A Comparison of Perceptions of Therapeutic Treatment Team Members Concerning Teacher Roles Within the Therapeutic Treatment Team in a Hospital School for Adult Psychiatric Patients.

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Adults; *Cocounseling; Comparative Analysis; *Mental Illness; Program Improvement; Research Projects; *Role Perception; *Teacher Role; *Therapy

This study examines the perceptions of professional and nonprofessional staff members concerning teacher roles within the therapeutic treatment team to determine individual teacher roles within the therapeutic treatment team and to compare any difference of individual teacher role perceptions between the two groups. Data was collected by means of a 20-item questionnaire concerning teacher roles within the therapeutic treatment team which was distributed to a proportional stratified random sampling of staff members of a state hospital. The analysis of the data concluded that of 17 of the 20 questions concerning teacher role perceptions within the therapeutic treatment team, both professional and nonprofessional staff were in agreement as to their teacher role perceptions. (Author/PC)
A COMPARISON OF PERCEPTIONS
OF THERAPEUTIC TREATMENT TEAM MEMBERS
CONCERNING TEACHER ROLES
WITHIN THE THERAPEUTIC TREATMENT TEAM
IN A HOSPITAL SCHOOL FOR ADULT PSYCHIATRIC PATIENTS

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We wish to express our appreciation to Dr. Willis Bower, Superintendent, G. Lee Sandritter, Associate Superintendent, Dr. Robert C. Browning, Clinical Director, Loren Garber, Assistant Personnel Officer, Louis Monical, Educational Administrator, Mr. James Parks, and those staff members of the Arizona State Hospital whose interest and assistance made this study possible.
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CHAPTER I
INTRODUCTION

There is a need to determine teacher role perceptions within a therapeutic treatment team of an adult psychiatric institution in order that teachers can function more effectively within that team. Much of what can be defined as individual teacher roles are unclear within a hospital setting. (4:294). How teachers are included in a therapeutic treatment team needs further exploration.

THE PROBLEM

Statement of the Problem

The purpose of this study was to determine individual teacher role perceptions within a therapeutic treatment team as perceived by professional staff and the individual teacher role perceptions within a therapeutic treatment team as perceived by non-professional staff and to compare any difference of individual teacher role perceptions between the two groups.

Hypothesis

The null hypothesis to be tested was: There will be
no significant difference between perceptions of professional staff and non professional staff of teacher roles within the therapeutic treatment team.

Assumptions

Three assumptions were made in connection with this study: 1) A valid instrument could be found that would accurately identify individual perceptions of teacher roles, 2) Respondents would answer items on the questionnaire conscientiously and in terms of their own personal attitudes, and 3) The random sampling used in this study would represent accurately the attitudes of the total population.

Definition of Terms

The following definitions are applicable to this study:

Therapeutic Treatment Team: As used in this study refers to all the people who work directly or indirectly with adult psychiatric patients as part of a team.

Individual Role: As used in this study refers to the various functions that a therapeutic treatment team member assumes within the structure of the team.

Professional: As used in this study refers to Doctors, Nurses, Psychologists, Rehabilitation Therapists, Chaplains, Social Workers, and Mental Health Technology Training Staff.

Non Professional: As used in this study refers to those who comprise the Mental Health Series Personnel. This group
can be divided into three subgroupings: 1) Mental Health Specialists or those who have Bachelor's Degrees, 2) Mental Health Technicians or those who have two years of college, and 3) Mental Health Workers or those who have a High School Diploma or the equivalence.

Preservice Training: As used in this study refers to the training given to hospital personnel in psychological techniques and hospital procedure prior to their job placement within the hospital.

Inservice Training: As used in this study refers to the reorientation to and further study of psychological approaches used in treating mental disturbance given periodically to all Mental Health Series Personnel.

Community Placement: As used in this study refers to the selection of proposed living quarters outside the hospital for a patient. This may include boarding houses, half-way houses, nursing homes, among others.

Behavior Modification: As used in this study refers to the focus on overt behavior and its change through manipulation of the same conceptual variable that led to its development. This subject is exposed to an environment which is manipulated by the therapist to provide meaningful contingencies for the subjects differential responses to stimuli.

