CHANGING CLASSROOM BEHAVIOR:  AN ASSESSMENT OF AN

ELEMENTARY SCHOOL COUNSELLING PROGRAM


by


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# ABSTRACT

An elementary school counselling program in a school district in the lower mainland of British Columbia was assessed. A teacher questionnaire was used to rate the quality and effectiveness of the counselling program. Goal attainment scales, the Piers-Harris Children's Self Concept Scale (PHCSCS), the Pupil Behavior Rating Scale (PBRS), and behavioral observations were used as outcome measure to evaluate the effectiveness of counselling intervention on changing student behavior. Two types of behavioral observations were used: (a) off-task behavior, and (b) clinical observations of peer and teacher interactions. A description of the program and of the counsellor's role was presented.

The program consisted of one counsellor working in three schools with a yearly caseload of 51 students. The counsellor was found to spend time consulting with teachers and parents, and counselling students and parents. Both program goals and the counsellor role description were found to be lacking in clarity.

The program was found to be effective as perceived by the teachers. The classroom behavior of the six students who were receiving services from the counsellor improved as measured by the goal attaiment scales and the behavioral observations. The PBRS and the PHCSCS did not detect a general trend of change in the students' behavior.

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CHAPTER I

THE PROBLEM

## Statement of the Problem

Although historically counselling has proven to be a worthwhile

service offered at the secondary school level, only recently has it been

recognized as having potential in elementary schools.  School

administrators have become interested in developing counselling programs

at the elementary school level to provide services for children who have

been identified as having difficulty adjusting to school.  Among the

factors that have influenced this change in policy are:  (a) an

increasingly complex society, (b) an interest in integrating exceptional

children into the regular class, and (c) a growing concern for the

healthy development of all chidren.

Approximately one half of the school districts in British

Columbia have counselling programs in their elementary schools (Allan

and Ross, 1979).  This fact suggests that there is a trend toward

establishing counselling programs at the elementary level.  Considering

this trend it is important that they are well designed, implemented and

evaluated.

School district A is one of the school districts in the lower

mainland of B.C. which is in the process of establishing a district wide

elementary school counselling program.  For the past two years the

present program has functioned as a pilot project.  A committee was

established in September, 1980 to oversee the implementation of the

pilot program.  This committee conducted a preliminary investigation

which assessed the needs of the school population. One of the recommendations growing out of this investigation was a request for a more thorough evaluation of the effectiveness of the counselling program. In response to their recommendation this study was designed to evaluate the effectiveness of the elementary school counselling program.

**Statement of Research Objectives**

The three objectives of this study are presented below:

1. To develop a program description through observation and interviews.

2. To evaluate the quality of services provided using a questionnaire with teachers who are involved with the counselling program.

3. To determine the counselling outcomes on a small sample of students receiving services from the counsellor using goal attainment scales, rating scales, and observation techniques.

The following research questions are addressed in this study:

1. How is the counselling program organized? What are its goals? Who receives services?

2. What is the definition of the role of the counsellor? How is his/her role distinguished from the role of the school psychologist?

3. Do classroom teachers think the counselling program is effective?

4. Is there a difference in the students' pre-treatment and post-treatment classroom behavior?

5. Is there a difference in the students' pre- and post-treatment self concept scores?

6. Does the teacher perceive a difference in pre- and post-treatment classroom behavior?

7. Do the observer(s) and the teacher agree on the type and amount of change noted in the students' behavior?

The remaining chapters attempt to answer these questions and meet the objectives listed above. To accomplish this, a review of related research, and the design of the study and results of the assessment are presented in the following chapters. The final chapter contains a discussion of the findings and several proposed recommendations.

CHAPTER 2

## REVIEW OF THE LITERATURE

This chapter provides a brief review of three discrete bodies of research literature related to this study. Due to their distinctness, each is presented in its own section. The first is a series of recent surveys of elementary school counselling programs done in British Columbia. This material is presented to provide an overview of the present state of counselling programs in British Columbia. The second is a group of studies that use opinion polling to assess the effectiveness of counselling programs in the lower mainland of British Columbia. This material is presented to provide general background information for the portion of the present study which focuses on assessment. As well it provides a framework for the discussion of results in Chapter 5. The third body of material is a group of studies that use an experimental approach to assess the effectiveness of elementary school counselling programs. These studies are reviewed because of their relevance to the portion of the present study which focuses on measuring student outcomes. Attendant methodological constraints for each of these three kinds of research are discussed and possible solutions are suggested.

### Surveys of Elementary School Counselling Programs

Elementary school counselling programs have been in existance in British Columbia for several years. The Vancouver school system has offered counselling at the elementary school level since the late 1940's (Kitley, 1975). Several other districts in the province have started

elementary school counselling programs since 1960 (Carr, 1978). Surveys of these programs have been completed to gather the following information: (a) perceived need for counselling programs, (b) number of elementary school counsellors, (c) number of schools and students with which a counsellor works, (d) the role of the counsellor, (e) the role of the counsellor as perceived by teachers, and (f) prevalance of elementary school counselling programs throughout urban and nonurban areas of B.C. The results of a number of these surveys are briefly summarized here to provide an overview of the literature concerning elementary school counselling programs in British Columbia.

In 1976, Allan surveyed school superintendents and directors of instruction in British Columbia to determine the perceived need for elementary school counselling programs. He found that they perceived a strong need for elementary school counsellors in their school districts (Allan, 1976). Three years later in 1979, Allan and Ross found that there were 97 full time elementary school counsellors employed in 32 of the 68 school districts in British Columbia. The average counsellor was found to work in six schools which had a total enrollment of 2200 students. The counsellors surveyed by Allan and Ross (1979) felt that the ideal situation would be to work in 2-3 schools containing 500 to 1000 students. Seventy seven percent of the respondents indicated a desire to decrease their case load to more manageable numbers. The recommended counsellor to pupil ratios ranged from 1:450 students to a maximum of 1:750 students (Brown and Hathaway, 1969).

The role of counsellors in British Columbia was surveyed by Allan, Doi, and Reid (1979). These results are summarized in Figure 1.

The time allocations presented in Figure 1 differ somewhat from the perceived role of the counsellor as identified by teachers who were also surveyed. Teachers believed that counsellors were spending 70% of their time in direct contact with children, whereas actually only 39% of counsellor time was spent in direct contact with the children (Allan et. al., 1979). This discrepancy between actual and perceived roles on the part of the teachers probably indicates that the teachers were unaware of the counsellors' dual role, as a consultant to significant adults in the child's environment as well as counsellor for the child him/herself.

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76% direct service
: 39% with children (25% individuals, 14% small groups)
21% with teachers (consulting and in service)
16% with parents (12% individuals, 4% groups)

24% indirect service
: 9% in meeting
8% on testing
7% on report writing

Figure 1. Percent of time spent in direct and indirect

service by B.C. counsellors

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Finally, according to the literature surveyed, it would appear that elementary school counselling is a growing field in urban but not in non-urban British Columbia. Allan found in 1976 that the number of graduates with an M.A., M.Ed., or diploma in counselling was steadily increasing (Allan, 1976). One would expect, therefore, that the overall

number of counselling programs and counselling positions would increase.
While this was true of urban districts it was not true of non-urban
districts. Allan found that 80% of the districts without elementary
school counselling programs were from non-urban areas of the province.
In summary, Allan's research confirms the following: (a) the average
B.C. district administrator recognizes the need for an elementary school
counselling program, (b) the average counsellor works in six schools
containing 2200 students, (c) the average counsellor spends 40% of
his/her time in direct contact with children, 21% in direct contact with
teachers, and 16% in direct contact with parents, (d) teachers are
uninformed of how a counsellor spends his/her time, (e) approximately
half of all school districts in B.C. have the services of elementary
school counsellors, and (f) most of the school districts with programs
are in the urban areas of B.C.

It appears from this research that there is an existing interest
in elementary school counselling programs. Although this has not
translated into actual programs in every district in British Columbia,
the precedent has been set in urban areas, and thus a trend has been
established.

## Assessments of Elementary School Counselling Programs

Three assessments have recently been completed in British
Columbia which are particularly relevant to this study. Each was
completed in different locations, as follows: Vancouver, New
Westminster, and Delta. The Vancouver assessment was completed by
Ketley in 1975. The New Westminster assessment was completed by Rothe

in 1980. The Delta assessment was completed by Auerbach et al. in 1982. Major points from this research in Vancouver, New Westminster, and Delta are summarized below.

Vancouver. The 1975 study by Kitley surveyed teachers, elementary school principals, and area counsellors in the Vancouver school district. The results provided favorable feedback concerning teacher and administrator satisfaction with the services provided by the area counsellors. The counselling program was found to be staffed by 18.5 counsellors who served 36,000 students in 74 elementary schools. The average counsellor worked in three to five schools which contained a combined population of 1900 to 2000 students.

The survey asked teachers and principals to rate their satisfaction with the services offered by the counselling program. The survey also asked them to list the most important services that the counselling program offered. Fewer than 10% of the elementary school personnel reported dissatisfaction with the counsellor services. The elementary school personnel surveyed also developed the following priorities for the services offered by the counselling program: (a) work with parents, (b) individual counselling with children about problems, (c) small group counselling for developing interpersonal relations, and (d) assistance for teachers dealing with children experiencing emotional problems. Emotional problems and "ego needs" were the two most frequently mentioned student needs.

Concern was expressed by teachers and administrators about the overlap of roles between the area counsellor and other school specialists i.e., the school nurse, psychologist, and learning

assistance teacher. Kitley made a number of recommendations concerning the role definition of the counsellors. He stated that the counsellor's role should be more clearly defined. He also recommended that counsellors should be assigned to fewer schools. He suggested that fewer schools, and therefore fewer students would enable the counsellors to work withina more clearly defined role description.

This study was limited in that its sole measurement of program effectiveness was consumer polling which is a measure based upon impression and belief and not on actual program effectiveness. Consumers i.e., teachers and principals in the Vancouver study were asked if they believed the program was as adequate as might be realistically expected (Kitley, 1975, pg. 35).

New Westminster. In 1980 an assessment of the elementary school counselling program in New Westminster was completed by Rothe (Rothe, 1980). The opinions of teachers, parents, students, and school administrators were surveyed to evaluate the effectiveness of the program. A small sample of each group was also interviewed. Four situational studies were completed of counselling sessions. The counselling program consisted of four itinerant counsellors who were assigned to the eight elementary schools in New Westminster. The population for grades 4-7 was 1027 students. No figures were given for grades K-3.

The four situational studies described developmental counselling activities. Developmental counselling refers to counselling and/or teaching sessions designed to develop healthy coping skills in students. This type of counselling is not limited to students already

experiencing problems. Two situational studies were classroom
discussions led by the counsellor. The two topics for discussion were
"adults and decisions" and "problems, alternatives, and consequences".
The other two situations described small group discussions. One group
was composed of the children of parents who were seperated and/or
divorced. The second group was made up of eight fifth grade students
with a variety of common problems. They volunteered issues and problems
for group discussion.

The results indicated that the majority of the students,
teachers, administrators and parents supported the elementary school
counselling program. The results also indicated that the scope and
quality of the services offered to meet the needs of the students was
adequate or better. However, the teachers indicated that if their
teacher-student ratio had been lower they could have provided the same
services as the counsellor. The results also indicated some confusion
concerning the counsellors' role and function. Teachers and
administrators felt that one weakness of the program was the shortage of
time a counsellor could spend in each school due to the itinerant nature
of the program.

Delta. A preliminary report on the elementary school counselling
project was completed in Delta in 1982 by Auerback (Auerbach, et al.,
1982). This report assessed the pilot project that had operated in
Delta for one year and was comprised of one elementary school counsellor
working in five schools.

Forty-four classroom teachers, learning assistance teachers,
administrators, and parents who had worked with the counsellor were

interviewed. These 44 teachers along with 23 additional school personnel who were not directly associated with the counselling program rank ordered 12 possible counselling situations.

One hundred percent of the respondents felt there should be elementary school counsellors. Forty-three percent felt that the counsellor should be assigned to fewer schools. It appeared from the responses that a remedial/preventive type counselling program was desired. Remedial/preventive counselling refers to work with students who are experiencing problems. In this study all active cases involved consulting with the teacher as well as interviewing the student.

