

Running head: THE EFFECTS OF GROUP COUNSELING

The Effects of Group Counseling on Adolescent Stress

Melissa I. Kurlan

State University of New York College at Brockport

Acknowledgements

The author wishes to acknowledge the help and support of significant individuals who have helped make this project possible. First the author would like to thank Dr. Thomas Hernandez of SUNY Brockport for help with preparation of this manuscript and advisement on this project. Second, the author would like to thank Gates Chili Middle School for its support and participation in this project, especially School Counselor Kelly Hunt. Lastly, the author would like to thank her father, Dr. Roger Kurlan, for his help with editing, and emotional support.

Table of Contents

I.	List of Tables and Figures.....	4
II.	Abstract.....	5
III.	Introduction and Review of Literature.....	6
IV.	Method.....	29
V.	Results.....	33
VI.	Discussion.....	39
VII.	References.....	49
VIII.	Appendices.....	55
	A. Appendix A: <i>University of Minnesota Adolescent Health Program: Measuring Emotional Stress</i>	
	B. Appendix B: <i>Teen Inventory on Common Stressors and Stress Symptoms</i>	
	C. Appendix C: Activity: <i>Progressive Relaxation Script</i>	
	D. Appendix D: Activity: <i>Three Types of Stressful Situations</i>	
	E. Appendix E: Activity: <i>Centering the Mind</i>	
	F. Appendix F: Activity: <i>Meditation Script</i>	
	G. Appendix G: Informed Consent for Minors	
	H. Appendix H: Informed Consent for Parents	

List of Tables and Figures

I. Table 1: Teen Inventory on Common Stressors and Stress Symptoms:
Stress Symptoms (Schmitz & Hipp, 1995) 33

II. Table 2: Teen Inventory on Common Stressor and Stress Symptoms:
Stressors (Schmitz & Hipp, 1995).....35

III. University of Minnesota Adolescent Health Program:
Measuring Emotional Stress (Blum & Resnick, 1986).....37

Abstract

The current literature has emphasized the prominent impact of stress on the lives adolescents and the need for counselors to implement stress management and coping programs. The purpose of this study was to determine whether or not psycho-educational group counseling in the school relieves stress among adolescent students identified as experiencing excessive stress. This study also examined gender differences in the severity and types of stress and response to the counseling intervention. Two separate groups (male and female) of 6-8 sixth grade students participated in ten weeks of structured group counseling that took place during the school day and focused on stress and coping. The results indicated that group counseling does indeed reduce stress among adolescents of both genders, although there were some gender differences in the character of response. The study also found that there was no major difference in the total amount of stress symptoms reported by males and females, although there were gender differences in specific types of stress symptoms reported. Thus, psycho-educational group counseling conducted in the school setting appears to be a useful intervention for reducing stress among adolescent students. Male and female students do show some differences in the quality of stress reported and in the response to counseling.

The Effects of Group Counseling on Adolescent Stress

This review focuses on the effects of group counseling interventions to reduce stress in adolescents. In today's society, adolescents are faced with stress unlike any other generation before (Elkind, 1984). Elkind (1984) is quoted as saying that "Contemporary American society has struck teenagers a double blow. It has rendered them more vulnerable to stress while at the same time exposing them to new and more powerful stresses than were ever faced by previous generations of adolescents" (p. 6). Elkind (2001) also suggested that "today's child has become the unwilling, unintended victim of overwhelming stress- the stress borne of rapid, bewildering social change and constantly rising expectations" (p.3). For these reasons, Schmitz & Hipp (1995) noted the importance for counselors working with adolescents to teach ways to help students deal with this issue and to be aware of the risk factors associated with adolescent stress. Hains (1994) noted that adolescent stress has been linked to various psychological problems such as anxiety, depression, delinquent behavior, decreased self-esteem, eating disorders, and suicidality. Sandler & Wolchik et al. (1997) reported that "improving child and adolescent adaptation to stress has been identified as one of the most promising approaches to preventing the development of problems of childhood and adolescence" (p. 3).

First, this review will discuss stress in general, its definitions, and types. Second, it will explore the literature on adolescence and why this period of development is particularly susceptible to stress related issues. The symptoms and causes of stress in adolescence are discussed as well as coping strategies that adolescents typically use to combat stress. This review will also focus on gender differences among adolescents in stress and coping strategies. Lastly, the literature on the effects of working with students through group counseling to teach stress management and coping skills will be discussed.

What is stress?

Richard Lazarus defined stress as “a fluid, dynamic and constantly changing bidirectional relationship between the person and the environment and as such is considered an ordinary component of everyday living” (Lazarus, 1984 p.128) Selye (1974) described stress as any stimulus in the environment that upsets an individual’s homeostasis or balance. These changes can be either positive or negative but either way they affect the person’s life in some form or another (Gladding, 1999 p. 264).

Lazarus went on to describe psychological stress as “a relationship between the person and the environment that is appraised by the person as taxing or exceeding their resources and endangering the individual’s well-being” (Lazarus, 1984, p.128). Therefore, it is not the stressful event itself that causes anxiety in the individual but rather the appraisal of the amount of threat, harm, or challenge it poses to the individual and their assessment of their coping resources to deal with it.

Selye (1978) added to Lazarus’s description of stress by noting that the human body reacts in specific and stereotypical ways to any extra demands made upon it. These demands can be physical, emotional, or intellectual. Selye (1978) described these situations, events or people who produce this extra demand as “stressors”. According to Selye (1978) all humans have a certain amount of “adaption energy” that allows them to deal with the demands of these stressors. Usually this “adaption energy” is replenished each night with sleep, eating, and relaxation. However, some stressors require more “adaption energy” than others. These demands are “any unusual demand for adaption that forces us to call upon our energy reserves over and above that which we ordinarily expand and replenish” (Selye, 1978). These unusual demands result in a

“stress response” which often occurs from emotional overload, causing emotional, physiological, cognitive and social responses (Selye, 1978).

Types of Stress

Compas (1987) differentiated two types of stress: acute and chronic. He described acute stresses as single events such as a life transition or an uncharacteristic event. Examples would be a first date, sickness, or getting into trouble in school. Chronic stress refers to reoccurring demands such as financial difficulties, academic concerns, or a disability. Acute stressors can turn into chronic stressors the longer they prevail (Frydenberg, 1997 p. 14). Hammen (1991, 1992) conceptualized a stress-generation model, which focuses on the difference between independent and dependent life events, which cause stress. Independent events are those outside the individual’s control such as a death of a family member. Dependent life events are those in which an individual contributes to in some way such as getting into trouble in school. Previously most literature focused on independent life events that cause stress, but newer research has examined both aspects (Rudolph & Hammen, 1999).

Elkind (1998) distinguished three types of stressors. The first is *foreseeable* and *avoidable* in which the individual is aware the stressor is looming but can prevent it from occurring. An example of this type of stress would be taking the lead in a school play or going on a date. The second type is *foreseeable* but *unavoidable* in which the individual knows the stressor is imminent but cannot prevent it. Examples of this type would be puberty or a final exam. The last and often most stressful type is *unforeseeable* and *unavoidable* in which the individual doesn’t know the stressor is coming and cannot prevent it. Examples of this type include car accidents, death of a pet or loved one, or parental divorce (Elkind, 1998).

Coping

An individual's mechanism for dealing with stress involves coping. Lazarus and Folkman (1984) define coping as "constantly changing cognitive and behavioral efforts to manage specific external and/or internal demands that are appraised as taxing or exceeding the resources of the person" (p. 141). Coping "is made up of the responses (thoughts, feelings, and actions) an individual uses to deal with problematic situations that are encountered in everyday life and in particular circumstances" (Frydenberg, 1997 p. 25). Coping includes any method a person uses to adapt and deal with the circumstances in their environment, both purposeful and unconscious (Frydenberg, 1997). Lazarus (1984) differentiated between *emotion-focused* and *problem-focused* coping. In emotion-focused coping, adolescents change the way they emotionally respond to the stress to regulate their emotional state. Examples of this form include avoidance, selective attending, denial, regression, withdrawal, and cognitive restructuring of the stressor (Washburn- Ormachea, & Hillman et al., 2004). Problem focused coping involves dealing with the issue, such as working hard, or solving the problem (Frydenberg & Lewis, 2004). "According to Lazarus, in the coping process there is both a problem-focused aspect and an emotion-focused aspect present in each interaction" (Frydenberg, & Lewis 1997 p. 25). Most researchers agree that the more effective ways of coping involve facing and accepting the stress (Santrock, 1990).

Several coping strategies such as seeking support, problem-solving, monitoring, relaxation, physical activity, cognitive-restructuring, and self-talk have been determined to be successful (Donaldson & Prinstein et al., 2000). Adolescents often use less effective coping strategies such as wishful thinking, distancing/denial, and self-blame. "Research on child coping indicates that children and adolescents typically utilize more than one strategy in response to stress" (Donaldson & Prinstein et al., 2000 p. 351). The most common form of adolescent coping is

avoiding the stress, which unfortunately contradicts the suggestion of Brenner (1984) that acknowledging and accepting the stress is usually more effective in the long term. Adolescents avoid stress in many ways including denial (pretending the stress does not exist), regression (act younger than their age) and withdrawal (remove themselves mentally or physically from the stress) (Santrock, 1990).

Lazarus also noted that one of the most important factors in adolescents choosing to solve or seek help to deal with stress has to do with their feelings of having control over events and having personal resources to deal with stressors (Lazarus, 1984). Therefore, it is important for adolescents to learn to have confidence in themselves and their personal resources to cope with life stressors. Teaching coping skills is important for adolescents. One study by Elias & Gara et. al. (1986) found that a program teaching fifth grade students social problem-solving skills resulted in the students feeling more effective in coping with stressors they encountered during middle school. Santrock (1990) noted that “adolescents who have a number of coping techniques have the best chance of adapting and functioning competently in the face of stress” (p. 579).