Supportive Services: As used in this study refers to those intrahospital agencies which offer specialized therapy not offered on the ward.
Personal Counselor: As used in this study refers to that person who advises a student on matters of personal concern to the patient.

Legal Counselor: As used in this study refers to that person who advises a student as to the laws and regulations by which he must abide whether it be hospital regulation, city code, state or federal statute.

Non Professional Ward Personnel: As used in this study refers to those Mental Health Series Personnel who are assigned to shift coverage on a specific ward.

Ward Personnel: As used in this study refers to all therapeutic treatment team members who are assigned to a specific ward.

Need for the Study

Recently at the Arizona State Hospital it has been recommended that teachers take a more active role in the treatment of their students. In order that this may be accomplished an attempt must be made to define as accurately as possible the roles of the therapeutic teacher and his functions within the therapeutic treatment team. It is hoped that this study will more clearly define teacher roles within the therapeutic treatment team to insure the teacher's effective inclusion into that team.
Limitations of the Study

The research study was limited as follows:

1. The study was concerned only with staff members of the Arizona State Hospital excluding the forensic division.

2. No attempt was made to determine the basis of the perceptions of the groups involved.
CHAPTER II
REVIEW OF LITERATURE

Although a review of literature uncovered research studies aimed at defining teacher roles it failed to produce studies that examined these roles in the context of an adult psychiatric facility.

Barnhill (2:3368A) conducted a study that attempted to ascertain the functional role expectations held by public school elementary teachers of the mentally retarded. The areas of concern fell into four categories 1) the identification of expectations which college trainers and graduating seniors in the field of teaching the educable mentally retarded (EMR) held for teachers; 2) identification of the role of the elementary teacher of the EMR as held by the incumbents; 3) a comparison of these expectations and perceptions to identify significant differences among the three populations; and 4) a summary of the role expectations of the teacher of the elementary EMR child, developed according to consensual data regarding the specific duties and perceptions which represent the role of the teacher of the elementary EMR child. A fifty-two item questionnaire
was developed and distributed to respondents of the three populations. Through the use of the Leik Measure of Ordinal Consensus and Chi Square the data was analyzed. It was found that group consensus fell with moderately low range on all four of the role norm categories. Category averages indicated a low consensual agreement.

In a study of similar design, Anderson (1:3368A) sought to determine levels of agreement, both within and between groups of teachers of EMR elementary children and their building principals in terms of role norm expectations and perceptions of role norm expectations held for the teachers' position. The study was specifically concerned with a three dimensional problem; 1) to what extent is there agreement within the two role defining groups regarding expectations held for the position; 2) to what extent do the two groups differentiate between their own expectations and those expectations which they perceive counter role group members as holding for the position; and 3) to what extent do the two groups accurately perceive the expectations which are held by members of the counter group. A fifty-two item inventory of role norm was distributed to the two groups. Leik's Measure of Ordinal Consensus and Chi Square were used in the analysis of the data. Teachers consistently had lower within-group mean agreement levels than did principals. Both groups
differentiated between the expectations which they held and the expectations which they perceived members of the counter group as holding. There was little difference found between the expectations held by teachers of EMR elementary children and their building principals in their total perceptive of the total position.

Stukat (6:2-18) attempted to identify some currently discernible teacher role changes which can be expected to become still more accentuated in the future. The study focused on changes related to individualized instruction. Other areas explored were team teaching and nongradedness. The aims of the research were threefold; 1) to survey and summarize reports on prediction of teacher role changes; 2) to check the predictions against available empirical investigations; and 3) to discuss consequences of teacher role changes for teacher training, research on teaching, and for the refinement of innovations. Predictions and expectations identified were summarized to make possible an empirical check against six studies which use direct observations of teacher activities in the classroom as a source of data collection. Each of these six studies were analyzed and summarized. All descriptions of teacher activity were identified and compared against the list of expectations for possible matching to that list. The six studies were compared with the predictions on a five
point scale which ranged from clear empirical support for the expectation to no empirical evidence available. Expectations were divided into two classes; activities expected to increase and activities expected to decrease. The increased use of individualized instruction was clearly supported by four of the studies reviewed. Supervision of students working independently was clearly supported by two of the studies reviewed. A decrease in contacts with the whole class was supported by three of the studies reviewed. An analysis of the study as a whole indicated a tendency toward individualized instruction in the future.

