

Assessing the Impact of a School-Based Group Approach With Adolescent Males

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Abstract

This study assessed the impact of a school-based group intervention, *The Council for Boys and Young Men*, specifically designed for adolescent males. The participants who attended an alternative school in a metropolitan area were randomly assigned to the intervention or to waitlist control groups. Measures assessed self-esteem, future and school-related self-efficacy, masculine identity ideology, identity distress, and relational aggression. Participants in *The Council* intervention group showed significant increases in school and future self-efficacy from pre- to post-test. For all boys at pre-test, higher scores on stereotypical masculine ideology were related to more relational aggression and lower self-esteem.

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Adolescence is commonly thought of as a period of self-definition and self-exploration and as a critical period of cognitive, identity, and social development. Adolescence as a developmental stage also poses specific risks for males in that adolescent males have fared poorly in areas of education, mental health, access to health care, violence, and substance abuse (Hossfeld, Gibraltarik, Bowers, & Taormina, 2009). Compared to same-age females, adolescent males are almost three times as likely to have ADHD, are more likely to have a learning disability, are more likely to have more sexual partners, and are over five times more likely to die of homicide (Park, Paul, Irwin, & Brindis, 2005). Furthermore, rigidity in adherence to traditional masculine identity norms in adolescent males has also been associated with significant risk behaviors, including reckless driving, violence, and suicide (Sabo, 1999). For men in general, masculine identity rigidity was associated with unhealthy stereotypes, emotional disconnect, emphasis on dominance and power, homophobia, sexism, poor self-health, and health maintenance behaviors (Carrigan, Connell, & Lee, 1987; Farrell, 1974, 1986; Goldberg, 1976, 1979, 1983; Levant & Pollack, 1995; Meth et al., 1990; O'Neil, 1981, 1982; Pleck, 1981; Pollack, 1998). In particular, rigid adherence to traditional masculine gender norms can result in gender role strain (Pleck, 1995). Gender role strain in males has been linked with psychological distress, low self-esteem, anxiety, and depression (Sharpe & Heppner, 1991), as well as negative emotions, stress, or poor coping behaviors, such as substance abuse or aggression (O'Neil, Helms, Gable, David, & Wrightsman, 1986).

A variety of variables have been linked to positive and negative outcomes for adolescents. Of particular interest in this study were self-esteem, educational self-efficacy, and relational aggression and whether these could be impacted by a group intervention that focused on masculine identity ideology. The following highlights literature on self-esteem, educational self-efficacy, and relational aggression as related to adolescent behaviors.

Self-Esteem

Self-esteem is one of the most researched constructs in the empirical literature (Emler, 2001). Self-esteem reflects one's feelings of self-worth that are shaped through personal experiences of success or failure, interactions with others, and social learning (Meggert, 2008). Low self-esteem has been found to be a risk factor for aggressive and antisocial behaviors (Barnow, Lucht, & Freyberger, 2005) and for increased gang involvement (Rizzo, 2003). Meggert (2008) pointed out that many researchers suggest that low self-esteem is one of the major causes of deviant behavior. In contrast, high self-esteem has been related to better mental health outcomes and lower rates of depression (Birndorf, Ryan, Auinger, & Aten, 2005), as well as successful social integration into school and work environments (Husler & Plancherel, 2007).

Self-Efficacy

Self-efficacy is the belief that one can accomplish specific tasks in one's environment (Bandura, 1977). Self-efficacy beliefs have been suggested to promote prosocial behavior (Bandura, Caprara, Barbaranelli, Gerbino, & Pastorelli, 2003) and to prevent engagement in delinquent behaviors (Bandura, Barbaranelli, Caprara, & Pastorelli, 2001; Caprara, Regalia, & Bandura, 2002). Self-efficacy can have a profound

influence on mental health, can be a protective factor, and can help increase resiliency (Bandura et al., 2001). For adolescents, self-efficacy not only promotes positive youth development but also buffers against internalizing and externalizing problem behaviors such as violence, anxiety, and depression (Caprara, Barbaranelli, Pastorelli, & Cervone, 2004). Vecchio, Gerbino, Pastorelli, Del Bove, and Caprara (2007) reported that self-efficacy was positively related to life satisfaction for both males and females. For incarcerated young people, self-efficacy was a salient factor related to reducing recidivism (Fields & Abrams, 2010).