Stress in Adolescence

One of the most stressful periods in human development is the period of adolescence, which has been characterized as “a time of unevenness and paradoxes marked by personal change” (Gladding, 1999 p. 473). ‘Adolescence’ was a term first coined by Hall in 1904 as a time of ‘heightened emotionality’, ‘storm and stress’, experimentation, and a desire for independence (Hall, 1904). Erikson (1968) believed that the stress during this period of development was a normative factor of the adolescent’s search for identity. He did not see this period of storm and stress, (he called it an “identity crisis”, as negative, but rather a necessary and adaptive process

that fostered the development of coping skills needed later in life (Erikson, 1968). This period of search for identity occurs in a time of transition from childhood to adulthood and is also marked by many developmental changes. These changes are physical, cognitive, emotional and social (Gladding, 1999).

Adolescence is characterized by great physical changes in the body brought on by the onset of puberty. Such physical changes can influence self-image, a search for sexual and personal identity, and impact personality factors like “self-esteem, confidence, shyness, and anxiety” (Frydenburg, 1997 p. 9). Cognitive changes occurring during this time include the development of more abstract and hypothetical thinking and moral reasoning, which influences adolescents’ interpretation of life events. Changes in emotion are also heightened during this time with frequent mood changes and disruptions which evidence has suggested are due to the hormonal changes that accompany puberty (Arnett, 1999). Lastly, adolescents face the social tasks of formation of identity, independence from the family, fitting into social groups, fulfilling social roles within a family, and succeeding in academics (Frydenberg, 1997, p. 6).

Many theorists have viewed adolescence in their own perspectives. Elkind (1984) described it as a period “marked by the ‘shock’ of moving from the culture of childhood to the culture of adulthood” (Frydenberg, 1997 p. 6). Adolescents face the pressures of accepting the new roles and responsibilities of behaving like an adult while at the same time not having all of the freedoms and privileges of adulthood. Elkind went on to note that “the extent to which the transition is experienced as stressful is generally dependent on an impact and interplay between individual and situational determinants” (Frydenberg, 1997 p. 6). Gladding (1999) noted that “adolescents must cope with crisis in identity, extraordinary peer pressures, dramatic personal changes, impending career decisions, the desire for independence, and self doubt” (p. 264).

Prevalence of Stress in Adolescence

It is important to note that today's research suggests that adolescence is not universally a time of storm and stress with many adolescents passing through this stage with little problem. However, "there still appears to be a tendency for adolescents as a group to experience higher levels of stress than individuals in older and younger age groups (Sullivan, 2003 p. 6). How common is stress in adolescence? One study reported that 21% of teens and adolescents reported feeling under stress or pressure "most or all of the time" and that rates escalated each year from sixth to 12th grade (Schmitz & Hipp, 1995 p. 8). Also, de Anda (1998) found that in a study of middle school students "one quarter to one third of respondents self-reported experiencing high levels of stress on a daily and weekly basis. Moreover, they evaluated their coping strategies to be generally low, and at best moderate in effectiveness" (de Anda, 1998 p.74).

Why stress is a problem

Stress in adolescence is an important issue for counselors because of its implications for young people's healthy development. De Anda and Bradley, et al. (1997) noted that adolescence is a time when individuals are "particularly at risk given the limits of their psychosocial and cognitive development and their life experiences" (p. 88). A study by Washburn-Ormachea and Hillman et al. (2004) noted "acute stressors and minor daily hassles have been associated with adolescent maladjustment and the later development of dysfunction and psychopathology" (p. 31). Adolescent stress has been observed to lead to various psychological problems such as anxiety, depression, delinquent behavior, decreased self-esteem, eating disorders, and suicidality (Hains, 1994). Suicide has become the third leading cause of death for adolescents (Wilburn & Smith, 2005) and Schmitz & Hipp (1995) found the strongest predictor of suicide risk among teens to be high emotional stress. This problem is extremely prevalent for females with one

source noting that each year “one in ten adolescent females will attempt suicide” (Schmitz & Hipp, 1995 p. 2). Compared to boys girls attempt suicide more often but are less successful, which has led to higher actual suicide rates for males (Schmitz & Hipp, 1995).

Other subtler ways adolescents often deal with stress involve bullying, acting out, becoming withdrawn, developing a low tolerance for frustration, and underachievement (Smead-Morganett, 1990). If the individual has not learned appropriate coping strategies in adolescence stress has also been linked to health issues often occurring later in life, such as high blood pressure and cholesterol levels (Ames & Offord, et al. 2005), heart disease and cancer (Schmitz & Hipp, 1995). Increased stress during adolescence can also lead to health problems secondary to drinking, drug use, or smoking. Some research has suggested that even minor stress or “hassles” can have an impact on general well being (Ames & Offord et al., 2005). Adolescence can be a particularly vulnerable time as one study concludes that “when daily stressors occur in combination or when developmental changes and major stress events occur simultaneously, then the negative impact on youth seems to increase” (Hains, 1994). Elkind (1998) discussed the importance of teaching adolescents effective coping strategies in that “how we learn to deal with [stress] in childhood and adolescence determines how well we will handle it in our later years” (p. 189). Schmitz and Hipp (1995) add that teaching life skills and effective coping strategies during adolescence gives students tools to be more equipped to manage stress and life events that occur later in life.

Symptoms of Stress in Adolescence

Adolescents display symptoms of stress in a number of different forms. Elkind (2001) reported that “how children respond to chronic stress depends upon several factors, including the child’s perception of the stress situation, the amount of stress he or she is under, and the

availability of effective coping mechanisms” (p. 186). Selye (1976) researched the physiological stress response in people and determined that most humans react to immediate stress in a stereotypical manner. In the initial shock stage, heartbeat becomes irregular, blood pressure falls, muscle tone is lost, and body temperature drops. After the initial shock, the counter shock stage occurs in which these symptoms are reversed in order to prepare the individual for defense known as the “fight-or-flight response” (Selye, 1976).

Physiologically, chronic stress also manifests itself in frequent headaches or stomachaches, sweating, sleeping problems, crying and sadness, and excessive or under eating (Santrock, 1990). Stress can also result in headaches, indigestion, acne, and hives. There are many long term physiological ailments that can result from prolonged stress. These include high blood pressure, ulcers, asthma, allergy attacks, and some forms of cancer (Santrock, 1990). Selye (1974, 1983) reported that the longer stress persists, the more damage it does to the adolescent's body. Psychologically, stress in adolescence can result in aggression, boredom, anxiety and worry, irritability, passivity, lack of interest in things previously enjoyed, rebellion, withdrawal, isolation, and difficulty concentrating (Frydenberg, 1997 p. 22). Elkind (2001) refers to Freud's notion of ‘free-floating anxiety’ to describe how children feel restless, irritable and anxious due to chronic stress, not attached to a specific fear (p. 186). Stress can manifest itself in other ways, leading to drug and alcohol addiction, truancy or school refusal, gang behavior, promiscuity, and violence (Frydenberg, 1997 p. 22).

Adolescent Stressors

There are many life stressors that typical adolescents face. One study noted that “stressors for adolescents appear in various forms including catastrophic events, personal loss, daily aggravations, and normal developmental transitions” (Hains, 1994 p. 114). These stressors can

vary from minor ones and “hassles” to major stressors from catastrophic life changes and events. While some stressors may be seen as major life events, Armacost (1989) proposed that it is the cumulative build up of regular daily stressors that has the greatest impact on adolescents’ lives. The most common stressors faced by typical adolescents can be categorized into family, social (peer), academic, and societal challenges.

Family stressors

Family stressors have a major impact on adolescents’ lives since they are still largely dependent on the family unit. As adolescents begin to test limits of independence, parent-youth conflict often arises (Hains, 1992). In addition, family changes such as divorce or separation of parents, remarriage of a parent, death of a family member or pet, birth of a sibling, moving, and family financial challenges are major causes of stress for adolescents (Schmitz & Hipp, 1995). Many adolescents also face family stress caused by physical or sexual abuse and by chaotic living conditions (Kessler & Edelman et al., 2000). Arnold (1990) noted that parental stress can have a significant affect on adolescents. When parents are stressed by challenges such as mental illness, marital discord, unemployment, and low socioeconomic status it causes great strain on the family (Arnold, 1990).

Social Stressors

The adolescent’s relationship with peers is one of the most central aspects of this time period. Peer relationships and friendships help adolescents identify who they are and associations within a peer group foster their sense of identity and belonging (Schmitz & Hipp, 1995). Peer relationship problems (de Anda, 1998) and dating anxieties (Hains, 1992) associated with testing relationships with the opposite sex become central causes for stress in adolescent lives. Much of the stress involves fitting in, maintaining and developing friendships, being made fun of or

rejected, loyalty, commitment and first dealings with intimacy (Schmitz & Hipp, 1995). Santrock (1990) described how in an adolescent's world, how they are perceived by their peers is often the most important aspect of their lives. Many adolescents will do anything to fit in with the group and exclusion is one of the most prevalent forms of stress. Pressure to conform to peers in order to be included is a central aspect of their lives and can lead to the adolescent partaking in activities or acting out in ways that are detrimental to themselves in order to be accepted (Santrock, 1990). Stress in adolescents also comes from their changing bodies and physical appearance and worry over whether their changes are 'normal' in relation to their peer group (Schmitz & Hipp, 1995).

Academic Stressors

Because adolescents spend the majority of their lives in the school setting, daily demands and expectations in the school environment are central to their stress concerns. During adolescence most students change schools from elementary to middle school and middle to high school. This transition can be stressful to a young adult (Arnold, 1990). Many students report feeling academic pressure to succeed from parents, teachers, and society as well as competition to set themselves apart from other students (Hains & Szyjakowski, 1990). Wilburn & Smith (2005) found that "academically successful students experience greater amounts of stress than do their less successful peers because more successful students feel more pressure to maintain their level of performance" (p. 35). Many students also report high levels of test anxiety especially on examinations that will help decide their future such as the SATS (Keogh, & Bond et al., 2006). Fiske (1988) noted that American schools have gone "test crazy" with the emphasis placed on state tests, resulting in increased stress for students. In addition, as they move up in grade level, adolescents begin to worry about college, future goals and careers (de Anda, 1998). Elkind

(2001) describes a phenomena known as “school burnout” in which the chronic stresses of school become too much to bear for adolescents, often resulting in dropping out of school or turning to drugs or alcohol for relief (p. 192).

