School principals face personal challenges as a result of the effect their job has on their health. This paper presents findings of a study that examined the extent to which eight health concepts, developed by the Medical Outcomes Study (MOS) team at the Health Institute, were prevalent within a population of school principals. A survey mailed to 266 elementary and secondary principals and assistant principals in 4 school corporations in northern Indiana and Missouri elicited 166 returns, a 73 percent response rate. When compared to baseline data from the national population, both the sample and the national population reported similar responses to the eight health concepts, and both the principals and the national sample scored lower on measures of vitality. Principals' perceptions of their health were above the national means in physical functioning, bodily pain, and general health perceptions. However, principals ranked below the national means in the health concepts of social functioning, role in physical activities, general mental health, and role activities in emotional health. African-American female principals reported means for their overall physical and emotional health that were higher than those of the national population. It is recommended that training programs be revised to recognize stressors and physical and emotional health in order to increase the overall effectiveness of school principals. Three tables and a copy of the questionnaire are included. (Contains 27 references.) (LMI)
COPING WITH THE PRINCIPALSHIP: HEALTH CHALLENGES OF AFRICAN-AMERICAN FEMALE SCHOOL PRINCIPALS AND THE IMPLICATIONS FOR PRINCIPAL TRAINING CERTIFICATION PROGRAMS AT COLLEGES AND UNIVERSITIES

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Paper presented at The Annual International Congress on Challenges to Education
Aruba
July 11, 1996

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Doris McEwen Walker, Ph.D.
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School principals are faced with situations that challenge not only their ability to effectively lead instruction and perform the professional aspects of their job, they face personal challenges as a result of the affect the job has on their health. Carr (1994) points out that many principals feel isolated and unsupported. There is a high incidence of anxiety and depression among principals, due primarily to the increased management function. Time management and handling of student discipline issues are ranked the most stress-producing element in the administrative profession (Dickman, 1993). Stress leads to unhealthy behaviors and health problems. And since a degree of stress is inherent within the principalship, the job of school principal is laden with health risks. Pappas (1994) indicates that occupation is a contributor to health. Work conditions and the prestige associated with the job relate to health, particularly as they relate to one’s reaction to stress. Scare resources, role ambiguity, role conflict, and serious organizational and administrative problems are the very nature of the principalship. It is these factors that Neville (1981) point to as the reason for occupational hazards experienced by managers. In addition to the common stressors existing among managers, school principals are exposed to stressors stemming from the educational learning environment. These stressors include disillusionment and frustration with academic achievement, student discipline and truancy problems, and unfair and disheartening public reaction to public schools (Friedman, 1995; Byrne, 1991; Sarros, 1988; Ricken, 1980; Ryor, 1978; Scrivens, 1979). Friedman (1995) indicates that,
particularly among female principals, home-work conflict is also a major stressor among school principals. Doring (1993) suggests that people work better under some degree of stress, but this degree varies according to the individual and his or her environment. Sires and Tonnsen (1993) also suggest that stress in moderation keeps one alert.

There have been some noteworthy studies on job-related stress, however little research exists on the self-perception of school principals on their overall well-being. Even less research has been found that compare school principals' health issues by gender and race and ethnicity. Specific groups within the American population are more likely to be affected by serious health concerns in certain categories. Pappas (1994) indicates that when the socioeconomic factors of income, marital status, and household income are controlled, African Americans are at higher risk for infectious diseases, homicide, and diabetes; and equally at risk for cancer and circulatory diseases. Waitzman and Smith (1994) indicate that hypertension is a major risk factor for heart disease and stroke and has a higher prevalence among African Americans. Another study on life expectancy (Kochanek, Maurer, and Rosenberg, 1994) support the findings of Waitzman and Smith.

A research study conducted by Anson, Para, Neuman, and Chernichovsky (1993) indicates that in general females are less happy, more distressed, and evaluate their health as poor twice as often as men. However, factored into this analysis must be the consideration that females are also more likely to be less educated and unemployed or underemployed.

The research in this study examines the extent to which eight health concepts, developed by the Medical Outcomes Study (MOS) team at The Health Institute, are prevalent within the population of school principals. These eight health concepts determine the overall physical and
emotional well-being of an individual, as they perceive themselves. The major objective of the research study was to obtain data on: 1) limitations in physical activities because of health problems; 2) limitations in social activities because of physical or emotional problems; 3) limitations in usual role activities because of physical health problems; 4) bodily pain; 5) general mental health (psychological distress and well-being); 6) limitations in usual role activities because of emotional problems; 7) vitality (energy and fatigue); and 8) general health perceptions. The responses on the eight health concepts are compared with the national population to determine whether school principals’ perception of their health differs from the general population. The research further looks at whether African American females’ self-perception of their health differs significantly from the survey and national populations. The major research hypothesis is that there is no significant difference between the self-perception of African American female school principals and the general population on their general health.