Aggression

The third variable of interest was aggression given that it is pertinent to delinquent behavior in adolescents. Most research on aggression examined overt aggression, defined as behaviors causing harm through physical means (Crick & Grotpeter, 1995). More recently, the concept of aggression was expanded to include indirect or relational aggression, which includes behaviors such as excluding peers from social groups, spreading rumors, or ignoring others when angry or upset (Archer & Coyne, 2005). Specifically, indirect aggression is regarded as a form of social manipulation (Bjorkqvist, Osterman, & Kaukiainen, 1992), and relational aggression is conceptualized as behaviors that are intended to attenuate friendships and/or feelings of inclusion (Crick, Bigbee, & Howes, 1996).

It has been generally accepted that males are more aggressive than females. This notion can be illuminated by examining hypermasculine and aggressive behaviors from an evolutionary perspective. Humans compete for resources in order to survive, and when competing with members of the same species, humans resort to aggressive

or destructive behaviors or even war (Buss, 2009). According to Buss (2009), Darwin noted that men use aggression for an advantage in competition with other males.

Aggression is used in indirect or relational ways to gain advantage over other men via means such as denigrating a rival's financial resources, impugning physical prowess, scoffing at achievements, or dominating the rival in front of others (Buss, 2009).

Using relational aggression has negative social and psychological consequences not only for victims of aggression but also for perpetrators. Among school-aged children, Crick and Grotpeter (1995) found that both relationally aggressive girls and boys reported feelings of peer rejection and depression. Werner and Crick (1999) also found that relationally aggressive individuals reported lower life satisfaction, greater depression, more negative affect, and had a more pessimistic outlook on the future.

Given the importance of these variables and of male adolescents' perceptions of who they are and what it means to be male, the current research was designed to evaluate the efficacy of a school-based group intervention to foster positive changes in self-esteem, self-efficacy, relational aggression, sense of identity, and perceptions of masculinity among male adolescents. For adolescents in alternative or at-risk school environments in particular, intervention options are few and mostly punitive in nature. Current research on programs addressing adolescent delinquency encourages using broad, multi-dimensional scopes in conceptualizing interventions and focusing on issues globally, as opposed to focusing on specific, individual behaviors (Elliott, 1993; Johnson & Roberts, 1999). Since delinquent behaviors are typically interrelated and plural, interventions should reflect this by being broad in nature (Masten, 2001). Reviewing the research on adolescent interventions, Eccles and Gootman (2002) identified physical

and psychological safety, structure, supportive relationships, opportunity to belong, and supporting self-efficacy as important elements for school-based prevention programs. In addition, LeCroy and Daley (2001) stressed that interventions must be developmentally appropriate and gender-specific. One such program, *The Council for Boys and Young Men* (Trepper, Hossfeld, & Taormina, 2009), includes these components and is a holistic, gender-specific, strengths-based intervention. The current study investigated the efficacy of and outcomes for *The Council for Boys and Young Men* as a group intervention for adolescent males in an alternative high school environment.

The Council for Boys and Young Men

The Council for Boys and Young Men (The Council) curriculum is a structured intervention utilizing a “gender-relevant, strengths-based group approach to promote young men’s safe, strong, and healthy passage through pre-teen and adolescent years” (Trepper et al., 2009, p. 2). Based on relational-cultural theory (Miller, 1991), The Council incorporates theories of masculine identity formation rooted in cross-cultural traditions. It also reports to be based on resiliency principles (Bernard, 2004) which include: recognizing strengths and capacities; challenging stereotypes; questioning unhealthy, stereotyped attitudes about masculinity; and encouraging solidarity through personal and collective responsibility (Trepper et al., 2009). Specifically, The Council aims to reduce risk factors, increase protective factors, and promote healthy masculine identity development and growth in areas such as self-esteem, self-efficacy, and interpersonal skills (Trepper et al., 2009). It also aims to promote boys’ natural strengths and to increase options concerning perceptions of maleness and masculinity. According to Trepper et al. (2009), The Council challenges myths about how to be a “real boy” or

“real man” and increases boys’ emotional, social, and cultural literacy by promoting valuable relationships with peers and adult facilitators through activities, dialogue, and self-expression. *The Council for Boys and Young Men* is made up of four subsets of curricula, each designed to address aspects of unhealthy masculinity ideology for different age groups. *Growing Healthy, Going Strong* (Wiser, Chow, Hossfeld, & Taormina, 2009) and *Standing Together* (Wiser, Chow, Hossfeld, & Taormina, 2009) were designed for ages 9-14, respectively; while *Living a Legacy* (Hossfeld et al., 2009) and *Journey of the Great Warrior* (Miranda, Hossfeld, & Taormina, 2010) were designed for ages 14-18.

