations. As described above, positive factors vary from one person to the next; however, it is important to note that these factors also change within a person over time (Egeland et al., 1993). That is, as a person grows, these factors are also changing with the developing person. For instance, extracurricular activities may act as a protective factor for a child at the age of 10, but may be replaced by friends at the age of 15. Protective factors do not necessarily vary from one year to the next but more from one developmental stage to the next. Werner (2000) describes various protective factors within four developmental periods, infancy, early childhood, middle childhood, and adolescence through adulthood. Examples of protective factors for an adolescent include more internal locus of control, more positive self-concept, being more responsible and achievement orientated, more empathic and socially perceptive, having higher intelligence, effective communication and problem solving skills (Werner, 2000).

Over the past few decades, researchers have found various factors to be related to resilience. Some of these factors include age, social support, an internal locus of control, competence, positive self-esteem, an easy temperament, social maturity, a need for achievement, positive coping abilities, adaptive family and community variables (Jew et al., 1999). Research outlines three categories of protective factors. First are factors within the
self or individual factors; these include good cognitive abilities, an easy temperament and a positive outlook in life (Masten & Reed, 2002). The second category includes factors within the family such as a close relationship with caregivers, authoritative parenting, a positive family climate with low discord, parents actively involved in child’s life, and socio-economic advantages (Masten & Reed, 2002). The third category is environmental factors or factors within the community. Examples of these include effective schools, involvements in pro-social activities such as sports or clubs, availability of community services and social support. Examples of protective factors include high IQ scores, competent parent figures, and effective schools (Masten et al., 1990). Other protective factors include, peer acceptance, graduating, age appropriate activities, and adaptive mental health (Masten & Reed, 2002).

According to Compas et al. (1995), risk factors are characteristics of a person or their surrounding environment that relate to an increased chance of maladaptive outcomes. Further, risk factors are “individual or environmental hazards that increase youngsters’ vulnerability to negative developmental outcomes” (Werner, 1990, as cited in Clark 1995, p. 3). Examples of risk factors include poverty, low socio-economic status, low maternal education, low birth weight, family instability, emotional or behavioural problems, lower work achievement, and trouble with the law (Masten et al., 1990); trauma, natural disasters, divorce, maltreatment, adolescent pregnancies, and homelessness (Masten & Reed, 2002). For the purpose of research, risk factors are referred to as threats or hazards to an individual’s functioning and development (Masten & Reed, 2002).

As just described, many risk factors are external from the individual’s control. Rutter (1979) found that individuals with only one true risk factor showed similar adaptive functioning as those who had no risk factors. Many individuals can effectively cope with one risk factor at a time, however, if a person has to cope with two risk factors at a time, the
level of risk is fourfold (Rutter, 1979). With four or more risk factors, the level of risk can become ten-fold (Luthar & Cicchetti, 2000). That is, with two stresses, a person is four times at greater risk of having difficulties coping. Thus, the number of risks can increase a person's vulnerability to coping difficulties. This is often referred to as cumulative risk where the risk factors build up and the person's ability to cope with the factors diminishes (Masten et al., 1990). According to Luthar et al. (2000), risk factors do not directly cause negative outcomes, but they are valuable in understanding potential processes that affect outcomes. Early investigations on resilience and risk factors focused only on one risk factor at a time, however individuals rarely have only one risk factor (Masten & Coatsworth, 1998). Children are often faced with many recurring risks. Thus in defining risk criteria, researchers should investigate the degree of risk for each individual, and not assume an individual is at-risk based on one criterion.

As described above, there are different ways of determining whether someone is at-risk and how there are difficulties in formulating level of risk based on one criteria. The following research will identify the level of risk by using a measure of life events. This will not only include life events as a criterion for being at-risk, but it will also put the level of risk on a scale and not just a yes or no diagnosis. In a recent study, Puskar, Tusaie-Mumford, Sereika and Lamb (1999) identified adolescents who are at-risk for depression. In particular, they worked to develop a screening tool for detecting risk factors for depressive symptoms and depression. As part of their research these authors examined the association of life events with adolescent mental and physical health. Eight hundred and forty six youth from grade nine to eleven from four high schools in rural areas of Pennsylvania were included in the study. A Life Events Checklist (developed by Johnson and McCutcheson as cited in Johnson, 1986) was administered to the youth as part of the screening tool. The authors
found that certain demographic variables and life events were identified as possible criterion for determining youth at-risk of depressive symptoms. Additionally, high levels of perceived negative life events were most likely associated with reports of depressive symptomatology. Finally, the results can assist professionals, families and support services in identifying and screening for depressive symptoms.

As described above, both protective factors and risk factors play important roles in understanding resilience. When balancing out risk and protective factors, they are not of equal value, one for one, but each factor has a different value and these values not only change from one person to the next, but also within the same person through time. Additionally, protective and risk factors are derived from different levels of influence, individual factors, family factors and environmental or community factors (Luthar & Cicchetti, 2000). In the context of this research, I will focus on the use of protective factors as independent variables. The reason for this is that when a practitioner applies the findings to real scenarios, it seems it would be easier to increase something positive rather than to remove a risk factor. Additionally, increasing the number of protective factors is linked to the greater likelihood of positive outcomes (Luthar & Cicchetti, 2000).

Factors of study. As described in Rutter (1990), Garmezy outlines three sets of variables that operate as protective variables. The first set includes personality features such as autonomy, self-esteem and a positive social orientation. The second set includes variables surrounding the family such as family cohesion, warmth and parenting styles. The third set of factors is environmental factors, which include availability of external support systems, support from friends and support from school.

Personal Factors. In understanding personal factors, Wayman (2002) defines them as “internal attributes and attitudes that the individual uses to buffer the adverse effects of their
situation” (p. 168). That is, personal factors are factors within the self, which work toward
buffering the negative circumstances. Examples of personal factors include easy
temperament, positive self-esteem, optimism, good cognitive ability, a sense of meaning of
life, a good sense of humor and a good self-regulation of emotions (Masten & Reed 2002).
According to Clark (1995), both boys and girls respond negatively to stress, however girls
seem to invest more in external relationships outside the family and have higher levels of
stress. Moreover, Clark suggests girls tend to turn inward when faced with problems, while
boys tend to act out.

Several studies have noted an unusual link between low self-esteem, depression and
resilience. Kinard (1998) found that many children appear competent in various external
measures but seemed to suffer from low self-esteem and depression. Individual risk factors
in adolescence include difficult temperament; self regulated deficiencies and hereditary
individual beliefs, motivation and attitude about school can affect their academic abilities and
competence.

An individual’s sense of effectiveness to carry out actions has a strong influence on
their behavioral responses to social situations. This factor is known as self-efficacy. Self-
efficacy can be defined as “the process by which people regulate their behavior through
internal standards and self-evaluative reactions to their own behavior” (Bandura, 1986, p.
390). That is, self-efficacy is the belief that one can successfully complete a task and the
learning from that success can be transferred to other tasks. Self-efficacy is also referred to
as an individual’s belief in their ability to control their actions and responses (Erdley, 1996).
In return these beliefs affect a person’s choices and activities (Erdley). According to Bandura
(1986), the concept of efficacy encompasses an organization of cognitive, social and
behavioral sub-skills. Additionally, success is often attained through generating and testing various strategies in diverse circumstances. Perceived efficacy is the judgement of one's ability to organize and execute skills as required for performance (Bandura, 1986). Further, people anticipate outcomes through their judgements of how well they did or performed in a particular situation. Thus, those who judge themselves highly will expect positive outcomes. Additionally, the higher the sense of self-efficacy, the more likely a person will choose appropriate activities. Self-efficacy can influence an individual's choice of tasks, amount of effort on tasks, persistence and achievement (Schunk & Zimmerman, 1996). As individuals learn, they evaluate their self-efficacy through experiences, accomplishments, reactions and observations. When individuals have positive experiences or successes, their sense of self-efficacy strengthens; at times of failure, their self-efficacy weakens. However, once an individual has achieved a strong sense of self-efficacy, the failures they experience have a small effect (Schunk & Zimmerman, 1996).

Self-efficacy judgements vary in level, generality and strength (Bandura, 1986). The stronger the perceived self-efficacy the greater chance a person will select challenging tasks. People often avoid situations that they believe exceed their capabilities, and easily take on tasks they feel confident about (Bandura, 1986). Additionally, the stronger the perceived self-efficacy is, the more persistent their efforts will be. When a person has a stronger sense of self-efficacy he or she will be more focused on the task or situation and less distracted by obstacles. According to Bandura (1986), the attainment of self-efficacy comes from four main sources of information. The first is through performance. Successes in a skill raise the level of efficacy, and failures lower it. Another source that can increase one's perception of self-efficacy comes from watching others perform successfully. The use of verbal persuasion in which people are talked into believing they possess a particular skill will enable them to
achieve what they seek. Finally, understanding one’s own physiological state has an effect on their judgement of capabilities.

As a child develops, many of their efficacy experiences come from the family (Bandura, 1986). That is, parental responsiveness increases cognitive competence and self-efficacy experiences. Through time the child’s social world increasingly assumes an important role. Specifically, siblings, peers, and school play prominent roles in building efficacious experiences. In general, girls view themselves as less efficacious than boys in particular stereotypical intellectual activities (Bandura).

In educational settings, students who are socially aware of their environment gain efficacy information by comparing themselves to the behaviors of others (Schunk & Zimmerman, 1996). According to Hall (2003), career related self-efficacy develops when goals are set and pursued over a period of time. Academic efficacy relates to the ability to manage one’s own learning, master academic subjects, and fulfill academic expectations (Muris, 2001). Information that is obtained vicariously is weaker than information that is based on performance (Schunk & Zimmerman, 1996). The reason is vicarious information can easily be outweighed by failures. Students who predicted themselves as having a strong sense of self-efficacy generally had higher grades and were more likely to declare majors in technical and scientific fields than students with a low sense of self-efficacy (Lent, Brown & Larkin, 1986). Self-efficacy relates to one’s beliefs of success, interests, choosing a goal, working through the goal, and attaining the goal. Many factors contribute to an individual’s sense of efficacy. Examples include perception of ability, amount of effort expended, amount and type of assistance from others, perceived similarities to others and persuader credibility (Schunk & Zimmerman, 1996). Other examples include memories of past similar experiences, observing other peers and teachers, mastering tasks and being aware of their
own level of motivation (Wang, Haertel & Walberg, 1994). According to Wood and Locke (1987), self-efficacy can influence a person's level of performance, task choice effort, persistence, thought patterns, and stress reactions. In general, self-efficacy is hypothesized to influence the choice and direction of achievement behavior (Schunk & Zimmerman, 1996).

In 1986, Lent et al., conducted a study that examined the extent to which self-efficacy can predict academic grades and retention. The study included 105 undergraduate subjects that were enrolled in a career/educational planning course and were contemplating science and engineering careers. Subjects were administered measures of self-efficacy, career indecision, self-esteem, expressed vocational interests, and a range of perceived vocational options in technical/scientific fields. These measures were administered twice, once at the beginning and once at the end of the ten-week planning course. The authors found that perceived self-efficacy was related to academic performance behavior, vocational interests and range of perceived career options. The authors suggest that measures such as self-efficacy can predict academic performance in intellectually homogeneous student groups.

In 2001, Muris developed a brief questionnaire measuring self-efficacy in youth. His measure was based on Bandura's measure of self-efficacy, however he believed that in dealing with affective disorders, emotional self-efficacy would be more important to measure than self-regulatory self-efficacy as used in Bandura's study. Thus Muris's questionnaire was developed to measure three domains, social self-efficacy, academic self-efficacy, and emotional self-efficacy. In his study, 330 children between the ages of 14 to 17 were administered the Self-Efficacy Questionnaire for Children (SEQ-C) and a measure of depression. He also found the internal consistency of the SEQ-C to be satisfactory; .88 overall, .85 for social self-efficacy domain, .88 for academic self-efficacy scale, and .86 for emotional self-efficacy scale. Finally, the SEQ-C was negatively correlated with the measure
of depression. That is, lower SEQ-C scores are associated with higher scores on depression. Muris found girls reported lower levels of emotional self-efficacy than boys and the connection between self-efficacy and depression was stronger for girls than for boys.

Family Factors. The role of the family seems to play a crucial part in the development of a child. More specifically, the role of the parent or guardian is key in resilience research. According to Doll and Lyon (1998), childhood poverty is the most consistent predictor of risk for adult maladjustment. Also, having ineffective parenting or uncaring parenting is the second largest predictor of adult maladjustment. The third factor that predicts poor outcomes are experiences with maltreatment and the fourth factor discussed that predicts poor outcomes as marital conflict. In all of these situations, the parental role is critical in childhood outcomes. It is not to say that all youth who are maladaptive have experienced any or all of these factors, it is just that these factors seem to be the most factors present with youth who are experiencing poor outcomes. Doll and Lyon (1998) also assert that these factors are chronic life conditions that are beyond the control of the children, and are often interconnected, which can create a fourfold of level of risk.