The research population consists of elementary and secondary school principals in Indiana and Missouri. Principals were given the MOS* 36-Item Short-Form Health Survey (SF-36). The survey has been researched and tested in the general population as well as in specific populations for validity and reliability (McHorney, Ware, and Raczek, 1993; Brazier, et al., 1992). The survey was constructed for self-administration for ages 14 and higher. The principal investigators sent the survey to school principals (principals and assistant/associate principals) for their responses. The data was disaggregated and compared with baseline data from the national population.

The primary objective of the research is to determine what changes, if any, are needed in school principal training and certification programs to reduce the health risks inherent in the job of
school principal. The secondary objective of the research is to comparatively look at specific populations, like African American female school principals, and their self-perceptions of health challenges to determine what, if any, differences exist in the perception of health.

Method

Sample

The subjects in the study were 226 public school principals and assistant principals in Missouri and Indiana. Of the total sample, 48 percent were females and 47 percent were males (5 percent did not disclose their gender); 58 percent were principals, 27 percent were assistant principals, and 5 percent indicated other (12 percent did not disclose their position). The ethnic representation of the sample consisted of 28 percent African American, 62 percent Caucasian, and .6 percent Native American (8 percent did not disclose race and ethnicity). The average age of the sample was 47.6. The average experience was 7.2 years. The proportion of female and male principals, age, years of experience in the sample approximates the general population.

Instrumentation

The MOS 36-Item Short-Form Health Survey (SF-36) was used in this study. A copy of the survey is included in Appendix A. The MOS - SF 36 was developed by the MOS team at The Health Institute in Boston, Massachusetts. The eight health concepts studies have had extensive review for validity and reliability with different populations. The instrument gives information on physical health, mental health, social functioning, vitality, and general health perceptions. In addition, information is obtained on how an individual perceives changes in their health. Exhibit 1.1 shows general information about the SF -36 health status scales.
<table>
<thead>
<tr>
<th>Health Concept</th>
<th>No. of Items</th>
<th>Meaning of Scores</th>
</tr>
</thead>
</table>
| Physical Functioning    | 10           | Low: Limited a lot in performing all physical activities including bathing or dressing  
|                         |              | High: Performs all types of physical activities including the most vigorous without limitations due to health |
| Role - Physical         | 4            | Low: Problems with work or other daily activities as a result of physical health  
|                         |              | High: No problems with work or other daily activities as a result of physical health |
| Bodily Pain             | 2            | Low: Very severe and extremely limiting pain  
|                         |              | High: No pain or limitations due to pain |
| General Health          | 5            | Low: Evaluates personal health as poor and believes it is likely to get worse  
|                         |              | High: Evaluates personal health as excellent |
| Vitality                | 4            | Low: Feels tired and worn out all of the time  
|                         |              | High: Feels full of pep and energy all of the time |
| Social Functioning      | 2            | Low: Extreme and frequent interference with normal social activities due to physical or emotional problems  
|                         |              | High: Performs normal social activities without interference due to physical or emotional problems |
| Role-Emotional          | 3            | Low: Problems with work or other daily activities as a result of emotional problems  
|                         |              | High: No problems with work or other daily activities as a result of emotional problems |
| Mental Health           | 5            | Low: Feeling of nervousness and depression all of the time  
|                         |              | High: Feels peaceful, happy, and calm all of the time |
| Reported Health         | 1            | Low: Believes general health is much better now than one year ago  
| Transition              |              | High: Believes general health is much worse now than one year ago |


The survey of Indiana and Missouri principals also included a question on reported health
transitions that was not included in the SF-36. This question (#2A) ask principals to compare their health now to what it was when they first entered the principalship. In addition, the Missouri survey also asked principals to respond to whether they had any other ailments not mentioned above which have been brought on by job stress, i.e., high blood pressure, high cholesterol, heart disease, weight gain?