As *The Council for Boys and Young Men* is a relatively new intervention, little data are available concerning its efficacy and outcomes. However, a pilot study conducted by Gray et al. (2008) found that involvement in the intervention was positively correlated with higher school engagement. Furthermore, relatively little is known about links among masculine ideology beliefs and the study variables for at-risk boys who have not yet been involved in the juvenile justice legal system but who experience school-related problems and do not attend a traditional high school. In the current study, we investigated four hypotheses. These hypotheses were: (H1) masculine ideology, school and future self-efficacy, and identity distress will predict self-esteem; (H2) masculine ideology, school and future self-efficacy, identity distress, and self-esteem will predict relational aggression; (H3) male adolescents who participate in *The Council for Boys and Young Men* group will report higher self-esteem and greater school and future self-efficacy than male adolescents who participate in a waitlist control group; and (H4) male adolescents who participate in *The Council for Boys and Young Men* group

will report less masculinity ideology, identity distress, and relational aggression than male adolescents who participate in a waitlist control group.

Method

Recruitment and Participants

This study was conducted at an alternative high school for students who struggled with behavior problems in their traditional school. Before recruitment began, approval for this research was obtained from the university Institutional Review Board and from the local public school system. Recruitment occurred via advertisements posted in school hallways and classrooms and by classroom visits. Interested students were given a letter explaining the study, and a parental informed consent form was given to those 17 or younger. A power analysis indicated that at least 54 participants were needed for an effect size of .25, with a power of .90. However, there were only 53 eligible male students attending this school. Of these, 22 (41.5%) volunteered to participate and completed the pretest instruments. Age ranged from 14 to 19 ($M = 16.59$, $SD = 1.36$). Four boys were in 9th grade, four in 10th grade, six in 11th grade, and eight in 12th grade. Eleven self-identified as White, seven as Latino, two as African-American, and two did not self-identify. Seven fathers/stepfathers and 12 mothers/stepmothers had some college/technical training. Six fathers/stepfathers and seven mothers/stepmothers each had a high school diploma/GED. Three fathers/stepfathers and one mother/stepmother had an 8th grade education. The educational level was not reported for six fathers/stepfathers and two mothers/stepmothers.

Design

After pre-testing, the 22 boys were randomly assigned to *The Council for Boys and Young Men* intervention group ($n = 11$) or to a waitlist control group ($n = 11$). Pretest data were used to test H1 and H2. A 2 (group) by 2 (time) pretest-posttest repeated measures design was used to test H3 and H4.

Group leaders. The two group leaders were male students in graduate counseling programs. Both had completed at least one year of supervised practicum and specialized in working with adolescents. Before facilitating the intervention, both leaders met weekly to discuss and to become oriented to the intervention curriculum and to decide how to divide facilitation responsibilities.

Intervention group. *The Council for Boys and Young Men* itself is made up of four subsets of curricula, each designed to address aspects of unhealthy masculinity ideology for different age groups. *Growing Healthy, Going Strong* (Wiser et al., 2009) and *Standing Together* (Wiser et al., 2009b) are designed for ages 9-14, respectively; while *Living a Legacy* (Hossfeld et al., 2009) and *Journey of the Great Warrior* (Miranda et al., 2010) are for ages 14-18. *The Council for Boys and Young Men* meetings are 60 to 90 minutes sessions and held weekly for 10 weeks. During the sessions, boys are given the opportunity to talk and listen to concerns and interests across topics such as relationships, conflict resolution, education, leadership, community service, diversity, mass media messages, personal values, integrity, and future goals (Trepper et al., 2009). Activities include role-playing, journaling, group discussion, and drawing to address themes such as unhealthy masculine identity norms, diversity, mentoring,

friendships, goals, and bullying (Trepper et al., 2009). Due to class schedules and state-mandated testing, the program was adjusted to eight 60-minute sessions.