This study recommended that the role of the counsellor and the psychologist should be operationally defined so that any overlapping of roles could be eliminated. This study did not attempt to assess the effectiveness of the program although the general response from teachers and administrators was favorable. They did recommend that a study designed to evaluate the effectiveness of the program would be helpful in making policy decisions.

Summary of program assessments. The three assessments that have been discussed utilized similar criteria and therefore may be summarized to provide an overview of lower mainland counselling programs. Common to the three assessments were accounts of student counsellor ratios, role definitions for the counsellors, and opinions of consumers concerning the services offered by the counselling program. Each of these issues is summarized below.

Program size and student counsellor ratios of the three programs varied considerably. The Vancouver program served 36,000 students. The

student counsellor ratio was 1900 to 2000 students per counsellor. The

New Westminster program served 1027 students. The student counsellor

ratio was 250 students per counsellor. The Delta program served

approximately 1500 students. The counsellor student ratio was 1500

students per counsellor.

Role definitions for counselling programs, in turn, were also

seen to vary between the districts with Delta and Vancouver somewhat

parallel and New Westminster quite different. In Delta and Vancouver,

high student counsellor ratios might have engendered confusion

concerning the role of the counsellor. In both of these districts

teachers and administrators were unclear as to the distinction between

the counsellor, school psychologist, and learning assistance teacher.

It may be that when a counsellor works with a large number of students

the services offered are spread thinly and begin to resemble those

services offered by other school specialists who also may have large

caseloads.

Somewhat differently, in New Westminster the counsellors worked

with small numbers of children. The teachers in this district felt that

the services offered by the counsellors resembled the services that

teachers could offer. This may have been due to the fact that the

classroom activities offered in conjunction with the counselling service

resembled teacher led lessons. This in turn, may be due to the fact

that the New Westminster program focused on developmental counselling.

Because of this focus and a small student to counsellor ratio,

counsellors were able to work with students in the classroom to develop

self concept and coping strategies. In Vancouver and Delta, by

contrast, the programs focused on prevention and remedial counselling. These counsellors tended to work with students who were already experiencing problems.

Although the goals and workload of the counsellors differed among the three programs the consumer polling of the teachers and administrators involved showed that, as a group, they tended to support the counselling programs. It is unfortunate that because of the measures used it is impossible to ascertain if their support is an indication of the effectiveness of the programs or whether it simply reflects a desperate need for services similar to those offered by the counselling programs.

By providing descriptions of student counsellor ratios, program goals, role definitions, and consumer opinions, the above studies have documented useful information. The limitations of the studies reflect the inherent difficulty of gathering data to document program effectiveness. Also, they resemble several other studies in the literature (Ellis, 1972; Kaczkowski, 1971; Miller, 1972; New York State Personnel and Guidance Association, 1975; and Van Hoose, 1969) and can thus be cross-correlated with them. It is interesting to note that the issues outlined in these three assessments of programs in British Columbia are similar to the issues identified in counselling programs elsewhere in North America.

## Counsellor Effectiveness

Methodological constraints. The previous section illustrates the fact that descriptive assessments of elementary school counselling

programs are prevalent in the literature. By comparison, studies that attempt to evaluate the effectiveness of counselling programs are few in number.

This discrepancy may exist in part due to several problems inherent in studies that attempt to measure change due to counselling intervention. Designing this type of study first requires that one conceptualize the desired outcome or what constitutes success in a program. This could be referred to as the goal of intervention. Unfortunately many counselling goals are difficult to define operationally for research purposes. Goals such as "wise decision making" or "self-actualization" serve as examples of goals that are difficult to define operationally. Guidance goals are usually concerned with the total development of an individual and they do not emphasize growth in one area (Sanborn, 1976). If this is the case it becomes a difficult task to measure the effectiveness of reaching these goals unless the goals can be defined operationally.

The second step in designing a study to measure the effectiveness of intervention by counselling requires reliable, sensitive, and valid measuring devices. These instruments must reflect the stated goals defined in the first step. Strickland stated that, "Because of the lack of sensitive and reliable indicators, measuring the dynamic aspects of intervention programs is a hopeless task" (Strickland and Morse, 1977, pg. 24).

Several authors have also argued that the requirements of strict experimental control are not appropriate for evaluating counselling or mental health treatment programs. The reasons given for this statement

include: (a) lack of equivalent, practical control groups (Hersen and Barlow, 1976); (b) ethical implications of withholding treatment from those identified as in need (Weinrach, 1976); (c) inappropriateness of randomly assigning subjects to treatment programs (Gurgevich, et al., 1977); and (d) the possibility of factors other than treatment confounding results.

The applicability of group statistics has also been questioned (Hersen and Barlow, 1976). Hersen contends that measuring change in individuals is a more accurate evaluation of treatment programs. This may be true for two reasons: (a) it is difficult to ensure that treatment groups are equivalent ie., exhibit the same amount of disruptive behavior, and (b) group means tend to negate both great improvement in one individual and deterioration in another. Therefore, measuring an individual's improvement may provide a better reflection of the effectiveness of a particular program with a particular individual.

Arbuckle (1968) questions the entire method by which we have attempted to study counsellor success. He rejects the application of the scientific method to systematic analysis of human behavior.

> The first question has to do with research methodology
> itself, which has pretty much tended to initiate the
> time honored scientific practices as they are followed
> in the physical sciences and medicine .... In a
> somewhat curious contradiction, counsellors insist on
> the uniqueness of the human individual, and yet, in
> their research they seem to find no difficulty in
> lumping him as one of many faceless numbers of a group."
> (pg. 432).

Despite the limitations discussed previously a number of studies that examine outcomes have been completed in an attempt to measure the effectiveness of various elementary school counselling programs. A

brief review of these studies follows.

Service delivery models   The comparative effectiveness of two service delivery models, counselling and consulting, was investigated in several studies.   In the consulting model the counsellor treated students by working with significant adults in the child's environment. In the counselling model the counsellor treated students by direct counselling with students and did not interact with the teachers or parents.

Marchant (1972) compared four treatment groups:   (a) counselling only, (b) consulting only (c) combination of counselling and consulting, and (d) no-treatment.   The classroom teachers selected students who were behavior problems. They then completed a Walker Problem Behavior Checklist (WPBC) (Walker, 1970) before intervention was provided.   This procedure was repeated during the post-intervention phase.   Both the consulting and counselling procedures used were those defined by Dinkmeyer (1968).

No differences were found between the counselling only, consulting only, or a combination of consulting and counselling. Behavior change as measured by the WPBC was statistically significant for all three groups.   Marchant noted that the teachers of the students receiving counselling only expressed dissatisfaction at not being more involved in the counselling process.

Another study (Moracco and Kazandkian, 1977) that compared a combination of consulting and counselling, with counselling, consulting, and no-treatment found that the students in the combination of consulting and counselling group improved significantly more than the

other groups. The behavior change was measured by a pre- and post-counselling rating on the Child Behavior Rating Scale (Spivak and Spotts, 1966).

Kanzler (1969) presented the results of a study which also examined the effectiveness of counselling, consulting, and no treatment. Fifth and sixth grade students of low sociometric status who had expressed interest in wanting to "learn how to make friends" were randomly assigned to three treatment groups. The counselling group exceeded the consulting group in gains on a pre- and post-treatment teacher rating of social skills and on a measure of sociometric status. However, none of these results were statistically significant in comparison to the no-treatment group.

It appears from this research on service delivery that there was a significant treatment effect as measured by the various behavior rating scales due at least in part to intervention by a counsellor. These results however do not appear to suggest that one service delivery model was more effective than the other. A combination of counselling and consulting may be the most practical in that it allows the counsellor to keep the teacher informed and at the same time provides direct contact with the student.

Another study by Kern and Hawkins (1977) found that Adlerian group counselling was more effective in improving scores on the Walker Problem Behavior Checklist (WPBC) and on the California Test of Personality (CTP) than an active control group. There were 21 fifth and sixth graders initially identified as disturbed on the WPBC involved in the study.

A state-wide evaluation of elementary school counselling programs in Florida found significant improvement in the self concept of students as measured by the Self Observation Scales. These students had seen the counsellor for at least five contact hours during the school year (Peck and Jackson, 1976).

These five studies tend to suggest that counselling intervention improved students' behavior and self concept. This conclusion should be qualified by the nature of the measures used. Test-retest reliability is extremely important when attempting to measure change over time. Behavior rating scales and self concept scales are not regarded as either very reliable or very sensitive especially when used to measure change. The validity of these measures for assessing counselling programs in general may also be questionable. This problem is related to the issue of defining the goals of intervention which was discussed previously. The behavior scales used as measures of change, rate non-specific behaviors and were originally developed to assess emotional disturbance. It may be that a more accurate evaluation of the counselling intervention would be to measure more specific behaviors that were specifically addressed during the counselling intervention. The use of these types of measures also restricts the counsellor to a group of children labelled as problems. The next section on developmental counselling suggests that this population should not be the only clients of the counsellor.

Developmental counselling. When defining the role of an elementary school counsellor the issue of how much emphasis should be focused on developmental counselling instead of remedial counselling is

often debated (Cottingham, 1973; Dinkmeyer, 1970; Herman, 1974; and Kohlberg, 1975). Proponents of developmental counselling suggest that an elementary school counselling program is needed due to the increased pressures and complexities of a society that has changed drastically in the last twenty years. They suggest that since life has become more complex for children, they are in need of counselling to help them develop coping strategies so that they can avoid crisises.

Kohlberg defines developmental counselling as "the stimulation of cognitive and emotional development in all children through a variety of didactic and experiential learning activities . . . . which contribute to the development of all children rather than those who come labeled as problems" (1975, pg. 250).

The justification for a developmental counselling program relies largely on research that refutes the proposition that children who are labelled as problems become mentally ill adults (Kohlberg, LaCrosse, and Ricks, 1971). Kohlberg (1975) refers to two studies that question the effectiveness of counselling and psychotherapy with children and adolescents (Bergin, 1977; and Vosky et al., 1965; both as cited in Kohlberg, 1975).

Research has been done attempting to assess the impact of developmental counselling on students involved in a developmental program (Eldridge, et al., 1973; Harris, 1976; Howell, 1972; and Zirges, 1981).

These studies were designed to include no-treatment and attention placebo control groups as well as a treatment group. The intervention was taught by either the counsellor or the teacher consulting with the

counsellor to an entire classroom or small group.  Different developmental curriculum materials were used such as:  The Magic Circle, Developing Understanding of Self and Others, or guidance materials developed by the University of Minnesota.  Pre-intervention and post-intervention testing was completed using various measures of self concept, academic achievement, locus of control and personality measures.

These studies tended to find improvement in the treatment groups on the various measures.  Students' self concept improved in all the studies.  In several of these studies the justification for the importance of increased self concept was the fact that improved self concept correlated "moderately and consistently with academic achievement" (Zirges, 1981).

Developmental counselling appears to be a justifiable component of an elementary school counselling program.  However, the argument that it should become the only service provided by the counselling program appears naive.  It may even be more appropriate to train teachers to provide developmental counselling lessons and allow the counsellor to spend more time consulting and counselling.

This research appears to support the conclusion that counselling intervention can change students' behavior and self concept.  The limitations of the measures used in these studies however, suggest that more appropriate measures should be designed and used for assessments of counselling effectiveness.

Goal attainment scaling  A measure that may be more appropriate than behavior rating scales for assessing counsellor effectiveness is

Goal Attainment Scaling (GAS). GAS was designed for evaluating program

effectiveness on the basis of the extent to which individualized client

goals had been achieved at the end of service delivery (Kirisuk and

Sherman, 1968). This type of measure would allow specific goals for

individuals to be conceived and addressed during the intervention

process. GAS were used to measure the effectiveness of a program at a

county mental health center in California (Kiresuk and Lund, 1976).