As already discussed many of the risk factors are out of the adolescent’s control. However, some of these factors are also out of the parents’ control (mental health) or are part of a situation that is difficult to control (SES, single parent families). One factor that may be compatible to change is the parents’ level of caring and supervision. In general, good supervision, well-balanced discipline can be protective factors for children from high-risk environments. Although boys and girls are equally exposed to family conflict, mother-daughter conflicts seem to be more pronounced than any other parent-child relationship. According to Masten and Coatsworth (1998), children who are shown warmth, structure, and are expected to achieve by their parents, often are more competent, have better conduct
and higher academic achievement than their peers. This type of parenting is known as authoritative parenting. Masten and Coatsworth also suggest that the main family factors associated with academic competence include the parents’ parenting style and their involvement in the youth’s life.

In 1968, Baumrind thought that the beliefs and values parents have about their children help define the affect, practices and values they use for parenting (Darling & Steinberg, 1993). In particular, she believed “control” is a key feature. From this she devised three different types of parental control; permissive parenting style where the parents are high in warmth and low in controlling, authoritarian parenting style, in which the parent is high in control and low in warmth, and authoritative parenting style where the parent is high in both control and warmth (Darling & Steinberg, 1993; Baumrind, 1995).

In 1983, Maccoby and Martin modified Baumrind’s typology to include a fourth type of parenting style, which is the neglecting or rejecting parenting style where the parent is low in both control and warmth. This was developed based on Baumrind’s later development of a two-dimensional classification of parenting styles (See Figure 1). Baumrind, Maccoby and Martin believed that parenting was defined within two processes; the number and type of demands made by the parent and the contingency of parental reinforcement (Darling & Steinberg, 1993). The two dimensions are responsiveness and demandingness, and it is important to first understand the meanings of these two dimensions.

Darling and Steinberg (1993) define responsiveness as “actions which intentionally foster individuality, self-regulation and self assertion by being attuned, supportive, acquiescent to the child’s special needs and demands” (p. 492). They further described it as the parent’s recognition of the child’s individuality. Two main aspects included in responsiveness are warmth, which is the parents’ emotional expression of love; and
Figure 1. Representation of the four parenting styles based on the two dimensions of warmth/involvement and strictness/supervision.

reciprocity, which refers to the extent the caregivers take into consideration the wishes and feelings of the child (Baumrind, 1995).

Demandingness refers to "the claims parents make on the child to become integrated into the family whole by their maturity, demands, supervision, disciplinary efforts and willingness to confront the child who disobeys" (Darling & Steinberg, 1993, p. 492). Darling and Steinberg further describe demandingness as the parents' willingness to act as a socializing agent. As noted in Darling and Steinberg, Baumrind broke demandingness down into two aspects: restrictiveness and firm control.

A parent who is high in demandingness including restrictiveness and firm control, but is low in responsiveness in both warmth and reciprocity is considered to have an authoritarian type parenting style (Baumrind 1989, 1991a, 1995; Darling & Steinberg, 1993; Maccoby & Martin, 1983; Steinberg, Lamborn, Darling, Mounts & Dornbush, 1994). Parents of this style attempt to shape, control, and evaluate the child's attitudes and behaviors based on a set standard of conduct (Baumrind, 1989). Rules are not discussed ahead of time (Maccoby & Martin, 1983); they are directive and demanding but not responsive (Baumrind...

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Parents of this style are status-oriented and provide a clear set of regulations (Baumrind, 1991a). They expect obedience and orders to be obeyed without reason or explanation (Baumrind, 1991a). They try to shape and control the behaviors and attitudes of their children, they value obedience and respect for authority, and they discourage verbal compromise between them and their children (Maccoby & Martin, 1983). Lamborn et al. (1991) found children from authoritarian homes scored well on measures of obedience and conformity; they do well in school, and are less likely than their peers to engage in deviant behavior. These authors also found that adolescents of this parenting style have a lower sense of self-confidence, self-reliance, and are expected to show high amounts of obedience.

A parent who is high on responsiveness and low on demandingness is considered to have a permissive parenting style (Baumrind 1989, 1991a, 1995; Darling & Steinberg, 1993; Maccoby & Martin, 1983; Steinberg et al., 1994). These parents are nondirective, non-punitive, they communicate less, they are accepting, lenient, they do not require mature behavior and they act in an affirmative way towards the impulses, desires and actions of the children (Baumrind, 1989, 1991a; Darling & Steinberg, 1993). Few demands are made on children of this parenting style, and little supervision and control is regulated over the child’s activities (Baumrind, 1989). Correlations show that these children are more impulsive, aggressive and they lack independence or the ability to take on responsibility (Maccoby & Martin, 1983). These parents allow their children to self-regulate and they avoid conflict, imposing control or restrictions (Baumrind 1991a; Maccoby & Martin, 1983).

Adolescents from this parenting style are highly socially competent, and self-confident (Lamborn et al., 1991). They are relatively disengaged from school, have a greater frequency of deviant behavior, and report greater somatic distress than their peers. Lamborn
et al., also suggests that these adolescents are well adjusted and more oriented towards their peers than individuals from other parenting styles.

Parents who are low in responsiveness and low in demandingness are considered to have a neglectful or rejecting parenting style (Baumrind 1989, 1991a, 1995; Darling & Steinberg, 1993; Maccoby & Martin, 1983; Steinberg et al., 1994). These parents are considered unengaged, nondirective; they are highly coercive, they lack intellectual stimulation, and they do not monitor their children's activities (Baumrind 1989, 1991a). On occasion, these parents actively reject their children or disregard parenting responsibilities altogether (Baumrind, 1991a). Minimizing time spent with, and effort to interact with their children is typical of parents of this style (Maccoby & Martin, 1983). Parents respond to their own needs rather than the needs of their children, and show little interest in the needs, opinions and feelings of their children (Mestapelto, Pulkkinen & Poikkeus, 2001). Children of this parenting style are low on both social responsibility and social assertiveness (Baumrind, 1995). These children make concessions in regards to competence, self-perceptions, misbehavior or psychological distress (Lamborn et al., 1991).

Parents who are high in both responsiveness (both types) and demandingness (only in firm control) are considered to have an authoritative parenting style (Baumrind, 1989, 1991a, 1995; Darling & Steinberg, 1993; Maccoby & Martin, 1983; Steinberg et al., 1994). These parents are child centered (Mestapelto et al., 2001) and act in a direct, issue oriented way (Baumrind, 1989). They have expectations about household chores, but allow for compromises. They expect conformity, they articulate their values clearly, and they emphasize respect for norms (Baumrind, 1989). Baumrind (1989, 1991a) also describes these parents as loving, supportive, and cognitively responsive to their children, but they are not restrictive, intrusive or punitive. These parents strive for assertiveness and encourage their
children to be socially responsible, self-regulated and cooperative (Baumrind, 1991a); and they give reasons and explanations for their decisions (Darling & Steinberg, 1993).

Children of this parenting style are typically socially responsible and socially agentic (Baumrind, 1995). These children are aware of others' needs, they tend to follow rules, are autonomous and active thinkers (Darling & Steinberg, 1993). They are considered better adjusted, competent and confident about their abilities; they do well in school and are less likely than their peers to get into trouble (Lamborn et al., 1991). Children of the authoritative parenting style have a higher self-esteem, an open communication with others, and the ability to recognize their own rights and the rights of others (Maccoby & Martin, 1983).

Various researchers have examined the effect of parenting styles on academic achievement. For instance, Aunola, Stattin, and Nurmi (2000) investigated the extent to which family parenting styles are associated with strategies used by adolescents in achievement contexts. These authors found that parenting styles were associated with both adaptive and maladaptive strategies. For example they found youth from authoritative families applied adaptive task oriented strategies with low levels of failure expectation, task irrelevant behavior and passivity. Youth from neglectful families applied maladaptive task avoidance strategies with high levels of passivity and task-irrelevant behavior. Whereas youth from authoritarian families were also found to use maladaptive strategies, passive behavior, and lack of self-enhancing attributes. Youth from permissive families showed higher levels of self-enhancing attributes than youth from neglectful families. The authors also found that girls reported lower self-enhancing attributes and higher levels of failure expectations than boys. Some limitations of the study as outlined by the authors include the difficulty in determining causality with a cross-sectional study, and only one parent filled in the parent form, which may not reflect the other parents' parenting style.
Other researchers who examined the relationship between parenting style and adolescent school performance found children from authoritative parenting style to have higher grades than those adolescents from authoritarian and permissive parenting style (Dornbusch, Ritter, Leiderman, Roberts & Fraleigh, 1987). These authors also found that adolescents from families with mixed parenting styles such as authoritarian and permissive, fared worse than adolescents from just authoritarian parenting families (Dornbusch et al., 1987). Based on the Dornbusch et al.'s (1987) study, Steinberg, Elmen and Mounts (1989) replicated and expanded it to examine the different components of authoritativeness and to examine these relationships over a longer period of time. They found their results corroborated with the previous research. In particular, these authors found that the overall authoritative parenting style and its components facilitated adolescents’ academic success. In another study, Steinberg, Lamborn, Dornbusch, and Darling (1992) investigated the relationship between authoritative parenting style, parental school involvement and scholastic encouragement. They found the longitudinal data suggest that authoritative parenting style does lead to academic success. They also found that parents from authoritative parenting styles have higher levels of school involvement and more encouragement of academic success.

In 1991, Lamborn et al. compared parenting styles to four different sets of outcomes; psychosocial development, school achievement, internalized distress, and problem behavior. In particular, the authors hypothesized that in all four outcomes, individuals from authoritative parenting styles were expected to score most positively and individuals from neglectful parenting styles were expected to score most negatively. In terms of academic competence and problem behavior the researchers expected individuals from authoritarian families to score more positively than individuals from indulgent or permissive
families. In relation to psychosocial development and internalized distress, individuals from indulgent families were expected to score more positively than individuals from authoritarian families.

Approximately 10,000 students were administered two different questionnaires (Lamborn et al., 1991). The first questionnaire a measure of parenting styles consisted of ten items which rated individuals along two scales, acceptance/involvement, and strictness/supervision. The acceptance/involvement scale measures how much adolescents perceive their parents as loving, responsive and involved (alpha = .72). The strictness/supervision scale measures perceived parental monitoring and supervision (alpha = .76). These scales place youth in one of four groups, authoritative, authoritarian, indulgent and neglectful.

Four sets of outcome variables were examined. Psychosocial development was assessed using the social competence sub-scale of the adolescent Self-Perception Profile; work orientation sub-scale and self-reliance sub-scale of the Greenberger’s Psychosocial Maturity Inventory. Grade point average and academic competence sub-scale of the Adolescent Self-Perception Profile were used to measure school achievement along with an orientation toward school measure, which was developed for the purpose of the research. To assess problem behavior the researchers used reports of drug and alcohol use, school misconduct and delinquency. Internalized stress was measured using the somatic symptoms scale and psychological symptoms scale from the Depression scale of the Center for Epidemiologic Studies.

The authors found results to be consistent along the four sets of outcomes for the authoritative and neglectful groups. As predicted the authors found individuals from the authoritarian group to score well on the measures of obedience and conformity.
Additionally, individuals from the indulgent group scored high on outcome measures of deviant behavior, school misconduct, and somatic distress.

Two important limitations were outlined in this study; firstly the cross-sectional design made it difficult to conclude that it was the parenting practices that caused the outcomes. Secondly, the researchers used self-report data, which only shows the adolescents perception of the parenting practices and may not reflect the true parenting practice. The present research used the parenting style questionnaire as described above.

**Environmental Factors.** Environmental factors are factors outside of the adolescent and the family network. Often environmental factors are considered to be at the macro-level of influence (Luthar & Cicchetti, 2000). According to Wayman (2002), environmental factors are “external influences that provide support and protect against negative factors threatening the resilient person” (p. 168). That is, these are factors outside the individuals control and they assist in the protection against negative outcomes. Examples include having a positive adult role model, support from peers and teachers, involvement in extra curricular activities, effective schools, having good emergency social services, having high levels of public safety, and having good health care availability (Masten & Reed, 2002).

An environmental factor that plays an important role in an adolescent’s life is that of the school (Rutter, 1979). This does not just refer to the scholastic aspect of school, but the school as a social institution as well. Specifically, the youth’s perception of the school environment, or the atmosphere of the school contributes to the overall achievement of the student. According to Doll and Lyon (1998), school may be one of the most protective environments for youth that are “at-risk” or have multiple risk factors. Call and Mortimer (2001) suggest that perceptions of support at school are related to the friendships made in the school setting. According to Masten and Coatsworth (1998), extracurricular activities are
one area of study that has been neglected and requires further investigation. Masten and Coatsworth further explain that some research shows benefits of extracurricular activities in lowering school dropout rates and more positive involvement in school; however, this needs more exploration.