In a study by Salvador (5:3377A) an attempt was made to 1) specify the level of consensus of expectations for the role of teachers of secondary educable mentally retarded students as held by the incumbents; 2) to specify the level of consensus of the expectations that secondary school counselors hold for the role of teachers of secondary EMR students; 3) to specify the level of consensus of the expectations that secondary vice-principals hold for the role of the teacher of secondary EMR students; and 4) to make comparisons between the expectations of teachers and counselors and between counselors and vice-principals. A fifty-two item questionnaire of role expectation was used as the data collecting instrument in the study. The data was analyzed by use of the Leik Measure of Ordinal
Consensus and the Kolmogorov-Smirnov Two Sample Test. On the basis of the consensus scores, the results of the study indicated that administrators are a more homogeneous group than either teachers or counselors. The total results indicated few significant differences in role expectations.

Tuckman (7:6721A) attempted to study interdisciplinary competition and role performance in the psychotherapy helping professions. The researcher constructed six fictional intake profiles of fictional psychotherapy patients. The profiles were then distributed to ninety subjects from three professional disciplines; psychiatrists, psychologists, and social workers. The subjects were told that the six profiles were of real patients who unsuccessfully terminated treatment within four sessions. The subjects were then asked to assist in determining why this had occurred. An analysis of variance of the data revealed the failure of the experiment to detect any systematic distortions in diagnosis. Although this study was not concerned with the teachers’ role within an interdisciplinary team, it points out the stability and cohesion within the team as a whole.
SUMMARY

The review of literature revealed many books and studies that were related to this study, however, no research studies of significance could be found that related directly to the purpose of this study.

Most of the research reviewed focused on teacher role expectancies rather than the teachers' role within an interdisciplinary team. Much of the reviewed research dealt primarily with the classroom teacher and the teacher of educable mentally retarded.

There is an obvious lack of research concerning teacher roles within a treatment team in a hospital setting. It is hoped that this study may encourage further exploration in this area.
CHAPTER III
METHODOLOGY AND PROCEDURES

The purpose of this chapter is to describe the selection of participants, the development of the instrument, procedures used in data collection, the hypothesis tested, and the statistical technique utilized in analyzing the data.

Selection of Participants

The sample used in this study consisted of a twenty percent proportional stratified random sample of treatment staff of the Arizona State Hospital, Phoenix, Arizona. (Table 1) Authorization for participation in the study was granted to all treatment personnel with the exception of the forensic staff. (Appendix A) They were subsequently not included in the total population. First, the therapeutic treatment staff was subgrouped into two categories: professional and non-professional. The professional population was further stratified into seven divisions by job classification. The non-professional therapeutic treatment staff was not stratified because when viewed by job classification they formed a homo-
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<table>
<thead>
<tr>
<th>Professional Therapeutic Treatment Team Members</th>
<th>Total Population</th>
<th>Sample</th>
</tr>
</thead>
<tbody>
<tr>
<td>DOCTORS</td>
<td>37</td>
<td>7</td>
</tr>
<tr>
<td>NURSES</td>
<td>58</td>
<td>12</td>
</tr>
<tr>
<td>PSYCHOLOGISTS</td>
<td>24</td>
<td>5</td>
</tr>
<tr>
<td>REHAB THERAPISTS</td>
<td>17</td>
<td>3</td>
</tr>
<tr>
<td>CHAPLAINS</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>SOCIAL WORKERS</td>
<td>33</td>
<td>7</td>
</tr>
<tr>
<td>MENTAL HEALTH TECH TRAINING STAFF</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>176</td>
<td>36</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Non Professional Therapeutic Treatment Team Members</th>
<th>Total Population</th>
<th>Sample</th>
</tr>
</thead>
<tbody>
<tr>
<td>MENTAL HEALTH SERIES</td>
<td>347</td>
<td>69</td>
</tr>
</tbody>
</table>
geneous grouping. The total population for each stratification was then found and a twenty percent sampling was randomly selected by a computer for each of the stratifications.