This measure enabled them to compare different therapists who worked

with different clients to attain different goals. GAS was suggested as

a means of establishing accountability for and providing useful

information to the elementary school counsellor by P. Keelin (1977) and

M. Glicken (1978).

> School systems often produce strictly descriptive and
> numerical reports in order to justify the impact of
> school programs. Evaluations of elementary school
> counselors or programs usually consist of data related
> to the receipt and disbursement of funds, performance of
> certain activities, and the availability of certain
> services. This process does not relate well to the
> needs of particular children from particular schools,
> nor does it provide much useful information for
> counselors. (Keelin, 1977, pg. 89).

GAS provides information concerning the effectiveness of a

counselling program to reach goals designed for individual students.

This measure appears to rectify the problems discussed previously by

allowing goals to be operationalized for the individual.

Although goal attainment scaling appears to be an appropriate

solution for the evaluation of counselling programs it should be noted

that there are questions concerning its reliability and validity. GAS

has become a very popular evaluation technique since its introduction

in 1968. However, the users of GAS have not always followed the procedures developed by Kiresuk and Sherman (1968).

Cyrtynbaum, et al., (1979) in a critical review of studies using GAS found only 5 of 41 studies reviewed that clearly met all three of the basic requirements of the classical GAS model. These three requirements were: (a) randomly assigning subjects to therapists or treatment conditions, (b) goal selectors and post-counselling raters independent of service deliverers, and (c) establishing current levels of functioning at intake. Cyrtynbaum, et al., (1979) concluded:

> If GAS is to be used as an evaluative technique, then cautious compliance with the requirements of the classical model (including training and the recording of baseline data) is the preferred approach. The value of the goal-setting process as an intervention is becoming well-established, and we would support on going research aimed at further clarifying critical and influential parameters. (pg. 36).

In conclusion it appears that the use of GAS is viable as one means of evaluating outcomes. However, the results must be used on a limited basis and should not be the only measure used to evaluate a program.

Behavioral observation. Although behavior rating scales provide a global rating of a child's behavior the behaviors presented in the scale may not represent the specific target behaviors of counselling intervention. Doss (1979) found that using the Devereux Elementary Behavior Rating Scale (DEBRS) as an outcome measure for a counselling program evaluation was a mistake. The teachers involved in the study found that it took too long to complete and that several of the behaviors were not directly observable in the classroom. It was inappropriate as an outcome measure because many of the behaviors on the

scale were beyond the scope of the counsellor's efforts.

The majority of behavior rating scales are completed by the students' teacher and results may be influenced by teacher expectations. Observing specific behaviors may provide a better indication of behavior change over time.

Studying the classroom behavior of students has suggested two areas that relate to academic achievement and classroom adjustment. McKinney et al., (1975) found that a child who was attentive, independent and task oriented in interactions with peers was more likely to succeed academically than the child who was distractable, dependent, and passive in peer group activities. Boomer and King (1980) found that secondary students identified as emotionally disturbed paid attention to the instruction of teachers less frequently than regular students. During seat work both groups paid attention to their work for the same amount of time. Although thisstudy was completed in a junior high setting with older children the results may be applicable in the elementary school. The findings of these two studies suggest that attending behavior and peer interaction behavior may be important factors in predicting academic achievement (McKinney, et al., 1975) and identifying emotionally disturbed students (Boomer and King, 1980). Both GAS and observing behavior appear to be appropriate measures for assessing the effectiveness of elementary school counselling programs. These measures provide a focus on change in the individual. They would also provide for assessment based on specific pre-determined goals.

Summary of literature review. It is evident from the research that has been done that elementary school counselling is a growing

service in British Columbia.  Two recurring issues appear in surveys done on counselling in B.C. as a whole and more specifically in three assessments of lower mainland counselling programs.  These issues relate to the role of the elementary school counsellor and the function of the counselling program.

The problem of how to assess the effectiveness of a counselling program is complicated due to the lack of operationally defined program goals and counselling outcome goals.  Although several studies were presented that reported measurable change due to counsellor intervention these results may be questionable.  Two alternative methods of measuring counselling outcomes, goal attainment scaling and observing behavior, were suggested as possible improvements over more traditional outcome measures.

CHAPTER 3

**METHODOLOGY**

This chapter provides a description of the design, subjects, instruments, procedures, and data analysis used in this study.

**Design**

This study was designed to evaluate two aspects of the elementary school counselling program. The first aspect concerned teachers' opinions of the quality and effectiveness of the services received. This information was collected using survey research procedures. The second aspect concerned several program outcomes which were defined as change in the classroom behavior of students. Student behavior was measured using goal attainment scales, observational techniques, teacher rating scales, and student questionnaires. These data were collected in a pre-counselling post-counselling format. The information for each student is presented as a case study. A program description was also written. Information was collected using interview techniques. A graphic representation of the research design is presented in Figure 2.

The opinions of the counsellor, director of pupil services, and teachers concerning the counselling program were collected using interview, survey, and observational research procedures. These opinions are represented in Figure 2 as the arrows pointing towards the program. The behavioral outcomes of students were measured to assess the functioning of the program. These outcomes are represented by the arrow pointing away from the counselling program. The effectiveness of the program was assessed from two perspectives: change in student

functioning and teacher opinion.  These perspectives represent actual

effectiveness (outcomes) and perceived effectiveness (opinions).

Counsellor and Director of Pupil Services Opinions

```
                                    |
        +---------------------------+---------------------+
        |                           |                     |
Teacher  --+--       Counselling | Program      --+--   Student
Opinion                            |                      Outcomes
        |                                                 |
        +-----------------------------------------------+
```
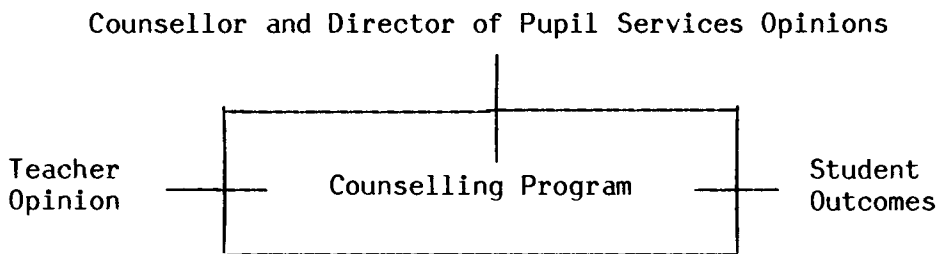
Figure 2.  Summary of Research Design

**Subject Selection**

Selection of teachers.  The teachers who participated in this

study included all of the teachers who had formally referred students to

the counselling program and/or who had consulted with counsellors

concerning a particular student.  The teachers selected were the total

number of teachers at the three schools who had received services

themselves or who had students that had received services from the

counselling program.  The term "teacher" includes classroom teachers

(K-7), learning assistance teachers (LAT), a special class teacher

(social learning program), and a teaching vice principal.  The term

"received services" includes teachers who had completed a referral form

concerning a student and teachers who had consulted with the counsellor

concerning a student without having completed a referral form.

Selection of students.  Seven students were selected from the

counsellor's pool of possible clients in January, 1982.  They were

selected on the basis of the following criteria:  (a) referral made

after December, (b) gender, (c) grade, (d) school attended, and (e) completed referral form. One student was eliminated after he was observed because the reason for referral appeared to be manifested only outside of the classroom.

The remaining six students selected were representative of the pool of clients available in January, 1982. Subject characteristics are summarized in Table 1.

Table 1

Characteristic of Subjects Selected

| Students[a] | School | Grade | Age | Gender | Services |
|-------------|--------|-------|-----|--------|----------|
| H | #1 | 3 | 9 | M | ESL |
| Sa | #1 | 3 | 9 | F | LAT |
| W | #2 | 5 | 10 | M | LAT |
| A | #1 | 7 | 13 | M | LAT |
| D | #1 | 7 | 13 | M | LAT |
| S | #1 | 7 | 12 | F | - |

[a]Student names have been abbreviated to a letter.

The final factor considered in the selection of subjects was that the counsellor had not begun counselling sessions with the student. Counselling was to be delayed until after pre-counselling data were collected.

Consent procedures. This study was approved by the Director of Pupil Services and the District School Board neither of whom required parent consent. Parents had consented to allow their child to be seen by the counsellor.

**Description of Instruments**

The Piers-Harris Children's Self Concept Scale (PHCSCS)

(The Way I Feel About Myself). The PHCSCS was designed by Piers and Harris (1969) as a self-report measure of general self concept for children in grades 3-12. It was intended to be used primarily for research in counselling, classroom or clinical settings.

The PHCSCS was selected for use in this study because it was one of the most reliable measures of self concept available. Self concept was measured because it was expected to improve after counselling intervention. However, the reader must be reminded that measures of this type are not highly regarded as precise tools especially when one is attempting to measure change. A high test re-test reliability co-efficient is important to distinguish between change in self concept and fluctuation in the testing instrument.

The scale contained 80 first-person declarative statements to which the students responds 'yes' or 'no'. These responses generated a general self concept score (raw score out of 80), a percentile rank, and a stanine score. These scores did not have separate age or gender norms as no significant sex or grade differences were found in the norming population.

On the PHCSCS a high score indicates how positive a child feels about himself/herself. Piers and Harris suggested that an increase of ten points in a pre- and post-testing situation can be considered significant (Piers and Harris, 1969). Piers and Harris do not state how they determined that a gain of ten points was a significant gain (Piers and Harris, 1969).

The scale also generated six factor scores. Samples of items from each factor follow: (a) Behavior (18 items) e.g., "I do many bad things", (b) Intellectual and School Status (18 items) e.g., "I can give a good report in front of my class", (c) Physical Appearance and Attributes (12 items) e.g., "I have a pleasant face", (d) Anxiety (12 items) e.g., "I worry a lot", (e) Popularity (12 items) e.g., "My classmates make fun of me", and (f) Happiness and Satisfaction (9 items) e.g., "I am a happy person." The factor scores were simply the number of items responded to in the positive direction divided by the total number of possible items to yield a percent. High percentage scores indicate that a child has positive feelings about himself/herself, a low percentage scores indicate negative feelings.

Reliability. Internal consisting coefficients on the original 95 item PHCSCS were found to range between .78 and .93 using the Kuder Richardson Formula 21 (Piers and Harris, 1969). Test-retest reliability was measured on the 80 item scale by Wing in 1966. He found for both a two-month and four-month interval a test-retest coefficient of .77 for 244 fifth graders (Wing, 1966 as cited in Piers and Harris, 1969).

Validity. Mayer (1965, as cited in Piers and Harris, 1969) compared scores on the PHCSCS with scores on the Lipsitts' Children's

Self Concept Scale (1958) for a sample of 98 students, 12-16 years of age. He obtained a Pearson correlation coefficient of r=.68.

Cox (1966 as cited in Piers and Harris, 1969) using subjects in grades 6 through 9 found correlations between the PHCSCS and teacher and peer ratings of socially effective behavior. (.43 and .31). The strongest concurrent validity correlations were found between the PHCSCS and teacher and peer ratings of superego strength (.40 and .42).

The Pupil Behavior Rating Scale (PBRS). The PBRS was developed by Lambert, Hartsough, and Bower (1979) to provide teacher ratings on an interval scale for eleven attributes of classroom behavior. The scale can be used by teachers of kindergarten to grade 7.

The PBRS was used in this study as a measure of the teacher's perception of improvement in a student's classroom behavior. It was selected because it was designed as an interval scale, it had been found to be reliable in a test-retest format, and was easy for teachers to complete.

To complete the scale teachers rated an attribute using the behavior descriptors and the numerical values provided (see Appendix A for example of rating scale). The raw score generated a percentile rank and standard score. The higher the score or percentile rank the more handicapped the student was rated by his/her teacher. A score above the 90th percentile placed a student in the "learning handicapped" range. Lambert defines a student with a learning handicap as one needing special placement due to behaviorial problems. Lambert provides no additional explanation for selectig scores of over 90% for defining a student as "learning handicapped".

The scale also generated three factor scores: (a) Classroom Adaptation, (b) Interpersonal Behavior, and (c) Intrapersonal Behavior. The classroom adaptation factor measured the degree to which the childs' behavior enabled him or her to learn successfully in the classroom. The interpersonal behavior factor measured the degree to which the child appropriately interacted with peers. Intrapersonal behavior assessed psychological factors such as being unhappy, having to be coaxed to work with others, or getting upset or sick when faced with a difficult situation. These three factors generated a raw score, percentile rank, and standard score.