As a child moves into adolescence, more time will be spent with their peers and less time with families (Call & Mortimer, 2001). Wang, Haertal and Walberg (1997b) state that youth in the USA spend almost 40% of their waking time unstructured and uncommitted. This is where adolescents are able to choose with whom they spend their time, how often, and what they do. Thus, this allows for independence of the adolescent. A social support network from peers allows for individuals to gain a sense of being valued, cared for and loved (Wang et al., 1994). Social support from others can also protect an adolescent against stress (Wang et al., 1994). According to Sarason, Levine, Basham and Sarason (1983), social support also assists in positive adjustment and personal development. Sarason et al., further suggests social support relates to the availability of others for us to rely on and for us to know that we are cared for, valued and loved by others. Fergusson and Lynskey (1996) explain that relationship to peers provides a positive source of support that can buffer the effects of family discord. Call and Mortimer (2001) also suggest that support from someone in one domain can help moderate the negative effects from another domain. These authors further suggest that girls’ relationships with friends are based more on intimacy and disclosure whereas boys’ relationships with friends are more activity based. In general, peers have a major influence on adolescent academic performance and educational aspirations. According to Masten and Coatsworth (1998), the one factor that may be a more powerful influence of academic achievement over family is the influence of the peer group.
According to Rutter (1990), having a positive social support network can act as a buffer to mental health issues and psychosocial risk for adolescents. Call and Mortimer (2001) suggest that the greater social support an individual receives or perceives to receive, the better their mental health is and the better they can adjust behaviourally. Fergusson and Lynskey (1996) suggest that when children from high-risk background form attachments to adults outside the immediate family, they appear to be more resilient to the effects of family adversity. Additionally, having a stable relationship with at least one adult, not necessarily a parent is associated with better social adjustment (Rutter, 1979). Rutter also found that only one quarter of the at-risk children with at least one positive relationship showed to have a conduct disorder, whereas three quarters of at-risk children without a positive relationship also showed to have a conduct disorder. Call and Mortimer (2001) suggest involvement in school activities, peers or having a supportive adult outside the family were important to adolescents who were exposed to marital discord.

Research has suggested that social support is a protective factor against adversity (Wolkow & Ferguson, 2001); however, these authors have found methodological issues in the research relying on retrospective accounts. They suggest there could be errors in people's memory or that people recall information based on their current situation. Further, Wolkow and Ferguson argue that resilient children tend to be more active, affectionate, good-natured and they may seek out social support. Thus, it is difficult to prove a causal relationship between social support and resilience. Finally, these authors find it difficult to isolate social support from all other variables. Wolkow and Ferguson conclude by suggesting future research is needed in linking social support and resilience which could lead to the development of community-based strategies.
In educational settings, peers can have a significant effect on adolescents’ perception of academic competence and attitude towards school (Wang et al., 1994). In particular, a peer group’s attitude towards school can be significant in predicting grades, achievement test scores, values of being a good student and perceived competence. Finally, adolescents who have peers that value high achievement tend to spend more time on homework, finish more homework assignments, attend school more regularly and are less tardy than adolescents whose peers do not value high achievement.

In 1983, Sarason et al. developed a measure for social support. These authors believed that social support has two main factors, first that the person believes there are enough people available for him/her to turn to when in need, and secondly the degree of satisfaction of these supports. These authors developed an instrument that quantified these dimensions of perceived ability of social support and satisfaction with social support. Sarason et al. (1983) examined the relationship between social support, locus of control, and cognitive interference in frustrating conditions. These authors found their measure to be highly reliable and they are able to better understand social support with personality indexes of well-being and self-esteem based on the correlations with other measures. They also found that people who score high in social support tend to describe more positive events, have a higher sense of self esteem, and seem to have more of an optimistic view than people who scored low on social support.

In 1987, Sarason, Sarason, Shearin and Pierce developed a brief measure of social support, and tested to see how it compared to their original social support questionnaire. Six of the original 27 items were tested to determine the psychometric properties of the measure. The internal consistency ranged between .90 to .93 for both number of supports
and satisfaction of supports. They concluded that the social support brief measure was psychometrically sound and is an acceptable substitute for the social support questionnaire.

*Issues in Resilience Research.* One concept that is commonly misunderstood is the notion that a person has resiliency (Luthar & Cicchetti, 2000). This implies that resilience is a personal attribute. However, personal attributes are something a person carries with them for life, or a personal trait. Research on the topic of resilience has concluded that a person may be resilient at different points of time but they are not born resilient (Luthar & Cicchetti, 2000). That is, according to Luthar and Cicchetti, children are active agents who can and do affect their own life circumstances.

In reviewing the research on resilience, Luthar and Cicchetti (2000) stress the importance of several specific points. Firstly, these authors stress the importance of examining positive outcomes and not just the negative outcomes. They also stress the importance of looking at areas of strengths and not just the deficits. This becomes helpful when applying the outcomes of the study to real life situations. It seems a lot easier for practitioners to assist in increasing something positive in a youth's life such as support, rather than removing something negative such as low SES. According to Masten and Coatsworth (1998), research on competence provides a base of knowledge and information for programs to aim towards success. Another important feature is for researchers to look at the process of resilience to assist in identifying possible interventions (Luthar & Cicchetti, 2000). It would seem more practical to have results that could be implemented through interventions. In a review, Coleman and Roker (1998) emphasize the importance in studying positive aspects of behavior, adaptive mechanisms and the role of gender in current research. In a review on adolescent research, Galambos and Leadbeater (2000) emphasize the
importance of focusing on positive, pro-social outcomes when examining resilience in high-risk circumstances.

In 1990, Rutter described four mechanisms that may act as predictors in protective processes. That is, if put in place these mechanisms could assist in providing protective results in youth at-risk. The first mechanism described by Rutter is to reduce the impact of the risk on the individual. The second type of mechanism is to reduce the negative chain reactions that come after risk exposure. The third set of mechanism is to promote self-esteem and self-efficacy. Finally the last mechanism is to open up for opportunities. Being aware of these mechanisms can assist practitioners in the treatment and interventions with adolescents. Luthar and Cicchetti (2000) emphasize that it is also important to understand how these mechanisms promote resilient outcomes. Luthar (1993) discusses the idea of “overall” resilience as something that is questionable. That is, it is difficult for researchers to label someone as being resilient in all domains of life when only one or two domains are examined. According to Gordon-Rouse (2001) resilience is a multi-faceted concept that changes over a life span. Since the adversities youth face to be resilient vary, it seems possible that there are different “types” of resilience (Gordon-Rouse). Luthar (1993) suggests that it would be more useful to specify domains when describing resilience. Examples of these domains include academic resilience, social resilience, and emotional resilience. The present research focuses on the educational resilience of adolescents.

**Educational Resilience**

*Definition.* As discussed in the above section, educational resilience is just one domain of resilience. According to Wang, Haertel, Walberg (1995) educational resilience refers to “the heightened likelihood of success in school and in other aspects of life, despite environmental adversities brought about by early traits, conditions and experiences” (p. 5).
Further, educational resilience is a dynamic interaction between an individual and aspects of the environment (Wang, Haertel & Walberg, 1997a; 1997b). This is very similar to the definitions described above on resilience however the focus is on an educational context. Examples of at-risk low achieving students include having academic difficulties, lack of structure, inattentiveness, distractibility, low self-esteem, health problems, low social skills, lack of motivation, low SES, and language difficulties (Lehr & Harris, 1988). Although the focus is on educational resilience, Wang et al. (1995) suggests that it is important to include other contexts surrounding the individual such as factors within the individual, the role of the family and the role of the environment.

Wang et al. (1995) stress that educational resilience should focus on the importance of relationships that characterize the development and function of resilient individuals. Wang et al. (1997a) suggest that enhancing children’s learning, developing their competencies and buffering them against environmental adversities are examples of interventions that foster resilient outcomes in an educational setting. Particularly high-poverty communities such as inner city and rural communities place youth at high-risk of educational failure (Wang, 1996). Lehr and Harris (1988) suggest that rather than focusing on the negative aspects of at-risk youth, professionals need to come to a better understanding of why these youth are not successful. Additionally schools need to provide a learning environment where these at-risk youth can have successful experiences (Lehr & Harris, 1988). In particular, teachers need to be accepting, caring, concerned, empathetic, patient, and flexible and be a good communicator with the students and the parents (Lehr & Harris, 1988). Further the multiple contexts surrounding the individual also need to be examined.
Current Literature. Much of the beginning research on resilience in educational settings focused on the instruction of academics and the curricula of the school (Wang et al., 1995). Examples include curriculum articulation and organization, high expectations of students, classroom engagement, opportunity to respond and cooperative learning (Wang et al., 1995). Other early studies of resilience in an urban school setting include variables that were not alterable such as SES and other demographic variables such as having a single parent household and ethnic background.

More recently, researchers have focused on variables that can be altered (Wang et al., 1995). Examples of this include active participation by the principal in school events, retention of faculty members, valuing high academic achievement, and supporting library activities (Wang et al., 1995). These are all aspect or values that can be implemented onto a person or a person can change for themselves. Overall, the teachers emphasize the importance of student involvement, belonging and reducing the feelings of alienation and disengagement as important aspects of effective urban schools (Wang et al., 1995). According to Wang et al. (1995), few researchers have studied educational risk and protective factors among youth from adverse circumstances. These authors suggest a need to investigate youth that are at risk of failing educationally. They also suggest the importance of examining other contributing variables in young persons’ lives such as the role of the self, the family and the environment. More specifically, Wang et al. (1997a) emphasize that the classroom, home, community and school are all areas that play a key role in fostering educational resilience.

Research suggests that when family members actively participate in students’ learning, the students’ achievement improves, attendance improves, and there is a decrease in dropout rates, delinquency and teen pregnancy (Wang et al., 1995, 1997a). Further,
educationally resilient youth have caring and structured families with high academic, moral
and social expectations, family participation, and at least one good relationship with a parent
or an adult (Wang et al., 1995; 1997b). By providing positive support, promoting a positive
student self-concept, offering active learning, having realistic expectations and reducing
stress teachers can also play an important role in fostering educational resilience (Wang et al.,
1995; 1997b). According to Wang et al. (1995; 1997b), after the role of the family, support
from peers is the second most important factor. The peer group’s attitude towards school is
a major predictor for grades, achievement tests, and perceived competence. Further youth
whose peers value successful achievement tend to spend more time on homework than
those with peers who do not value high achievement. However, Wang et al. (1997b) suggest
that the peer group can also hinder academic success through peer pressure of truancy and
misconduct.

Information from the National Educational Longitudinal Study showed that
educationally resilient students tend to have higher self concepts and educational aspirations,
feel more internally controlled, interact more with parents and have parents who encourage
them to do their best (Wang et al., 1997a). The study also showed resilient students to
perceive their school and class environments as positive learning with appropriate standards
set upon them (Wang et al., 1997a). The resilient students are described as being responsible
and more socially mature; they tend to complete school assignments, are more focused,
value education and draw upon personal strengths (Wang et al., 1997a).

Clark (1995) found that girls tend to perform better in academics than boys in early
years, then their performance declines through the later years. Additionally absenteeism for
girls increases as the girls get older and the transition to junior high is difficult for girls
(Clark). Boys, however, seem to receive lower grades on report cards and are more likely to
repeat grades and/or drop out of school. Boys also seem to have more difficulty adjusting to school (Clark). Clark also suggests that since girls tend to turn their problems inward, educators need to pay close attention to their problems, as it may not be as obvious as boys’ problems.

*Programs Fostering Educational Resilience.* Wang et al. (1997b) describe a program called the Community for Learning Program, which supports inner-city youth and their families in having more successful outcomes. This program was developed by the National Center on Education in the Inner Cities and was designed to foster educational resilience in inner-city communities. The program provides a “powerful instructional program that draws on multiple learning environments and is supported by a comprehensive service delivery system” (Wang et al., 1997b, p. 18). The program utilizes academic accomplishments, school, family, and community resources in assistance to attain program goals (Wang et al., 1997).

The students from the Community for Learning program perceived their teachers as more constructive, held higher levels of aspirations, better academic self-concepts and had clearer understandings of the rules and expectations of the school as compared to other students (Wang et al., 1997b). Students from the Community for Learning program also had a lower dropout rate (19%) compared to other students for the same school (60%). The families of the Community for Learning Program played a more active role in the students learning and school activities.

The Learning City Program was developed by the National Center on Education in the Inner Cities, and is based on research findings on inner city at-risk populations. This program was developed in the mid 1990’s, and is designed to foster educational resilience by connecting the school, family and community together (Wang & Oates, 1995). There was a hope that the program would create a system that fosters educational resilience and
educational success among a diverse population (Wang, 1996). Wang and Oates (1995) noted three major outcomes 1) improved student achievement, 2) patterns of active learning and teaching processes, 3) positive student and staff attitudes towards the school-learning environment. A collaborative process including the school, family, and community were used to enhance student success (Wang, 1996).

Wang and Oates (1995) found that students in the Learning City Program were better able to understand constructive feedback from teachers, had higher levels of academic aspirations, better academic self-concepts, and a clearer understanding of the rules and expectations. Youth from the Learning City Program outperformed at-risk students who are not part of the Learning City Program in math and reading scores (Wang & Oates, 1995). Wang and Oates (1995) also noted that both families and the community had an increase in involvement in school activities and decision-making processes for the youth in the program.