Procedure

Surveys were mailed to school principals and assistant principals in four school corporations in Northern Indiana (Elkhart, School City of Mishawaka, Penn-Harris-Madison, and South Bend) and Missouri (Kansas City School District). The research directors obtained permission from the respective school corporations and school districts and university to conduct research. The survey was accompanied by letters from the research directors. The letters set out the research aims and explained its importance. A total of 266 surveys were mailed, of which 166 were completed and returned (a 73 percent return rate). Indiana populations had a return rate of 90 percent and Missouri's return rate was 56 percent. The overall response rate was higher than the 65.1 percent used as a gauge for an acceptable response rate for a survey done by mail in some national studies (McHorney, Kosinski, and Ware, 1994).

Results

The following results were generated from the SF-36 information received from school principals. School principals' self-perception of their health, compared with the national population indicates that school principals are above the national means in physical functioning, bodily pain, and general health perceptions. School principals score below the national means in the health concepts of social functioning, role in physical activities, general mental health, and role activities
in emotional health. School principals and the national populations were the same in the category of vitality. In response to general health transition, or how school principals feel their health is compared with one year ago, they fall just below the national population. This response indicates that in general school principals feel their health is about the same as it was one year ago. Exhibit 1.2 shows school principals' self-perception of their health compared to state and national populations.

<table>
<thead>
<tr>
<th>Health Concept</th>
<th>Indiana</th>
<th>Missouri</th>
<th>Total Population</th>
<th>*National Population</th>
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<td>85</td>
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<td>Social Functioning (SF)</td>
<td>76</td>
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<td>77</td>
<td>83</td>
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<td>Role - Physical Activities (RP)</td>
<td>84</td>
<td>75</td>
<td>79.5</td>
<td>81</td>
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<tr>
<td>Bodily Pain (BP)</td>
<td>75</td>
<td>81</td>
<td>78</td>
<td>75</td>
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<tr>
<td>General Mental Health (MH)</td>
<td>70</td>
<td>78</td>
<td>74</td>
<td>75</td>
</tr>
<tr>
<td>Role Activities-Emotional Health (RE)</td>
<td>72</td>
<td>75</td>
<td>73.5</td>
<td>81</td>
</tr>
<tr>
<td>Vitality (VT)</td>
<td>57</td>
<td>65</td>
<td>61</td>
<td>61</td>
</tr>
<tr>
<td>General Health (GH) Perceptions</td>
<td>75</td>
<td>83</td>
<td>79</td>
<td>72</td>
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<tr>
<td>Health Transition (HT)</td>
<td>3.41</td>
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The difference in responses between African American female school principals and Caucasian females school principals were determined based on an item by item response. There were no significant difference between the responses of African American female school principals in comparison with Caucasian female school principals or the total population surveyed. Variations in item responses are indicated in Exhibit 1.3.
## EXHIBIT 1.3 - COPING WITH THE PRINCIPALSHIP
### COMPARISON OF SURVEY POPULATION WITH NATIONAL MEANS

<table>
<thead>
<tr>
<th>Item</th>
<th>African American Females</th>
<th>Caucasian Females</th>
<th>Total Population</th>
<th>*National Population</th>
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<td>3b</td>
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<td>2.78</td>
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<td>3c</td>
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<td>2.88</td>
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</tr>
<tr>
<td>3d</td>
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<td>2.56</td>
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<tr>
<td>3e</td>
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<td>3f</td>
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<td>3g</td>
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<td>4c</td>
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<td>7</td>
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**VITALITY**

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**SOCIAL FUNCTIONING**

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**ROLE EMOTIONAL**

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**MENTAL HEALTH**

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**REPORTED HEALTH TRANSITION**

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<td>2.93</td>
<td>2.91</td>
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</table>

The item average for Physical Functioning for African American females is slightly below the responses for Caucasian female, and both are higher than the national population. The same is true for the health concept -- General Health. The item averages for Pain, Vitality, Role-Emotional, and Mental Health indicate that African American females responses are higher than Caucasian females, and all three are higher than the nation populations. Both African American females and Caucasian females scored the same on Social Functioning and Role-Physical, each slightly higher than the national population.

**Discussion**

The findings of this study suggest that African American female school principals differ in their perceptions of their physical and emotional health from Caucasian females and the total population surveyed. African American females indicated that in general they are very good at performing most physical activities, including the most vigorous without limitation due to health. Their general health is higher than the national population by 1.1 points. Their emotional health is also higher than the general population.

The data suggest that the research hypothesis that there is no significant difference between the self-perception of African American female school principals and the general population is not supported. While specific disorders may exist in the African American
population, like diabetes and high blood pressure, this study indicates that overall the physical and emotional health of African American female school principals and assistant principals is better than the national population. However, in reviewing this data it should be noted that the mean age of African American females in this study is two years younger than others in the study. Also the number of years in the position is two years less for African American females. Fifty percent of the African American female survey respondents were principals and 33 percent were assistant principals (17 percent did not indicate position).