Societal stresses

Today’s adolescents also face societal stresses unlike any other generation. Schmitz & Hipp (1995) noted that some adolescent psychologists such as David Elkind believe that youth today live in a culture that no longer promotes a safe transition for adolescents into adulthood.

Increased numbers of children are now living with divorced or separated parents or in single parent homes (Schmitz & Hipp, 1995). Some literature has focused on the loss of neighborhood and community support, which has occurred in recent years, causing adolescents to have less of a support network to rely on. Today’s teens are also faced with growing up in a changing economy and with many unrestricted freedoms and choices (Schmitz & Hipp, 1995). More than ever teens are exposed to choices regarding sex, drugs and to violence openly portrayed in the media.

Lastly, the societal issues of racism, sexism, classism, and pressure to succeed are still active for today’s youth (Schmitz & Hipp, 1995).

Positive Stressors

While most of the research focuses on negative experiences that cause stress, there has been some work done on stress that occurs due to positive experiences (Santrock, 1990). Selye (1983) described this type of stress as ‘eustress’. Examples include being chosen captain of a team, transitioning from elementary to middle school, making the honor roll, performing in a school play or musical concert, or competing in state athletic championships. Although all of these situations are viewed as positive life events, they can also cause significant levels of stress for adolescents (Santrock, 1990).

Compound Stressors

Santrock (1990) reported that when adolescents face more than one stressor at a time, the effects can become compounded. For example, Rutter (1979) reported that adolescents who were dealing with more than one chronic life stressor at a time were four times more likely to need psychological services than those who were coping with one stressor.

Gender Differences

Gender differences become more apparent in the adolescent years and have an effect on stress and coping (Santrock, 1990). Maccoby & Jacklin (1974) reported that adolescent boys had better math skills, visual-spatial ability, and are more aggressive than girls. Girls showed better verbal and communication skills. However, Santrock (1990) reported that this gender gap is shortening in recent years with boys scoring just as well as girls on the verbal portion of the SATs.

Gender differences in individuals arise from many different sources (Santrock, 1990). Some gender differences are inborn. For example, Santrock (1990) reported that as early as 18 months of age children begin to express interest in gender role activities and classify themselves according to gender. Gender differences also result from gender stereotypes that exist in our culture that reflect our beliefs about appropriate gender roles (Santrock, 1990). Social influences and expectations also influence gender differences (Santrock, 1990). Parents influence these expectations at an early age by socializing their children in different ways, such as buying girls dolls to be more nurturing and boys action figures for more aggressive behaviors (Santrock, 1990). Also, children learn from their parents, and mothers and fathers often play different roles in the family that foster these differences as well. Peers also influence gender roles in that peer relationships reward gender-appropriate behavior and peer demands to conform to gender become especially intense during adolescent years (Santrock, 1990). Additionally, the media

plays an important role in influencing gender roles in that television, movies and video games continue to foster gender role differences (Santrock, 1990).

Gender Differences in Stress and Coping

Stress

Research has noted gender differences in stress and coping. There have been differences found in boys' and girls' perceptions of stress, frequency of stressful events, and coping styles used to combat stressful situations (Frydenberg, 1997). There are differences in the types of stressors that boys and girls report as causing them the most distress. Girls often cite interpersonal, social, relationship, and family stressors as most problematic, while boys report more school related stressors (Sullivan, 2003). Frydenberg (1997) reported that "not only are adolescent girls concerned about more things than boys but girls report experiencing more stressful events and they are more affected by stressful events than are boys"(p. 13). Jose and Ratcliffe (2004) stated that "girls reported significantly more stressful events from age 12 to 17 than boys and girls showed higher levels of internalizing from age 13" (p.145). It remains unclear to researchers if the reasons for these differences are that girls indeed face more stressful challenges in their lives or rather they perceive or appraise them differently than boys (Jose & Ratcliffe, 2004). Jose & Ratcliffe (2004) argued that the a possible reason for this gender discrepancy is that girls are more "responsive and reactive to a stressful event" which leads to the notion that it is not the stressor itself that has a more negative effect on girls but it is rather that girls' coping mechanisms for dealing with stress are different (p.145).

Coping

There have been gender differences reported in coping. Frydenberg (1997) noted that "gender is consistently the clearest predictor of coping" (p. 85) and described how boys use more

problem-focused and action oriented ways of coping and more denial and suppression of problems than girls. Frydenberg (1997) also reported that girls assess stressful situations as “four times more threatening than do boys” (p. 89) and that girls cope with stress more emotionally, use more wishful thinking, and more often seek social support than boys (Frydenberg, 1997 p.91). Schmitz & Hipp (1995) discussed differences in the resources that boys and girls have to deal with stress in terms of developmental assets and deficits. Developmental assets are those resources that a person has personally or in their environment to deal with the stress.

Developmental deficits are the absence of such assets or opportunities to help combat stress. Several researchers have focused on the differences in assets and deficits in coping across gender (Schmitz & Hipp, 1995). Frydenberg & Lewis, (1997) suggested that boys and girls develop differently in their patterns of coping with age and therefore the timing of teaching these skills to boys and girls may vary and is important for counselors to consider.

Explanations for Gender Difference

Some researchers have suggested reasons for this gender difference in stress and coping, which include gender socializations, gender role orientation, and stereotypes. Frydenberg, (1997) noted that boys and girls have been socialized into different gender oriented expectations around what are acceptable forms of coping. From young ages boys are socialized toward more independent action while girls are socialized toward more interpersonal behaviors. Gender differences are evident in the types of stressful events that girls and boys report as most frequent. Girls identify more interpersonal issues with friends while boys report more physical fights, threats, and school problems (Washburn-Ormachea & Hillman et al., 2004). Washburn-Ormachea & Hillman et al. (2004) reported that girls might perceive interpersonal events more stressful than boys because their identity is more associated with their interpersonal

relationships. Girls also report parent-child conflict as forms of stress more than do boys (Washburn- Ormachea, & Hillman et al., 2004). Rudolph & Hammen (1999) noted that this difference stems from the fact that girls seek more emotional autonomy from parents, which clashes with the societal norms whereby parents tend to give more autonomy to boys. Van Hook (1990) suggested that adolescent females report more stress related to the family because girls have been socialized to take on more familial responsibility and show more concern for their families. Lastly, it is important to note that girls may report stress and seek help for stress related problems more than boys because they have been socialized and encouraged to express their emotions and feelings more than boys (Washburn- Ormachea, & Hillman et al., 2004). These gender differences in stress and coping demonstrate the need for counselor to “be conscious of the differential ways in which stress management and coping programs might benefit boys and girls and the need to adapt both the content and the process of their particular needs” (Frydenberg & Lewis et al., 2004 p. 34).

Need for counseling

The literature on the causes and effects of stress on adolescents is overwhelming. Although there are differing perspectives on the ways adolescents cope, and the apparent gender differences, most agree on the importance of counseling programs surrounding this issue (Schmitz & Hipp, 1995). Santrock (1990) emphasized coping as an important area for counselors to explore in working with stress in adolescence. As noted previously many adolescents feel that their coping strategies in dealing with stress are ineffective (de Anda, 1998). De Anda (1998) hypothesized that this was due to the fact that most adolescents are not taught stress management and effective coping strategies and therefore rely on trial and error. Therefore, it is important for counselors to provide adolescents instruction in specific coping and stress management

techniques to promote their well-being and avoid distress (de Anda, 1998). Hains, (1994) suggested “the acquisition of coping strategies by adolescents seems to be critical to their efforts to manage stress” (p. 114). Frydenberg & Lewis (2004) added that it is important not only to teach productive coping skills to adolescents but also to “focus on the reduction of the use of non productive coping skills” which adolescents are relying on” (p. 34). There has been little attention given to prevention programs with adolescents to prevent stress-related problems before they arise (Hains, 1992). Most previous programs have focused on specific stress related issues like phobias or illness, rather than the wider range of issues adolescents face (Hains & Szyjakowski, 1990). Hains (1992) noted that intervention programs to help students cope with multiple pressures have not been developed or tested. Such deficits in research demonstrate the importance for the current study.

Managing Stress In Schools

Schools and school counselors are logical settings and agents to provide students with stress intervention and prevention counseling because of their relationship and daily contact with students (Hains, 1994). The school setting is also logical to provide counseling services in that adolescents spend the majority of their time, aside from with their family, in school, interacting with teachers, counselors and other students (Fydenberg & Lewis, et al, 2004). Furthermore, the school environment itself is often considered a source of adolescent stress and anxiety (Kiselica & Baker, 1994). Johnson (1979) reported that 10% to 30% of students experience “school related anxiety severe enough to interfere with performance”. School counselors have the advantage of being within the system in which stress often arises and have the opportunity to observe students within their main ecological system (Davis & Kruczek et al., 2006). Additionally, school counselors have the advantage of being able to intervene in that system

when necessary (Davis, & Kruczek, et al., 2006). Furthermore, difficulty coping with stress has been linked to decreased academic achievement, so providing counseling in the schools is very relevant to its academic mission (de Anda, 1998). Many schools are seeking programs and ways of enhancing resiliency and academic success in their students and implementing stress and coping programs meets this need and is of utmost importance (Frydenberg & Lewis, et al, 2004). Plunkett & Radmacher, et al. (2000) made several suggestions for counselors implementing stress management and coping programs in their schools. These include conducting an assessment of the life events occurring in their school to get a better understanding of the specific stresses the population is facing at that time and routinely examining the coping strategies used by the students in order to determine where intervention is most needed.