The Hoop of Learning program was designed to foster educational resilience and career development among First Nation Students in the USA and was implemented in 1995 (Waller et al., 2002). The main objective of the program was to offset the youth's feelings of alienation and social isolation and provide a culturally responsive environment (Waller et al., 2002). The program consisted of collaboration between the school, the family and the community to replicate a traditional tribal community. Research on the program found the program to be successful in meeting its goals. Further, the students from the program showed higher rates of retention, lower rates of dropouts and an increase in graduation rates among the first nations population. More specifically, during the three years of research, graduation rates among the students in the Hoop of Learning program were 100% for all years (Waller et al., 2002).
In both of these programs, educators promoted academically resilient outcomes for youth at risk. These programs are also good examples of including all aspects of the youth's life in supporting youth at-risk. Knowing successful programs like these exist add hope that there is more we can do as service providers for these youth at-risk. Before one can look at implementing such programs, it is important to first gain a thorough understanding of the needs of the at-risk youth.

Summary

As shown in the literature review, resilience is a broad term which needs to be narrowed. Resilience can be referred to as succeeding despite being faced with adverse situations. Resilient outcomes occur when there is an increase in protective factors, a decrease in risk factors or both. Understanding protective and risk factors are key components in resilient research. Recent research has focused on understanding and enhancing protective factors for youth at-risk of failure. One reason for this is, it is much easier for practitioners to work to enhance protective factors than it is to remove risk factors. In resilience research it is important to examine factors that can be enhanced in a young person.

Resilient outcomes have been defined in many ways; however, few studies have examined resilience through an educational setting. In general, youth spend more waking time at school than in any other component of their life. Thus, to understand how youth can be successful in school is an important part of resilient research. Education also seems to be a link to other areas of an individual's life, such as social support, self-esteem, and future career successes. Researchers usually choose one or two areas to focus in on when studying resilience. As discussed the main area of focus comes from individual factors, family factors, or environmental factors. Examples of individual factors include locus of control, self-
esteem and academic self-efficacy. Examples of family factors include parenting styles, parental education, and socioeconomic status. Examples of environmental factors include social support, community programs and extra-curricular activities. Very few researchers have examined aspects of the individual, family and environment together in one study. Additionally there have been no known studies that examine parenting style, academic self-efficacy, and social support in predicting English grade achievement among youth at-risk. Thus the following research plans to examine the discussed variables and their relationship to each other in promoting resilient outcome in youth at-risk.

The purpose of this research was to examine resilience in adolescence. Specifically the researcher assessed the relationship pattern of perceived parenting style, academic self-efficacy and social support with English grade achievement. Additionally, Life Events Checklist (Johnson, 1986) was used to determine at-risk youth.

Research Hypothesis 1:
For at-risk students who report their parents as scoring high on parental warmth/involvement and high on parental strictness/supervision, there will be a significant positive correlation with academic self-efficacy.

Research Hypothesis 2:
For at-risk students who report their parents as scoring high on parental warmth/involvement and high on parental strictness/supervision, there will be a significant positive correlation with social support.

Research Hypothesis 3:
For at-risk students who report their parents as scoring high on parental warmth/involvement and high on parental strictness/supervision, there will be a significant positive correlation with English grade achievement.
Research Hypothesis 4:
At-risk males will also score higher than at-risk females on academic self-efficacy.

Research Hypothesis 5:
At-risk females will also score higher than at-risk males on social support.
Method

This chapter outlines how my research was conducted. Specifically, this chapter includes the exact procedures used to complete this study. This involves operationalizing the definitions, stating the hypotheses and research question, describing the measurements and the procedures to follow through with the measurements. The final part of this chapter specifies at how the information was analyzed and the statistical procedures used to do so.

Definitions and Operational Terms

Youth. Refers to any individual between the ages of 14-19.

At-Risk. Refers to a situation or environmental circumstance which can increase a person's chance of a maladaptive outcome. At-risk was measured using a median split on subjects' scores on the Life Events Checklist (Johnson, 1986). Youth who scored above 13 were considered at-risk, and youth who scored 13 or lower were considered not at-risk.

Protective Factors. Protective factors are aspects of a person or situation that enhance positive outcomes under stressful situations (Masten & Reed, 2002). The protective factors examined in this study were parenting style, social support and academic efficacy.

Parenting Style. Refers to the adolescents' report of how they perceived their parents' style of parenting based on two dimensions, parental warmth/involvement and parental strictness/supervision (Lamborn, Mounts, Steinberg & Dornbusch, 1991). These dimensions are based on Baumrind's (1991b) typology of parenting styles. The participants' reports on their parents on the two dimensions placed them in one of four parenting categories, Authoritarian, Authoritative, Permissive, or Indulgent.

Social Support. Refers to individuals' perception of the quantity and quality of support from others when in need. The amount of perceived support and satisfaction of support
received was also measured using Sarason's brief Social Support Questionnaire (Sarason, Sarason, Shearin & Pierce, 1987).

*Academic Self-Efficacy.* Refers to an individual's perception of their ability to master academic requirements. Academic efficacy was measured using the academic efficacy sub-category of Muris's Self-Efficacy Questionnaire for Children (2001).

*English grade achievement.* Refers to actual academic achievement. English grade achievement was measured using a grade percentage of the most recent English course taken.

*Non-mainstream School System.* Alternate or independent school based system where the curriculum is adapted or modified with a lower student-to-teacher ratio.

*Resilient Outcome.* The ability to succeed despite being faced with high levels of risk. For the purpose of this research, resilient outcome was operationalized by at-risk youth achieving an average grade percentage of 70% or higher based on the most recent English course taken during the past year.

**Research Design**

Masten (2001) suggests there are two main approaches to studying resilience. One approach focuses on people and the other approach focuses on variables. This research focuses on the latter. According to Masten, variable-focused approaches “use multivariate statistics to test for linkages among measures of the degree of risk or adversity, outcome, and potential qualities of the individual or environment that may function to compensate for or protect the individual from the negative consequences of risk or adversity” (p. 228). That is, correlations are used to search for relationships between the predictors and the outcomes. Since there is no measure of resilience, researchers break down resilience into specific factors that can produce resilient outcomes.
Participants

Individuals between the ages of 13 and 18 were recruited from two local non-mainstream school systems in the Greater Vancouver area. For one of the schools, an alternate program within the school district, student enrollment was based on learning and behavioral issues from within the mainstream schools. The other school, although considered to be an independent school, most of the students attended as a result of being unsuccessful in the mainstream schools. Approximately 80% of the students from this school experienced learning and behavioral issues and at the time of study were attending this independent school. Participants were recruited through letters distributed during class (see Appendix F). Due to the age of the participants, consent was required from the students and their parents or guardians prior to participation in the study (see Appendix C). The consent form was distributed at the same time as the recruitment letter. From a potential sample size of approximately 300 students, 86 returned completed consent forms, and 80 of those subsequently completed the questionnaires. The other six students were either away at the time the questionnaires were completed or chose not to participate. The questionnaires of three other students were incomplete and omitted from the study, leaving 77 participants in the study.

Sampling Procedures

Volunteer participants were recruited from two independent and alternate based school systems during the months of May, June and July of 2004. The researcher attended each class to address the students as a group. Approximately 5-10 minutes was spent in each class for the researcher to explain the research to the students and hand out the permission forms to be signed (See Appendix B for a detailed explanation of what the researcher said to the students). The researcher also included a reminder in the daily announcements on the
day prior to data collection to remind students they were required to have their consent forms signed before they could participate in the study. Up to three weeks was given for participants to hand in their consent forms before the testing commenced. Prior to data collection, the researcher obtained the grade percentage for the most recent English course completed for each participant who returned a signed consent form. This procedure was done with the help of the school administration. It had been initially proposed that the students’ grades were to be obtained from the teachers as described in Appendix E, however, both schools preferred the researcher go through the school’s administration to obtain the student’s grade percentages. For each participant, the researcher recorded the English course taken along with the percent given in that course on a sticker label. The label was then placed inside a sealed envelope with the students’ first name and last initial on the front of the envelope.

On the day of data collection, the researcher invited all the students with signed consent forms to an empty classroom to complete the questionnaire. The researcher then read out the instructions to the participants (see Appendix D for complete instructions), gave directions on how to complete the questionnaire and answered any questions. The researcher also provided the participants with a list of supports and numbers to contact if further emotional support was needed. Once the participants began completing the questionnaire, the researcher walked around and asked each student their first name, and gave them their corresponding envelopes. As the participants completed their questionnaires and handed them in, the researcher checked to see that the questionnaires were complete and the label of the English course and grade was attached.
Measures

Parenting style. Perceived parenting style was measured using the items from Lamborn et al. (1991) Parenting Scale. This scale consists of 19 items that are based on two dimensions, parental warmth/involvement and parental strictness/supervision. Based on Lamborn’s research, the parental warmth/involvement dimension consisted of 10 items, alpha=.72, mean score=.81, SD=.11. The parental strictness/supervision consisted of 9 items, alpha=.76, mean score=.74, SD=.13 (see Appendix A for an example of the questionnaire with all of the measures used). The authors reported a moderate inter-correlation between the two dimensions r=.34, p<.001.

The items were scored by dividing the response by the number of possibilities in the question. For example, if the item contained three possible responses it would be scored as .33, .67 or 1.0. (See Appendix G for the scoring of this measure). The possible range of the acceptance/involvement dimension is 3.99-10. The possible range of the strictness/supervision dimension is 2.73-9. The scores were then divided by the number of items for each dimension to obtain an average. This procedure was done so both dimensions were of equal weight and the range of possible scores was between 0-1.0 for each dimension.

The scores were then split in half using a median split, and each respondent was placed in one of four parenting style categories. As shown on Figure 1, a person with a high score on both dimensions of parental warmth/involvement and parental strictness/supervision was considered to come from an authoritative parenting style. A high score on parental warmth/involvement and a low score on parental strictness/supervision was considered to come from a permissive parenting style. A person with a low score on parental warmth/involvement and a high score parental strictness/supervision was considered to have an authoritarian parenting style. A score that was low on both
dimensions was classified as an indulgent or neglectful parenting style. Considering the small number in the sample, a median split was most appropriate in that there is no possibility for overlap and it provides for a relative even number of subjects in each of the four categories. A median split also counteracts any extreme outliers that could influence a mean score.

To address hypothesis 1, the two averaged scores for the dimensions were added together to create one parenting style score to reflect the authoritative parenting style. That is, every participant's scores on warmth/acceptance and strictness/supervision were added together. This allowed the researcher to examine parenting style as one variable rather than two. Adding the scores together would only be effective in examining the authoritative parenting style, as the two dimensions are directional. A high score on both dimensions is reflective of authoritative parenting style, a low score on both dimensions is reflective of indulgent parenting style, a high score on one dimension and a low score on the other dimension is reflective of either the authoritarian parenting style or permissive parenting style. The significance for adding the two scores together is it allows the researcher to evaluate the measure as one score of parenting style. This is helpful for answering the first research question and comparing authoritative parenting style to the other measures. Otherwise the researcher would end up with two weaker correlations for the same variable.

*Academic Self-Efficacy.* Academic self-efficacy was measured using Muris (2001) Academic Self-Efficacy subscale of the Self-Efficacy Questionnaire for Children. The total number of items for this sub-scale is 8, and the items are based on a five-point Likert scale ranging from 1 (not at all) to 5 (very well). Cronbach's alpha for Muris's (2001) scale is reported at .88, with a scale mean=23.6 and a standard deviation=5.8, based on a study of 330 youth from secondary schools. The possible ranges of scores are 8-40. The validity of the scale was not reported.
Social Support. Social support was measured using a brief measure of social support (Sarason, Sarason, Shearin & Pierce, 1987). The measure consists of 6 items and each item has two parts. The first part measured the number of supports in a person's life. Respondents were asked to list the names of people they may have relied on in specific situations. The scores for each item ranged from 0-9 and the range for total number of supports was from 0-54. The second part measured the satisfaction of their support. This was measured with a six-point scale ranging from 6 (very satisfied) to 1 (very dissatisfied). The total range of satisfaction of scores varies from 6-36. The reported internal reliabilities for the SSQ6 ranged from .90 to .93 for both number and satisfaction (Sarason et al., 1987). The authors also reported the test re-test reliability to be highly satisfactory. Validity of the scale was not reported.

Life Events. The purpose of the Life Events Checklist was to determine whether youth were at-risk. Life events were measured using a modified version of the Life Events Checklist developed by Johnson and McCutcheon (Johnson, 1986). The Life Events Checklist consists of 46 life events and looks at the number of significant events that occurred over the past year, whether the events are seen as positive or negative and the impact these events have on the person. For the purpose of this research, I only included the number of events that occurred in a person's life. The remaining parts of the checklist (whether the events are seen as positive or negative, and the impact of the events on the person) were excluded from the present research as only the number of events was required to determine participants' level of risk. Any life event; regardless of whether it is seen as positive or negative impacts an individual's level of stress (Gillock & Reyes, 1999). The more life events a person experiences, the higher the level of stress the individual will experience (Gillock & Reyes). Gillock and Reyes also found that higher levels of stress are linked to an
increased risk of school failure. Additionally research has found that having each life event weighed as one point is just as reliable as calculating the impact ratings for each item (Johnson). Thus, a simple count of events was calculated to determine level of risk.