Reliability. The authors reported inter-rater reliability coefficients for the PBRS that ranged from .74 to .91. Stability coefficients for the PBRS on a four month interval ranged from .71 to .83.

Validity. A study by Lambert (1963, as cited in Lambert, et al., 1979) found that the screening procedure published in 1963 of which the PBRS is a revised edition, was valid for predicting independently derived clinical assessments of school adjustment.

**Observational Data**

Off-task behavior. The six students' off-task behavior was measured during eight ten minute segments before counselling intervention had begun and was repeated after counselling intervention was completed. Off-task behavior was collected as a measure of change of a quantifiable, student behavior. This measure was especially important for three of the six students because their teachers were

concerned about the amount of time spent off-task. This measure enabled a comparison to be made between the students' actual time off-task as measured by the observer and the teacher's perception of time spent off-task.

The ten minute intervals were scheduled on different weekdays at different times throughout each two week period. This was done to allow for a sampling of behavior from different days and different time periods. The off-task behavior was recorded during time periods when seat work was being performed. Off-task behavior was defined as any behavior not directly related to the completion of the seat work task. Three students were observed by two observers who recorded off-task behavior for four 10-minute periods for each student. An inter-rater reliability coefficient was calculated using these data. The data were presented as a percent of time spent off-task during the total time observed, both during the pre-counselling data collection phase and the post-counselling phase. The reduction in time spent off-task was calculated as the difference between the pre- and post-percent of time off-task, divided by the percent of time spent off-task during the pre-counselling data collection phase. This was calculated using the following formula:

percent of improvement = $\dfrac{\text{(\% off-task during pre-counselling)} - \text{(\% off-task during post-counselling)}}{\text{\% off-task during pre-counselling phase}}$

Clinical observations. Each student was observed for 80 minutes at eight different times during the pre-counselling and post-counselling data collection phases. Data collected during each ten minute interval

were recorded as a minute by minute description of the students' activities. As these data were collected observer judgements were made for one behavior. The judgement made concerned the appropriateness or inappropriateness of the students' interactions with the teacher and classmates within the context of the classroom environment.

Each students' pre-counselling and post-counselling descriptive data were summarized in a paragraph that characterized the student in each phase. These two paragraphs were then used to evaluate a change in the students' classroom behavior. These data portray the classroom behavior of students before and after counselling intervention.

## Goal Attainment Scaling (GAS)

GAS was selected as a measure in this study due to the need to evaluate individuals on different goals which could not be measured by more conventional means. The procedures used to establish client goals and rate them at the end of the counselling intervention differed somewhat from the original GAS procedures developed by Kerisuk and Sherman (1968) and discussed in Chapter 2. Keelin (1977) suggested a method of GAS applicable for elementary school counsellors which was used to establish scales for the six students involved in this study.

The researcher worked in collaboration with the classroom teacher and the counsellor to devise a five point scale for each goal identified by the teacher (see Appendix B for examples of GAS). The indicators describing each point were based on the student's current functioning, expected improvement, and measurability. The number of scales for each student ranged from two to five. When the counselling intervention was

completed the teachers used the scales to rate the students' goal attainment. An example of one of the GAS used appears in Figure 3.

-2  W finishes his classroom assignments on time one day per week.
-1  W finishes his classroom assignments on time two days per week.
 0  W finishes his classroom assignments on time three days per week.
+1  W finishes his classroom assignments on time four days per week.
+2  W finishes his classroom assignments on time five days per week.

Figure 3.  Example of goal attainment scale

Other scales were concerned with frequency of teacher assistance, frequency of attention sought in negative ways, improvement of composition organization, frequency of homework assignments being handed in on time, frequency of student bringing stuffed animal to school, and frequency of complaints about student's teasing.

Reliability. The reliability of GAS has been examined in several studies. Three types of reliability has been studied: rater stability, inter-rater agreement at the same point in time, and inter-rater stability at different points in time.

The rater stability coefficients of the GAS were reported by Garwick (1974a as cited in Cytrynbaum et al., 1979) for a 3 week and 2 month interval $r=.70$ and for a 2 month and 6 month interval $r=.47$.

A number of studies cited in Cytrynbaum et al. (1979) reported inter-rater agreement coefficients ranging from $r=.51$ to $r=.95$. These coefficients were obtained by either correlating separate goal scales or correlating separate GAS scores obtained by different raters at the same point in time.

Cytrynbaum sited 11 studies that reported inter-rater stability coefficients. The mean inter-rater stability coefficient for these 11 studies was r=.60.

Validity. Concurrent validity was studied by Garwick (1974b as cited in Cytrynbaum et al., 1979). He correlated GAS scores with an unpublished anxiety scale and obtained a coefficient r=.52. He also correlated GAS with the therapist's global rating and obtained coefficients that ranged from r=.58 to r=.85.

## Teacher Questionnaire

A teacher questionnaire was designed by the researcher to collect information concerning the type and quality of services offered by the counselling program (see Appendix C). A questionnaire of this type was used to allow teachers to rate anonymously the services received.

The information gathered concerned the following categories: client population, referral process, services received, ratings of services received, and a description of where the teacher would have referred the student and what services would have been offered if the counselling program was not available. Responding to the questionnaire involved recording numbers,circling ratings, and checking an appropriate response. The twelfth question was open ended. The results were presented in frequency and percent tables. The responses to the open ended question were grouped in similar categories and presented in an abbreviated form. Additional comments were also presented in an abbreviated form. Many of the questions were based on information gathered the previous year in a needs assessment done for the

counselling program by the district's committee on elementary school counselling. They were also based on the role description for the elementary school counsellor written in the Fall of 1981. These two sources of information were used to design the questionnaire in an attempt to reflect the language and concerns stated previously by both the committee and the counsellor.

**Interview Schedule**

An interview schedule was designed by the researcher and was used to interview both the elementary school counsellor and the Director of Pupil Services. Each interview took between one and two hours to complete. Notes were taken during both interviews which were then transcribed. Summaries of the interviews are presented in the program description section of Chapter 4.

The interview schedule included the following areas: (a) justification for the program; (b) program goals; (c) relationship between counselling and special education; (d) distinction between counsellor's and psychologists' roles; (e) counsellor student ratio; (f) definition of clients; and (g) developmental, preventive, and remedial counselling. (see Appendix D for interview schedule).

**Data Collection**

Data were collected using the various instruments previously described between January and May, 1982. The sequence for data collection is summarized in Figure 4.

January - Pre-Counselling Phase

- Students were selected.
- PBRS were completed by classroom teachers.
- GAS were written by the researcher in consultation with the classroom teacher.
- PHCSCS were administered by the counsellor to four students. One teacher administered the scale to her entire class of which two were involved in the study.
- Off-task data were collected by researcher.
- Clinical observations were made by researcher.

February - April

- Counselling sessions began with the individual students and continued until the end of April.
- Researcher observed several student counselling sessions, teacher consultation sessions, and an evening meeting for parents where the counsellor explained the purpose of the elementary school counselling.
- Counsellor and Director of Pupil Services were interviewed.

May - Post-Counselling Phase

- PBRS were completed by the classroom teachers.
- GAS were completed by the classroom teachers.
- PHCSCS were administered by the counsellor to four students. One teacher administered the scale to her entire class of which two students were involved in the study.
- Off-task data were collected by the researcher.
- Clinical observations were made by the researcher.

May 17

- Teacher questionnaires were distributed to the schools.

May 31

- Teacher questionnaires were collected

Figure 4. Data Collection Sequence

CHAPTER 4

RESULTS

The results of this study are presented in three parts:
(a) program description, (b) teacher questionnaires, and (c) case
studies. Within each section the results of measures used are
summarized.

## Program Description

A description of the Elementary School Counselling Program (ESCP)
was written to provide a framework for the results of the study. This
information was gathered by observing the everyday activities of the
counsellor, interviewing the counsellor and the director of pupil
services and by reviewing the role descriptions written by the
counsellor and the director of pupil services.

General description. The ESCP has existed as a pilot project for
two years. It was first started in September, 1980 when a district
psychologist was reassigned to the elementary school counsellor
position. At that time he was assigned to five schools for which he was
to provide counselling, consultation, and coordination of services.

During the second year of operation of the program the counsel-
lor's school assignments decreased from five to three schools. The
three schools are referred to as School 1, School 2, and School 3.

The three schools had a combined population of 1390 students and
a combined classroom teacher population of 57. School 1 was the coun-
sellor's home school where he had an office and phone. He spent approx-
imately 1.5 days in each school.

The counsellor spent most of his time at School 3 primarily involved with a new special class for students with behavior disorders. The social learning program had six students each seen on a weekly basis by the counsellor. He had very little interaction with other students or clasroom teachers at School 3.

Role description. The duties of the counsellor were defined in a discussion paper written by the counsellor (see Appendix E for complete role description). A summary of this role description follows. The counsellor was directly responsible to the Director of Pupil Services. He was responsible for instituting a counselling program at the developmental, preventive, and remedial level which involved counselling, consultation, and coordination. He contributed to the referral and placement of pupils in special classes especially the social learning program. He also followed the progress of students placed in special classes or programs. He offered individual and group counselling to students attending the social learning program. He provided individual psychoeducational assessments which included the students' social and behavioral skills as well as the students' intellectual potential. When needed he assisted with interpretation of assessments done by the district psychologists or outside agencies. He worked closely with the district psychologists. He assisted teachers and parents in understanding student's behavior and helped them develop alternative methods for coping with problem situations. Parent counselling would be offered to those parents requiring and wanting counselling. He assisted students through individual and group counselling to become more aware of their own strengths, needs,

weaknesses, and motivators. He consulted with learning assistance teachers, principals, psychologists, classroom teachers, and parents to assist them with remedial action for students. He also consulted with teachers and principals to develop a better classroom and school atmosphere.

The counsellor was interviewed to obtain information describing how his time was actually spent. The counsellor stated that he spent between 40%-60% of his time consulting with school personnel and 60%-40% of his time in direct service (counselling) with students and parents. He indicated that he sees 50% of the parents of the children with whom he is involved. He felt that the coordinating aspect of his role description was being done primarily by the school administrators who are becoming more concerned with and involved in coordinating services for all of the children in their schools. The counsellor also stated that the Ministry of Human Resources appears to be less involved in the school system as the schools are providing more services for students, thus requiring less coordination with outside agencies.

When asked how his time was divided between developmental, preventive, and remedial counselling he responded in the following manner:

1. Ten percent of his time was spent on developmental counselling. This time included workshops with teachers using Teacher Effectiveness training kits and workshops with Parents using Parent Effectiveness training kits as well as parent discussion groups. The counsellor believes that teachers should be trained how to teach developmental counselling issues so that counsellors can spend their time with the students who are experiencing problems.

2. Thirty percent of his time was spent on preventive counselling. This he defined as consulting and counselling with teachers and parents before the situation becomes a crisis.

3. Sixty percent of his time was spent on remedial counselling. This he defined as counselling that is needed immediately because a student is no longer functioning appropriately in the school setting. When asked how he would prefer to divide his time into these three areas he stated that he would like to spend more time, 10%-30%, on developmental counselling. This would include the workshops for teachers and parents discussed previously. He would also like to be involved with the in-service training of Learning Assistance Teachers in areas such as interviewing skills and understanding childrens' behavior.

Program goals. Although there are no written program goals both the counsellor and the director of pupil services defined the goals of the program when questioned. The counsellor felt that the goal of the program was to assist teachers by increasing their understanding of children's behavior so that they can cope with and teach a wider range of children. This could be accomplished through workshops on developmental counselling and through consulting services offered by the counsellor.

The director of pupil services felt the goal of the counselling program was to eventually reduce the number of children who need therapy by intervening before situations reach a crisis. This could be accomplished by monitoring potential problems such as scapegoating, difficulties faced by new students, or racial tension and then implementing services by consulting with the classroom teacher,

counselling the individual, or counselling a small group of students who share a common, potential problem.