The survey focuses on eight health concepts that have a history of study in general populations. Responses by school principals to the eight health concepts were compared with the general population, as well as between the two states serving as population for the study. Slight differences were found in the survey responses, however the variances are small. Except for the category of Vitality, the survey population and the national population are above 70 percent on health concepts. Vitality falls at 61 percent for both the survey population and the national populations.

The suggestions from the survey indicate that change in principal training and certification programs relate to assisting aspiring principals in dealing with stress. Vitality is proportional to stress. The low scores on vitality translates into the energy level versus fatigue that one is experiencing. While some research suggest that school principals have a higher-than-average group well-being score and a range of healthful behaviors regarding drug use, job satisfaction, and coping, they could improve by increasing their physical exercise, diet, stress, and time management (Smith, 1988). The research that exists on burnout and stress in the principalship indicate that it is necessary to consider these factors as principal training and certification
programs are developed. This is especially true in light of the responses in the category of Vitality. The energy it takes to be a school principal is unquestioned. Although the responses are not different from the national population, the low percentage indicates that this is an area that remains one to consider as we look at longevity in the principalship. Vitality is akin to stress and burnout. Assisting principals with coping with the principalship includes attention to stressors in the principalship.

The fatigue and discontentment experienced by school principals limits the available pool of persons aspiring to be school principals. Some potential school principals do not see advantages in assuming building leadership. They are just as comfortable in their teaching assignment - with less management challenges. A burned-out school principal experiences physical, mental, and cognitive exhaustion; personal detachment from recipients of services (teachers, students, and parents); and belittles and derogates those who work for or with him or her (Friedman, 1995, p. 649). With the mounting challenges in education we need school leaders who eagerly embrace the demands, while maintaining physical and emotional fitness programs designed to enhance their capabilities. Attention to identified stress relievers like physical activity, mental control, and management skill development (Gmelch, 1982) increases a principal’s effectiveness. Since school principals in the population that was surveyed are feeling good about their physical and emotional health, programs need to focus on maintaining and increasing that perception and minimizing stressors. Rather than preventing risk factors from happening, healthy people must be encouraged to lead lifestyles that will maintain and improve their state of well-being (Kanters, M. A., Montelpare, W. J., and Carter, M., 1994). Principals need to learn how to take time out of everyday to remove themselves from stress producing situations. The end result
will be longevity to their career (Goldstein, 1992). Revisions in training programs with attention to stressors and physical and emotional health increase the overall effectiveness of school principals.
References


McHorney, C. A., Kosinski, M., Ware, J. E. (1994). Comparisons of the costs and quality of norms for the SF-36 health survey collected by mail versus telephone interview: Results from a
national survey. Medical Care, 32(6), 551-567.


Ware, J. E. (1996). The MOS 36-Item Short-Form Health Survey (SF 36). In Sederer, L. I. & Dickey, B., (Eds.), Outcomes assessment in clinical practice, pp. 61-64. Baltimore, Maryland: Williams & Wilkins.
Thank you for helping me with this survey. The survey was developed by the Medical Outcomes Study, which has been tested and validated extensively. All responses will be reported as composite data and will be strictly anonymous. The number codes are to determine response rate only.

PLEASE CHECK THE RESPONSE YOU FEEL IS MOST ACCURATE

DEMOGRAPHIC INFORMATION: In each category below, please CIRCLE the appropriate response:

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<th>Elkhart</th>
<th>School City of Mishawaka</th>
<th>Penn-Harris-Madison</th>
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<tr>
<td></td>
<td>South Bend</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current Position:</td>
<td>Principal</td>
<td>Assistant Principal</td>
<td>Other/Specify</td>
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<tr>
<td>Number of Years in the Position Circled Above: ______</td>
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<tr>
<td>Your Age:</td>
<td>______ years</td>
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<tr>
<td>Gender:</td>
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<td>Male</td>
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<tr>
<td>Race/Ethnicity:</td>
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<td>Caucasian</td>
<td>Hispanic American</td>
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<tr>
<td></td>
<td>Asian-American</td>
<td>Native American</td>
<td>Other/Specify</td>
</tr>
</tbody>
</table>

1. In general, would you say your health is:  (Select One and Circle)
   - Excellent
   - Very Good
   - Good
   - Fair
   - Poor

