This study of a school-based counseling program for primary grade children marked the third and final component of a program evaluation for students in urban, Catholic, non-public schools in Philadelphia, Pennsylvania. The study was conducted to determine the efficacy of short-term school counseling on students (N=56) in the first and second grades in 17 schools. Students were identified by their teacher and/or their parent/guardian as having difficulty with academics and/or behaving inappropriately within the classroom. The findings revealed that the counseled students made significant gains in their self-perceptions of their cognitive and physical competence. In the areas of maternal and peer acceptance, the improvements were not statistically significant. The findings suggest that students referred for counseling at Chapter 1 schools, already at risk because of adverse socioeconomic factors, do not seem to derive as great a benefit from counseling as those students from non-Chapter 1 schools, as reflected by Chapter 1 students' lower perceptions of their cognitive competence after counseling. Since no control group was studied, it is difficult to definitely determine whether counseling was the reason for the students' improved self-perceptions. (NB)
A Program Evaluation of

Short Term Counseling With

Primary Grade Children

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ABSTRACT

This study was a program evaluation of fifty-six first and second graders who received short term counseling and benefited from this intervention.
This study of a school based counseling program for primary aged children marked the third and final component of a program evaluation for students in non-public schools in Philadelphia. The purpose of the study was to determine the efficacy of short term school counseling on students in the first and second grade.

These authors, who serve as supervisors to a counseling and psychology program at READS, Inc., had evaluated both its elementary counseling program for students in the academic year 1989-90 (grades three through seven) and its secondary school based counseling program (grades nine through twelve) in 1990-91 (Lavoritano & Segal, 1992a, 1992b) to determine the efficacy of short term school based counseling.

The 1989-90 study suggested that school counseling was an effective intervention by favorably adjusting students’ self-perceptions about their academic competence after counseling. The 1990-91 program evaluation of secondary students yielded specific gender differences, with females appearing to have benefitted more from the counseling experience than males.

READS, an acronym for Remedial Education and Diagnostic Services, has been a service provider of psychological and educational testing, counseling, and remedial education to nonpublic schools in southeastern Pennsylvania since 1975. These services are legislated through Pennsylvania Act 89 and are
funded by the state educational intermediate unit. Over the years, READS has serviced more than a quarter million individuals. More than forty nonpublic schools in north and south Philadelphia benefit from READS services. The majority of these schools are Catholic in orientation.

Conducting research in a setting where service to individuals is its major commitment, posed difficulty to these authors in arriving at an appropriate research design for this study. After consulting some statistical texts, (Winer 1971; Huck, Cormier, & Bounds, 1974; Myers, 1979; Howell, 1982), it appeared as if the ideal way to conduct this study would have been to use a repeated measures ANCOVA with a control group of referred students not receiving treatment to compare with those referred students in treatment. This design was infeasible to activate as READS would have been unable to deny service to those in need of counseling in favor of a research study. These researchers decided to employ a pretest/posttest design with the counseled students where results on a self-esteem measure were compared before and after treatment to assess counseling efficacy. Because of the design limitation, i.e., the absence of a control group, some caution must be exercised when interpreting the results.

Before this program evaluation was undertaken a review of the outcome research for counseling/psychotherapy was undertaken (Fiedler, 1951; Strupp & Hadley, 1977; Smith & Glass, 1977; Frank, 1979; Glass & Kiegl, 1983; Lambert, Christensen,
& DeJulio, 1983) and specific research citing school based counseling was reviewed (Stoffer, 1970; Alper & Kranzler, 1970; Love, Kaswan, & Bugental, 1972; Rossman & Kahnweiler, 1977; Friesen & Der, 1984; Pryzwansky, Harris & Jackson, 1984; Reynolds & Stark, 1987).

The four following assumptions seemed to capsulize the psychotherapy/outcome research:

1) No singular approach to psychotherapy has demonstrated effectiveness over others; 2) More individuals benefit from the experience than do not; 3) Most psychotherapy/counseling recipients demonstrate increased self-esteem, better adjustment to work and/or school, and report a reduction in anxiety; 4) School-based intervention programs are an effective means to positively affect children’s quality of life.

In line with the two other program evaluations, these authors continued to measure treatment differences using self-esteem as the dependent variable and selecting a self-report measure by Susan Harter to uphold continuity.

Prior research indicated the measurement of self-esteem with young children had often been inferred through observation, parent interview, and teacher/student questionnaires (Pratt and Hawke, 1973; Latorre, 1982). These researchers sought to use a more direct measurement of self-esteem. However, most self-concept scales tended to pull for socially desirable responses and utilized a bi-polar format (true/false, like
me/unlike me) not providing any latitude for children to qualify their responses. Clinical experience with young children led these authors to believe that the problems of social acceptability would be exacerbated with a traditionally formatted test.