Each group meeting focused on a specific theme. In the first session, the theme was “Creating Our Council.” The group’s purpose and format were explained, rules for conduct during sessions were derived, and hopes and fears about the group and expectations and perceptions of roles for boys and men were discussed. The theme for session two was “Strength Through Diversity.” Activities included completing a group *culture gram*. Participants also participated in a discussion of diversity, stereotyping, prejudice, and discrimination, as well as an activity focused on experienced discrimination or unfair treatment, such as receiving preferred treatment from someone or being questioned by authority without logical basis.

“Mentors, Role Models, and Heroes” was the theme for session three. The “Personal Web of Influence and Support Activity” was used to stimulate discussion about how the web relates to life, relationships, support, and negative influences. Group members drew their personal webs of influence and support and discussed supportive relationships. Discussion focused on turning to positive influences as a strategy for coping with difficulties and seeking guidance in difficult decisions regarding personal and future decisions.

“Unlocking the Code” was the theme for session four. Societal expectations about male gender roles, such as the need to be independent, emotionally stoic, and tough, were discussed. The “Boys Boxed In” activity was used to examine personal experiences around socialized male gender norms and how the boy/man “code” (Pollack, 1998) can “box in” individuals.

The focus for session five was “Healthy Relationships.” Group members wrote questions about relationships (both romantic and non-romantic) anonymously. Discussion questions focused on intimacy, healthy relationships, emotional honesty/expression, and how these have been inculcated with the boy/man code.

The theme for session six was “Who’s the Man? Boys and the Media.” Participants completed the “Star of the Show” worksheet and discussed what they were attracted to and influenced by in the media. In the “Real Man Collage” activity, members examined current magazines and publications targeting male audiences to identify societal messages about masculinity. The session ended with a discussion about socialization and normative masculinity.

For session seven, “Conflict Resolution-Squash It Before It Starts” was the theme. After reading “Joe’s Story,” a narrative about a young man whose poor social choices lead to an unwanted and avoidable physical altercation, group members discussed their reactions and identified possible proactive solutions. Group conversation focused on preventing conflict before it starts, identifying emotions and behaviors that precede and provoke conflict, and how the boy/man code exacerbates conflict. To address the last theme, “Living and Leaving a Legacy,” the group focused on themes salient to their identity, lessons learned, and how best to improve personally.

Waitlist control. The boys in the waitlist control group completed the pretest and the posttest and were then invited to participate in The Council intervention.

Measures

In addition to completing a demographic sheet at pretest, participants completed five instruments that assessed the outcome variables at both pretest and posttest.

Rosenberg Self-Esteem Scale (RSE). Rosenberg (1965) designed this 10-item scale to measure one's feelings of self-worth. Items such as "At times I think that I am no good at all" are rated on a 4-point scale ranging from "strongly agree" to "strongly disagree." Ratings are summed to form a total score that can range from 10 to 40, with higher scores indicating higher self-esteem. Cronbach's alphas ranging from .72 to .88 and a test-retest reliability of .82 have been reported (Gray-Little, Williams, & Hancock, 1997). For this study, the Cronbach's alphas were .86 at pretest and .90 at posttest.

Adolescent Masculinity Ideology in Relationships Scale (AMIRS; Chu, Porche, & Tolman, 2005). The 12-item AMIRS has four major themes: Emotional stoicism, heterosexual dominance, sexual drive, and physical toughness. Items such as "If a guy tells people his worries, he will look weak" are rated on a 4-point Likert-type item ranging from "disagree a lot" to "agree a lot," with reverse coding on five items. Total scores can range from 12 to 48, with higher scores indicating stronger beliefs in a conventional masculine gender ideology. Internal consistencies have been established across different ages of adolescents (7th grade: Cronbach's alpha = .71; 8th grade: Cronbach's alpha = .67; high school: Cronbach's alpha = .70) and also for the samples combined ($\alpha = .70$) (Chu et al., 2005). For the current study, Cronbach's alphas computed for pre- and post-data were .72 and .81, respectively.