The measure was scored by tallying the number of life events checked off by the participant. The total score ranged from 0-50. The authors only reported descriptive statistics for positive and negative life events. This procedure was not used in the present research. Based on normative data from a general population, the reported test-retest correlation of the positive score was $\tau = .69$ and the mean was $M = 6.88$ with a standard deviation of $SD = 5.74$ (Johnson). The test re-test correlation of the negative score was $\tau = .72$ with a mean of $M = 5.46$ and a standard deviation of $SD = 5.51$ (Johnson). The measure was tested for validity against health and adjustment, and is reported as valid by the researchers. A median split was used to determine the cut-off for at-risk. The medium number for the current research was 13. Thus individuals who scored above 13 were considered at-risk, and individuals who scored 13 or lower were considered to be not at-risk. When compared to a mean score of 12 for a normal population, the cut-off score for risk level seems to be an appropriate number.

*English grade achievement.* English grade achievement was measured using the grade percentage of the most recent English course taken during the past year. If an individual had not taken an English course during the past year, the researcher first used their current English course if they were enrolled in English at the time of data collection. For some students who had not taken English course recently, this meant going back a few years to obtain their English grade. For 5% of the sample I had to go back more than two years to obtain an English grade percentage. This information was obtained through assistance from the school administration.
Demographic Questions. Demographic information was gathered through a series of brief questions about sex, age, grade, current living situation, parental education, ethnic background and extra-curricular activities.

Analysis

Data were analyzed using the 2001 version of SPSS Base 11.0. The demographic information was analyzed using descriptive statistics. Means and standard deviations were also computed for at-risk participants, all participants and the male and female breakdown for each measure. Based on the scores of the students’ perceptions of the Parenting Style questionnaire, respondents were categorized as reporting one of four parenting styles, authoritative parenting style, authoritarian parenting style, permissive parenting style, and neglectful parenting style. This was computed using a median split.

Pearson product-moment correlations were computed to examine the relationships between the variables of parenting style (parental warmth/acceptance, parental strictness/supervision), academic efficacy, life events, social support (social support numbers, social support satisfaction), grade percentage and extra-curricular activities. A correlation matrix was also used to explore male and female relationships of the two dimensions of the parenting styles, academic self-efficacy, social support, grade percentage and extra-curricular activities with the outcome measure of English grade achievement.

To test hypothesis 1, 2 and 3 the raw scores of the two dimensions of parenting style were added together to form one score of parenting style. A correlation matrix was computed for at-risk youth with academic self-efficacy, social support, both numbers and satisfaction, and grade percentage. The cut-off score for at-risk youth was computed using a median split of the life events questionnaire. The median score for the life events questionnaire was 13. For the present study, a total of 36 respondents had a score of 14 or
higher and are in the at-risk category, and 41 respondents scored 13 or lower and are in the not at-risk category. To test hypotheses 4 and 5, one-way analysis of variances (ANOVA) was computed to determine mean differences for at-risk youth. Post hoc Analysis: Gender differences and differences between parenting styles were explored through correlation matrices and one-way analysis of variance for all participants.
Results

For the following chapter all quantitative statistics will be presented including means and standard deviations for the current research. Correlation matrices are presented for all measures and a series of one way analysis of variance (ANOVA) is presented to compare mean differences for gender and risk level.

As shown in Table 1, all of the participants were between the ages of 14-19 ($M=16.6$, $SD=1.16$). It was originally proposed that individuals between the ages of 15-18 were recruited to participate in the study, however, there were nine participants outside that age group (one 14 year old and five 19 year olds) who met the other criteria and chose to participate. The administration at these schools explained that the only reason these students are attending these schools is they will be turning 15 soon or had just turned 19 over the past few months. Forty-two percent of the participants ($N=32$) were male and fifty-eight percent ($N=45$) were female. The participants ranged from Grade 9-12 with an average grade of 10.96 ($SD=.82$). Forty-two percent ($N=32$) reported living with two parents, 36% ($N=28$) reported living with a mother, stepmother or female guardian; 4% of participants ($N=3$) reported living with a father, stepfather or male guardian; 9% of participants ($N=7$) reported living independently, 1% ($N=1$) reported living in a foster/group home and 8% of participants ($N=6$) reported some other living situation. In terms of ethnic background, 73% of participants ($N=56$) indicated they were Caucasian, 6% ($N=5$) were First Nations, 6% ($N=5$) Asian, 6% ($N=5$) Hispanic, and 8% of participants ($N=6$) indicated they were from a different ethnic background. Forty-two percent of respondents ($N=32$) indicated they participated in 3 or more extra-curricular activities, 23% ($N=18$) participated in 2 activities, 17% ($N=13$) in one activity, and 18% of individuals ($N=14$) indicated they participated in no extra-curricular activities. The mean for extracurricular activities is $M=2.75$ ($SD=2.71$). The
reason for the large variance in the standard deviation is there are five outliers of extreme scores of 9 activities or higher (see Table 1 for a complete report of these descriptive statistics).

The range in scores for the Life Events Checklist is 4-34. To categorize participants as at-risk, a median split was computed. The median score for the Life Events Checklist was 13, thus participants who scored 13 or lower were categorized as not at-risk and participants who scored 14 or higher were categorized as being at-risk. As a result, 41 participants were in the not at-risk category and 36 participants were in the at-risk category. The mean of the Life Events Checklist for all of the participants is 13 (SD = 5.3) and the mean for at-risk participants is 17 (SD = 4.1).

Means and standard deviations for at-risk participants as well as the sex breakdown for grade percentage, parenting style, social support, academic self-efficacy, life events and extra-curricular activities are reported in Table 2. Means and standard deviations for all participants on the above measures are reported in Table 3. The means and standard deviations for the parenting style questionnaire measure (Lamborn et al., 1991) and the academic self-efficacy measure (Muris, 2001) were consistent with the descriptive statistics reported by the authors. For all of the subjects, females scored on average 10% more in their English course than males and females reported on average 7 more people they can count on for support in various situations than males. Additionally, on average at-risk youth (M = 3.5, SD = 3.17) reported participating in more extra-curricular activities than did all of the participants (M = 2.75, SD = 2.71). One possible explanation for this is it is common for youth at-risk to be hooked into various activities and support groups as a way of supporting them and helping their adjustment. For all of the participants and the at-risk only group, as
Table 1

Description of Demographic Characteristics of Sample

[Males = 32(41.6%), Females = 45(58.4%)]

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<tr>
<th>Biographical Information</th>
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<th>%</th>
<th>Range</th>
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</tr>
<tr>
<td>Female</td>
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<td>9-12</td>
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<tr>
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Note: f=frequency, %=percent
Table 2


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Note. n=total number of subjects in each group
Table 3


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Note. n=total number of subjects in each group
the number of life events increased so did the reported number of extra-curricular activities $r = .43, p < .01$ and $r = .51, p < .01$ respectively.

Correlation matrices for all of the participants and the at-risk only group on the above measures are provided in Table 4. Correlation matrices for the measures and the male and female breakdown are reported in Table 5. For at-risk youth, the correlation matrices for the measures and male/female breakdown are reported in Table 6. For all participants, the numbers portion of the social support questionnaire showed significant correlations with parental warmth/acceptance $r = .24, p < .05$ indicating that youth who report their parents as warm and accepting also report having more people they can rely on for social support.

Interestingly, for all males, both social support numbers and social support satisfaction were significantly correlated with parental warmth/acceptance $r = .41, p < .05$ and $r = .36, p < .05$ respectively. This means that males who report their parents as being warm and accepting also reported having more people they can rely on for support and are more satisfied with the support. For all participants, there was a significant correlation between strictness/supervision and the numbers portion of the social support scale, $r = .26, p < .05$. This is also true for at-risk youth, $r = .38, p < .05$ This means that youth who report their parents as scoring high on strictness and supervision also report having more people they can rely on for social support. A significant correlation was found between parental strictness/supervision and academic self-efficacy, $r = .26, p < .05$ for all subjects. For the at-risk females, this correlation is the strongest, $r = .67, p < .01$. That is, youth who reported their parents as being strict with high supervision also reported feeling more successful in their academic studies. At-risk females were more likely to report their parents as being strict with high supervision and reported feeling more successful in their academic studies. It is likely that the significant correlation among all subjects was in part due to the high correlation
Table 4
Correlations Between Measures for all Subjects and At-risk Subjects.

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*p<.05. **p<.01. (2 tailed-test)
Table 5

Correlations Between Measures for All Females and Males.

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<td>8. Extra-curricular activities</td>
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*p<.05. **p<.01.
Table 6

Intercorrelations Between Measures for At-Risk Females and Males.

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<th>Variable</th>
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<th>3</th>
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<th>6</th>
<th>7</th>
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<td>.13</td>
<td>.20</td>
<td>-.25</td>
<td>-.14</td>
<td>-.25</td>
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<td>.09</td>
<td>-.17</td>
<td>-.03</td>
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<td>.07</td>
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<td>.05</td>
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*p<.05. **p<.01.
among the female group. Females also showed a significant correlation between academic self-efficacy and the numbers portion of the social support scale \( r = 0.32, p < 0.05 \) for all subjects and \( r = 0.42, p < 0.05 \) for at-risk females, indicating females who reported having a high number of people they relied on for support also report feeling successful in their academic studies.

There was a significant correlation between the parental warmth/acceptance dimension and the parental strictness/supervision dimension of the parenting style questionnaire for all subjects \( r = 0.43, p < 0.01 \), and for at-risk subjects, \( r = 0.43, p < 0.01 \). This was also significant for all females \( r = 0.51, p < 0.01 \) and females at-risk, \( r = 0.49, p < 0.05 \). As discussed, a moderate inter-correlation between the two dimensions of the parenting style questionnaire is reported by the authors of the measure \( r = 0.34, p < 0.001 \).

To test hypothesis 1, 2 and 3, a correlation matrix was computed for at-risk youth. For the purpose of this research 36 subjects were considered at-risk. Additionally as described above the two raw scores for parenting style was added together to create one parenting style score to reflect the authoritative parenting style. This allowed for me to examine parenting style as one variable rather than two. My first hypothesis predicted that for at-risk youth who reported their parents as being authoritative (scoring high on warmth/acceptance and scoring high on strictness/supervision), there would also be a positive correlation with academic self-efficacy. There was a significant correlation between authoritative parenting style and academic self-efficacy \( r = 0.47, p < 0.01 \). This means that for at-risk youth who reported their parents as scoring high on warmth/acceptance and high on strictness/supervision, reflective of the authoritative parenting style, also reported feeling successful in their academic studies.

My second hypothesis predicted that for at-risk youth who reported their parents as being authoritative in their parenting style, there would also be a significant correlation with
social support (both number of support and satisfaction of support). There was a significant
correlation between authoritative parenting style and the number of social supports in at-risk
youth $r = .35, p < .05$. This means that at-risk youth who perceive their parents as coming from
an authoritative parenting style were more likely to report a greater number of supports in
their lives. This hypothesis was not supported with satisfaction of social support in that the
correlation was not significant $r = .12, p > .05$. This means that it did not matter if youth
reported their parents as being authoritative in their parenting style, satisfaction of support
remained the same among all participants.

Hypothesis 3 predicted that for youth who reported their parents as being
authoritative in their parenting style, there would also be a significant correlation with
English grade achievement. This hypothesis was not supported in that the relationship
between two variables is not significant $r = -.23, p > .05$. This means that parenting style had
little to no effect on the relationship with English grade achievement.

Hypothesis 4 predicted that at-risk males would score on average higher than at-risk
females on the academic self-efficacy scale. This hypothesis was not supported in that, at-
risk youth males ($M = 24.54, SD = 6.49$) and females ($M = 24.09, SD = 4.59$) scored slightly
above the mean ($M = 23.00, SD = 5.8$) as reported by the author (Muris 2001). Although males
scored marginally higher than females, when testing with ANOVA’s, the difference was not
statistically significant $F(1,34) = .06, p > .05$

Hypothesis 5 predicted that at-risk females would score higher than at-risk males on
the measure of social support. The hypothesis was supported for the numbers portion of
social support in that, compared to the mean of all at-risk participants for the social support
numbers ($M = 18.97, SD = 8.67$), females ($M = 20.13, SD = 8.41$) reported on average 5 more
people they could rely on for support than males ($M=15.15, SD=8.06$). A one-way analysis of variance was conducted and indicated a significant difference $F(1,34)=4.32, p<.05$.

Satisfaction of social support was not supported by the hypothesis in that, males ($M=33.38, SD=2.75$) scored higher than females ($M=30.96, SD=3.80$). Through conducting ANOVA this difference was significant $F(1,34)=4.08, p<.05$. This means that for at-risk youth, males reported they were more satisfied with their support than females.