The Benefits of Group Counseling

Research has shown group counseling in schools to be a time effective way of reaching a greater number of needy students and serves as a manageable way for counselors to bring together students dealing with similar problems (Zinck & Littrell, 2000). Sells and Hays (1997) suggested that group counseling was a way for counselors to serve a larger number of students in a school setting and Borders and Drury (1992) added that this practice is both cost effective and developmentally appropriate. Coppock and Dwivedi (1993) noted that “group work in the school setting offers the opportunity for the work to be carried out in an environment which is often more acceptable to both parents and pupils alike” (p. 278). Studies have shown “a significant reduction of problem severity” with students participating in counseling groups (Zinck & Littrell, 2000).

There are many reasons why group counseling can be a beneficial method of counseling. Groups “can provide support, facilitate learning, help ease internal and external pressures, and

offer hope and models for change” (Gladding, 1999 p. 265). Also, many times members learn more from listening to each other than from talking. Borders and Drury (1992) also cited research validating the positive effects of group counseling on behavior, self concept, attendance, and attitudes toward self and others.

The Benefits of Group Counseling with Adolescents

Group counseling can be especially beneficial for adolescents because “the adolescent peer group serves a crucial role in the developmental tasks of this age group (Arronson, 2004 p. 174). The group context provides adolescents a safe environment to express themselves, be heard, experiment with new skills and practice them with their peers and with adults. In a group format adolescents can also practice their interpersonal skills, gain a sense of identity and intimacy with other members and attain greater self-awareness through peer interactions (Gladding, 1999 p. 266). Adolescents may talk more freely with other adolescents in a group than one on one with an adult (Jacobs, Masson, & Harvill, 1998). Finding acceptance and encouragement from group members and adult leaders can be great agents to facilitate change (Gladding, 1999 p. 266). As one researcher notes, “Deep lasting changes, individually and structurally, must ultimately come from sharing with like individuals” (Egbochiuku & Obiunu, 2006 p. 504). In a group format many students feel a sense of universality or “we are all going through this together” which can serve as a source of comfort when sharing with students who have similar experiences (Arronson, 2004 p. 174). Adolescence is often a time of self-doubt and conflicting feelings and being able to share these issues with peers can be therapeutic (Lasell & Russell, 1993). Bringman & Earkey (1991) reported that “not only is anxiety reduced when students learn they are not alone with their concerns, but a sense of belonging and support can replace feelings of loneliness, isolation, and helplessness” (p. 5). A study by Kingery & Roblek, et al. (2006) found

that incorporating peers and activities into counseling, “makes skills learned in therapy more meaningful and generalizable to older children and adolescents” (p. 265).

Gladding (1999) listed several advantages for using group counseling with adolescents. First, groups are a part of their “natural” environment since they spend so much time in groups in their everyday lives; the group situation feels comfortable to them. Second, groups are a great mechanism to teach life skills through modeling and role-playing. Barrett (1998) noted that group counseling is an excellent means to promote healthy behaviors through modeling by the leader and other group members. Third, the sense of belonging that is created in groups allows adolescents to learn skills through interactions in the group and to then carry them over to the broader social context. Fourth, groups provide adolescents with quick and helpful feedback as to how their peers see them. Last, groups allow members to have the opportunity to help one another, which in turn, can lead to enhanced self-esteem and confidence (Gladding, 1999 p.283).

Rationale for the Present Study

Although group therapy has been proven effective for certain adolescent issues such as abusive dating relationships, sexual abuse, alcohol abuse, learning disabilities, communication problems, and developmental concerns, research is lacking on its effects in reducing overall stress in adolescents (Zinck & Littrell, 2000). There have been a few studies done on group counseling and stress. Zinck and Littrell (2000) noted one study by Whiston and Sexton in 1998 found group counseling to be effective in managing stress in young people. Another study by de Anda (1998) found a stress management program for middle school students effective in promoting academic performance. However, Kessler & Edelman, et al. (2000) noted “the effects of stress and stress reduction techniques have been studied much more with adults than they have been studied in children and adolescents.” Therefore, one can see the absence of substantial

information and the need for further research in this area. One researcher noted, “given multiple changes and challenges encountered by young adolescents, their limited range of available coping strategies, and their potential to develop emotional and behavioral problems, early adolescence is an important period to study the coping process” (Washburn- Ormachea, & Hillman, et. al, 2004 p. 31). For this reason this study focuses on ten and eleven year old students as an early intervention.

There has been research done on certain theoretically based interventions used to teach stress and anxiety reduction (Kingery & Robleck et al, 2006). Kessler & Edelman et al. (2000) indicate that interventions attempted with children and adults include “cognitive-behavioral therapies, relaxation training, meditation, hypnosis, biofeedback, and psychopharmacology” (p. 152). However, this study seeks to teach adolescents an eclectic approach involving various stress management and coping techniques. The book *A Leader’s Guide to Fighting Invisible Tigers* (Schmitz & Hipp, 1995) from which the counseling sessions in this study were taken, describes this eclectic approach as “life skills” training. Schmitz & Hipp defines ‘life skills’ as “an assortment of stress-reducing, life-enhancing strategies that keep people feeling emotionally and physically balanced” (Schmitz & Hipp, 1995 p. 16). This approach is interdisciplinary and touches on diverse theories from fields such as counseling, educational psychology, medicine, relaxation and human development. The book uses the metaphor of “fighting invisible tigers” as teaching adolescents to cope with the stresses in their lives. The author reminds counselors using this approach that of course it won’t prevent all of the stresses adolescents face but teaching students “life skills” may make it easier for teens to cope. “Just helping them become aware of the stressors in their lives, and providing them with a setting where it is okay to talk about stress

and talk about their ways to ‘get it together’ may be the biggest gifts you can give them” (Schmitz & Hipp, 1995 p. 2).

Summary

From the literature reviewed one can see that stress is a significant problem in the life of adolescents. Therefore, the need for counselors to implement stress management and coping programs for adolescents is evident. The literature points out gender differences in stress and coping, which will also be explored in this research study. Research has identified the benefits of group counseling for adolescents but more information is needed. This study focuses on an eclectic approach in providing ‘life skills’ training to young adults in a group format. This research is needed because of the lack of data on the effects of stress management with young adolescents, with an eclectic approach, and using group counseling as the means to deliver this training.

Purpose of the Study

The purpose of this project is to determine whether or not psycho-educational group counseling relieves stress among adolescents with these symptoms. This study will also examine whether the effects of the group intervention differ among boys and girls and gender differences in stress symptoms and causes of stress. This research is important because stress and anxiety affect the lives of many students and can have strong influences on students psychologically, emotionally, physically and academically. It is important for counselors to learn how they can better help students and to assess the effectiveness of their work. Group counseling is often a preference in schools because this approach can reach more students and is time effective. For this project the purposes of group involvement are to identify stressors that cause stress and anxiety, provide a forum for the discussion of these issues, and to teach students how to manage

their anxiety. It is the hope that through the group experience, students will gain an increased awareness of the stresses in their lives and increased coping skills.

Method

Setting

The participants in this project were students at a working class middle school in upstate New York. The district as a whole has 4,989 students enrolled. The district reports a poverty rate of 29%. There are 1,251 students enrolled at the middle school. The middle school is made up of 52% males and 48% females. The ethnicity breakdown at the middle school is 77% white, 15.6% Black or African American, 3.8 % Hispanic or Latino, 3.4 % Asian, and 0.2% American Indian or Alaskan Native.

Participants

The project involved two groups of seven white 6th grade students (10-11 years old). One group consisted of only boys and the other group of only girls. The participants were selected for the group by parent and teacher recommendations that the students may benefit from participation in a group on stress and anxiety. Participation in the group was voluntary. Students did not receive any fees, extra credit or any other rewards for participation.

Materials

Participants were given a pre-test to measure stress and anxiety symptoms prior to participation in the group and the same instrument as a post-test at the conclusion of the group work. The test is entitled *University of Minnesota Adolescent Health Program: Measuring Emotional Stress* (from Blum & Resnick, 1986). The test is used with permission in *A Leader's Guide to Fighting Invisible Tigers: A Stress Management Guide for Teens* by Schmitz and Hipp (1995). (See Appendix A)

During one session, the group members were also given the *Teen Inventory on Common Stressors and Stress Symptoms* (Schmitz & Hipp, 1995) to measure their stress symptoms and most prevalent stressors in their lives. (See Appendix B)

The ten group sessions were modified from the program outlined in the book *Revised & Updated Fighting Invisible Tigers: A Stress Management Guide for Teens* devised by Schmitz and Hipp (1995). The student researcher condensed the main topics of the twelve outlined sessions into ten sessions and utilized them as a guide for the group work with the students. Worksheets and activities in the book were also used to teach students to recognize and deal with stress and anxiety.

Procedure

Each group participated in ten weeks of group sessions that were 40 minutes in length and took place once a week. Participants were given the pre-test in the first group session and the post-test at the conclusion of the group work. The ten sessions were guided by the manual (*Revised & Updated Fighting Invisible Tigers: A Stress Management Guide for Teens* Schmitz and Hipp, 1995) and tailored based on the flow of the sessions. The ten sessions were organized as follows:

Session 1:

The main objective of this session was for students to learn about the purpose and function of the group and to complete the pre-test.

- Conducted a “get to know each other” activity (“icebreaker”)
- Went over group rules
- Explained the purpose of the group
- Obtained Consent forms (See Appendix G and H)

- Administered Pre-test (Appendix A)

Session 2: (Schmitz & Hipp, 1995, p. 28-29):

The main goals of this session were for students to recognize what stress is, what it feels like, and how it affects their lives

- Recognizing Stress: What is stress?
- How stress affects our lives and why it is important to alleviate it
- What does stress feel like physically?
- Remembering a time when you felt stressed

Session 3:(Schmitz & Hipp, 1995, p. 30- 35):

In this session students compared the feelings of deep relaxation with those of stress.