Development of the Instrument

A Likert-type scale was used in the design of the instrument. Borg (3:183) clarifies the use of this design:

"On a Likert-type scale, the individual checks one of the five possible responses to each statement: strongly agree, agree, undecided, disagree, strongly disagree."

The Likert-type scale was chosen for this study because its operational design offered key advantages over other rating systems. Likert-type scales record attitudes in the form of group scores. Respondents have the opportunity to express varying degrees of their role perceptions.

The questionnaire developed for this study was divided into two sections. The first section contained one page which required the respondent to acknowledge his position title and the date the questionnaire was filled out. One question enabled the respondent to receive a copy of the final results of the study if he so requested. The second section contained a brief set
of instructions for answering the questionnaire and a statement as to its content. This was followed by twenty statements involving teacher role perceptions. Ten of the twenty statements were randomly assigned negative values. The respondent was required to express his attitude toward each of the twenty statements on a five-point scale which ranged from "strongly agree" to "strongly disagree". A middle classification on the scale was designated "undecided" for respondents who held no attitude toward a particular item. The statements that were randomly assigned negative values were later changed to positive statements when discussed in the findings as seen in Table 3.

Item Selection

The twenty items selected for use as questions in the teacher role perception questionnaire were chosen in a two part process. First, tentative questions were identified in a review of literature. Stukat (6) and Cruickshank (4) were particularly helpful. Second, the staff of the Adult and Adolescent Learning Center of the Arizona State Hospital critiqued the tentative list of questions. Modifications were made to make the final list of questions relevant to the psychiatric hospital setting.
Data Collection

Each of the participants received a four page questionnaire (Appendix A) delivered through the inter-departmental mailing service of the hospital. The questionnaire was color coded to facilitate their separation into the two groups that were to be compared. Included in the envelope with the questionnaire was a return envelope and a note explaining the mailing procedure and requesting the questionnaire be returned no later than April 29, 1974. On April 23, 24, and 25, there appeared in the hospital newsletter, the Action, a reminder to the participants of the April 29 deadline for return. (Appendix A).

Hypothesis to be Tested

The null hypothesis to be tested in this study was:
There will be no significant difference between perceptions of professional staff and non professional staff of teacher roles within the therapeutic treatment team.

The researcher will then determine individual role perceptions of the two groups by analysis of single questions.

Statistical Technique

The independent t-test was used in this study because it provides an accurate estimate of significance when results must be obtained from a small sample. (3:304).
CHAPTER IV
ANALYSIS AND RESULTS

The purpose of this chapter is the presentation and interpretation of results obtained from the statistical techniques applied to the data. The chapter is divided into four sections: percentage of questionnaire return, the presentation of raw and computed results, a test of instrument reliability, and an analysis of the data.

Responses to the Questionnaire

Thirty six professional staff responded with twenty seven questionnaires or a 75 percent return. Sixty nine non professional staff responded with thirty seven questionnaires or a 54 percent return. One hundred and five staff responded with sixty four questionnaires for an overall return of 61 percent. (Table 2)

<table>
<thead>
<tr>
<th>Professional Therapeutic Treatment Team Members</th>
<th>Sample</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>DOCTORS</td>
<td>7</td>
<td>3</td>
</tr>
<tr>
<td>NURSES</td>
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<td>9</td>
</tr>
<tr>
<td>PSYCHOLOGISTS</td>
<td>5</td>
<td>3</td>
</tr>
<tr>
<td>REHAB THERAPISTS</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>CHAPLAINS</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>SOCIAL WORKERS</td>
<td>7</td>
<td>6</td>
</tr>
<tr>
<td>MENTAL HEALTH TECH</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>TRAINING STAFF</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>UNSIGNED</td>
<td>1/36</td>
<td>1/27</td>
</tr>
</tbody>
</table>
TABLE 2
(con't)