Referral procedures. Most students are referred for services by their classroom teacher. At other times, referrals have been made by parents and school administrators. The referral procedure involves completing a referral form which asks for the following information: (a) school history, (b) other services student receives (LAT, ESL, Special Class, etc.), (c) reason for referral, (d) referral expectations, (e) classroom teacher observations, (f) LA Teacher's observations, (g) principal's comments, (h) date of parent/guardian contact, (i) principal's authorization, and (j) counsellor's notes. Not all students are formally referred. Several teachers consult with the counsellor concerning a particular student who has not been formally referred. However, this student would not receive services directly from the counsellor without having been formally referred.

Clients. The students who were either referred or whose teacher consulted with the counsellor generally had a behavior problem as the foremost concern. The students with learning problems tended to be referred to the Learning Assistance Teacher (LAT) and/or the school psychologist. It was often difficult to draw a distinction between a student with primarily a behavior problem or primarily a learning problem. Therefore, the students with whom the counsellor worked tended to have various combinations of learning and behavior problems.

The majority of the clients the counsellor saw were from a regular classroom setting. Six students seen attended the social learning class at School 3.

Summary. A description of the elementary school counselling

program was presented to provide a framework for the teacher questionnaire and case study results. Several issues raised in the Discussion Chapter will refer back to the program goals and role description presented in this section.

## Questionnaire Results

Questionnaires were distributed in May, 1982 to 30 teachers who had either referred students to the counselling program and/or who had consulted with the counsellor during the school year 1981-82. Twenty four or 80% of the questionaires were returned. Three of these questionnaires were not used due to the lack of information presented. With the exception of the first table the following results are based on the 21 useable questionnaires. The figures in the first table were derived from the counsellor's judgement as to whom he had delivered services.

Number of teachers and students who received services. The number of teachers from the three schools who consulted with the counsellor is summarized in Table 2.

Table 2

Number of Classroom and Learning Assistance Teachers
Who Received Services

| School | n | % |
|--------|------|----|
| 1 | 15/22 | 68 |
| 2 | 13/29 | 45 |
| 3 | 1/10 | 10 |
| Total | 29/61 | 48 |

Fifty-one students received services from the counsellor. These services could have been either direct services to students i.e., counselling or indirect services i.e., consulting for school personnel or parents concerning the student.

Table 3

Number of Students Who Received Services

| School | n | % of School Population |
|--------|-----|------------------------|
| 1 | 27/488 | 6 |
| 2 | 18/676 | 3 |
| 3 | 6/230 | 3 |
| Total | 51/1394 | 4 |

**Referral process.** Fifty-nine percent of the students who received services were formally referred to the counselling program. No students were formally referred from School 3 whereas 66% of the students who received services from School 1 and School 2 were formally referred.

Table 4

Number of Students Formally Referred

| School | n | 90 |
|--------|-------|----|
| 1 | 18/27 | 66 |
| 2 | 12/18 | 66 |
| 3 | 0/6 | 0 |
| Total | 30/51 | 59 |

The majority of the referrals (verbal or written) received services within four weeks.

Table 5

Time Between Referral and Delivery of Services

| Time Period | n(50) | % | Cum % |
|-------------|-------|----|-------|
| 0-2 weeks | 25 | 50 | 50 |
| 2-4 weeks | 11 | 22 | 72 |
| 4-6 weeks | 8 | 16 | 88 |
| 6 or more weeks | 1 | 2 | 90 |
| Never seen | 5 | 10 | - |

Client characteristics. The counsellor's clients were described by the reason they were referred and by the other specialists from whom they received services. The question concerning reason for referral offered four choices. They were: behavior problem in the classroom, learning difficulty, parental assistance needed, and other. Some teachers indicated more than one category as the reason for referring a student. These responses therefore total to more than the 51 students who were referred.

Table 6

Reason for Student Referral to Counsellor

|  | n | % |
|---|---|---|
| Behavior problem | 27 | 54 |
| Learning difficulty | 26 | 52 |
| Parental assistance | 19 | 38 |
| Weekly counselling | 6 | 12 |
| Parents' request | 3 | 6 |

Some of the students receiving services from the counsellor were also receiving services from other school personnel. These data are presented in Table 7.

Table 7

Percent of Referred Students Who Received Services from
Other School Personnel

| School Personnel | n | % |
|---|---|---|
| Learning Assistance Teacher | 15 | 29 |
| School Psychologist | 6 | 12 |
| Outside Agency | 3 | 6 |
| Speech Therapist | 2 | 4 |

Description of services. The questionnaire asked the teachers to describe the type of services they had received from the counselling program. There were several teachers who had received more than one type of service. These results are summarized in Table 8.

Table 8

Type of Service Received by Percent of Student Referrals

| Type of Service | n | % |
|---|---|---|
| Teacher Consultation | 41 | 80 |
| Student Interviewed | 36 | 70 |
| Educational Assessment | 20 | 39 |
| Student Observed | 12 | 23 |
| Parent Counselling | 9 | 17 |
| Weekly Counselling | 6 | 12 |
| Small Group Counselling | 1 | 2 |

The teachers were also asked if they thought the counsellor had spent enough time in their school to be able to deliver the services summarized in Table 8.

School 1 and School 2 teachers did not differ significantly in their perception of the adequacy of the counsellor's time spent in their school. School 3 only had one teacher who had consulted with the counsellor and, therefore, who responded to the questionnaire. It would have been interesting to have asked the remaining School 3 teachers if they felt the counsellor was available for enough time at their school.

Table 9

Teachers' Perception of Quantity of Time Spent

| Time Spent | n | % |
|---|---|---|
| More than enough time | 0 | 0 |
| An adequate amount of time | 8 | 40 |
| Not enough time | 12 | 60 |

Quality of services. Teachers were asked two questions concerning the effect the counselling services appeared to have had upon: (a) the student who was referred, and (b) their ability to effectively teach the referred student.

The responses to the first question are presented in Table 10. The "changes noted" by the teachers are presented following the table.

Table 10

Percent of Students Whose Teachers Noted Change

| Amount of Change | n | % |
|---|---|---|
| Great Change | 5 | 10 |
| Some Change | 23 | 45 |
| Little Change | 14 | 27 |
| No Change | 9 | 18 |

Teachers noted that the students who had change greatly were: (a) "more willing to work and listen to instructions and they also felt good about themselves," and (b) showed "better behavior and better effort on assignments."

The students who had shown some change were described as: (a) "paying more attention to task and behaving better in class", (b) "exhibiting less disruptive behavior", (c) "becoming more involved and beginning to participate", and (d) "making progress in their weak areas."

The students who had shown little change were described as follows: (a) "attitude has changed - sometimes high, sometimes low", (b) "student has shown some improvement in social behavior and a little improvement in school work", and (c) "the child with learning difficulties has continued to progress slowly."

The second question the teachers were asked concerned the effect the counselling services appeared to have had upon their ability to effectively teach the referred student. The focus of this question may have been too narrow as it asks about effective teaching. It may be that the consultation with the counsellor was helpful in that it explained behavior, but did not necessarily lead to more effective teaching.

Table 11

Percent of Teachers Who Rated Counsellor
Consultation as Helpful

| Rating | n | % |
|--------|-----|-----|
| Very Helpful | 1 | 5 |
| Helpful | 3 | 15 |
| Somewhat Helpful | 10 | 50 |
| Not Helpful | 6 | 30 |

The third question concerning the quality of services asked the
teachers to rate the services they had received on a 5-point scale. The
number of teachers who rated each service differs due to the fact that
not all teachers received all services. These ratings are summarized in
Table 12.

Table 12

Teacher Ratings of Counsellor Services

| Service[b] | Mean Rating | n | %[a] |
|---|---|---|---|
| Consultation with teachers | 3.0 | 19 | 86 |
| Assists in understanding behavior | 3.3 | 19 | 86 |
| Strategies for teachers | 2.6 | 18 | 82 |
| Consultation with parents | 2.9 | 18 | 82 |
| Strategies for parents | 3.0 | 15 | 68 |
| Strategies for students | 3.7 | 14 | 64 |
| Psychoeducational assessment | 3.5 | 11 | 50 |
| Resolves conflict | 3.1 | 11 | 50. |
| Develops positive climate | 3.0 | 10 | 45 |
| Crisis intervention | 3.5 | 6 | 27 |

[a]Percent of total teachers who rated service.

[b]See Appendix C for listing of complete services.

$\overline{X} = 3.16$      $S = 0.32$

Alternatives to the counselling program. Two questions asked the teachers what they would have done if the counselling program had not been available.

The first question asked the teachers, "who would you have referred these students to if the counselling program was not available?" The responses are presented in Table 13 for each school. Some teachers chose more than one person as an alternate.

Table 13

Referrals that Would Have Been Made to Other School Personnel

| Referrals Made To | Total (22)[a] % | Schools[b] | |
| | | School 1 n | School 2 n |
| --- | --- | --- | --- |
| Principal | 36 | 11 | 6 |
| Learning Assistance | 32 | 6 | 9 |
| School Psychologist | 17 | 4 | 4 |
| No one | 11 | 4 | 0 |
| Other | 4 | 1 | 1 |

[a]Numbers in parentheses indicate the number of teachers who responsed.

[b]School 3 had one teacher respond. Referral would have been made to no one.

When the results of the three schools were examined separately, the rank order of alternate referrals changed. This may reflect a difference in the availability and quality of services in the three schools.

The second question concerning alternatives asked the teachers how this year would have differed for them if the services provided by the counselling program had not been available. The responses to this open ended question were grouped into categories reflecting who had benefited and are presented in Table 14. How these people benefited were summarized and are presented in the following the table.

Table 14

People Who Benefited From Counselling Program Services

| Beneficiaries | n(15) | % |
|---|---|---|
| Teachers | 10 | 66 |
| Students | 8 | 53 |
| Administrative Personnel | 2 | 13 |
| No One | 3 | 20 |

The teachers stated that they had benefited due to consultation with the counsellor. It appeared that several teachers used the counsellor as a sounding board to validate their own ideas about a particular student. Others felt they had gained new insight concerning a childs' behavior. Most of these comments reflected the consulting

service, but did not mention actual strategies suggested by the counsellor.

The responses from teachers that stated the students had benefited primarily described the counselling that had taken place between student and counsellor. It appeared that most of these students had developed a positive relationship with the counsellor and felt better about themselves. Two teachers from School 1 stated that the vice principal and principal would have been burdened with more problem students if the counselling program had not been available. Three teachers from School 2 stated that this year would not have differed if the counselling program had not been available. Of the 15 responses to this question 12 or 80% were judged to indicate positive support for the counselling program.

Additional comments. Four additional comments were made all reflecting concern about the counsellor's time. Three comments stated that the service is extremely important, but that the amount of time allotted to each school "is so meagre as to make it next to useless." All three teachers realized the need for prevention and stressed that more time was needed to work with students before the situation became a crisis. One teacher suggested that the role of the counsellor should be to identify problems and make referrals to private agencies. Another comment suggested that if more emphasis was placed on counselling at the elementary school level, the need for counselling and the problems that exist in secondary schools would be drastically reduced.

The fourth comment stated that the counselling program is a "band-aid measure attempting to treat a symptom and not a problem." This teacher felt that the program was attempting to replace the role

and responsibilities of the parents and was not a necessary or appropriate service for the school to offer. These comments along with the other results from the teacher questionnaire will be discussed in Chapter 5.

## Case Studies

A separate case study was written for each of the six subjects. The results of the following measures were presented in each case: (a) Pupil Behavior Rating Scale (BPRS), (b) Goal Attainment Scales (GAS), (c) Piers-Harris Children's Self Concept Scale (PHCSCS), (d) Off-task behavior, and (e) Clinical observations.

The results were reported using different scores. The PBRS and the PHCSCS scores were presented as percentiles for both the pre- and post-counselling phases. The GAS scores were presented as the maximum number of possible improvement points in the pre-counselling phase and as the points improved in the post-counselling phase. The percent improvement score was calculated as a percent of improvement between phases by dividing the possible improvement points by the improvement points gained. The off-task behavior scores were presented as a percent off-task in both the pre- and post-counselling phases. A percent of improvement score was then calculated by dividing the difference between pre- and post- off-task behavior by the percent off-task during the pre-counselling phase. An inter-rater reliability coefficient for these data was calculated $r = 0.97$. The clinial observation were reported in written form.