Identity Distress Survey (IDS). Berman, Montgomery, and Kurtines (2004) modeled the IDS after the DSM-III and III-R criteria for Identity Disorder. Useful for identifying youth who have difficulties in developing a healthy personal identity, the IDS can be used to assess identity problems and to explore links between identity problems and other areas of psychological functioning. Participants are asked to rate on five-point

Likert-type items the degree to which they have been distressed or worried about the following identity issues: Long-term goals, career choice, friendships, sexual orientation and behavior, religions, values and beliefs, and group loyalty. They also rate a 10th statement on how long they have been upset or distressed about the previous items on five-point Likert-type items. Total scores range from 10 to 50, with higher scores indicating more identity distress. Internal consistency was reported as .84 with one-week test-retest reliability of .82 (Berman et al., 2004). For the study sample, the Cronbach's alphas were .79 for pre-data and .81 for post-data.

Educational Self-Efficacy-Adolescence (ESEA). Developed by Robinson Kurpius (1992), the ESEA measures one's confidence in being able to accomplish various education-related tasks. Participants rated themselves on seven-point Likert items ranging from "not sure" to "very sure" they can complete a task. Two of the four subscales were used in this study: School Self-Efficacy, which assesses belief in one's ability to do well in 13 basic high school subjects and Future Self-Efficacy, which assesses beliefs about 21 statements about the future, such as "finishing high school will help me get a good job." Responses within each subscale are summed and averaged. Total scores can range from one to seven. Robinson Kurpius reported internal consistencies of .93 for School Self-Efficacy and .77 for Future Self-Efficacy for 500 high school girls. For the current sample, the Cronbach's alphas for pre and post data on School Self-Efficacy were .89 and .88, respectively. For Future Self-Efficacy, Cronbach's alphas were .86 and .85, respectively.

Relational Aggression. Little, Jones, Henrich, and Hawley (2003) created two scales to measure relational aggression. The 12-item instrumental relational aggression

scale presents items such as “I often tell friends to stop liking someone to get what I want.” Each item is responded to on a four-point Likert-type item ranging from “not at all true” to “completely true.” Seven items comprise the reactive relational aggression measure. Items such as “If others upset or hurt me, I get my friends to stop liking them” are responded to on four-point Likert-type items ranging from “not descriptive” to “very descriptive.” For the current study, after responses for each scale were summed and averaged, the two scores were averaged to form an overall mean relational aggression score, with higher scores reflecting higher relational aggression. For a sample of 1723 students, Little et al. (2003) reported internal consistencies of .63 and .78 for the reactive and the instrumental subscales, respectively. For the current study, Cronbach’s alphas for pre and post data were .79 and .88, respectively.

Procedures

One week prior to the first intervention group session, all participating students were given a pre-test packet consisting of the demographic questionnaire, the AMIRS, RSE, IDS, ESEA, and the Relational Aggression measures. Participants were then randomly assigned to The Council intervention or to the waitlist control. Immediately following the final session for the intervention group, all participants were given a post-test packet. The range of sessions attended by participants was 6 to 8 sessions, with a mean of 7.18 sessions. After the posttest, boys in the waitlist group were invited to participate in The Council intervention.

Results

Stepwise regressions were calculated to determine whether the independent variables (identity distress, masculinity ideology, school self-efficacy, and future self-

efficacy) would account for significant variance in the boys' self-esteem (H1) and whether self-esteem, identity distress, masculinity ideology, school self-efficacy, and future self-efficacy would predict relational aggression (H2). The first stepwise regression indicated that masculinity ideology alone accounted for 18.2% of the variance in self-esteem, $F(1, 20) = 4.44, p = .048$ with a beta weight of $-.43$. Self-esteem was negatively correlated with less stereotypical masculinity ideology ($r = -.43, p < .05$). The second stepwise regression included self-esteem as an independent variable and tested the ability of the five independent variables to predict relational aggression. Again, the only significant predictor was masculinity ideology ($\beta = .57$), accounting for 28.8% of the variance, $F(1, 20) = 8.08, p = .01$. Relational aggression was positively correlated with stereotypical masculinity ideology ($r = .40, p < .05$). The power analysis indicated that our sample size was less than half than that needed for robust statistical analyses (Cohen, Cohen, West, & Aiken, 2003); therefore, these findings are exploratory only.