2. Compared to one year ago, how would you rate your health in general now?  (Select One and Circle)
   - Much better now than one year ago
   - Somewhat better now than one year ago
   - About the same
   - Somewhat worse now than one year ago
   - Much worse now than one year ago

2a. Compared to the year you first became a school administrator, how would you rate your health in general now?  (Select One and Circle)
   - Much better
   - Much worse now
   - Somewhat better
   - About the same
   - Somewhat worse now
3. The following items are about activities you might do during a typical day. Does your health now limit you in these activities? If so, how much? [Circle one in (a-j) below]

a. **Vigorous activities**, such as running, lifting heavy objects, participating in strenuous sports
   
   Yes, limited a Lot  
   Yes, limited a little  
   No, not limited at all

b. **Moderate activities**, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf
   
   Yes, limited a Lot  
   Yes, limited a little  
   No, not limited at all

c. Lifting or carrying groceries
   
   Yes, limited a Lot  
   Yes, limited a little  
   No, not limited at all

d. Climbing **several** flights of stairs
   
   Yes, limited a lot  
   Yes, limited a little  
   No, not limited at all

e. Climbing one flight of stairs
   
   Yes, limited a lot  
   Yes, limited a little  
   No, not limited at all

f. Bending, kneeling, or stooping
   
   Yes, limited a lot  
   Yes, limited a little  
   No, not limited at all

g. Walking **more than** a mile
   
   Yes, limited a lot  
   Yes, limited a little  
   No, not limited at all

h. Walking **several blocks**
   
   Yes, limited a lot  
   Yes, limited a little  
   No, not limited at all

i. Walking **one block**
   
   Yes, limited a lot  
   Yes, limited a little  
   No, not limited at all

j. Bathing or dressing yourself
   
   Yes, limited a lot  
   Yes, limited a little  
   No, not limited at all

4. During the **past 4 weeks**, have you had any of the following problems with your work or other regular daily activities as a result of your physical health? [Circle yes or no in (a-d) below]

a. Cut down the **amount of time** you spent on work or other activities
   
   Yes  
   No

b. **Accomplished less** than you would like
   
   Yes  
   No

c. Were limited in the **kind of work** or other activities
   
   Yes  
   No

d. Had **difficulty** performing the work or other activities (for example, it took extra effort)
   
   Yes  
   No
5. During the **past 4 weeks**, have you had any of the following problems with your work or other regular daily activities as a result of any emotional problems (such as feeling depressed or anxious)? [Circle one in (a-c) below]

   a. **Cut down the amount of time** you spent on work or other activities
      
      Yes  No

   b. **Accomplished less than** you would like
      
      Yes  No

   c. Didn't do work or other activities as **carefully** as usual
      
      Yes  No

6. During the **past 4 weeks**, to what extent has your physical health or emotional problems interfered with your normal social activities with family, friends, neighbors, or groups? (Select One and Circle)

   Not at all  Slightly  Moderately  Quite a bit  Extremely

7. How much **bodily** pain have you had during the **past 4 weeks**? (Select One and Circle)

   None  Very Mild  Mild  Moderate  Severe

   Very Severe

8. During the **past 4 weeks**, how much did **pain** interfere with your normal work (including both work outside the home and housework)? (Select One and Circle)

   Not at all  A little bit  Moderately  Quite a bit  Extremely

9. These questions are about how you feel and how things have been with you during the past 4 weeks. For each question, please give the one answer that comes closest to the way you have been feeling. [Circle one in (a-I) below]

   a. Did you feel **full of pep**?
      
      All of the time  Most of the time  A good bit of the time  Some of the time  A little bit of the time  None of the time

   b. Have you been a **very nervous** person?
      
      All of the time  Most of the time  A good bit of the time  Some of the time  A little bit of the time  None of the time

   c. Have you felt so down in the dumps that nothing could cheer you up?
      
      All of the time  Most of the time  A good bit of the time

   d. Have you felt calm and peaceful?
      
      All of the time  Most of the time  A good bit of the time  Some of the time  A little bit of the time  None of the time

   e. Did you have a lot of energy?
      