H. Student H improved on the PBRS, on all four GAS, and on the measure of off-task behavior. On the PHCSCS he scored at the 36th

percentile in January and at the 17th percentile in May. His teacher felt the May PHCSCS score did not reflect the fact that H was feeling "a whole lot better about himself." A summary of pre- and post- scores for H is presented in Table 15.

Table 15

Student H Pre- and Post-Scores

| Measures | Pre | Post | % Improvement b |
|---|---|---|---|
| PBRS (percentile) | 92 | 69 | a |
| PHCSCS (percentile) | 36 | 17 | a |
| GAS (possible points/ points gained) | 16 | 12 | 75 |
| Off-Task (%) | 43 | 31 | 28 |

a. Percent improvement scores have only been calculated for off-task behavior and Goal Attainment Scales.
b. Percent improvement between pre- and post-counselling phases.

H could be characterized by the clinical observations made in January as a child who attempted to interact with other children, but who rarely did so successfully. He played with clay, paper clips, and rubber bands at his desk until he was told to put them away or had them taken away. He needed to be coaxed to get to work and rarely worked for prolonged periods.

In May H could be characterized as a good independent worker, beginning his work without having to be prompted. He initiated interactions with other students and they responded appropriately to him. Other students also initiated appropriate social interactions with H.

It appeared from the clinical observations that H had improved dramatically in the following areas: (a) his ability to interact without antagonizing other students, (b) classmates showed more interest in socializing with H, and (c) work habits.

The teacher perceived a great improvement in this student which was reflected on all measures except the PHCSCS.

Sa. Student Sa improved on the PHCSCS, on the GAS, and on the measure of off-task behavior. These results are summarized in Table 16.

Table 16

Student Sa Pre- and Post-Scores

| Measures | Pre | Post | % Improvement |
|---|---|---|---|
| PBRS (percentile) | 69 | 69 | - |
| PHCSCS (percentile) | 31 | 74 | - |
| GAS (possible points/ points gained) | 12 | 8 | 75 |
| Off-Task (%) | 27 | 23 | 15 |

Sa could be characterized by the clinical observations made in January as a student who often had a stuffed animal on her desk, who spoke frequently and appropriately with other students, who worked well independently, and who was frequently absent.

In May Sa could be characterized as a student who brought a stuffed animal to school less frequently, who continued to be absent from school often, who continued to work well independently, and who continued to have appropriate interactions with other students.

It appeared from the clinical observations that Sa was displaying immature behavior less frequently although it was still present. She continued to work well independently and interacted pleasantly with her classmates.

The teacher perceived an improvement in this student as measured by the GAS. The PBRS, however, did not show any improvement. Sa's self concept as measured by the PHCSCS improved and her off-task behavior improved. In this case it appears that the teacher perceived improvement in the student which was not reflected by the PBRS or the clinical observations to the same degree as was expressed by the teacher.

W. Student W improved on the measure of off-task behavior. His teachers perceived little changes on the GAS and on the PBRS. W had two classroom teachers both of whom rated him on the PBRS and the GAS. The inter-rater reliability was calculated using a Pearson r. The correlation coefficient for these two sets of scores was r = .74. His scores are summarized in Table 17.

Table 17

Student W Pre- and Post-Scores

| Measures | Pre | Post | % Improvement |
|---|---|---|---|
| PBRS (percentile) | 76 | 83 | - |
| PHCSCS (percentile) | 36 | 38 | - |
| GAS (possible points/ points gained) | 20 | 2 | 10 |
| Off-Task (%) | 43 | 22 | 49 |

W could be characterized by the clinical observations made in January as a loner who did not interact with other students. His classmates did not initiate interaction with W and he in turn did not initiate interaction with them. He had a number of toys such as a Rubik's Cube, a recorder, and a ruler that occupied his attention and his hands frequently. He was often reminded to "get to work" by his teachers. When forced to work with a small group of students he spoke with the teacher frequently and members of his work group made fun of him.

In May W coud be characterized as being an independent worker. He interacted appropriately with his neighbors and several students initiated social interactions with him. He still played with his pen and pencil, but the other toys were no longer present. It appeared from the clinical observations that W was interacting more appropriately with his classmates and spending less time playing with toys at his desk. He also required fewer individual instructions and prompts from his teachers. The teachers perceived very little improvement in W's behavior as measured by the GAS and the PBRS. However, the observer noted improvement in both the clinical observations and on the measure of off-task behavior.

It was interesting to note that since the PBRS and GAS were completed in May both teachers have noticed a dramatic improvement in W's behavior. The teachers' ratings may have been influenced by two negative incidents that took place a few weeks before they were asked to complete the PBRS and the GAS. Their current assessment appears to agree with the improvement noted in the off-task and clinical

observation data.

A. Student A improved on the measure of off-task behavior and on the GAS. He was ranked on the PBRS at the 96th percentile in both January and May. This percentile places him in the learning handicap category defined by Lambert (1979). His scores are summarized in Table 18.

Table 18

Student A Pre- and Post-Scores

| Measures | Pre | Post | % Improvement |
|----------|-----|------|---------------|
| PBRS (percentile) | 96 | 96 | - |
| PHCSCS (percentile) | 87 | 89 | - |
| GAS (possible points/ points gained) | 12 | 3 | 25 |
| Off-Task (%) | 50 | 31 | 38 |

A could be characterized by the clinical observations made in January as a disruptive student. He tended to move around the room frequently, bother other students by pushing their desks and poking them, looking around the room when he was sitting at his desk working, and asking the teacher many questions.

In May A could be characterized as a student who was attempting to do his classwork. Although he continued to ask the teacher for extra help he was not bothering other students while he waited for the teachers attention. He interacted appropriately with his neighbors asking them questions about the assignments. He tended to stay in his

seat and when sitting tended to keep his eyes, hands, and feet to himself.

It appeared from the clinical observations made that A was acting more appropriately in the classroom both in terms of social behavior and working behavior. He appeared very interested in correctly completing his assignments and spent much less time bothering other students.

The teacher perceived a slight improvement in A's behavior as measured by the GAS. The observational data noted a great improvement in time spent off-task as well as a general improvement in classroom behavior.

D.  Student D improved on the GAS and the PHCSCS. The results of the measures are summarized in Table 19.

### Table 19

Student D Pre- and Post-Scores

| Measures | Pre | Post | % Improvement |
|---|---|---|---|
| PBRS (percentile) | 27 | 31 | - |
| PHCSCS (percentile) | 46 | 63 | - |
| GAS (possible points/ points gained) | 8 | 3 | 38 |
| Off-Task (%) | 17 | 16 | 6 |

D could be characterized by the clinical observations made in January as a quiet student who worked at his desk and when not working read a variety of fiction and non-fiction books. Students rarely

initiated interactions with him, however, if D initiated an interaction they would respond appropriately. He would often speak to other students about what he had just learned from the book he was reading.

In May D could be characterized as a student engrossed in his work. He initiated friendly conversations with two other students on several occasions. During an informal art lesson D assigned fanciful careers to each member of the class. This was received well and was enjoyed by many of his classmates.

It appears from the clinical observations made that D acted in a much more lighthearted manner during interactions with several classmates. He remained an ardent student, but tended to spend more of his free time interacting with his classmates instead of reading.

S. Student S improved on the GAS. Her scores on the PBRS and on the measure of off-task behavior indicated no improvement. These results are summarized in Table 20.

Table 20

Student S Pre- and Post-Scores

| Measures | Pre | Post | % Improvement |
|---|---|---|---|
| PBRS (percentile) | 87 | 97 | - |
| PHCSCS (percentile) | 15 | 15 | - |
| GAS (possible points/ points gained) | 8 | 3 | 38 |
| Off-Task (%) | 18 | 33 | 83[a] |

a. Off-task behavior increased between pre- and post- phases.

S could be characterized by the clinical observations made in January as a sullen, depressed student. Her classmates often made fun of her when she attempted to interact with them. She sat in a corner desk next to the wall and often turned so that her back faced the class.

In May S could be characterized as a happier student. She and a friend often sat and worked together. Other students interacted appropriately with her and she initiated interactions with them. She often turned her back to the wall and sat facing the rest of the class. It appears from the clinical observations made that S was interacting in a positive, appropriate manner with several students and had established what appeared to be a friendship with another girl.

S's teacher perceived a change in her behavior as measured by the GAS. The observer noted a change in her interacting behavior which appears to have greatly increased the amount of time spent off-task.

Summary of case studies. The results of the six case studies are summarized in Table 21. Because of the small number of subjects no group statistics are presented.

Table 21

Summary of Students Scores on Pre- and Post- Measures

| Type of Score | Measures | Student Scores | | | | | |
|---|---|---|---|---|---|---|---|
| | | H | Sa | W | A | D | S |
| Percentile | PBRS (pre) | 92[a] | 69 | 76 | 96[a] | 27 | 87 |
| | PBRS (post) | 69 | 69 | 83 | 96[a] | 31 | 97[a] |
| | PHCSCS (pre) | 36 | 31 | 36 | 87 | 46 | 15 |
| | PHCSCS (post) | 17[b] | 74[b] | 38 | 89 | 63 | 15 |
| % Improvement | GAS | 75 | 75 | 10 | 25 | 38 | 38 |
| | Off-Task | 28 | 15 | 49 | 38 | 6 | 83 |

[a]Above 90th percentile "learning handicapped" (Lambert, 1979).

[b]Significant change more than 10 pts on rawscore (Piers, 1969).

One student's score improved dramatically on the PBRS, whereas the other students' scores changed slightly if at all. Another student's score on the PHCSCS improved significantly (Piers and Harris, 1969) between pre- and post-testing. The other student scores did not show substantial change on the PHCSCS. The GAS scores measured percent improvement for each student which ranged from 10-75. The off-task behavior measured a percent improvement score for five students ranging from 6-49. The sixth student's percent of off-task behavior increased by 83% between pre- and post-observations.

## DISCUSSION

In this chapter the results reported in Chapter 4 are summarized and discussed, limitations of the study are discussed, and conclusions and recommendations are made.

### Summary and Discussion of Questionnaire Results

Type of program. Four percent of the total student population received services from the counselling program. A more developmentally oriented program would have had contact with a much larger percentage of the student population. Theoretically, a developmental counselling program would interact with every student (Muro and Dinkmeyer, 1977). The figure four percent, therefore, suggests that this counselling program focussed on preventive and remedial counselling. This finding was supported by other research that suggests the main focus of many school counselling programs is remedial counselling (Auerback, et al., 1982; and Miller, 1972).

Program goals. Fifty-four percent of the students referred to the counsellor were referred because of behavior problems. One student who would have been referred for placement in the social learning program (special class for behavior disordered students) remained in the regular class after receiving services from the counsellor. Both of these facts appear to support the goal for the program stated by the Director of Pupil Services: to reduce the number of students who needed therapy by intervening before situations had reached a crisis. It was assumed that of the 27 students referred for behavioral reasons (54% of

referred students) there were additional potential candidates for special class placement.

Fifty-one percent of the total teacher population received services from the counselling program. Eighty percent of the teachers who received services did so in the form counsulting with the counsellor. Consultation with the counsellor usually involved a discussion as to why the student may be behaving in such a manner and strategies for changing or coping with the presenting behavior. This appears to support the counsellor's stated goal for the program which was to assist teachers by increasing their understanding of children's behavior. It was assumed that consultation with the counsellor did in fact increase teacher understanding.

Referral process. Fifty-nine percent of the students seen by the counsellor were formally referred (a referral form had been completed, usually by the classroom teacher). The counsellor felt that teachers who formally referred their students tended to be more involved than those teachers who informally referred students. When a student was formally referred the counsellor may also have tended to spend more time with both the student and the teacher. In School 3 where a formal referral process had not been established the counsellor did not work with any students or teachers from the regular classes. It appears that a formal referral process may tend to add structure and importance to the counselling program as it is perceived by other school personnel.