A series of analyses of covariance (ANCOVA) were conducted to evaluate the effect of *The Council for Boys and Young Men* group intervention on participants' self-esteem, school self-efficacy, and future self-efficacy (H3). According to Green & Salkind (2008), the use of parametric statistics, such as ANCOVA, is sufficiently robust and provides meaningful results when working with Likert and Likert-type scales, and was therefore chosen for this study. The independent variable, type of group, included two levels: the intervention group and the waitlist control group. The covariate for each ANCOVA was the corresponding pre-test baseline scores for each measure. Prior to conducting the ANCOVAs, the correlations between the measures at pre and posttest

were calculated. All correlations were significant with values that ranged .862 ($p = .001$) for esteem to .467 ($p = .038$) identity distress. Furthermore, all tests of homogeneity of variance and of homogeneity of regression slopes were non-significant. Thus the data met the model assumptions of ANCOVA. The means and standard deviations for the outcome variables for both the intervention and control groups are reported in Table 1.

Table 1

Treatment and Control Group Means and Standard Deviations for Pre- and Post-tests

Measure	Pre-test		Post-test		Adjusted	
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SE</i>
Treatment Group						
Self-Esteem	34.42	3.96	34.87	4.78	33.96	0.77
School Self-Efficacy Scale	5.42	1.08	5.70	0.86	5.60	0.28
Future Self-Efficacy Scale	5.67	0.79	6.00	0.62	5.98	0.11
Masculinity Ideology	27.00	6.59	24.86	7.64	25.30	1.24
Identity Distress	22.92	7.51	21.75	5.10	22.18	1.60
Relational Aggression	27.66	5.30	25.55	5.24	27.14	1.80
Control Group						
Self-Esteem	31.60	5.01	31.47	4.53	32.59	0.85
School Self-Efficacy Scale	5.03	1.29	4.67	1.21	4.77	0.30
Future Self-Efficacy Scale	5.57	0.59	5.37	0.39	5.40	0.10
Masculinity Ideology	28.28	5.19	27.33	4.85	26.80	1.38
Identity Distress	25.76	6.21	24.89	6.34	24.35	1.77
Relational Aggression	31.03	7.65	31.41	9.54	29.46	2.00

For school self-efficacy, the ANCOVA revealed group differences, $F(1, 17) = 5.50$, $MSE = .80$, $p = .031$. The strength of relationship between the treatment group factor and the dependent variable was strong, as assessed by a partial η^2 , with the treatment group factor accounting for 24.4% of the variance in the school self-efficacy posttest scores, holding constant pretest scores. After accounting for pretest scores, the

boys in The Council group ($Adj M = 5.68$, $SE = 0.27$) scored significantly higher on school self-efficacy than did the boys in the waitlist control group ($Adj M = 4.34$, $SE = 0.30$). Similar group differences were found for future self-efficacy, ANCOVA $F(1, 16) = 11.92$, $MSE = .13$, $p = .003$, partial $\eta^2 = .43$. Male adolescents who participated in The Council group ($Adj M = 5.98$, $SE = 0.11$) reported higher future self-efficacy than did those in the waitlist control group ($Adj M = 5.40$, $SE = 0.10$). The ANCOVA using self-esteem was not significant, $F(1, 17) = 1.37$, $MSE = 8.28$, $p = .26$, observed power $\beta = .20$, partial $\eta^2 = .08$.

The pre- and post-test correlations for each set of outcome variables were significant; however, the correlations between the different outcome variables were not significant. Therefore, series of one-way ANCOVAs that controlled for the pre-test on its paired post-test assessment were conducted to evaluate the effect of participating in The Council on masculinity ideology, identity distress, and relational aggression (H4). For masculinity ideology, the ANCOVA was not significant, $F(1, 17) = .65$, $MSE = 0.12$, $p = .43$, observed power $\beta = .12$, partial $\eta^2 = .04$. For identity distress, the ANCOVA was also not significant, $F(1, 17) = .807$, $MSE = 27.66$, $p = .38$, observed power $\beta = .14$, partial $\eta^2 = .05$. For relational aggression, the ANCOVA was not significant, $F(1, 17) = .70$, $MSE = 23.27$, $p = .41$, observed power $\beta = .12$, partial $\eta^2 = .04$.