- Difference between stress and relaxation
- What is relaxation? What does it feel like?
- Relaxation activity- *Progressive Relaxation Script # 2* (Appendix C)
- Feedback: how it feels to be relaxed as opposed to stressed?
- How do you relax in your day? How can you make time for it?

Session 4: (Schmitz & Hipp, 1995, p. 36-42):

The main objective of this session was for students to understand the origins of stress, and how it affects the body (physically and emotionally). Students also learned about how and why we perceive certain situations and events as stressful.

- Understanding where stress/anxiety comes from
- Define stressor and stress reaction
- Understanding how stress/ anxiety can affect academic performance, relationships, health
- Difference between good stress and bad stress- give examples

- Understanding the physical and emotional manifestations of stress/anxiety
- Discuss important factors in whether we perceive an event as stressful
- Discuss the difference between *Foreseeable/Avoidable*, *Unforeseeable/Unavoidable* and *Foreseeable/Unavoidable- Three Types of Stress Situations* (Appendix D)

Session 5: (Schmitz & Hipp, 1995, p. 44):

The purpose of this session was to relate common teen stressors and symptoms to their own situations.

- Take “Teen Inventory on Common Stressors and Stress Symptoms” (Schmitz, 1995) (Appendix B)
- Evaluate and discuss stress symptoms and stressors in their lives from the Inventory

Session 6: (Schmitz & Hipp, 1995, p.45-57):

The topic of this discussion was coping and coping strategies. Students learned effective coping strategies. Another goal was to determine when stress levels get too high and outside help is needed.

- Discussion of positive and negative coping strategies
- Evaluation of their own coping strategies
- Identification of stress/anxiety levels in which immediate help is needed
- Discuss knowledge and skills in how to help other teens in crisis
- Discuss “triggers” in their own lives in which they may need “outside” help

Session 7: (Schmitz & Hipp, 1995, p. 60-74):

The purpose of this session was to understand how the mind can influence the stress a body feels and how one can increase awareness. The session also focused on relaxation techniques and physical activities to relieve stress.

- Begin teaching life-skills: how mind influences, slow time down and increase awareness of present- Centering the Mind Activity- (Appendix E)
- Work on relaxation techniques (meditation and breathing) (Appendix F)
- Discuss physical activities that can reduce stress
- Group physical activity (playing drums, game)

Session 8 (Schmitz & Hipp, 1995, p. 75-98):

In this session participants learned the effects of communication styles on relationships and how they affect stress and friendship levels.

- Discuss communication and response styles
- Identify benefits of being assertive
- Discuss how relationships affect stress and anxiety, friendships and trust levels
- Discuss characteristics of supportive friends

Session 9: (Schmitz & Hipp, 1995, p. 110-112, 99-109):

The purpose of this session was to introduce the idea of 'self talk'. Participants identified some of the personal barriers they face in developing life-skills and worked on positive messages they can give themselves to work through these challenges. Students also examined the decisions and stresses that they may encounter in their future and how they will work through them with the tools they have learned in the group.

- Positive Self Talk
- Planning for the future
- Planning for change- discuss resources and constraints

Session 10:

The purpose of this session was to illicit feedback from group members on the group experience, close the group and administer the post-test.

- Discussion of what they have learned from the group
- Administer post-test (Appendix A)

Evaluations and Scoring

The pre-test and post-test used was the *University of Minnesota Adolescent Health Program: Measuring Emotional Stress* (from Blum & Resnick, 1986). The emotional stress section was a sub-section of the University of Minnesota Adolescent Health Survey conducted by the National Adolescent Health Resource Center in 1987. This survey was designed to measure youth health and risk behaviors in a variety of topics. The study population consisted of 30,000 Minnesota public school students in grades 7 through 12. The emotional stress section of this survey has very high reliability (Cronbach's alpha coefficients of .87 for 7th grade males and .90 for 7th grade females). In scoring this instrument, the manual reports that scores of 0-21 are viewed as low stress, scores of 22-32 are viewed as moderate stress, and scores 33-74 are viewed as high stress (Blum & Resnick, 1986).

Results

The results are divided into three parts. First, the author will present the results of the *Teen Inventory on Common Stressors and Stress Symptoms* (Schmitz & Hipp, 1995) that participants completed at the beginning of the project in order to gain a better understanding of the stress symptoms and life stressors adolescents' face. Results from the *Stress Symptoms* part of the inventory will be discussed, followed by results of the *Stress* portion of the inventory. Next, in order to see the results of the group intervention the author will present the results of the pre and

post-test measure, *The University of Minnesota Adolescent Health Program: Measuring Emotional Stress* (Blum & Resnick, 1986).

Table 1: Teen Inventory on Common Stressors and Stress Symptoms (Schmitz & Hipp, 1995)

Stress Symptoms

The degree to which students have experienced the following symptoms of stress in the previous month

Symptom	Males n = 6	Females n = 8
1.) Chronic dissatisfaction	0.67	2.13
2.) Loss of interest or pleasure	1.33	1.25
3.) Excessive sleeping or sleeplessness	2.33	1.88
4.) Always irritable, angry over small things	1.67	1.75
5.) Reject positive comments or support from others	0.33	1.50
6.) Difficulty concentrating	1.67	1.38
7.) Major change in academic performance	2.17	0.88
8.) Significant change in eating habits	1.50	1.75
9.) Ongoing, recurrent worries	1.00	1.75
10.) Nightmares or disturbing dreams	1.17	1.25
11.) Increase in number of mishaps, accidents	1.50	1.00
12.) Obsessive- compulsive about routine, time, grades, etc.	1.33	1.50
13.) Jittery, hyper	1.83	1.63
14.) Withdrawal, aversion	0.50	1.13
15.) Recurrent physical ailments (headaches, colds, etc)	0.83	1.13
Total Stress Symptoms Total Symptom Score Means (45 is maximum score)	1.31 19.50	1.46 21.88

As shown in Table 1, the results show significant differences in the specific stress symptoms reported by the males and females. Females showed significantly higher (more than 0.5

difference) symptoms of chronic dissatisfaction, rejecting positive comments or support from others, recurrent worries, withdrawal or aversion, and physical ailments. The males, on the other hand, reported significantly higher symptoms of excessive sleeping or sleeplessness, major change in academic performance, and an increase in the number of mishaps or accidents. The most prevalent symptom of stress reported for females was chronic dissatisfaction (2.13) and for males it was excessive sleeping and sleeplessness (2.33). There was no major difference in the total amount of stress symptoms reported by the two genders.

Table 2: Teen Inventory on Common Stressors and Stress Symptoms

(Schmitz & Hipp, 1995)

Stressors

Experienced this stressor in the last year

Common Teen Stressor	Boys n = 6	Girls n = 8
<i>Stressors At Home</i>		
1. Argument with parent(s) or other adult at home	0.50	0.75
2. Conflicts with brother(s) or sister(s)	0.83	0.75
Significant change in family, such as:		
3. Separation or divorce of parents	0.67	0.13
4. Blending two families (moving in with step-siblings)	0.00	0.00
5. Remarriage of a parent	0.16	0.00
6. Parent changes jobs	0.50	0.50
7. At-home parent gets a full-time job outside of the home	0.50	0.25
8. Move to a new house or apartment	0.16	0.25
9. Home remodeling- invasion of your "space"	0.16	0.38
1. Alcohol or drug abuse by a family member	0.16	0.13
11. Physical or sexual abuse by a family member of a sibling or other	0.00	0.13
12. Physical or sexual abuse a family member of your self	0.00	0.13
13. Parent or family member becomes seriously ill	0.83	0.50
14. Parent or family member dies	0.50	0.38
15. A pet dies	0.33	0.50
Section Mean	.353	.319
<i>Stressors at School</i>		
1. Did less well in school (academically) than expected or desired	0.83	0.50
2. Underwent psychological or educational testing	0.67	0.88
3. Placed in special class (gifted, remedial, other)	0.17	0.13
4. Had confrontation with teacher, coach, or administrative staff	0.17	0.38
5. Was tardy for three or more classes	0.00	0.13
6. Was expelled from class	0.00	0.00
7. Received a detention	0.33	0.25
8. Received probation for academic or behavioral problems	0.00	0.00

9. Felt frustrated when learning	0.67	0.75
10. Was singled out for an award or recognition	0.17	0.38
11. Was elected for an honored position (captain, editor)	0.33	0.13
12. Was accepted or promoted to an athletic team	0.33	0.25
13. Was eliminated from or demoted on an athletic team	0.00	0.00
14. Incidents of school vandalism occurred at your school	0.67	0.88
15. Incidents of youth violence occurred at school or neighborhood	0.67	0.63
16. Other disruptions in school (e.g. teacher strike, resignation of principal, change in class size, school)	0.50	0.50
Section Mean	.344	.362
<i>Stressors with Peers</i>		
1. Fell in love with someone new	0.83	0.25
2. Lost a significant friend due to relocation or separation	0.67	0.63
3. Felt your trust or confidence was betrayed by a significant friend	0.83	0.50
4. Became disillusioned with a previous girlfriend or boyfriend	0.50	0.13
5. Was “dropped” by a boyfriend or girlfriend you really care for	0.50	0.13
6. No longer feel part of the same old crowd	0.33	0.38
7. Don’t have a group that you feel comfortable hanging out with	0.33	0.00
8. Excluded from groups that you’d like to be a part of	0.00	0.25
9. Feel less adequate, compared to your friends	0.50	0.38
10. Feel your friends make too many demands of you	0.50	0.13
11. Engaged in unprotected sex with a partner	0.00	0.00
12. Became pregnant, or impregnated with a partner	0.00	0.00
Section Mean	.416	.232
<i>Stressors with Self</i>		
1. Concerned about your weight, height, physical development	0.67	0.63
2. Concerned about clothes, other material things	0.67	0.75
3. Change in employment or income status	0.50	0.38
4. Wondered what you are “good at”	0.50	0.75
5. Questioned what your future will be	0.33	1.00
6. Passed (or failed) your drivers test	0.17	0.00
7. Went through a bar/bat mitzvah training or religious confirmation	0.33	0.13
8. Received acceptance (or rejection) from college	0.00	0.00
9. Conflict over major decisions involving values, life choices	0.17	0.25
10. Used alcohol or drugs	0.00	0.00
11. Dealing with issues of homosexuality and self	0.00	0.00
12. Dealing with chronic illness or disability	0.17	0.25
13. Considered leaving home, moving out on your own	0.17	0.13
Section Mean	.283	.329
<i>Stressors Related to Life</i>		
1. Questioned whether God exists, what religion means to you	0.50	0.88
2. Felt injustice in your immediate world (e.g. racism, sexism)	0.50	0.38
3. Felt environmental threats in your immediate world	0.33	0.13
4. Loss of influential adult in your life (other than parent)	0.33	0.63
5. Negative images in the media (violence, sexuality, stereotyping, etc.)	0.67	0.75
6. Lack of challenge in life: not much to do, not many places to go	0.67	0.50
7. Lack of community: disconnectedness in neighborhood, school	0.33	0.38
8. Lack of economic opportunity, money	0.33	0.50
9. Overwhelming sense of authority, structure, conformity, no options	0.33	0.25
Section Mean	.443	.489
Grand Mean	.443	.489