      All of the time  Most of the time  A good bit of the time  Some of the time  A little bit of the time  None of the time
f. Have you felt downhearted and blue?
   All of the time
   Most of the time
   A good bit of the time
   Some of the time
   A little bit of the time
   None of the time

g. Did you feel worn out?
   All of the time
   Most of the time
   A good bit of the time
   Some of the time
   A little bit of the time
   None of the time

h. Have you been a happy person?
   All of the time
   Most of the time
   A good bit of the time
   Some of the time
   A little bit of the time
   None of the time

i. Did you feel tired?
   All of the time
   Most of the time
   A good bit of the time
   Some of the time
   A little bit of the time
   None of the time

10. During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities (like visiting with friends, relatives, etc.)? (Select One and Circle)
   All of the time
   Most of the time
   Some of the time
   A little bit of the time
   None of the time

11. How true or false is each of the following statements for you? [Circle one in (a-d) below]

   a. I seem to get sick a little easier than other people
      Definitely true
      Mostly true
      Don't know
      Mostly false
      Definitely false

   b. I am as healthy as anybody I know
      Definitely true
      Mostly true
      Don't know
      Mostly false
      Definitely false

   c. I expect my health to get worse
      Definitely true
      Mostly true
      Don't know
      Mostly false
      Definitely false

   d. My health is excellent
      Definitely true
      Mostly true
      Don't know
      Mostly false
      Definitely false

THANK YOU!!!!!!!!!!
COPING WITH THE PRINCIPALSHIP

PLEASE CHECK THE RESPONSE YOU FEEL IS MOST ACCURATE

Female ______ Male ______ African American ______ Caucasian ______ Hispanic ______ Asian ______
Native American ______ Other ______ Principal ______ Assistant Principal ______
Number of Years in the Position Check Above ______

1. In general, would you say your health is:  (Select One and Circle)

   Excellent  Very Good  Good  Fair  Poor

2. Compared to one year ago, how would you rate your health in general now?  (Select One and Circle)

   Much better now than one year ago
   Somewhat better now than one year ago
   About the same
   Somewhat worse now than one year ago
   Much worse now than one year ago

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   a. Vigorous activities, such as running, lifting heavy objects, participating in strenuous sports

   Yes, limited a Lot  Yes, limited a little  No, not limited at all

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   c. Lifting or carrying groceries

   Yes, limited a Lot  Yes, limited a little  No, not limited at all

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   Yes, limited a lot  Yes, limited a little  No, not limited at all
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4. During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of your physical health? [Circle yes or no in (a-d) below]

   a. Cut down the amount of time you spent on work or other activities
      Yes  No

   b. Accomplished less than you would like
      Yes  No

   c. Were limited in the kind of work or other activities
      Yes  No

   d. Had difficulty performing the work or other activities (for example, it took extra effort)
      Yes  No

5. During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of any emotional problems (such as feeling depressed or anxious)? [Circle one in (a-c) below]

   a. Cut down the amount of time you spent on work or other activities
      Yes  No

   b. Accomplished less than you would like
      Yes  No

   c. Didn’t do work or other activities as carefully as usual
      Yes  No

6. During the past 4 weeks, to what extent has your physical health or emotional problems interfered with your normal social activities with family, friends, neighbors, or groups? (Select One and Circle)
7. How much bodily pain have you had during the past 4 weeks? (Select One and Circle)

None Very Mild Mild Moderate Severe
Very Severe

8. During the past 4 weeks, how much did pain interfere with your normal work (including both work outside the home and housework)? (Select One and Circle)

Not at all A little bit Moderately Quite a bit Extremely

9. These questions are about how you feel and how things have been with you during the past 4 weeks. For each question, please give the one answer that comes closest to the way you have been feeling. [Circle one in (a-I) below]

a. Did you feel full of pep?
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   Most of the time
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   A little bit of the time
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      Definitely true
      Mostly true
      Don't know
      Mostly false
      Definitely false

   b. I am as healthy as anybody I know
      Definitely true
      Mostly true
      Don't know
      Mostly false
      Definitely false

   c. I expect my health to get worse
      Definitely true
      Mostly true
      Don't know
      Mostly false
      Definitely false

   d. My health is excellent
      Definitely true
      Mostly true
      Don't know
      Mostly false
      Definitely false

12. Do you have any other ailments not mentioned above which you feel have been brought on by job stress, i.e., high blood pressure, high cholesterol, heart disease, weight gain?
   Yes
   No
   If yes is checked, please describe below.

THANK YOU!!!!!!!!!!
I. DOCUMENT IDENTIFICATION:

Title: Coping with the principalship: Health Challenges of African-American female school principals and the implications for principal training/certification programs at colleges and universities

Author(s): DORIS MCEWEN WALKER & JOHNETTA HUDSON

Corporate Source:

Publication Date: July 11, 1996

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