Discussion

For the 22 boys who participated in this study, their perceptions of what it means to be male were related to their self-esteem and relational aggression. This finding is consistent with prior research on negative aspects of rigid adherence to masculinity ideology (Carrigan et al., 1987; Farrell, 1986; Goldberg, 1976, 1979, 1983; Levant &

Pollack, 1995; Meth et al., 1990; O'Neil, 1981, 1982; Pleck, 1981; Pollack, 1998).

Specifically in this study, endorsement of traditional masculinity ideology was positively related to relational aggression and negatively related to self-esteem, which is consistent with prior research on male gender role strain (Pleck, 1995). Masculinity appears to be an important factor in how these adolescent boys saw themselves and related to others. Although findings did not reveal significant changes in masculine identity ideology, the males who participated in The Council group were encouraged to expand their concept of what it means to be male. They participated in activities that provided discussion about what they perceive to be a male in today's society and how they arrived at these perceptions. They experienced discussions about feelings, personal fears, and areas of perceived vulnerability with male peers. As a result, they may have been able to see themselves a little differently, created some new relationships, and challenged the avenues of information by which they learned what it means to be a male. Although the impact of these discussions and activities did not result in a statistical change in scores, the post-test scores reflect a shift towards less rigid adherence to traditional masculinity ideology.

While the control group stayed at or around baseline levels on the outcome measures, The Council participants showed some improvements in self-esteem as well as slight decreases in identity distress and relational aggression. While these changes were in a direction considered to be positive and healthier, they were not statistically significant. These shifts, however, are consistent with the idea that both positive social relationships and positive social experiences contribute to more positive self-esteem (Meggert, 2008). The group may have afforded them a positive social experience, which

may contributed to their movement toward more positive self-esteem. Furthermore, activities and discussions designed to promote healthy masculine identity and decrease role strain related to unhealthy aspects of masculine identity and socialized masculine norms occurred across group sessions. Both masculine identity and role strain have been linked to self-esteem (i.e., Levant & Pollack, 1995; Pleck, 1995; Pollack, 1998) and earlier findings linked low self-esteem and increased relational aggression (Barnow et al., 2005). Over-rigid adherence to socialized masculine norms was related to aggressive and violent behaviors (Pollack, 1998; Sabo, 1999) and using aggression to cope with emotional distress (O'Neil et al., 1986).

Implications for School Counselors

While not a cure-all, *The Council for Boys and Young Men* has promising implications for school counseling practice and can easily be implemented within the school setting. As a result of participating in The Council group, adolescent males in this study became more positive both about their future efficacy and about their school efficacy. By exploring logistics of the job/college application process and identifying and challenging perceived barriers to finding a job/attending college in the future, these discussions also helped promote job/education-seeking competency. This increase in self-efficacy is consistent with social learning theory (Bandura, 1977; Bandura et al., 2001). By identifying and reinforcing skills already present in participants, encouraging them to seek positive mentors and stimulating discussion around how to do so, and having facilitators provide positive feedback when appropriate, The Council activities allowed group members to experience positive feedback and mastery experiences that appeared to enhance their self-efficacy beliefs about their ability to do well in school

subjects and to have a more hopeful future. Researchers showed that higher self-efficacy related to school is linked to more occupational and educational aspirations (Arbona, 1990; Church, Teresa, Rosebook, & Szendre, 1992). By implementing this group intervention, school counselors can potentially help adolescent males believe that they can do their work at school and can have a better future. Doing so also can potentially increase their academic persistence.

As evident from the increasing violence in schools, particularly by young males, school counselors can play a vital role in early prevention and intervention. Relational aggression is a form of bullying, and if school counselors can intervene to decrease relational aggression and in turn improve self-esteem, they may also decrease the probability of bullying behaviors that sometimes turn violent. Since The Council is a manualized treatment, school counselors can readily and easily use it with students.