<table>
<thead>
<tr>
<th>Non Professional Therapeutic Treatment Team Members</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sample</td>
</tr>
<tr>
<td>MENTAL HEALTH SERIES</td>
</tr>
</tbody>
</table>

**Presentation of Raw and Computed Results**

On the following three pages data is arranged to present the means of the two groups compared and "t" ratios. Each of the twenty questions is analyzed in terms of the two means and the corresponding "t" value. The "t" values found to be significant at the .05 level are labeled with an asterisk. (Table 3).
### TABLE 3

**MEANS AND "t" RATIOS FOR GROUP CLASSIFICATIONS**

<table>
<thead>
<tr>
<th>Item No.</th>
<th>Question</th>
<th>Professional Staff Means (n=27)</th>
<th>Non Professional Staff Means (n=37)</th>
<th>&quot;t&quot; Ratios</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>A role of the teacher includes the assistance with selection of community placement of his students.</td>
<td>2.00</td>
<td>2.62</td>
<td>2.10*</td>
</tr>
<tr>
<td>2.</td>
<td>Teachers should assume the role of assessor of academic achievement.</td>
<td>1.52</td>
<td>2.05</td>
<td>2.39*</td>
</tr>
<tr>
<td>3.</td>
<td>Teachers should assume the role of personal counselor to his students.</td>
<td>2.89</td>
<td>2.78</td>
<td>-.34</td>
</tr>
<tr>
<td>4.</td>
<td>Teachers should assist in maintenance of his students' personal hygiene.</td>
<td>2.52</td>
<td>2.89</td>
<td>1.20</td>
</tr>
<tr>
<td>5.</td>
<td>The role of the teacher includes that of disciplinarian in the classroom.</td>
<td>2.04</td>
<td>2.00</td>
<td>-.13</td>
</tr>
<tr>
<td>6.</td>
<td>A role of the teacher includes the assistance in the preservice and inservice training of non professional hospital personnel.</td>
<td>1.89</td>
<td>1.81</td>
<td>-.31</td>
</tr>
<tr>
<td>7.</td>
<td>Teachers should assume the role of instructor of sex education.</td>
<td>2.89</td>
<td>2.68</td>
<td>-.74</td>
</tr>
<tr>
<td>8.</td>
<td>Teachers should instruct non professional ward personnel in the use of educational materials on the ward.</td>
<td>1.81</td>
<td>1.62</td>
<td>-.84</td>
</tr>
<tr>
<td>Item No.</td>
<td>Question</td>
<td>Professional Staff Means (N=27)</td>
<td>Non Professional Staff Means (N=37)</td>
<td>&quot;t&quot; Ratios</td>
</tr>
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<td>---------</td>
<td>--------------------------------------------------------------------------</td>
<td>---------------------------------</td>
<td>-------------------------------------</td>
<td>------------</td>
</tr>
<tr>
<td>9.</td>
<td>Teachers should assume the role of coordinator of social activity of his students.</td>
<td>3.86</td>
<td>3.76</td>
<td>-.34</td>
</tr>
<tr>
<td>10.</td>
<td>A role of the teacher is one of educational consultant to the therapeutic treatment team.</td>
<td>1.48</td>
<td>1.86</td>
<td>1.73</td>
</tr>
<tr>
<td>11.</td>
<td>Teachers should assume the role of therapeutic treatment team member.</td>
<td>1.67</td>
<td>1.84</td>
<td>.75</td>
</tr>
<tr>
<td>12.</td>
<td>Teachers should assume the role of vocational counselor to his students.</td>
<td>2.15</td>
<td>2.14</td>
<td>-.05</td>
</tr>
<tr>
<td>13.</td>
<td>Teachers should assume the role of vocational counselor to his students.</td>
<td>1.52</td>
<td>1.65</td>
<td>.59</td>
</tr>
<tr>
<td>14.</td>
<td>A role of the teacher includes that of legal counselor to his students.</td>
<td>4.26</td>
<td>3.89</td>
<td>-1.52</td>
</tr>
<tr>
<td>15.</td>
<td>Teachers should assume the role of instructor of physical education.</td>
<td>2.52</td>
<td>2.51</td>
<td>-0.02</td>
</tr>
<tr>
<td>16.</td>
<td>A role of the teacher includes the assistance in the psychological diagnosis of his students.</td>
<td>2.48</td>
<td>3.14</td>
<td>2.02*</td>
</tr>
<tr>
<td>Item No.</td>
<td>Question</td>
<td>Professional Staff Means (N=27)</td>
<td>Non Professional Staff Means (N=37)</td>
<td>&quot;t&quot; Ratios</td>
</tr>
<tr>
<td>---------</td>
<td>---------------------------------------------------------------------------</td>
<td>---------------------------------</td>
<td>------------------------------------</td>
<td>-------------</td>
</tr>
<tr>
<td>17.</td>
<td>A role of the teacher includes that of developer of educational curriculum.</td>
<td>1.37</td>
<td>1.51</td>
<td>.92</td>
</tr>
<tr>
<td>16.</td>
<td>Teachers should assume the role of medical advisor to his students.</td>
<td>4.37</td>
<td>4.19</td>
<td>-.77</td>
</tr>
<tr>
<td>19.</td>
<td>Teachers should assume the role of behavior modifier within the educational setting.</td>
<td>1.85</td>
<td>1.97</td>
<td>.52</td>
</tr>
<tr>
<td>20.</td>
<td>Teachers should assume the role of coordinator of communication between ward personnel and supportive services.</td>
<td>3.04</td>
<td>2.81</td>
<td>-.75</td>
</tr>
</tbody>
</table>