Overall, as shown in Table 3, the results did not show a major gender difference in the amount of “stressors” adolescents’ face, with males reporting stressor levels at a mean of .443 and females at a mean of .489. There were similarities in the types of stressors that males and females report as most stressful. Both boys and girls reported *Stressors Related to Life* as their biggest concern (.443 for males, and .489 for females). However, males ranked *Stressors with Peers* second (.416), followed by *Stressors At Home* (.353), *Stressors Related to School* (.344), and *Stressors With Self* (.283) while females reported *Stressors At School* as second (.362), followed by *Stressors with Self* (.329), *Stressors at Home* (.319), and *Stressors with Peers* (.232). Within the subsections, males reported significantly higher levels of stress from a parental divorce than females, as well as a parent or family member becoming seriously ill, and doing less well in school than expected or desired. Males also reported greater stress from falling in love with someone new, and feeling their friends make too many demands on them. Females, on the other hand, reported higher levels of stress from being excluded from groups they would like to be a part of, questioning what their future will be, questioning whether God exists and what religion means to them, and losing an influential adult in their lives (other than a parent).

Table 3: University of Minnesota Adolescent Health Program: Measuring Emotional Stress (Blum & Resnick, 1986)

	Males (n=6)			Females(n=8)		
	Pretest	Post-test	Δ	Pretest	Post-test	Δ
1. How have you been feeling in general during the past month?	1.67	1.17	-0.50	1.75	1.50	-0.25
2. Have you been bothered by nervousness or your “nerves” (during the past month)?	2.00	1.33	-0.67	2.00	1.63	-0.37
3. Have you felt in control of your behavior, thoughts, emotions, or feelings (during the past month)?	0.67	0.67	0.00	1.25	0.63	-0.62
4. Have you felt so sad, discouraged, hopeless, or had so many problems that	0.50	1.33	+0.83	1.63	1.00	-0.63

you wondered if anything was worth while anymore in the past month?						
5. Have you felt you were under any strain, stress, or pressure (during the past month)?	1.67	1.33	-0.34	2.00	1.00	-1.00
6. How happy or satisfied or pleased have you been with your personal life (in the past month)?	1.50	1.33	-0.17	1.38	1.25	-0.13
7. Have you worried you might be losing your mind or losing control over the way you act, talk, think, feel, or of your memory (during the past month)?	1.00	1.00	0.00	0.88	0.75	-0.13
8. Have you been waking up fresh and rested (during the past month)?	1.67	1.17	-0.50	1.88	1.75	-0.13
9. Have you been bothered by any illness, body disorder, pains, or fears about your health (during the past month)?	0.67	0.17	-0.50	1.25	0.50	-0.75
10. Has your daily life been full of things that were interesting to you (during the past month)?	1.33	1.50	+0.17	1.38	1.38	0.00
11. Have you felt sad (during the past month)?	1.17	1.33	+0.16	1.50	1.13	-0.37
12. Have you been feeling emotionally secure and sure of yourself (during the past month)?	1.17	1.00	-0.17	1.50	1.13	-0.37
13. Have you felt anxious, worried, or upset (during the past month)?	1.83	1.50	-0.33	1.88	1.25	-0.63
14. Have you felt tired, worn out, burned out, or exhausted (during the past month)?	2.17	1.33	-0.84	1.75	1.38	-0.37
15. How relaxed or tense have you felt (during the past month)?	2.83	1.83	-1.00	3.25	2.63	-0.62
16. How much energy, pep, vitality have you felt (during the past month)?	2.33	2.83	+0.50	2.75	2.13	-0.62
17. How depressed or cheerful have you been (during the past month)?	2.50	2.00	-0.50	3.13	2.00	-1.13
Mean scores	1.57	1.34	-0.23	1.83	1.35	-0.48
Mean Total Scores	30.0	22.83	-7.17	41.0	23.0	-18.0

Note: For total mean score the lowest possible score is 0, and the highest possible score is 74

The pre- and posttest measured levels of emotional stress are shown in Table 3. Both genders reported a decrease in stress levels with a change at -.23 for males and -.48 for females. The means of the total scores on the inventory decreased 7.17 points for males and 18.0 points for females. Females' stress levels decreased on every question except one, ("Has your daily life been full of things that were interesting to you (in the last month)?"") which remained unchanged. None of the measures worsened during the project. The most significant decrease observed was

for the question “How depressed or cheerful have you been in the past month?” (-1.13). There were also significant decreases for the items, “Have you felt you were under any strain, stress, or pressure (during the past month)?” (-1.00), and “Have you been bothered by any illness, body disorder, pains, or fears about your health (during the past month)?” (-0.75)

For males, the majority of the questions (11/17) also demonstrated decreased levels of stress but four questions increased and two showed no change. The most significant decreases in emotional stress reported by males were for the questions “How relaxed or tense have you felt (during the past month)? (-1.0), "Have you felt tired, worn out, burned out, or exhausted (during the past month)? (-0.84) and "Have you been bothered by nervousness or your “nerves” (during the past month)? (-0.62). The four question in which males reported increased stress levels in post-test were for the questions, “Have you felt so sad, discouraged, hopeless, or had so many problems that you wondered if anything was worthwhile anymore in the past month?” (+0.83), “How much energy, pep, vitality have you felt (during the past month)” (+0.50), “Has your daily life been full of things that were interesting to you (during the past month)?” (+0.17), and “Have you felt sad (during the past month)?” (+0.16). The two questions that showed no change for males were, “Have you felt in control of your behavior, thoughts, emotions, or feelings (during the past month)?” and “Have you worried you might be losing your mind or losing control over the way you act, talk, think, feel, or of your memory (during the past month)?”

Discussion

The purpose of this project was to determine whether or not psycho-educational group counseling improves symptoms in adolescents with stress and anxiety and to determine whether or not group counseling relieves symptoms of stress and anxiety. This study also examined whether the effects of the group intervention differed among boys and girls. In order to gain a

better understanding of how stress affects adolescents, the author also researched gender differences in stress symptoms and adolescent life stressors.

From the results it can be inferred that both male and female stress levels decreased following participation in the group counseling, with females showing a greater response than males. Males showed an increase in stress levels for some questions. In regard to stress symptoms prior to the intervention there was no major difference in the total amount of stress symptoms reported by males and females. However, the results showed significant differences in the specific types of stress symptoms reported by genders. On the other hand, overall, the results did not show a major gender difference in the amount of “stressors” adolescents face or the types of stressors in which adolescents report as being most taxing (Both males and females reported *Stressors Related to Life* as their biggest concern).

Interpretation of Findings

When identifying stress symptoms there was no significant difference in the total amount of stress symptoms reported by males and females. However, the results did show significant differences in specific stress symptoms reported by the males and females. The most prevalent symptom of stress reported for females was chronic dissatisfaction (2.13) and for males it was excessive sleeping and sleeplessness (2.33). An explanation for this difference may be found in the literature in that Frydenberg (1997) described how boys use more problem-focused and action-oriented ways of coping and more denial and suppression of problems than do girls. Therefore, boys may resort to excessive sleeping as an action to relieve their stress and a way to suppress or shut out the stress. Frydenberg (1997) also reported that adolescent girls appear to be “more affected by stressful events than are boys” which may be a reason why they commonly report a general, long term feeling of chronic dissatisfaction. It was also found that females

reported significantly higher levels of rejecting positive comments or support from others, ongoing, recurrent worries and withdrawal or aversion. A possible explanation for this result is that females deal with stress more interpersonally and emotionally than do males, which may result in higher levels of these kinds of stress symptoms (Frydenberg, 1997). Males, on the other hand, reported higher levels of symptoms of major change in academic performance and an increase in the number of mishaps or accidents. This difference may point to reports in the literature that stress in males is often demonstrated in more physical and action oriented ways as opposed to more emotional responses (Frydenberg, 1997).

In examining the amount of stressors that affect adolescents, the overall results that did not show a major gender difference, are inconsistent with the literature of Frydenberg (1997) and Jose and Ratcliffe (2004). These authors noted that girls report significantly more stressful events in adolescence than do boys. Also, the results showed that there was no gender difference in the type of stressors reported as their biggest concern. Items in the category *Stressors Related to Life* were reported more often than concern over stressors at home, school, or with peers. One explanation for this result may be the opinion of Elkind who postulates that today's adolescents face societal stresses more than any other generation. Examples of these types of newly encountered stressors include terrorism, disease, and neighborhood violence (Elkind, 1984)

There were some gender differences in the rank order of stressors, however, with males ranking *Stressors with Peers* second (.416), followed by *Stressors At Home* (.353), *Stressors Related to School* (.344), and *Stressors With Self* (.283). Females ranked *Stressors At School* second (.362), followed by *Stressors with Self* (.329), *Stressors at Home* (.319), and *Stressors with Peers* (.232). This finding is not consistent with the article by Sullivan (2003), which reported that girls often cite interpersonal, social, relationship, and family stressors as most

problematic, while boys report more school related stressors. In this study, girls ranked academic stressors higher, and boys ranked peer relationships and home stressors higher.