Lastly, an important implication from this study is the need for school counselors to take masculinity into consideration generally when working with adolescent males, for it is during this life stage that boys struggle to decide who they are and what it means to be male, and how they are supposed to behave (Erikson, 1968). Although the sample size was small for the boys who participated in this intervention, endorsement of masculinity ideology accounted for significant variance in both self-esteem and relational aggression. School counselors are uniquely prepared for boys to discuss what it means to be a man and to help address myths they may believe about masculinity. The findings from this study suggest that The Council may be a viable intervention for boys, such as boys in this study, who already exhibit behavioral difficulties in school.

Limitations of Study

There are a number of limitations to this study that need to be noted. First, because of difficulties obtaining parental/guardian consent and the size of the potential subject pool, it became requisite to conduct the study with a small sample size. This small sample size failed to meet the suggested sample size based on power analysis; therefore, any conclusions resulting from this study must be made very tentatively. Furthermore, the small sample size allowed only one intervention and one waitlist control group. Given that the observed power estimates for the non-significant findings ranged from weak to moderate, an increased sample size may have yielded sufficient power to uncover group differences, particularly considering the direction of the changes from pre to post test for the intervention group but not for the waitlist control group. Still, it needs to be emphasized that this study is only a pilot and needs to be replicated with a larger sample of high school boys.

Second, duration of the intervention may also have been a limitation in that it was offered over an eight-week period as compared to the desired 10-week period, and for a total of eight clock hours as opposed to the recommended 10-15 clock hours per session. Further, *The Council for Boys and Young Men* curricula are designed to be delivered in a manualized, sequential fashion. Due to the afore-mentioned time constraints, sessions 2 and 9 were omitted, forcing a departure from the manual's instructions. Such a departure makes it impossible to state that the administration of the intervention was fully manualized. If it had been possible to follow the recommendations, the group intervention may have been more impactful. Limiting participants' time to think about and integrate what was discussed in group may have

altered potential responses to the post-test and thus lead to attenuated effect sizes. Since participants completed the same instruments at pre and posttest, there may have been a testing effect. Furthermore, due to the group nature of *The Council for Boys and Young Men* intervention, participants were routinely involved in group activities and discussion, which may have created a group dynamic dependent upon the participants themselves. Finally, no other intervention was used beyond *The Council for Boys and Young Men* program, consequently the intervention was compared to control only.

Recommendations for Future Research

In spite of these limitations, the current findings suggest that *The Council for Boys and Young Men* has a positive impact on the future and school self-efficacy of male adolescents in an alternative school setting. This study, however, is only one of the many studies that need to evaluate the efficacy of this manualized group intervention. School counselors would benefit from collecting additional behavioral data for similar samples in that many of the participants in the current study reported a history of delinquency and/or behavioral difficulties in home and school settings. It would be of interest to investigate the effects of the group intervention on the number/types of behavioral incidents involving participants following *The Council* intervention. It is hoped that school counselors and other personnel concerned with the behaviors of adolescent males will continue to gather quantitative data to evaluate the effectiveness of not only *The Council for Boys and Young Men* group intervention but also other school-based positive youth development interventions so that more evidence-based options will become available for school counselors to use as tools to

help at-risk male adolescents. Finally, a more comprehensive understanding of the impact of *The Council* on young boys could be garnered from qualitative interviews.

Conclusion

Growing up in American society, boys such as those in this study are bombarded with messages of what it means to be male and how they should behave. For example, they receive messages to be tough, to be independent, not to need others for help, and not to show emotions (Levant & Pollack, 1995; Meth et al., 1990; O'Neil, 2008, Pollack, 1998). As a result, adolescent males often adopt an emotional box that limits their development, behavior, and expression of feelings. While they feel and have moments of vulnerability, they are told by their social environment that a real man does not feel vulnerable and does not need feelings. When feelings arise, they are again told that to express those feelings is weak and that the only acceptable means for doing so is through aggression or acting out. Behaving aggressively or acting out thus becomes a forum for expressing many kinds of negative emotions (Pollack, 1998).

The Council for Boys and Young Men is potentially a tool for school counselors to use in a group format. It may assist students to foster more positive masculine identities, promote healthier interpersonal relationships that are less relationally aggressive, and develop more positive self-perceptions, not only concerning self-esteem but confidence in their ability to succeed in school and have a brighter future. These are certainly goals that school counselors would, and should, endorse. Hopefully, others will replicate and extend this study to further test the utility of *The Council for Boys and Young Men*.

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