Time. Sixty percent of the teachers surveyed believed that the counsellor did not spend enough time at their school. Three of the additional comments made on the questionnaire concerned the lack of

counsellor time available. On the other hand, the counsellor stated that he had an adequate amount of time to meet the needs of the three schools to which he was assigned. Seventy-two percent of the referrals received services within four weeks.

It appears that there was a discrepancy between the teachers' perception and the counsellor's perception of "adequate time spent". This discrepancy may have reflected a difference between the counsellor's and teachers' perception of the type and amount of services that should be provided. It also may support the fact that teachers need to be informed of the specific nature of services being provided so that they are aware of the amount of time the counsellor is spending at their school.

Number of schools. Related to the issue of time spent in schools is the number of schools to which the counsellor is assigned. The counsellor originally was assigned to five schools. That number was reduced to three during the programs second year of operation. One of the three schools was not involved to a great extent with the counselling program. Therefore, the counsellor spent the majority of his time working in two schools (student population 1164) and conselling six students in the social learning program. B.C. counsellors surveyed by Allan and Ross (1979) felt that the ideal situation would be to work in 2-3 schools with a combined enrollment of 500 - 1000 students. If the counsellor is assigned to two schools next year and remains involved with the social learning program the counsellor student ratio would be close to the recommendations reported by Allan and Ross (1979).

The number of students and schools to which the counsellor is assigned also tends to dictate the focus of the program. If a counsellor is working in several schools with a combined enrollment of 2000 or more students, it would be impractical to attempt developmental counselling. At best, remedial counselling would be the focus of such a program and a counsellor's time would be spent intervening in crisis or near crisis situations. It appears from the number of students and schools assigned to the counsellor that the counselling program has chosen to focus primarily on preventive and remedial counselling.

Counsellor involvement with the social learning program. The conseller's involvement with the social learning program was rated as "very helpful" by the special class teacher. Next year another class is being added to the social learning program. It appears that the counsellor's involvement with the class was beneficial and should continue. The fact that there will be two classes next year should be taken into consideration when the number of schools is decided to which the counsellor will be assigned.

This year the counsellor was assigned to the school which housed the social learning class. He had very little interaction with the regular class teachers. This may be accounted for at least in part due to his involvement with the special class. The teachers may have perceived the counsellor as only working with extreme cases and they were, therefore, reluctant to refer their own students.

School psychologist and the counsellor. Thirty-nine percent of the students referred to the counselling program had an educational assessment done by the counsellor. Traditionally the dividing line

between a psychologist's role and a counsellor's role has been established by the use of tests. Psychologists have traditionally used individual intelligence tests and individual achievement tests to complete psychoeducational assessments. It appears that the traditional roles were not being practiced in the two schools where the counsellor was involved as he completed several psychoeducational assessments.

Testing appears to be the major area where the two roles overlap. Only 17% of the students referred to the counsellor would have been referred to the school psychologist if the counselling program had not been available. This means that the majority of students referred to the counsellor would not have been seen by the psychologist. In fact, only 12% of the students seen by the counsellor also received services from the psychologist.

Counsellor and LAT. It is difficult to limit the students seen by the counsellor to only those who have behavior problems. Of the total students referred to the counsellor 54% were referred because of behavior problems and 52% were referred because of difficulty learning. There were several students referred for both reasons. In the context of the school environment where academic achievement appears to be the principal goal it is not surprising to find that behavior problems and learning problems have become entangled.

It was apparent from the goal attainment scales which were written in collaboration with the classroom teachers that the behaviors needing improvement were directly related to academic achievement i.e., completing school work, correctly and on time. Twenty-nine percent of the students seeing the counsellor were also receiving services from the

learning assistance teacher (LAT). Due to the combined problems of learning and behavior it would appear appropriate to formalize the relationship between the LAT and the counsellor. A team approach by these two individual specialists could provide coordinated services for those students receiving services from both programs.

Small group counselling. One student who received services from the counsellor was involved in group counselling. This was a successful experience for the participants and helped the referred student develop better peer relationships. As this is also an efficient way of seeing several students it may be worthwhile to expand the number of students who receive services through small group counselling.

Parent counselling. Thirty-eight percent of the students were referred to the counselling program because their parents needed assistance (figure based on teacher response). Three parents requested that their children be referred to the counselling program. Seventeen percent of the student referrals involved parent counselling (figure based on teacher responses).

The counsellor stated that he was involved to varying degrees with the parents in 50% of his cases. It appears that the teachers were not informed of the counsellor's involvement in the home.

Counsellor effectiveness. The majority of teachers noted "some change" to a "great change" in the students receiving services from the counsellor. Seventy percent of the teachers found consultation with the counsellor "somewhat helpful" to "very helpful" in improving their ability to teach the referred student (the limitations of this question were discussed on page 51). Eighty percent of the teachers surveyed

felt that this year had been improved for both themselves and their students due to the counselling program.

The teachers rated the ten different services provided by the counselling program using a 5-point scale. The mean rating was 3.16 which placed the teacher rating between adequate (3) and good (4). The three highest ratings were for crisis intervention, strategies for students, and psychoeducational assessments. These finding support a positive rating by the teachers of the quality of services received.

Alternative Referrals: The majority of the referrals made to the counsellor would have been made to the LAT (32%) or the school principal (36%) if the counselling program had not been available. The LAT referrals may represent those students who are experiencing difficulty learning as well as being labelled a behavior problem. The referrals to the principal may represent those students who were referred because of behavior problems. In either case the counsellor, when one is available, would appear to be the more appropriate service provider for students with behavior problems or students with behavior and learning problems.

## Summary and Discussion of Case Study Results

The Pupil Behavior Rating Scale (PBRS) did not detect a trend of improved behavior for the six students. One student's percentile rank improved by 21 points. The remaining student scores varied only slightly from the pre-counselling phase. It appears that improvement made by the students was either not the same type as measured by the PBRS, or that the instrument itself may not be sensitive enough to

measure the form or amount of change in students' behavior resulting from this type of intervention.

The Piers-Harris Children's Self Concept Scale (PHCSCS) results were also ambiguous. One student who, according to his teacher, improved dramatically in the area of self concept actually deteriorated in self concept as measured by the PHCSCS. Another student who, according to both the counsellor and her own comments, was feeling better about herself, scored at the 15th percentile both before and after counselling intervention. One of the six students did improve significantly on the PHCSCS (raw score increased by more than 10 points which is significant according to Piers and Harris, 1969). It appears that the PHCSCS was not sensitive enough to measure the change in self-concept perceived by the teachers and counsellor.

These ambiguous results may also have been biased by the non-blind rating situation. The teachers were aware of the fact that the students were expected to improve after counselling intervention. Depending on their own personal attitude toward the counselling program they could have rated student improvement, or lack of it, accordingly.

Neither the PBRS or the PHCSCS proved to be viable outcome measures for this study. They appeared to lack the necessary sensitivity or measured some aspect of behavior that was not addressed in the counselling intervention.

The Goal Attainment Scales (GAS) reflected a trend of improvement for all six students. The percent improvement scores ranged from 10 to 75. The scales were based on behaviors that the teachers could observe and rate. They reflected teachers' goals for intervention better than

the PBRS. A weakness of the scales was that the teachers generally chose work habit type behaviors. These were not necessarily within the scope of the counsellor intervention. Although the GAS had been designed to measure behavior observed by the classroom teacher, they were not always goals that were addressed by the counsellor.

The measure of off-task behavior reflected a trend of improvement for 5 of the 6 students. The percentage of improvement ranged from 6 to 49. One student deteriorated by 45% (in her case this may have reflected an improvement in her peer socializing behavior). This measure was more relevant for 3 of the 6 students whose teachers were concerned because so much of their time was spent off-task. These three students showed improvement on this measure. The other students had spent very little time off-task at the beginning and the changes noted were minimal. Although this method for collecting data absorbs disproportionate resources, it proved to be worthwhile in two cases where improvement unnoticed by teachers was identified.

The clinical observations tended to show a trend of improvement in 5 of the 6 students. The students were observed interacting with their peers and their teachers. In 4 cases there was fairly dramatic improvement in the students' ability to interact appropriately with his/her peers.

## Limitations of the Study

Limits of case study method. The number of subjects was limited to six because of the amount of time required for clinical observations, and consequently the data analyses was limited to descriptive statistics.

Limits of design. The design of the study did not provide for a control group or strict control of treatment variables. These two factors do not allow one to confirm that the counselling program caused a change in behavior. Another design limitation was the non-blind teacher rating of the PBRS and the GAS. Because the teachers were aware that the student had received counselling services their expectation of improvement may have biased their ratings.

Limits of questionnaire. Parent and student opinions were not surveyed. A more complete evaluation of the conselling program would have been possible if all of the counsellor's clients had been surveyed. Because parents were not surveyed the information evaluating services for parents was based on teacher's perceptions and is not therefore a sufficient assessment.

Another limitation of the questionnaire was expressed by a few teachers. They felt that the range of responses involving a rating should have been expanded from four to possibly five or seven.

## Conclusions

The use of the PHCSCS and the PBRS as outcome measures did not prove to be effective for measuring change in student behavior. These measures are not recommended for future studies of this type.

The use of a modified GAS did prove to be more sensitive in detecting the changes in student behavior perceived by teachers. This measure is recommended for use in this type of study. However, if this procedure is to be continued by the counselling program it could be improved if the counsellor either wrote his own goals along with the

teacher or ranked the teacher goals according to how much importance the counsellor placed on each goal. This would allow for a more valid system of evaluation by having the counsellor involved in the goal selection, and, as well, in weighing the feasibility of goal attainment.

Off-task behavior data and clinical observation data proved worthwhile in detecting change in students' behavior. However, due to the time required for data collection these procedures may not prove to be practical for assessing the program on an ongoing basis.

Based on the case study data the researcher concluded that the students' behavior did change and that this change occurred while the students were receiving services from the counselling program. This change in student behavior was corrobated both by the classroom teachers (GAS) and the researcher (observations). However, the extent of change was perceived as greater by the researcher than the classroom teachers.

The questionnaire responses support the conclusion that the majority of the teachers surveyed believed that the counselling program was effective and a positive addition to the service offered in the elementary school.

The role definition of the counsellor was found to be too inclusive and should be rewritten. The relationship between the counsellor, the psychologist, and the learning assistance teacher should be clearly defined in the counsellor's role definition.

The program goals should be clearly stated. To improve the validity of another evaluation clearer goals should be written for both the counsellor and the program.

The counsellor's involvement with the social learning program was found to be very successful. However, the counsellor should not be assigned to work with the regular students in the school that houses the social learning program.

## Recommendations

1.  The counselling program should be continued.

2.  The number of schools the counsellor is assigned to should be limited to two with a combined enrollment not exceeding 1,000 students.

3.  The counsellor should continue to counsel students in the social learning program. The counsellor should not be assigned to work with regular students in the schools that house social learning program classes.

4.  The role of the psychologist and the counsellor should be reexamined. The use of tests and the ability to counsel should be discussed by the Director of Pupil Services, counsellors, and psychologists to determine the functions that are appropriate for the two roles.

5.  The use of small group counselling should be considered as an addition to the counselling program.

6.  A more consistent approach to service delivery should be attempted. This should take the form of weekly scheduled appointments with students and teachers. This may help to change the teachers' perception of time spent in the school by the counsellor.

7.  Program goals, especially those with a developmental focus, should be reexamined. Program outcome goals should be more clearly defined.

8. An ongoing evaluation system should be designed using a modified version of goal attainment scales. This should provide data for evaluation and also assist in specifying concerns of the classroom teachers. Goal attainment should be rated by both the counsellor and the teacher.

9. The relationship between the LAT and the counsellor should be formalized for better coordination of students common to both programs.

10. A formal referral system should be instituted for all schools.

The counselling program, which has been functioning as a pilot program, appears to have established an effective service for both teachers and students. The two years spent in developing the program including this research, have allowed for changes to be made while the program remains small. The writer would encourage the district personnel to carefully consider the recommendations expressed herein before the program expands, as it should, to a district-wide elementary school counselling program.