Harter (1979) devised a children's self-esteem scale, the Perceived Competence Scale for Children, which was later revised to be The Self-Perception Profile for Children, (SPPC), (Harter, 1985) that could be administered to children eight to thirteen years old (third grade through eighth grade). This test was remarkable in that it expanded the two choice format (true-false) by allowing a child to reference with either a competent or an incompetent group of children, and then determine whether this identification was strong or weak. These additional choices added discriminative value to the measurement of self-concept making the SPPC an instrument often used in current self-esteem research (Strop and Hultgren, 1985; Cate and Sugawara, 1986; Kowalski et al, 1987; Summerville et al, 1987; Anderson, 1989; Renick and Harter, 1989; Anderson, 1990; Berndt, 1990; Lavoritano and Segal, 1992a).

Harter (1983) developed a downward extension of this instrument, The Pictorial Scale of Perceived Competence and Social Acceptance for Young Children, (PSPCSAYC), for preschool and primary grade students.
METHOD

Subjects

Fifty-six, first and second grade students from seventeen schools served as subjects for this study. There were 42 males and 14 females (a three to one ratio) ranging in age from six to nine years old.

Specifically, there were 25 male and 8 female first graders and 17 male and 6 female second graders. By age, the student distribution was as follows: 21 six year olds, 24 seven year olds, 10 eight year olds, and 1 nine year old.

Participating students were identified by their teacher and/or their parent/guardian as individuals generally having difficulty with academics and/or behaving inappropriately within the classroom setting. Teachers completed a READS referral form indicating the reasons for referral. No student was refused services.

All schools were urban and Catholic with ten of the seventeen schools receiving Chapter I services. Chapter I programs provide remedial education in math and reading to economically disadvantaged students through federal funds. The students represented were multi-culturally and ethnically diverse. The socioeconomic status ranged from welfare recipients to middle class. Other demographic data collected indicated that 51% of the students in this study came from single parent homes, 52%
were from Chapter I schools, 16% had already been retained a grade.

Ten Pennsylvania elementary school certified counselors gave service to the fifty-six students in the study. In addition to participating in this study, these counselors maintained service to their other counseling cases at the schools they ordinarily serviced. These counselors all completed a master's level of graduate training and their counseling experience ranged from 0-6 years. The general orientation of their training and clinical experience tended to be supportive and client centered, as well as behavioral, with specific emphasis on prosocial modeling and positive reinforcement for socially acceptable behaviors. Students were seen individually for an average of fifteen sessions, generally on a weekly basis for half hour to forty minute sessions.

Materials

The PSPCSAYC (Harter 1983) is a two factor test measuring perceived competence and acceptance by the child's self report. These two general scales are further subdivided into four specific domains. The competence scale yields measures of the child's perceived physical and cognitive adequacy while the acceptance scale examines the child's perceived acceptance by the mothering figure as well as his/her peer approval.
The psychometric properties of the PSPCSAYC were acceptable. (Harter & Pike, 1984). This measure has demonstrated adequate internal consistency reliability, as well as adequate factorial and convergent validity. Reported reliabilities when combined with their designated factors fell within a range of .75-.89.

There are two versions of the PSPCSAYC. One test is utilized for preschool and kindergarten children, the other for first and second graders. The latter was chosen for this study. The PSPCSAYC for first and second graders is a twenty-four item measure which taps the domains of cognitive and physical competencies as well as maternal and peer acceptance six different times during the test administration. The test items are read aloud to the child by an examiner while he/she looks at two accompanying pictures. The illustrations portray both a competent child and an inadequate child if the item is measuring adequacy. When the scale taps acceptance, it pictures either the child integrated with others or isolated and uninvolved. The child is then asked to identify with one of the pictures and then to qualify this reference indicating whether there is a stronger or weaker connection.

Harter concretizes this discriminant task by using four circles of two different sizes beneath the illustration. If the child has a strong identification he/she will choose the larger circle at either end of the continuum, whereas the smaller circles would represent a weaker identification. The PSPCSAYC
utilizes separate sets of pictures for boys and for girls while retaining the same items for both sexes.

In scoring, responses are given a "one" to "four" numerical rating. A "four" response would mean the child strongly and positively identified with the competent and socially accepted individual whereas the converse would be true of a "one" response. The six scores obtained for each domain are then averaged.