There were some other surprising results, such as boys reporting significantly higher levels of stress from a parents divorce. However, it is important to note that out of the six male participants, three had divorced parents whereas out of the eight girls only two had divorced parents. Also, boys reported more stress from a family member becoming seriously ill, which might reflect the fact that during the study three of the boys had immediate family members hospitalized. Lastly, males reported higher levels of stress from doing less well in school than expected or desired. Only one of the boys and four of the girls, were on the honor roll, and three of the boys were on the failure list, while only one female was.

Another surprising result was that males reported greater stress from falling in love with someone new. This was unexpected in that most of the literature has focused on interpersonal relationship stress being higher for females. However it is important to note here than when this question was read aloud the boys erupted in laughter and when one said he was in love the others followed. Therefore, it might have been a result of “piggy backing” or being influenced by other group members responses. The girls on the other hand, did not verbally outwardly respond to any questions.

The results also showed females reporting higher levels of stress from being excluded from groups they would like to be a part of. This result is consistent with Santrock (1990) who described how the most important aspect of adolescents’ lives is often how peers perceive them and the pressure to fit in with the group and exclusion is one of the most prevalent forms of stress. Frydenberg (1997) also noted that this type of social stress is more prevalent among females. Females also reported losing an influential adult in their lives (other than a parent) as

causing more stress which may also point to Frydenberg's (1997) explanation that interpersonal and relationship stress is more prevalent for females.

From the results of the pre- and post test, *The University of Minnesota Adolescent Health Program: Measuring Emotional Stress* (Blum & Resnick, 1986) (Table 3)

it can be inferred that both genders' stress levels decreased following the group counseling.

Therefore, it appears that psycho educational group counseling does indeed reduce stress among adolescents.

There were also some significant gender differences in the ratings after counseling. Females reported a greater decrease in stress levels than males at the end of the group. The author wishes to note at this point that the dynamics of the group sessions were very different for the boys and girls. The girls group was made up of more quiet and shy individuals, who were focused on learning and sharing throughout the group. They took turns, listened to each other, shared similar experiences, and took in all of the information. The boys, on the other hand, were made up of more outgoing and verbal individuals. They had a difficult time taking turns, staying seated, and focusing on the material. Many of the "deeper" and more personal topics resulted in laughter from the boys and they appeared to have a hard time taking some aspects of the process seriously. This may point to both immaturity and gender role socialization. Boys are typically perceived as more immature than girls, especially at this age, and have a harder time focusing, especially in a group situation. Socially, it is more acceptable for boys to act out in this way (Santrock, 1990). Also, boys have been encouraged and socialized to express their feelings more than girls, which may be a reason why the girls seemed to get more out of the group than the boys (Washburn- Ormachea, & Hillman et al., 2004). Therefore, it would make sense that girls would get more out of the group than boys and this might explain why the females' stress levels

decreased after the group on every question on the post-test, except one, which remained the same.

It is also of interest to look at the question that showed the greatest decrease for the girls (“How depressed or cheerful have you been in the past month?”) (-1.13). This result is very important because this question points to issues of depression, which is often the result of stress for adolescents, especially females, and displays the impact the group had on the females (Hains, 1994). There was also a significant decrease in the question “Have you felt you were under any strain, stress, or pressure (during the past month)?” (-1.00) which points to the fact that the group may have helped reduce the degree to which girls perceive events in their life as stressful.

For males, the majority of the questions (64.7%) also decreased, but four questions increased and two showed no change. The most significant decrease reported by males was for the questions “How relaxed or tense have you felt (during the past month)? (-1.0), "Have you felt tired, worn out, burned out, or exhausted (during the past month)? (-.84), and "Have you been bothered by nervousness or your “nerves” (during the past month)? (-0.62). There were however, four questions in which males reported their stress levels increased in post-test. The most significant of these was the question, “Have you felt so sad, discouraged, hopeless, or had so many problems that you wondered if anything was worthwhile anymore in the past month?” (+0.83). This increase is concerning because it points to an increase in feelings of depression. There may be two possible explanations for this unexpected change. First, is that during the course of the group, one of the boys’ parents told him they were getting divorced and that his father was having a baby with another woman. Within the time of the group, the parents moved to different houses and the student had a new step-parent and sibling. These social upheavals caused significant distress for this student, who displayed many symptoms of depression. This

students' responses may have affected the mean score on this inventory for the group as a whole, especially on this particular question. Also, it is possible that participation in this group brought up stressful events in the boys' lives that they had suppressed or did not allow themselves to think about beforehand. Such realization, and a need to "face" their issues may have created new anxiety and sadness among the members. This suggests that the group might be a great forum for the boys to begin to accept these struggles and to deal with them. The questions that indicated worsening may have showed improvement later on, once the students learned how to cope with the newly recognized stress. Another question that showed an increase, "Have you felt sad (during the past month)?" (+. 16) may be explained by this same reasoning. It is important to note that another question that showed an increase ("How much energy, pep, vitality have you felt (during the past month)" (+ 0.50) and two that showed no change ("Have you felt in control of your behavior, thoughts, emotions, or feelings [during the past month]?" and "Have you worried you might be losing your mind or losing control over the way you act, talk, think, feel, or of your memory [during the past month]?") were difficult questions for the 6th graders to understand. For both the boys and girls these questions were met with confusion by the students due to their wording. Therefore, it is possible that these items increased or stayed the same because students did not properly understand the questions.

Limitations

Although from the results of this study one could infer that the psycho-educational group counseling reduces stress levels in both male and female groups, there were many limitations to the study. First, the study was done with only a small number of students (six boys and eight girls). In order to generalize the results, a larger sample size would have been better. It is also important to note that the researcher started with an equal number of boys and girls, but that two

of the boys dropped out during the study. The first boy left because he felt the group wasn't "fun enough" and because he didn't want to give up his free time to participate. Therefore, it might have been better to hold the group at a time where students were not missing free time. One might also note that none of the girls had a problem giving up their free time. Therefore, free time may be more valued by males than females..

The second boy dropped out after the Stressors Inventory was given since one of questions surrounded the topic of sex. During that question, the boys in the group all erupted with laughter, blushed, were uneasy, and had a hard time getting back on track. The girls, on the other hand, looked a bit embarrassed but made no issue of the question. This reflects the differential maturity issue discussed earlier. The next day one of the boys' parents called and said the boy didn't want to participate in the group anymore because he felt uncomfortable with that question.

This brings up another limitation. The book from which the group sessions were guided was intended for teens in grades 7-12. It had not been developed for 6th graders. However, the researcher spoke with the book's authors who thought that it would work well with younger students as well. However, when conducting the project it appeared that some of the topics, ideas, wording and vocabulary might be too difficult for 6th graders to comprehend. Therefore, it would be better for future study to tailor the sessions to work with younger students.

In order to more accurately interpret the effects of the group counseling on adolescent stress it is necessary for the intervention to be replicated with a control group that does not receive the psycho-educational group counseling. Lastly, the generalizability of the results of this study to the general adolescent population may be limited by the fact that all of the participants were white. Therefore, it would be important to replicate this study with a more diverse sample.

Implications for Counseling Practice

This study provides a greater understanding of the effects of group counseling on adolescent stress and the importance of examining gender issues in regard to this topic. The results of this study are important for counselors, especially those working in a school. First, from the results, one can infer that psycho-educational group counseling reduces symptoms of stress in adolescence. Therefore, school counselors can recognize the usefulness of this time effective method of counseling. Teaching adolescents about stress and coping strategies can help reduce stress symptoms. Because one of the main goals of schools is to enhance the well being of young people, it is apparent that the use of stress management counseling groups is an effective way to reach this goal.

The result of this study also can inform counselors about the types of life stressors that adolescents face in today's society and the ones they view as most taxing. With this knowledge, counselors can better identify students experiencing excessive stress and tailor counseling interventions to address the most common problems.

Lastly, this study emphasizes the importance for counselors to consider gender issues when developing and implementing adolescent stress programs.

Recommendations for Further Study

In order to better establish the effectiveness of the group counseling approach this study needs to be replicated with a control group that does not receive the group counseling intervention. This would allow one to sort out whether it is the counseling process itself, rather than other factors like socializing or support from time spent with a group of peers, that underlies to observed improvement. Because all participants were Caucasian with middle to working class SES, further research could focus on the effects of group counseling on adolescent stress among students from more diverse ethnic and social backgrounds. Also, since all of the participants in

this study were 6th grade students, in order to be able to generalize the results to all adolescents, it would be important to conduct this study involving other grade levels. Finally, it would also be of interest to study the effects of group counseling program in adolescents who not identified as being distressed. This would be an important because of research information indicating that that even minor daily hassles and short-term stressors can lead to adolescent maladjustment (Washburn-Ormachea et al, 2004.)

Conclusion

The purpose of this project was to determine whether or not psycho-educational group counseling conducted in the school setting improves symptoms in adolescent students with stress and anxiety. This study also examined whether the effects of the group intervention differed among boys and girls and investigated gender differences in the amounts and types of stress symptoms reported. From the results it appears that group counseling does indeed reduce stress among adolescents of both genders, although some gender differences in the character of response were observed. The study also found that there was no major difference in the total amount of stress symptoms reported by boys and girls, although there were gender differences in specific types of stress symptoms reported. Psycho-educational group counseling in the school setting appears to be a useful approach to reducing stress among adolescent students.