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## APPENDIX A

Example of Item Format from the Pupil Behavior Rating Scale

3.00

These pupils are hostile and       2.75    This pupil bullies others and
abusive to other children.                 is quick tempered.
They resort to physical
violence or force to resolve       2.50    This pupil mimics and mocks
differences of opinion.                    others and initiates fights.

                                   2.25

                                           This pupil teases others and
                                   2.00    then is upset and tearful when
                                           others fight back.

These pupils ordinarily are        1.75
cooperative and friendly.
When treated unfairly, they
will be assertive in standing      1.50
up for their rights.

                                   1.25

                                   1.00

These pupils avoid all physical     .75
confrontations by finding other,
nonagressive ways of resolving
conflicts.                          .50    This pupil is generally amiable
                                           and isn't easily antagonized.

                                    .25

                                    .00

## APPENDIX B

Goal Attainment Scales

**H**

-2  Does not complete all of his work on any day during the week.
-1  Completes all work on one day during the week.
 0  Completes all work on two days during the week.
+1  Completes all work on three days during the week.
+2  Completes all work on four days during the week.

-2  Students complain about H's teasing every day during the week.-1
Students do not complain about H's teasing one day during the
week.
 0  Students do not complain about H's teasing two days during the
    week.
+1  Students do not complain about H's teasing four days during the
    week.
+2  Students do not compalin about H's teasing at all during the
    week.

H's overall academic work has improved over the last month.
Please rate:  -2  -1  0  +1  +2

H has established a friendship or friendships during the last month.
Please rate:  -2  -1  0  +1  +2

**Sa**

-2  Sa has a stuffed animal or doll on her desk four days per week.
-1  Sa has a stuffed animal or doll on her desk three days per week.
 0  Sa has a stuffed animal or doll on her desk two days per week.
+1  Sa has a stuffed animal or doll on her desk one day per week.
+2  Sa does not have a stuffed animal or doll on her desk at all during
    the week.

-2  Sa speaks with a "baby voice" several times per day most every day
    during the week.
-1  Sa speaks with a "baby voice" once or twice per day most every day
    during the week.
 0  Sa speaks with a "baby voice" once or twice per day three days per
    week.
+1  Sa speaks with a "baby voice" once or twice per day on or two days
    per week.
+2  Sa does not speak in a "baby voice" during the week.

Sa's overall academic work has improved over the last month.
Please rate:  -2  -1  0  +1  +2

appendix B contd...

## W

| | |
|---|---|
| -2 | W's homework is handed in on time 1/5 days per week. |
| -1 | W's homework is handed in on time 2/5 days per week. |
| 0 | W's homework is handed in on time 3/5 days per week. |
| +1 | W's homework is handed in on time 4/5 days per week. |
| +2 | W's homework is handed in on time 5/5 days per week. |

| | |
|---|---|
| -2 | W finishes his classroom assignments on time one day per week. |
| -1 | W finishes his classroom assignments on time two days per week. |
| 0 | W finishes his classroom assignments on time three days per week. |
| +1 | W finishes his classroom assignments on time four days per week. |
| +2 | W finishes his classroom assignments on time five days per week. |

| | |
|---|---|
| -2 | W requires teacher assistance much more frequently than other students. |
| -1 | |
| 0 | |
| +1 | |
| +2 | W requires teacher assistance as frequently as other students. |

W's overall work habits have improved over the last month.  Please rate.  -2  -1  0  +1  +2

W's overall attitude concerning his schoolwork has improved over the last month.  Please rate.  -2  -1  0  +1  +2

## A

| | |
|---|---|
| -2 | A is off task most of the time (90%-100%). |
| -1 | A is off task about 75% of the time. |
| 0 | A is off task about half the time. |
| +1 | A is off task about 25% of the time. |
| +2 | A is off task close to 100% of the time. |

| | |
|---|---|
| -2 | A's homework is handed in on time 1/5 days. |
| -1 | A's homework is handed in on time 2/5 days. |
| 0 | A's homework is handed in on time 3/5 days. |
| +1 | A's homework is handed in on time 4/5 days. |
| +2 | A's homework is handed in on time 5/5 days. |

| | |
|---|---|
| -2 | A finishes his classroom assignments on time one day per week. |
| -1 | A finishes his classroom assignments on time two days per week. |
| 0 | A finishes his classroom assignments on time three days per week. |
| +1 | A finishes his classroom assignments on time four days per week. |
| +2 | A finishes his classroom assignments on time five days per week. |

Appendix B Contd...

## D

```
-2   D turns in 20% of his weekly assignments on time.
-1   D turns in 40% of his weekly assignments on time.
 0   D turns in 60% of his weekly assignments on time.
+1   D turns in 80% of his weekly assignments on time.
+2   D turns in 100% of his weekly assignments on time.
```

Organization of reports and compositions has improved over the last month.  Please rate:  -1  -2  0  +1  +2

## S

```
-2   S turns in 20% of the weekly assignments on time and complete.
-1   S turns in 40% of the weekly assignments on time and complete.
 0   S turns in 60% of the weekly assignments on time and complete.
+1   S turns in 80% of the weekly assignments on time and complete.
+2   S turns in 100% .of the weekly assignments on time and complete.
```

```
-2   Seeks attention in negative ways two to three times per day.
-1   Seeks attention in negative ways once every few days.
 0   Seeks attention in negative and positive ways several times during
     the week.
+1   Seeks attention in only positive ways several times per week.
+2   Seeks attention in only positive ways once or twice per day.
```

APPENDIX C

May 17, 1982

Dear Teachers,

The    '    Pupil Services Office is interested to find out if the services
provided by the elementary school counselling program are helpful to you
in their present form.  Because it is a new and developing program we are
interested in your input so that it will be a successful addition to
services offered at the elementary school.  Your participation is very
important.

We recognize that the range of available responses on this questionnaire
may not reflect your complete opinion, so feel free to expand on any of the
items.  We welcome additional comments.

The confidentiality and anonymity of your responses is guaranteed.  The
value of this study is directly related to the participation of those, like
yourself, who receive this questionnaire.  We would greatly appreciate your
response although we realize it is a busy time for you.  The questionnaire
should take no more than 15 minutes to complete.

Please return the completed questionnaire to your school principal by
Friday May 28, 1982.


                                        Thank you,



                                        Director of Pupil Services

1.  Have you consulted the counsellor this year concerning students in your class?

    no          yes          number of students _____

2.  Did you complete a referral form for any of these students?

    no          yes          number of students _____

On questions 3-9 please respond for <u>each</u> student who received services from the counsellor.

3.  Were any of these students also seen by  (please check)

    ___ the school psychologist.
    ___ the learning assistance teacher.
    ___ the speech pathologist.
    ___ an outside agency.
    ___ other.  (please specify) _____

4.  What was the reason you initiated contact with the counsellor?  (please check)

    ___ behavior problem in the classroom
    ___ learning difficulty
    ___ parental assistance needed
    ___ other  (please specify) _____

5.  What services were provided after you made the initial contact with the counsellor?  (please check)

    ___ consultation with teacher
    ___ observation of student
    ___ interviewed student
    ___ educational assessment of student
    ___ other (please specify)

6.  What amount of time passed between initial contact and the services provided? (please check)
    ___ 0-2 weeks
    ___ 2-4 weeks
    ___ 4-6 weeks
    ___ 6 or more weeks
    ___ never seen

7.  From your point of view have you noticed any changes in these students in the area of concern?

    1                   2                   3                   4
    no change      little change       some change        great change

    Please specify any change noted. _____

    _____

8.  Did you find that consultation with the counsellor helped you to teach these students more effectively?

    1                   2                   3                   4
    not helpful    somewhat helpful      helpful           very helpful

9.  Who would you have referred these students to if the counselling program
    was not available?  (please check)

    ____ school psychologist
    ____ learning assistance teacher
    ____ school principal
    ____ no one
    ____ other  (please specify)

10. The counsellor spent approximately 1.5 days in each of three schools.
    Was the counsellor available in your school for  (please check)

    ____ more than enough time.
    ____ an adequate amount of time.
    ____ not enough time.

11. Please rate the following services provided by the elementary school
    counselling program.  If you have no information upon which to base
    a rating of a particular item please use number 1.

    Quality of service was:
    1               2           3           4           5           6
    not applicable  very poor   poor        adequate    good        very good

    ____ crisis intervention with student

    ____ consultation with teachers concerning individual students

    ____ consultation with parents

    ____ development with teachers of effective strategies for dealing with student

    ____ development with parents of effective strategies for dealing with student

    ____ development of helping techniques for students who are experiencing problems

    ____ psychoeducational assessment

    ____ helps to resolve classroom conflict

    ____ assists teachers in developing a positive classroom climate

    ____ assists teachers in understanding children's behavior

12. How would this year have differed for you if the services provided by
    the counselling program had not been available?

    _____

    _____

    _____

## APPENDIX D

### Interview Schedule for Director of Pupil Services and
### Elementary School Counsellor

1. Why is elementary school counselling important?

2. Why has elementary school counselling become important at this point in time?

3. What are the basic goals of an e.s.c.p. and how can a counsellor attain these goals?

4. What, if any, is the relationship between an e.s.c.p. and special education?

5. Should the counsellor be involved, and if so to what extent, with programs for behaviorally/emotionally disturbed children?

6. What distinction do you see between the role of the e.s. counsellor and the district psychologist?

7. What kind of relationship should exist betwen the LAT and the ESC?

8. What ratio of schools: counsellors and students counsellors: do you feel will be effective?

9. What happens in the schools that do not have an e.s.c.p.?

10. What would you look for to show you that the e.s.c.p. is working effectively?

11. What ratio of developmental, preventive, and remedial counselling should be followed in the e.s.c.p.?

Counsellor was also asked:

12. How is your time spent in terms of direct and indirect services and how much time is spent on developmental, preventive, and remedial counselling?

13. Is counselling experience at the secondary school level good training for elementary school counsellors?

14. How would you define the type of student you see?

## APPENDIX E

Draft

### District Elementary School Counsellor Role Description

Will be directly responsible to the Director of Pupil Services, and duties will include the following:

a. Responsible for instituting a counselling programme at the Developmental, Preventive, and Remedial level. This programme, which will be developed in cooperation with the staff and administrators of the schools assigned, will involve counselling, consultation, and coordination of services in the community.

b. Provide individual psychoeducational assessments of particular pupils in order to obtain information pertaining to their educational progress and to recommend appropriate specific individual programmes and/or special placements.

c. Consult with learning assistants, principals, teachers, psychologists and parents to assist them with remedial action on behalf of pupils.

### Specific Duties and Responsibilities:

a. Coordinate certain psychoeducational activities within assigned schools;

b. Advise the Director of Pupil Services regarding psychoeducational matters relating to their role;

c. Work in close liaison with District Psychologists;

d. Detect young children's behavioural and learning problems leading to early intervention;

e. Assess the inconsistencies in the child's behaviour;

f. Provide an assessment of the child's social and behavioural skills, and if necessary the child's intellectual potential and capabilities. This assessment will look at both strengths and weaknesses.

g. Recommend further professional assessment where necessary;

h. Assist in interpretation of results of individual assessments carried out by District Psychologists and outside agencies;

i. Contribute to referral and placement of pupils in special class, particularly the Social Learning Programme and to outside agencies;

k. Help plan short term and long term goals for the child which may include academic, behavioural, and social skills (I.E.P.'s);

l. Follow the progress of pupils placed in special programmes;

m. Assist teachers in developing a better classroom climate;

n. Assist Principals and staffs to develop better school climate;

o. Assist parents in understanding their children's behaviour and help them develop alternative methods to handle problem situations;

p. Assist teachers in understanding their pupil's behaviour and help them develop alternative methods to handle problem situations;

q. Assist community agencies in recognizing present and future needs;

r. Assist pupils in becoming more aware of their own strengths, weaknesses, needs, and motivators;

s. Observe the child's interaction in a variety of environments; Consult with parents to:
   i. improve the learning situation for the child referred;
   ii. improve the social relationship situation of the child with others and self;

t. Offer individual and group counselling to pupils in the assigned schools and the Social Learning Programme;

u. Offer counselling services to parents requiring and wanting counselling.

81/11/10