Gender differences were explored during post hoc analysis with all of the participants. In looking at the effect of gender differences on the dependent variables, a series of ANOVA's were conducted. All females scored ten percent higher than males ($M=62, SD=16, M=52, SD=20$ respectively) on their English grade in percentage, showing a significant difference between gender and English grade in percentage, $F(1,75)=5.53, p<.05$. This difference however was not significant among at-risk youth $F(1,34)=.02, p>.05$. In looking at just youth who are not at-risk, the mean differences were even larger between males ($M=50, SD=20.49$) and females ($M=67, SD=11.75$) and statistically significant $F(1,39)=11.87, p<.001$. All females ($M=20.82, SD=8.74$) reported on average 7 more people they could rely on for support than males ($M=13.53, SD=7.89$), representing significant mean differences $F(1,75)=14.01, p<.001$. For at-risk youth, females also reported significantly more supports they can rely on than males $F(1,34)=4.31, p<.05$. As described above, there was also an unexpected finding for at-risk youth and satisfaction of social support. That is, at-risk males significantly reported they were more satisfied with their supports than at-risk females $F(1,34)=4.08, p<.05$. There were no significant differences between gender and the remaining dependent variables for all subjects, social support satisfaction $F(1,75)=.016, p>.05$; academic self-efficacy $F(1,75)=1.23, p>.05$; warmth/acceptance $F(1,75)=.099, p>.05$; strictness/supervision $F(1,75)=1.51, p>.05$; life events
E(1,75)=.314, p>.05; and extra-curricular activities E(1,75)=.069, p>.05. Additionally there was no significant mean gender differences for at-risk youth on the remainder of the variables warmth/acceptance E(1,34)=.19, p>.05; strictness/supervision E(1,34)=.55, p>.05; extra-curricular activities E(1,34)=1.33, p>.05; academic self-efficacy E(1,34)=.06, p>.05 and life events E(1,34)=.18, p>.05.

In exploring the differences of parenting style (authoritative parenting style, authoritarian parenting style, permissive parenting style, and indulgent parenting style), a series of ANOVA’s were conducted to look for significant mean differences. Among all subjects there were no significant mean differences between parenting style and the participants English grade in percentage F(3,73)=.20, p>.05; social support numbers F(3,73)=2.16, p>.05; social support satisfaction F(3,73)=1.09, p>.05; academic self-efficacy F(3,73)=2.64, p>.05; life events F(3,73)=2.00, p>.05; and extra-curricular activities F(3,73)=1.25, p>.05. A series of ANOVA’s were computed to explore the mean differences between parenting style and the other dependent variables for at-risk students only. The results indicated a significant difference in the number of life events checked off by the student and the different parenting styles E(3,32)=4.0, p<.05. For at-risk youth there were no significant mean differences between parenting style and the other dependent variables (see Table 7).
Table 7

Descriptive Statistics for One-Way Analysis of Variance for At-Risk Youth.

<table>
<thead>
<tr>
<th>Dependent Measure</th>
<th>Group</th>
<th>N</th>
<th>Mean</th>
<th>Standard Deviation</th>
<th>95% Confidence Interval for Mean</th>
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<td></td>
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<td></td>
<td>Lower Bound</td>
</tr>
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<td>8.67</td>
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<td>Dependent Measure</td>
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<td>Standard Deviation</td>
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Discussion

The results of the present study provide some support for the role of protective factors in at-risk youth. Specifically, the present research demonstrates the role and significance of protective factors in both at-risk and not at-risk youth. However, there is little evidence that these protective factors provide successful outcomes for at-risk youth in an educational setting. The following chapter further explores and discusses the research findings. Each of the three hypotheses is discussed, followed by a general discussion, limitations of the present research and implications for future research.

The results for the first hypothesis showed that for at-risk youth there was a significant correlation between authoritative parenting style (a high score on parental warmth/acceptance and a high score on strictness/supervision) and academic self-efficacy. This means that students who perceive their parents as warm and caring and actively involved in their life also feel successful in their academic studies. Although there are no known studies that have examined these specific variables, Aunola et al. (2000) found that adolescents from authoritative families reported having lower levels of failure expectations and more frequently used self-enhancing attributes. They also tended to have higher levels of self confidence (Maccoby & Martin, 1983). This seems to make sense in that individuals who feel accepted by their parents would also feel good about themselves and their studies.

For the second hypothesis, the present research also showed a significant correlation between authoritative parenting style and the numbers portion of the social support questionnaire. That is, youth who described their parents as having an authoritative parenting style, also felt they had more people they could rely on for support in different situations. Although no known research examined these specific measures, other research confirms these findings in that adolescents' from authoritative families are more socially
competent than youth who are not from authoritative families (Baumrind, 1991b). Additionally, parents who are authoritative in their parenting style strive to raise socially responsible children (Baumrind, 1991b; Darling & Steinberg, 1993). This suggests that individuals who describe their parents as having an authoritative parenting style may also feel more comfortable turning to their parents and others for support when needed.

The present research found no significant relationship between authoritative parenting style and satisfaction of social support. Regardless of the parenting style and whether the youth was considered at-risk, the satisfaction of support was relatively similar. This is interesting in that no matter how many supports youth reported to have, they felt well supported. The total possible range for the social support satisfaction scale is between 6-36, and the average score for at-risk youth was 31.8. This score is slightly higher than the average for all of the subjects. There is no known research that has obtained similar results to the current study, however, Sarason et al. (1983), offers one possible explanation in that the number of supports people feel they need varies from one person to the next. An introvert that tends to keep to him or herself with little supports may feel just as satisfied as an extrovert that needs several supports.

For the third hypothesis, the results indicated no significant relationship between authoritative parenting style and English grade achievement. At-risk youth who came from an authoritative parenting style scored an average English grade percentage of $M=49.7\%$, $SD=22.75$, and youth who were not at-risk from an authoritative parenting style scored an average English grade percentage of $M=64.6\%$, $SD=18.28$. Although there is a difference in the grade percentages, this difference is not significant ($p>.05$). Research on authoritative parenting suggests that authoritative parenting has a direct link to adolescents’ academic success (Steinberg et al., 1989). Additionally, Dornbush et al. (1987) found authoritative
parenting style to be the only parenting style that had a significant positive correlation with student grades.

Interestingly, at-risk youth reported feeling as successful as youth who are not at-risk; however their grade percentage was 15 percent lower than not at-risk youth. That is, actual grades did not seem to have a negative influence on the students' perception of success. According to Bandura, Barbaranelli, Caprara and Pastorelli (2001), children with high perceived academic self-efficacy tend to achieve higher academic standings and have higher educational aspirations. Additionally, Jones and Jolly (2003) stressed that those who are distressed by life events are less likely to see themselves as having control in altering their world, thus less efficacious. One possible explanation for this discrepancy is the difference in the meaning of success. At-risk youth and not at-risk youth may have different interpretations of what success means to them. A person who may have faced many difficulties in life, or had struggled in some way may find a grade percentage of 70% out of reach. For instance, one person may see 60% as a good grade where as another may see 80% as a good grade.

For the fourth hypothesis, the results indicated no significant difference between at-risk males and at-risk females' scores on academic efficacy. In fact, both males and females scored within one point of each other. This means that, in general, males and females felt equally confident in their academic abilities. This seems to contradict relevant research in that Bandura (1986) suggests girls generally view themselves as less efficacious than boys at intellectual activities. One possible reason for this contradiction in evidence is that the present research was completed at two non-mainstream educational settings where the academic curriculum has been altered to adapt to the students' needs. In these settings,
students are encouraged to feel successful in all accomplishments. In a mainstream setting, teachers may not have the flexibility to meet such needs.

The results of the final hypothesis indicated a significant difference between males and females on the numbers portion of social support. As expected, females felt they had more people to turn to than males on social support. This is true for both the at-risk group and the entire sample. Current research supports this idea in that girls tend to invest more in external relationships outside the family than boys (Clark, 1995). One likely explanation for this is females in general talk more about their problems and issues than males. Males are more likely to withhold their feelings from others. This could be in part due to the way boys and girls are socialized as children. Historically, it is more acceptable for females to discuss issues and concerns with others than it is for males. According to Sarason, Sarason, Hacker and Basham (1985), women time after time report greater perceived social support and greater satisfaction of the available support than men. The last part of the findings as suggested by these authors does not support the current research. In fact, the at-risk males felt satisfied with the support given and these results were statistically significant. These results have not been located in the general literature on resilience, and the reason for such finding need to be further explored. It could be that these at-risk males have a barrier up against other supports and they feel they are satisfied with the limited supports because it is on their own terms. To be willing to be supported one must be open to certain vulnerabilities. Many youth, especially at-risk youth, may not be willing to open themselves up to these vulnerabilities and they may feel that they are better utilizing the limited supports they have.
**General Discussion**

In general the sample for the present research was mainly Caucasian, with a slightly higher percentage of females than males. Almost half of the sample reported living with two parents, a third of the youth reported living with a single mother or female guardian and about 10 percent reported living on their own. Almost half of the sample indicated they participated in three or more extra-curricular activities and over 80% of the sample indicated participating in at least one extra-curricular activity. Additionally all of the participants at the time of the research were registered in a non-mainstream educational setting.

In examining gender differences, the current research revealed females scored 10 percent higher than males on grade percentage for all participants. In comparing the differences between at-risk youth and not at-risk youth, these differences are only significant for youth who are not at-risk. The present research suggests that as the level of risk increases for females, their grades decrease. It is interesting how these differences are significant only among females and not among males. According to one study, Luthar (1991) found that individuals of higher intelligence were greater affected by levels of stress in relation to their school grades. That is, a more intelligent person seems to have a greater susceptibility to environmental stressors. In Luthar's study, as the number of environmental stressors increase, school grades decreased. This could explain some of the discrepancy between males and females, however, Luthar found no significant gender differences between levels of stress and school grades.

The current research also found a positive relationship between perceived parental strictness/supervision and academic self-efficacy for all females. This relationship is even stronger for females who are at-risk. This means that there is a relationship between adolescents perception of her parents being strict with a lot of supervision and her feeling
of success toward her academic abilities. Additionally, for females who report their parents as being high in strictness and supervision and report having many life events, they are more likely to feel successful in their academic studies. These results seem to contradict the current literature in that according to Lamborn et al. (1991), youth whose parents are high in strictness and supervision are more likely to do well in school but tend to have lower perceptions of their academic ability. It may be that these students are successful according to their own standards. As described above, some students may have a different meaning of success. This however does not fully explain for the increased sense of academic efficacy in at-risk females whose parents are high in strictness and supervision.

The current findings showed a significant correlation between the amounts of social support reported and perceived parental warmth/acceptance for all subjects. Additionally the present research also showed a significant positive relationship between perceived parental warmth/acceptance and the amount and satisfaction of perceived social support for all males. Thus the significant correlation for all subjects seems to be due to the positive relationship for the males. As perceived parental warmth increases so does their perception of amount of support provided and their satisfaction of the support, for males. This seems to make sense in that adolescents who perceive their parents as warm and accepting may feel more comfortable going to their parents for support and feel more satisfied with the support based on their parents parenting style. This provided the youth with additional supports and greater satisfaction of their supports. One possible explanation as to why this does not hold true for females is that according to Clark (1995) girls tend to invest more energy into relationships outside of the family systems than boys. It could be that girls may be less likely to turn to their parents as a source of support than boys.
The present research also showed significant differences for the number of life events checked off and the different perceived parenting styles for at-risk youth. In particular, at-risk youth who came from authoritarian parenting also reported more life events (M=21.8, SD=6.5), than youth from authoritative parenting (M=15.6, SD=2.5), permissive parenting (M=17.6, SD=3.1) or neglectful parenting (M=16.5, SD=2.9). This means that at-risk youth who reported their parents as coming from an authoritarian parenting style also reported having experienced more life events than at-risk youth from the other parenting styles. There is no known research that has found similar results, however one possible explanation could be youth from authoritarian parenting tend to have a lower sense of self-confidence, self-reliance, and are powerless to obedience (Lamborn et al., 1991). These individuals may have a more negative view on life and thus may report more life events. It may just be that youth from authoritarian parenting reared families have had more life events. Another interesting result was as the number of life events increased, so did the number of reported extra-curricular activities. This seems to contradict resilience research. As previously mentioned, extra-curricular activities are seen as a protective factor for individual's at-risk (Masten & Coatsworth, 1998). As already expressed by Masten and Coatsworth, the study of extra-curricular activities has been neglected and more research on this topic is needed.

The results of the present study provide evidence for the importance of emphasizing protective factors in adolescent's at-risk in an educational setting. That is, authoritative parenting style, academic self-efficacy and the amount of perceived social support demonstrated to be protective factors to at-risk youth. Additionally the current study outlined various gender differences that add support to the existing literature. For instance females tend to seek out more social support from others than males. The results of this
study however, can only be generalized to Canadian youth who attend non-mainstream educational settings in suburban areas. Although these results have shown to be significant, there are many methodological limitations to the present study which need to be addressed.

Limitations

One of the major limitations of the present study is there is no comparison group from a mainstream educational setting. Having a comparison group from a mainstream educational setting would allow researchers and practitioners to better understand why these students are attending a non-mainstream educational program and how these students obtain successful outcomes. It would be interesting to see how the results would be different if they were compared to students from a mainstream educational setting.

The population of the current study is potentially at-risk students to begin with; creating a median split to formulate a comparison group for at-risk may have skewed the data causing less significant results. As described above the average score on the life events measure of all the subjects is 13, and 17 for the at-risk group. If there was a comparison group from a mainstream educational setting, more students may be considered at-risk, thus changing the results.