READS counselors were given an in-service training on the administration of the PSPCSAYC in October 1990. These counselors had familiarity with the SPPC which had been introduced to them in September 1989. Counselors were also responsible for collecting demographic data on each student which included information such as: age, sex, school, Chapter I services, family background (single parent versus two parent family), and retention history.

After parent permission was obtained and rapport was established, counselors were instructed to administer and score the PSPCSAYC with their counselees. This was generally accomplished by the third session. At the conclusion of counseling, the children were post tested with the PSPCSAYC.

RESULTS

T-tests for dependent samples demonstrated that counseled
A Program Evaluation


students made significant gains in their self-perceptions of their cognitive and physical competence. In the areas of maternal and peer acceptance, the improvements were not statistically significant. These results are presented in Table 1.


TABLE 1
In addition, several one way analyses of covariance were performed. The four pretest domain scores were used as covariates with the independent variables of gender, retention, single parent family, and Chapter 1 services. Except for Chapter 1 services, no significant difference was found for the post test scores with the other independent variables. Post test means for cognitive competence were significantly higher for students from non-Chapter 1 schools (Non-Chapter 1 mean=3.57, adjusted mean=3.51, standard deviation=.40; Chapter 1 mean=3.23, adjusted mean=3.28, standard deviation=.40, F=6.40, p<.05). A follow-up ANOVA was run to determine the pretest perceptions of cognitive competence of the non-Chapter 1 students versus the Chapter 1 students. They were not significantly different. Finally, t-tests for dependent samples comparing pre and post test perceptions of cognitive competence of Chapter 1 students were not significant, however non-Chapter 1 students did score significantly better in the post test (pretest mean 3.35, standard deviation =.40, t=2.89, p<.01)

DISCUSSION

Without the presence of a control group, it is difficult to definitively conclude whether counseling in and of itself was the specific reason for the student’s improved self-perceptions from
the onset of treatment to its conclusion. Improvement might have been due to a natural developmental progression and/or more experience within the school environment itself.

However, this is the third time that these authors have measured counseling efficacy and past results have indicated improved perceptions of their school competence (Lavoritano and Segal 1992a, 1992b).

This study suggests that the role of the school counselor, even with children of a younger age, is a viable intervention for improving self-perceptions in the area of school competence. This is an important assertion as often counselors feel particularly uncertain of whether they make a difference with children at a younger age. It may also be a notable finding for school systems who might be determining whether counseling for young children is a worthwhile program to offer its constituents.

In conclusion, this research suggests that students referred for counseling at Chapter 1 schools, already at risk because of adverse socioeconomic factors, do not seem to derive as great a benefit from counseling as those students from non-Chapter 1 schools, as reflected by their lower perceptions of their cognitive competence after counseling. This finding was different from the authors' prior study of an elementary school counseling program which showed no significant differences in any areas of self-esteem ratings between Chapter 1 and non-Chapter 1 students (Lavoritano and Segal, 1992a).
This difference in cognitive competence perception of counseled students might suggest that Chapter 1 students are less confident with the school experience, perhaps due to lack of earlier school or "school-like" experience. It is an area worthy of further scrutiny.
# TABLE 1

Means and Standard Deviations of Pretest and Post Test Scores of the PSPCSAYC - Counseled Students

<table>
<thead>
<tr>
<th>Subdomain</th>
<th>Number SS</th>
<th>Mean</th>
<th>Standard Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Cognitive Competence</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pretest</td>
<td>56</td>
<td>3.26</td>
<td>.57</td>
</tr>
<tr>
<td>Post test $t=2.31^*$</td>
<td>56</td>
<td>3.38</td>
<td>.49</td>
</tr>
<tr>
<td><strong>Physical Competence</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pretest</td>
<td>56</td>
<td>3.16</td>
<td>.60</td>
</tr>
<tr>
<td>Post test $t=2.79^{**}$</td>
<td>56</td>
<td>3.33</td>
<td>.55</td>
</tr>
<tr>
<td><strong>Social Acceptance</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pretest</td>
<td>56</td>
<td>3.12</td>
<td>.68</td>
</tr>
<tr>
<td>Post test $t=1.76$</td>
<td>56</td>
<td>3.25</td>
<td>.55</td>
</tr>
<tr>
<td><strong>Maternal Acceptance</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pretest</td>
<td>55</td>
<td>2.76</td>
<td>.70</td>
</tr>
<tr>
<td>Post test $t=1.77$</td>
<td>55</td>
<td>2.90</td>
<td>.72</td>
</tr>
</tbody>
</table>

* * p<.05 ** p<.01
REFERENCES