df=62
* "t" significant at .05 level
Analysis of the Data

The purpose of this study was two-fold: the determination of individual teacher role perceptions within a therapeutic treatment team as perceived by professional staff and non professional staff and to compare any difference of individual teacher role perceptions between the two groups.

Therapeutic treatment team members were not significantly different in their perceptions of the following teacher role perceptions:

Strongly agree
1) developer of educational curriculum.

Agree
1) disciplinarian in the classroom.
2) instructor of non professional ward personnel in the use of educational materials on the ward. (The non professional group tended to agree more strongly.)
3) educational consultant to the therapeutic treatment team. (The professional group tended to agree more strongly.) Stukat (6)
4) therapeutic treatment team member. (The professional group tended to agree more strongly.)
5) vocational counselor.
6) researcher of more effective therapeutic practices. (The professional group tended to agree more strongly.
7) instructor of physical education.
8) behavior modifier within the educational setting.
9) assistance in preservice and inservice training of non professional hospital personnel.

Undecided
1) personal counselor to his students.
2) instructor of sex education.
3) coordinator of communication between ward personnel and supportive services.
Therapeutic treatment team members were significantly different in their perceptions of the following teacher role perceptions:

**Professional Group**

Strongly agree 1) assessor of academic achievement.

Agree 1) assistant with selection of community placement of his students.
2) assistant in the psychological diagnosis of his students.

**Non Professional Group**

Agree 1) assessor of academic achievement.

Undecided 1) assistant with selection of community placement of his students.
2) assistant in the psychological diagnosis of his students.

In all three cases the professional group differed from the non professional group in the direction of agreement with the perceived role.

A cluster analysis of the personal comment section of the questionnaire failed to yield any significant trends. Twenty one respondents made personal comments. Four respondents promoted closer contact between teachers and ward personnel. Three respondents had difficulty perceiving teacher roles.
The null hypothesis: There will be no significant difference between perceptions of professional staff and non professional staff of teacher roles within the therapeutic treatment team was clearly supported in this study. Anderson (1), Salvador (5).

Test of Instrument Reliability

Thirty of the sixty four questionnaires were randomly selected. Thirteen of the selected questionnaires were from the professional group and seventeen questionnaires were from the non professional group. A split half analysis of reliability was used in comparing the odd numbered questions to the even numbered questions. The data was then analyzed using the Pearson Product Moment Correlation and corrected by the Spearman Correction Formula.

The split half analysis of reliability yielded a reliability coefficient of .56 and was significant at the .01 level. This correlation can be interpreted as moderate. Correlations within this range permit use of the instrument in group prediction only.
Summary

There is clearly a need to define teacher roles within a hospital setting in order to facilitate their effectiveness within the interdisciplinary team in which they must function.