Another major limitation of the present study is that almost all of the data, including the measure of parenting style, is based on self-report. The only piece of data that was not self-report was the students' grade percentages, which came from school administration. Since most of the information came from the students, all of the results are based on the youth's perception of the variable being measured. Youth can be cautious of what they report; the accuracy of some of the responses may be questionable. On the positive side however, for each subject all of the data comes from one source. Additionally, since the study focused on youths lives, their perception maybe the most important.
All of the measures, aside from the demographic information, came from existing measures that have been used in research previously. The measure of parenting style showed some limitations. Although this measure has been used in other studies, the authors did not report on the validity of the measure and there was a significant inter-correlation between the two dimensions. There does not seem to be one consistently used measure of parenting style. Additionally, to categorize the subjects into the four different parenting styles, a median split was used. This means that youth who scored their parents as being average in their parenting style were still placed into a category. That is, a score from the middle of the dimension would be placed in the same category as a score at the extreme end of the dimension.

The results are based purely on correlations and ANOVA's, individual experiences and reports are only accounted for in grouped data. Additionally, from a potential sample size of over 300, 80 people completed questionnaires. Since the majority of the youth are under 19, parent consent was required in order for participation to take place. Thus, it was difficult for the youth to remember to have their consent form signed. In fact during the time of data collection, I had many youth express to me that they forgot their form at home, or they lost the form.

Implications

The current research has implications for research, theory and practice in both educational and counselling settings. Although the concept of resilience has been around for several years, it is still very difficult to define and measure. There is no measure of resilience, which is one of the main reasons why it is such a broad term. It would be difficult to create a measure that encompasses everything resilience is about. This leads researchers, including myself, to examine one aspect of resilience. The current research only examined a fraction of
what resilience is about and there is much more that still needs to be researched. There is still a need for researchers to come to some agreement on what resilience entails, how it is measured and the results that define resilient outcomes.

Most research on resilience is short term and uses mostly quantitative measures. There is a need for a more qualitative approach or a mix between quantitative and qualitative research. That is, to get the youth’s perspective on what the protective and risk factors are for them would lead research in a new direction. Additionally, there is a greater need for evaluating intervention programs for at-risk youth. As described above Wang and Oates (1995) and Waller et al. (2002) provided evidence for the success in specific educational programs for at-risk youth. It is important to understand what makes these programs successful and how they can be implemented for other populations. According to Clark (1995), school can have a positive or negative effect on adolescents’ development depending on whether the school is promoting positive or negative factors. This shows that the role of the school is strong and it is important for the school to do what it can to promote protective factors, especially for at-risk youth.

Finally, it is difficult to gain a full understanding how various factors affect youths’ lives over a short period of time. Protective and risk factors are not constant. They fluctuate over time. As previously described social support may act as a protective factor for someone during one point in life but not another, it would be interesting to better understand these fluctuations. What causes a protective factor to lose its effectiveness? What strengthens protective factors? These questions can only be answered through more longitudinal studies of specific factors over time.

In terms of the present research, replicating the current research with a few modifications would be recommended. Some of the changes that are recommended would
be to include a comparison group. That is, it is difficult to really understand these youths’ situation if there is no group to compare them to. Another recommendation for change is the measure of parenting style. For the present research, many subjects scored their parents in the middle between two parenting styles, however for the present research; each score was placed into one of four categories. For future research it is recommended that rather than placing parents into one of four categories, to allow parents to have a mix of parenting styles depending on their score. Thus for parents who score in the middle, they are not placed in an extreme category, but are in a category that more reflects their score. Unfortunately at this time there is no known measure that exists that takes into account the middle scores.

Another recommendation would be to re-examine the cut off criteria for success. Being behind in a grade level could also be used as a measure of risk. According to Clark, (1995) being at a lower grade level than expected is a major predictor of all risk behavior. Finally, it is recommended to include other people’s perspective. For instance, it would be interesting to see how the parents would have rated themselves on the parenting style measure.

Additionally a teacher’s perspective of how the adolescent behaves during school and how they get along socially with others would also be important to measure. In general the current research adds to the existing literature on resilience and creates more questions for future direction.
References


1244-1257.


Appendix A: Questionnaire for Participants

Directions
The following booklet contains four questionnaires plus some questions about you. For each of the questionnaires, please read through the directions before answering the questions. Please be sure to answer all questions and do not leave any unanswered. It should take between 30-35 min to answer, take your time and answer each question to the best of your ability. Remember there are no right or wrong answers, the information from these questionnaires are meant to get a better understanding of what is going on for you.

You may have to recall and check off some emotionally distressing events from the past. You will have a chance to debrief the process once all the questionnaires are complete. You are also encouraged to speak with your school counsellor if you have other concerns.

To recognize you for your involvement in the research, each class that participates will have a chance to win free pizza for the class for lunch.

All information will remain anonymous in that there will be no names of other identifying information on the questionnaires. Once you hand in your questionnaire, there is no way of determining whose questionnaire belongs to whom. If you have any questions raise your hand and I will assist you as soon as possible.
Social Support Questionnaire

The following questions ask about people in your environment who provide you with help or support. Each question has two parts. For the first part, list all the people you know, excluding yourself, whom you can count on for help or support in the manner described. Give the persons' initials, their relationship to you (see example). Do not list more than one person next to each of the numbers beneath the question.

For the second part, circle how satisfied you are with the overall support you have.

If you have had no support for a question, check the words "No one," but still rate your level of satisfaction. Do not list more than nine persons per question.

Please answer all the questions as best you can. All your responses will be kept confidential.

EXAMPLE:

Who do you know whom you can trust with information that could get you in trouble?

No one 1) T.N. (brother) 2) L.M. (friend) 3) R.S. (friend)
4) T.N. (father) 5) L.M. (employer) 6) 7) 8) 9)

How satisfied?

6 - very satisfied 5 - fairly satisfied 4 - a little satisfied 3 - a little dissatisfied 2 - fairly dissatisfied 1 - very dissatisfied
1. Whom can you really count on to be dependable when you need help?

No one 1) 4) 7) 10)
2) 5) 8)
3) 6) 9)

2. How satisfied?

<table>
<thead>
<tr>
<th>6 - very satisfied</th>
<th>5 - fairly satisfied</th>
<th>4 - a little satisfied</th>
<th>3 - a little dissatisfied</th>
<th>2 - fairly satisfied</th>
<th>1 - very dissatisfied</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
</tbody>
</table>

3. Whom can you really count on to help you feel more relaxed when you are under pressure or tense?

No one 1) 4) 7) 10)
2) 5) 8) 11)
3) 6) 9)

4. How satisfied?

<table>
<thead>
<tr>
<th>6 - very satisfied</th>
<th>5 - fairly satisfied</th>
<th>4 - a little satisfied</th>
<th>3 - a little dissatisfied</th>
<th>2 - fairly satisfied</th>
<th>1 - very dissatisfied</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
</tbody>
</table>

5. Who accepts you totally, including both your worst and your best points?

No one 1) 4) 7) 10)
2) 5) 8) 11)
3) 6) 9)

6. How satisfied?

<table>
<thead>
<tr>
<th>6 - very satisfied</th>
<th>5 - fairly satisfied</th>
<th>4 - a little satisfied</th>
<th>3 - a little dissatisfied</th>
<th>2 - fairly satisfied</th>
<th>1 - very dissatisfied</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
</tbody>
</table>

7. Whom can you really count on to care about you, regardless of what is happening to you?

No one 1) 4) 7) 10)
2) 5) 8) 11)
3) 6) 9)

8. How satisfied?

<table>
<thead>
<tr>
<th>6 - very satisfied</th>
<th>5 - fairly satisfied</th>
<th>4 - a little satisfied</th>
<th>3 - a little dissatisfied</th>
<th>2 - fairly satisfied</th>
<th>1 - very dissatisfied</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
</tbody>
</table>

9. Whom can you really count on to help you feel better when you are feeling generally down-in-the dumps?

No one 1) 4) 7) 10)
2) 5) 8) 11)
3) 6) 9)

10. How satisfied?

<table>
<thead>
<tr>
<th>6 - very satisfied</th>
<th>5 - fairly satisfied</th>
<th>4 - a little satisfied</th>
<th>3 - a little dissatisfied</th>
<th>2 - fairly satisfied</th>
<th>1 - very dissatisfied</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
</tbody>
</table>

11. Whom can you count on to console you when you are very upset?

No one 1) 4) 7) 10)
2) 5) 8) 11)
3) 6) 9)

12. How satisfied?

<table>
<thead>
<tr>
<th>6 - very satisfied</th>
<th>5 - fairly satisfied</th>
<th>4 - a little satisfied</th>
<th>3 - a little dissatisfied</th>
<th>2 - fairly satisfied</th>
<th>1 - very dissatisfied</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
</tbody>
</table>
Please answer the following questions by circling the number that best fits for how you feel about each statement. Answer each statement only once and do not leave any questions unanswered.

1. How well can you get teachers to help you when you get stuck on schoolwork?
   - 1  2  3  4  5
   - not at all  a little bit  sometimes  fairly well  very well

2. How well can you study when there are other interesting things to do?
   - 1  2  3  4  5
   - not at all  a little bit  sometimes  fairly well  very well

3. How well can you study a chapter for a test?
   - 1  2  3  4  5
   - not at all  a little bit  sometimes  fairly well  very well

4. How well do you succeed in finishing all your homework every day?
   - 1  2  3  4  5
   - not at all  a little bit  sometimes  fairly well  very well

5. How well can you pay attention during every class?
   - 1  2  3  4  5
   - not at all  a little bit  sometimes  fairly well  very well

6. How well do you succeed in passing all subjects?
   - 1  2  3  4  5
   - not at all  a little bit  sometimes  fairly well  very well

7. How well do you succeed in satisfying your parents with your schoolwork?
   - 1  2  3  4  5
   - not at all  a little bit  sometimes  fairly well  very well

8. How well do you succeed in passing a test?
   - 1  2  3  4  5
   - not at all  a little bit  sometimes  fairly well  very well
Instructions: Below is a list of questions. Some of the questions have several statements attached, for each question/statement circle the response that best fits for you. Even if you are unsure of your response do the best you can and answer all questions/statements.

1. What do you think is usually true or usually false about your father (stepfather, male guardian)?
   
   I can count on him to help me out, if I have some kind of problem.
   
   usually true  usually false

   He keeps pushing me to do my best in whatever I do.
   
   usually true  usually false

   He keeps pushing me to think independently.
   
   usually true  usually false

   He helps me with my schoolwork if there is something I don’t understand.
   
   usually true  usually false

   When he wants me to do something, he explains why.
   
   usually true  usually false

2. What do you think is usually true or usually false about your mother (stepmother, female guardian)?

   I can count on her to help me out, if I have some kind of problem.
   
   usually true  usually false

   She keeps pushing me to do my best in whatever I do.
   
   usually true  usually false

   She keeps pushing me to think independently.
   
   usually true  usually false

   She helps me with my schoolwork if there is something I don’t understand.
   
   usually true  usually false

   When she wants me to do something, she explains why.
   
   usually true  usually false

3. When you get a poor grade in school, how often do your parent(s) or guardian(s) encourage you to try harder?

   never  sometimes  usually

4. When you get a good grade in school, how often do your parent(s) or guardian(s) praise you?

   never  sometimes  usually
5. How much do your parent(s) really know who your friends are?
   
   don’t know know a little know a lot

6. How often do these things happen in your family?

   My parent(s) spend time just talking with me.
   
   almost every day a few times a week a few times a month almost never

   My family does something fun together.
   
   almost every day a few times a week a few times a month almost never

7. In a typical week, what is the latest you can stay out on SCHOOL NIGHTS (Monday to Thursday)?

   not allowed out before 8:00 8:00 to 8:59 9:00 to 9:59 10:00 to 10:59
   11:00 or later as late as I want

8. In a typical week, what is the latest you can stay out on a FRIDAY OR SATURDAY NIGHT?

   not allowed out before 9:00 9:00 to 9:59 10:00 to 10:59 11:00 to 11:59
   12:00 to 12:59 1:00 to 1:59 after 2:00 as late as I want

9. My parents know exactly where I am most afternoons after school.
   
   yes no

10. How much do your parents TRY to know…

    Where you go at night?
    
    don’t try try a little try a lot

    What you do with your free time?
    
    don’t try try a little try a lot

    Where you are most afternoons after school?
    
    don’t try try a little try a lot

11. How much do your parents REALLY know…

    Where you go at night?
    
    don’t know know a little know a lot

    What you do with your free time?
    
    don’t know know a little know a lot

    Where you are most afternoons after school?
    
    don’t know know a little know a lot
The Life Events Checklist

Instructions: Below is a list of things that sometimes happen to people.

Put an X in the space by each of the events you have experienced during the past year (12 months). Only respond to those events you have actually experienced during the past year.

At the end of the checklist there is space for you to add events that may not have been listed.