In this study the perceptions of professional and nonprofessional staff members concerning teacher roles within the therapeutic treatment team were examined to determine individual teacher roles within the therapeutic treatment team and to compare any difference of individual teacher role perceptions between the two groups.

The population of this study consisted of therapeutic treatment staff members of the Arizona State Hospital with the exclusion of the forensic division. The therapeutic treatment staff was subgrouped into professional and nonprofessional members.

The procedure for collecting the data was distribution of a twenty question questionnaire concerning teacher roles within the therapeutic treatment team to a proportional stratified random sampling of staff members of the hospital.
A Likert-type scale was used in the design of the data collecting instrument. The scale ranged from "Strongly Agree" to "Strongly Disagree". This allowed varying degrees of perception concerning each question.

A mean of each of the two groups was computed in order to determine the individual teacher role perceptions of the two groups. A "t" ratio was then computed to examine any difference between the two groups.

Therapeutic treatment team members agreed to the following teacher role perceptions: 1) developer of educational curriculum, 2) instructor of non professional ward personnel in the use of educational materials on the ward, 3) disciplinarian in the classroom, 4) educational consultant to the therapeutic treatment team, 5) therapeutic treatment team member, 6) vocational counselor, 7) researcher of more effective therapeutic practices, 8) instructor of physical education, 9) behavior modifier within the educational setting, and 10) assistance in preservice and inservice training of non professional hospital personnel.

Therapeutic treatment team members were undecided as to the following teacher role perceptions: 1) personal counselor to his students, 2) instructor of sex education, 3) coordinator of communication between ward personnel and supportive services, and 4) assistant in maintenance of his students personal hygiene.
Therapeutic treatment team members disagreed as to the following teacher role perceptions: 1) coordinator of social activity of his students, 2) legal counselor to his students, and 3) medical advisor to his students.

Conclusions

The analysis of the data has determined that on seventeen of the twenty questions concerning teacher role perceptions within the therapeutic treatment team that professional staff and non professional staff were in agreement as to their teacher role perceptions.

Concerning the difference in teacher role perception on question one (assistant with selection of community placement of his students) and question sixteen (assistant in the psychological diagnosis of his students) where professional staff agreed to the roles and non professional staff were undecided as to the roles, it is the belief of the researcher that non professional staff feel that these roles fall into their domain of function. Concerning the difference in teacher role perception on question two (assessor of academic achievement) where professional staff agreed strongly with the role and the non professional staff agreed with the role, it is the belief of the researcher that professional staff have more faith in the expertise of the teaching staff than do the non professional staff.

The null hypothesis was clearly accepted by the results of this study.
Recommendations

As a result of this study, the following recommendations are made:

1. That consideration be given, by administrative personnel, to defining teacher roles in terms of those statements agreed upon by professional and non-professional staff members.

2. That provisions be made for teachers to meet those criterion included within the statements which are agreed upon by professional and non-professional staff members.

3. Exploration is needed into the nature of the difference in perception of those teacher roles in which the two groups significantly differed.
SELECTED REFERENCES


BIBLIOGRAPHY


ROLE PERCEPTION QUESTIONNAIRE

Questionnaires have been coded so that only the researcher will know the identity of the respondent. Your answers will remain confidential, but a copy of the composite results will be mailed directly to you if you so request.

DATE: __________________________

POSITION TITLE: ________________

Would you like a copy of the final results of this study given to you when completed? Yes___ No___
INSTRUCTIONS: All items in this section are declarative statements concerning role perceptions of teachers. It is the purpose of this section to determine which roles you feel should be those of teachers in the therapeutic team.

Please indicate the position nearest your belief or perception of each statement. CIRCLE THE NUMBER ASSIGNED TO THE PERCEPTION NEAREST YOUR OWN. Please double-check your responses to be certain that you have circled a response for each item. Space is provided at the end of the questionnaire for your personal comments.

KEY: 1. Strongly agree (SA) - complete agreement with no reservations.
2. Agree (A) - agreement with some reservations.
3. Undecided (U) - cannot decidedly agree or disagree.
4. Disagree (D) - disagreement to some extent.
5. Strongly disagree (SD) - totally in disagreement.