<table>
<thead>
<tr>
<th>Event</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Moving to new home</td>
<td></td>
</tr>
<tr>
<td>2. New brother or sister</td>
<td></td>
</tr>
<tr>
<td>3. Changing to new school</td>
<td></td>
</tr>
<tr>
<td>4. Serious illness or injury of family member</td>
<td></td>
</tr>
<tr>
<td>5. Parents divorced</td>
<td></td>
</tr>
<tr>
<td>6. Increased number of arguments between parents</td>
<td></td>
</tr>
<tr>
<td>7. Mother or Father lost job</td>
<td></td>
</tr>
<tr>
<td>8. Death of a family member</td>
<td></td>
</tr>
<tr>
<td>9. Parents separated</td>
<td></td>
</tr>
<tr>
<td>10. Death of a close friend</td>
<td></td>
</tr>
<tr>
<td>11. Increased absence of parent from the home</td>
<td></td>
</tr>
<tr>
<td>12. Brother or sister leaving home</td>
<td></td>
</tr>
<tr>
<td>13. Serious illness or injury of close friend</td>
<td></td>
</tr>
<tr>
<td>14. Parent getting into trouble with the law</td>
<td></td>
</tr>
<tr>
<td>15. Parent getting a new job</td>
<td></td>
</tr>
<tr>
<td>16. New stepmother or stepfather</td>
<td></td>
</tr>
<tr>
<td>17. Parent going to jail</td>
<td></td>
</tr>
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<td></td>
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</tr>
<tr>
<td>18.</td>
<td>Change in parents’ financial status</td>
</tr>
<tr>
<td>19.</td>
<td>Trouble with brother or sister</td>
</tr>
<tr>
<td>20.</td>
<td>Special recognition for good grades</td>
</tr>
<tr>
<td>21.</td>
<td>Joining a new club</td>
</tr>
<tr>
<td>22.</td>
<td>Losing a close friend</td>
</tr>
<tr>
<td>23.</td>
<td>Decrease in number of arguments <em>with</em> parents</td>
</tr>
<tr>
<td>24.</td>
<td>Male: girlfriend getting pregnant</td>
</tr>
<tr>
<td>25.</td>
<td>Female: getting pregnant</td>
</tr>
<tr>
<td>26.</td>
<td>Losing a job</td>
</tr>
<tr>
<td>27.</td>
<td>Making the honour role</td>
</tr>
<tr>
<td>28.</td>
<td>Getting your own car</td>
</tr>
<tr>
<td>29.</td>
<td>New boyfriend/girlfriend</td>
</tr>
<tr>
<td>30.</td>
<td>Failing a grade</td>
</tr>
<tr>
<td>31.</td>
<td>Increase in number of arguments <em>with</em> parents</td>
</tr>
<tr>
<td>32.</td>
<td>Getting a job of your own</td>
</tr>
<tr>
<td>33.</td>
<td>Getting into trouble with police</td>
</tr>
<tr>
<td>34.</td>
<td>Major personal illness or injury</td>
</tr>
<tr>
<td>35.</td>
<td>Breaking up with boyfriend/girlfriend</td>
</tr>
<tr>
<td>36.</td>
<td>Making up with boyfriend/girlfriend</td>
</tr>
<tr>
<td>37.</td>
<td>Trouble with teacher</td>
</tr>
<tr>
<td>38.</td>
<td>Male: Girlfriend having abortion</td>
</tr>
<tr>
<td>39.</td>
<td>Female: Having abortion</td>
</tr>
<tr>
<td>40.</td>
<td>Failing to make an athletic team</td>
</tr>
<tr>
<td>41.</td>
<td>Being suspended from school</td>
</tr>
</tbody>
</table>
42. Making failing grades on report card
43. Making an athletic team
44. Trouble with classmates
45. Special recognition for athletic performance
46. Getting put in jail

Please list other events that have had an impact on your life.

47. ____________________________
48. ____________________________
49. ____________________________
50. ____________________________
Demographic Information

Please DO NOT place your name anywhere on this questionnaire

Please answer every question as best as possible

Sex (circle one only): Male Female

Age: ______

Grade: ______

Who do you currently live with (Please circle)?

Two parents

Single mother/Step mother/Female guardian

Single father/Step father/Male guardian

Foster home/Group home

Living Independently

Other __________________________

Parental Education – highest level completed (if more than one parent/guardian, indicate both and specify relationship):

For mother/step mother

Some high school

High school

College

University (3 years +)

Post University

Don’t know

For father/step father

Some high school

High school

College

University (3 years +)

Post University

Don’t know
What is your ethnic background?
- Caucasian
- First Nations
- African American
- East Indian
- Asian
- Other ________________

Please circle the extra curricular activities you are currently involved in:

<table>
<thead>
<tr>
<th>Community Sports</th>
<th>Arts</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hockey</td>
<td>Drama</td>
<td>Church</td>
</tr>
<tr>
<td>Lacrosse</td>
<td>Art</td>
<td>Youth Groups</td>
</tr>
<tr>
<td>Soccer</td>
<td>Choir</td>
<td>Volunteering</td>
</tr>
<tr>
<td>Basketball</td>
<td>Band member</td>
<td></td>
</tr>
<tr>
<td>Volleyball</td>
<td>Play musical Instrument</td>
<td></td>
</tr>
<tr>
<td>Baseball/softball</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cheerleading</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dancing</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Activities</strong></td>
<td><strong>Other (Please Specify)</strong></td>
<td></td>
</tr>
<tr>
<td>Swimming</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ice Skating</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Skiing/Snowboarding</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Roller-blading</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Skateboarding</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Appendix B: Introduction to Research

Hello, my name is Danielle and I am a student at UBC. Some of you may have seen me as a youth and family worker, however today I am here for something different. I am working on a research project that will help me and other people in your life to better understand you and the many needs you may have. Specifically I hope to get a better understanding of how young people can be more successful in school.

What I am asking of you is about 40-45 min of your time on this same day in three weeks. At that time you will be asked to respond to a series of brief questionnaires. If you agree to participate in this research you will be asked to sign and have your parent/guardian sign this consent form (raise a copy of the consent form for the students to see) and bring it back with you. I will spend the next couple of weeks collecting the signed consent forms from you. In three weeks time I will give everyone with a signed consent form a questionnaire to fill out. As you are completing the questionnaire, I will walk around with and envelop with your name on it. You will open the envelope and attach the label with the grade to your last English course taken on to your questionnaire. Once you are finished I will scan the questionnaires to make sure they are complete and that the grades are attached.

If you choose to participate, all your information on your questionnaires will remain anonymous. This means that your name will NOT be anywhere on the questionnaire, even with your grades. Once they are all handed in there is no way of connecting the person to the questionnaire. Also the school and anyone from this school will not have access to any of the questionnaires. Your choice to participate or to not participate in the research will have no effect on your relationship to your school. I will be back in a week to collect any signed consent forms. Once you have you consent form signed you can go to the front office and ask to have the consent form placed in an envelop I have left up there, or you can
hold onto it until I return on this same day next week. I would be happy to answer any questions that you may have at this time (once questions are answered, hand out informed consent forms).
Consent:

Your participation in this study is entirely voluntary and you may refuse to participate or withdraw from the study at any time without jeopardy.

Your signature indicates you have received a copy of this consent for your own records.

Your signature indicates that you consent to participate in this study.

Student assent: I assent/ I do not assent (circle one) to participate in this study.

Parent/Guardian's consent: I consent/ I do not consent (circle one) to my child's

__________________________ (name) participation in this study.

__________________________ Date

Adolescent’s Signature

__________________________ Date

Parent/Guardian Signature

__________________________ Date

Parent/Guardian printed name

__________________________ Date

Signature of Witness

Please return this page only
Appendix D: Dialogue for Participants During Data Collection

Hello. In case you forgot who I am, my name is Danielle and last week I gave you consent forms for both you and your parents to sign. If you don’t have your form signed, I ask you go with your teacher to receive further instructions.

If you have handed your consent form in already please raise your hand and I will come by to confirm I received the signed consent form and hand you a questionnaire. I ask that you remove everything from your desk except for a pen.

This is not a test and there is no right or wrong answers. Your responses on the questionnaire will have no effect on any part of your studies or your school. I ask that you complete this on your own without help from others. I also ask that you do not share your answers with others while you are completing the questionnaires.

As you are completing the questionnaire, I will walk around and ask you your name. I will not be recording your name anywhere; I will just hand you a sealed envelope with your name on it. What you will do is open the envelope and remove the label from the envelope. You will then remove the backing from the label and attach it to the back of your questionnaire. You are to then dispose of the envelope with your name on it. The information is your grade percentage for the last English course you completed during the past year (Show a sample). Are there any questions at this time? (Collect the consent forms, make sure it is signed, and give students’ questionnaire).
Appendix E: Dialogue to Teachers Regarding English Grade Percentage

Teachers Form

Hello, Thank you for taking the time to speak with me. My name is Danielle and I am a student at UBC. Currently I am working on a research project for my thesis. The purpose of my thesis is to gain a better understanding of resilience in youth in an educational setting. Specifically I am examining how various protective factors contribute to academic success in adolescence.

On this day in three weeks during the same block, I will be giving youth who have their informed consents signed a series of short questionnaires to fill out. It will take them about 40-45 minutes to complete. To assess academic success I have decided to use grade percentage of the most recent English course completed during the past year. What I am asking of you is a list of the names of the students in your class and the grade percentage of the most recent English course taken. These grades will be transferred to labels and attached to the students’ questionnaires. All remaining information will be shredded.

In ensuring the students are aware the research is not associated with their academic studies, I ask the teachers leave the room during the time the students are completing the questionnaires.

Thank you for your co-operation and support. Your contribution to this research will assist me, as well as other professionals in a better understanding of how to better assist youth.
Thank you for your time.
Sincerely yours,

Richard A. Young
Professor
Counselling Psychology
Principal Investigator

Danielle Kavin
MA Student
Counselling Psychology
Co-Investigator
Appendix G: Scoring of the Parenting Style Questionnaire

Values are indicated in parenthesis:
If questions 1 and 2 are complete, compute the average of the two questions and record the average only.

1. What do you think is usually true or usually false about your father (stepfather, male guardian)?

I can count on him to help me out, if I have some kind of problem.

*usually true (1)*

*usually false (.5)*

He keeps pushing me to do my best in whatever I do.

*usually true (1)*

*usually false (.5)*

He keeps pushing me to think independently.

*usually true (1)*

*usually false (.5)*

He helps me with my schoolwork if there is something I don’t understand.

*usually true (1)*

*usually false (.5)*

When he wants me to do something, he explains why.

*usually true (1)*

*usually false (.5)*

2. What do you think is usually true or usually false about your mother (stepmother, female guardian)?

I can count on her to help me out, if I have some kind of problem.

*usually true (1)*

*usually false (.5)*

She keeps pushing me to do my best in whatever I do.

*usually true (1)*

*usually false (.5)*

She keeps pushing me to think independently.

*usually true (1)*

*usually false (.5)*

She helps me with my schoolwork if there is something I don’t understand.

*usually true (1)*

*usually false (.5)*

When she wants me to do something, she explains why.

*usually true (1)*

*usually false (.5)*

3. When you get a poor grade in school, how often do your parent(s) or guardian(s) encourage you to try harder?

*never (.33)*

*sometimes (.67)*

*usually (1)*

4. When you get a good grade in school, how often do your parent(s) or guardian(s) praise you?

*never (.33)*

*sometimes (.67)*

*usually (1)*
5. How much do your parent(s) really know who your friends are?
   don't know (.33)  know a little (.67)  know a lot (1)

6. How often do these things happen in your family?
   My parent(s) spend time just talking with me.
   almost every day (1)  a few times a week (.75)  a few times a month (.5)  almost never (.25)

   My family does something fun together.
   almost every day(1)  a few times a week (.75)  a few times a month (.5)  almost never (.25)

7. In a typical week, what is the latest you can stay out on SCHOOL NIGHTS (Monday to Thursday)?
   not allowed out(1) before 8:00 (.86) 8:00 to 8:59 (.71)  9:00 to 9:59 (.57)  10:00 to 10:59 (.43)
   11:00 or later (.29)  as late as I want (.14)

8. In a typical week, what is the latest you can stay out on a FRIDAY OR SATURDAY NIGHT?
   not allowed out (1)  before 9:00 (.89)  9:00 to 9:59 (.78)  10:00 to 10:59 (.67)  11:00 to 11:59 (.56)
   12:00 to 12:59 (.44)  1:00 to 1:59 (.33)  after 2:00 (.22)  as late as I want (.11)

9. My parents know exactly where I am most afternoons after school.
   yes (1)  no (.5)

10. How much do your parents TRY to know...
    Where you go at night?
      don't try (.33)  try a little (.67)  try a lot (1)

    What you do with your free time?
      don't try (.33)  try a little (.67)  try a lot (1)

    Where you are most afternoons after school?
      don't try (.33)  try a little (.67)  try a lot (1)

11. How much do your parents REALLY know...

    Where you go at night?
      don't know (.33)  know a little (.67)  know a lot (1)

    What you do with your free time?
      don't know (.33)  know a little (.67)  know a lot (1)

    Where you are most afternoons after school?
      don't know (.33)  know a little (.67)  know a lot (1)

* Questions 1-6 are related to the warmth/acceptance dimension with a range of 3.99-10
  Questions 7-11 are reflective of strictness/supervision dimension and the scores range from 2.73-9