SA A U D SD

1. A role of the teacher includes the assistance with the selection of community placement of his students. ................. 1 2 3 4 5

2. Teachers should assume the role of assessor of academic achievement. ................. 1 2 3 4 5

3. Teachers should not assume the role of personal counselor to his students. ......... 1 2 3 4 5

4. Teachers should assist in the maintenance of his students' personal hygiene. .......... 1 2 3 4 5

5. A role of the teacher does not include that of disciplinarian in the classroom. ....... 1 2 3 4 5

6. A role of the teacher includes the assistance in the preservice and inservice training of non-professional hospital personnel. ......................... 1 2 3 4 5
7. Teachers should assume the role of instructor of sex education

8. Teachers should not instruct non professional ward personnel in the use of educational materials on the ward.

9. Teachers should assume the role of educational consultant to the therapeutic treatment team.

10. A role of the teacher is not one of educational consultant to the therapeutic treatment team.

11. Teachers should not assume the role of therapeutic treatment team member.

12. Teachers should not assume the role of vocational counselor to his students.

13. Teachers should assume the role of researcher of more effective educational and therapeutic practices.

14. A role of the teacher includes that of legal counselor to his students.

15. Teachers should not assume the role of instructor of physical education.

16. A role of the teacher does not include the assistance in the psychological diagnosis of his students.

17. A role of the teacher does not include that of developer of educational curriculum.

18. Teachers should not assume the role of medical adviser to his students.

19. Teachers should assume the role of behavior modifier within the educational setting.

20. Teachers should assume the role of coordinator of communication between ward personnel and supportive services.
Personal Comments


March 21, 1974

Dear Dr. Browning:

Your consent is needed in a hospital-wide study that I am conducting to partially fulfill requirements for a graduate course in Research Methods (EP-500) in the College of Education, Arizona State University, Tempe, Arizona.

The study is entitled "A Comparison of Perceptions of Therapeutic Treatment Team Members of Teacher Roles within the Therapeutic Treatment Team in a School for Adult Psychiatric Patients." The need for this study is to determine teacher role perceptions within the therapeutic treatment team of an adult psychiatric institution in order that teachers can function more effectively within that team.

Questionnaires will be distributed through a random sample of hospital personnel to obtain the data needed.

Findings from the study will be sent to the Director of the Hospital, the Clinical Director in charge of Adult Education, and the head of Personnel. Any additional copies of the findings may be obtained from myself upon request at the Adult Education Center.

Your cooperation in this matter will be greatly appreciated.

Sincerely yours,

Robert Ellis, Teacher
Adult Education
To: Robert Ellis, Teacher, Adult Education
From: G. Lee Sandritter, M.D., Associate Superintendent
Date: April 12, 1974
Subject: Research Project

Your request for permission to do a research project entitled "A Comparison of Perceptions of Therapeutic Treatment Team Members of Teacher Roles within the Therapeutic Treatment Team in a School for Adult Psychiatric Patients" is approved.

Paragraph B. Sample - Population, under Research Methods and Procedures states that a "random sample (20%) of professional and nonprofessional therapeutic treatment staff of the Arizona State Hospital" will be utilized.

Request you insure that this project will not interfere with the normal every day duties of the personnel selected to participate.

G. Lee Sandritter, M.D.
Associate Superintendent
per Superintendent's deputations of January 18 and April 9, 1974

Copy: Robert C. Browning, D.O.
Mike Beaghler, Administrative Assistant
Louis Monical, Education Administrator
MEMORANDUM

TO: Michael Beaghler
ACTION

FROM: Robert Ellis
Teacher, Academic & Special
Adult & Adolescent Learning Center

DATE: April 22, 1974

SUBJECT: Notice for Action

"I would like to remind those who received the Teacher Role Perception Questionnaire that April 29, 1974 is the deadline for its return to Adult Education (U-23). Your cooperation is deeply appreciated.

Robert Ellis
Teacher, Academic & Special
Adult & Adolescent Learning Center"

RE:ms