References

- Ames, S.C., Offord, K.P., Nirelli, L.M., Patten, C.A., Friedrich, W.N., Decker, P.A., & Hurt, R.D. (2005). Initial development of a new measure of minor stress for adolescents: the adolescent minor stress inventory. *Journal of Youth and Adolescence, 34*(3), 207-219.
- Armacost, R.L. (1989). Perceptions of stressors by high school students. *Journal of Adolescent Research, 4*, 443-461.
- Arnett, J.J. (1999). Adolescent storm and stress, Reconsidered. *American Psychologist, 54* (5), 317-326.
- Arnold, L.E. (1990). *Childhood stress*. New York: John Wiley & Sons, Inc.
- Aronson, S.M. (2004). Where the wild things are. *The Mount Sinai Journal of Medicine, 71* (3), 174-180.
- Barrett, P.M. (1998). Evaluation of cognitive-behavioral group treatments for childhood anxiety disorders. *Journal of Clinical Child Psychology, 27* (4), 459-468.
- Blum, R., & Resnick, M.D. (1986). *The Minnesota Adolescent Health Survey*. National Adolescent Health Resource Center, University of Minnesota Division of General Pediatrics and Adolescent Health. In Schmitz, C.C., & Hipp, E. (1995). *A leader's guide to fighting invisible tigers: A stress management guide for teens*. Minneapolis, MN: Free Spirit Publishing.
- Brenner, A. (1984). *Helping children cope with stress*. Lexington, MA: Lexington Books.
- Brigman, G., & Earley, B. (1991). *Group counseling for school counselors: A practical guide*. Portland: J. Weston Walch.
- Borders, L.D., & Drury, S.M. (1992). Comprehensive school counseling programs: A review for policymakers and practitioners. *Journal of Counseling and Development, 70*, 487-498.

- Coppock, C., & Dwivedi, K.N. (1993). Group work in schools. In K.N. Dwivedi (Ed.), *Group work with children and adolescents* (pp. 265-280). London: Jessica Kingsley Publishers.
- Davis, A.S., Kruczek, T., & McIntosh, D. (2006). Understanding and treating psychopathology in schools: Introduction to the special issue. *Psychology in the schools, 43* (4), 413-417.
- De Anda, D. (1998). The evaluation of a stress management program for middle school adolescents. *Child and Adolescent Social Work Journal, 15* (1), 73-85.
- De Anda, D., Bradley, M., Collada, C., Dunn, L., Kubota, J., Hollister, V., Miltenberger, J., Pulley, J., Susskind, A., Thompson, L.A., & Wadsworth, T. (1997). A study of stress, stressors, and coping strategies among middle school adolescents. *Social Work in Education, 19* (2), 87-98.
- Donaldson, D., Prinstein, M.J., Danovsky, M., & Spirito, A. (2000). Patterns of children's coping with life stress: Implications for clinicians. *American Journal of Orthopsychiatry, 70* (3), 351-359.
- Egbochuku, E.O., & Obiunu, J.J. (2006) The effect of reciprocal peer counseling in the enhancement of self-concept among adolescents. *Education, 126* (3), 504-511.
- Elias, M., Gara, M., Schuyler, T., Brandon-Muller, L., & Sayette, M. (1986). The promotion of social competence: Longitudinal study of preventative school based program. *American Journal of Orthopsychiatry, 61*, 409-417.
- Elkind, D. (1984). *All grown up and no place to go*. Reading, MA: Addison-Wesley Publishing Company.
- Elkind, D. (1998). *All grown up and no place to go (Revised Ed.)* Cambridge, MA: Perseus Books.

- Elkind, D. (2001) *The hurried child: Growing up too fast too soon* (3rd ed.) Cambridge, MA: Perseus Publishing.
- Erikson, E.H. (1968). *Identity: Youth and crisis*. New York: Norton.
- Fiske, E.B. (1988). America's test mania. *New York times education life*, 10 April 1988.
- Frydenberg, E. (1997). *Adolescent coping: Theoretical research perspectives*. London: Routledge.
- Frydenberg, E., & Lewis, R. (1997). *Coping with stressors and concerns during adolescence: a longitudinal study*. Paper presented at the Annual Meeting of the American Educational Research Association, (Chicago, IL, March 24-28 1997). p. 1-22.
- Frydenberg, E., Lewis, R., Bugalski, K., Cotta, A., McCarthy, C., Luscombe-Smith, N., & Poole, C. (2004). Prevention is better than cure: Coping skills training for adolescents at school. *Educational Psychology in Practice*, 20 (2), 117-134.
- Gladding, S. T. (1999). *Group work: A counseling specialty*. (3rd ed.). Upper Saddle River, NJ: Prentice-Hall Inc.
- Hains, A.A. (1992). Comparison of cognitive-behavioral stress management techniques with adolescent boys. *Journal of Counseling & Development*, 70, 600-605.
- Hains, A.A. (1994). The effectiveness of a school based, cognitive-behavioral stress management program with adolescents reporting high and low levels of emotional arousal. *School Counselor*, 42 (2), 114-126.
- Hall, G.S. (1904). *Adolescence: Its psychology and its relations to physiology, anthropology, sociology, sex, crime, religion, and education* (Vols. I & II). New York: Appleton.
- Head, C. (2006). Ready, steady, check it out. *Therapy Today*, 17 (8), 43-46.

- Jacobs, E.E., Masson, R.L., & Harvill, R.L. (1998). *Group counseling strategies and skills*. Pacific Grove, CA: Brooks/Cole Publishing.
- Johnson, S. (1979). Children's fear in the classroom setting. *School Psychology Digest*, 8, 382-396.
- Jose, P.E., & Ratcliffe, V. (2004). Stressor frequency and perceived intensity as predictors of internalizing symptom: Gender and age differences in adolescence. *New Zealand Journal of Psychology*, 33 (3), 145-154.
- Keogh, E., Bond, F.W., & Flaxman, P.E. (2006). Improving academic performance and mental health through a stress management intervention: outcomes and mediators of change. *Behaviour Research and Therapy*, 44, 339-357.
- Kessler, K., Edelman, R., Janeway, D., Orlowski, B., Pictrobono, N., & Kymissis, P. (2000). The effects of stress management group therapy on patients in an adolescent psychiatric unit. *Journal of Child and Adolescent Group Therapy*, 10 (3), 151- 158.
- Kingery, J.M., Robleck, T.L., Suveg, C., Grover, R.L., Sherrill, J.T., & Bergman, R.L. (2006). They're not just "little adults": Developmental considerations for implementing cognitive-behavioral therapy with anxious youth. *Journal of Cognitive Psychotherapy*, 20 (3), 263-273.
- Kiselica, M.S, Baker, S.B., Thomas, R.N., & Reedy, S. (1994). Effects of stress inoculation training on anxiety, stress, and academic performance among adolescents. *Journal of Counseling Psychology*, 41(3), 335-342.
- Laselle, K. M., & Russell, T. T. (1993). To what extent are school counselors using meditation and relaxation techniques? *School Counselor*, 40 (3), n.p.
- Lazarus, R. (1984). On the primacy of cognition. *American Psychologist*, 39, 124-129.
- Lazarus, R.S. & Folkman, S. (1984) *Stress, appraisal, and coping*. New York: Springer.

- Maccoby, E.E., & Jacklin, C.N. (1974). *The psychology of sex differences*. Stanford, CA: Stanford University Press.
- Plunkett, S.W., Radmacher, K.A., & Moll-Phanara, D. (2000). Adolescent life events, stress, and coping: A comparison of communities and genders. *Professional School Counseling, 3* (5), 356-366.
- Rudolph, K.D., & Hammen, C. (1999). Age and gender as determinants of stress exposure, generation, and reactions in youngsters: a transactional perspective. *Child Development, 70* (3), 660-677.
- Rutter, M. (1979). Protective factors in children's response to stress and disadvantage. In M.W. Kent & J.E. Rolf (Eds.), *Primary prevention in psychopathology (Vol. 3)*. Hanover, N.H.: University Press of New England.
- Sandler, I.N., Wolchik, S.A., MacKinnon, D., Ayers, T.S., & Rosa, M.W. (1997). Developing linkages between theory and intervention in stress and coping process. In *Handbook of children's coping: linking theory and intervention*, Wolchik S.A. & Sandler, I.N. (Eds.) New York: Plenum Press.
- Santrock, J.W. (1990). *Adolescence. (4th ed.)* Dubuque, IA: Wm. C. Brown Publishers.
- Schmitz, C.C., & Hipp, E. (1995). *A leader's guide to fighting invisible tigers: A stress management guide for teens*. Minneapolis, MN: Free Spirit Publishing.
- Sells, J. & Hays, K.A. (1997). A comparison of time-limited and brief group therapy at termination. *Journal of College Student Development, 38* (2), 136-142.
- Smead-Morganett, R. (1990). *Skills for living: Group-counseling activities for young Adolescents. (Vol. II)*. Champaign: IL: Research Press.
- Selye, H. (1974). *Stress without distress*: Philadelphia: Saunders.

- Selye, H. (1976). *The stress of life (rev. ed.)*. New York: McGraw Hill.
- Selye, H. (1978). *The stress of life*. New York: McGraw Hill.
- Selye, H. (1983). The stress conflict: Past, present, and future. In C.L. Cooper (Ed.), *Stress research*, New York: Wiley.
- Sullivan, J. (2003). The applicability of the storm and stress theory of adolescent development across gender and ethnicity. *UMI Dissertation Abstracts*. (UMI no. 3102509)
- Van Hook, M.J. (1990). The Iowa farm crisis: Perceptions, interpretations, and family patterns. *New Directions for Child Development*, 46, 71-86.
- Washburn-Ormachea, J.M., Hillman, S.B., & Sawilowsky, S.S. (2004). Gender and gender-role orientation differences on adolescents' coping with peer stressors. *Journal of Youth and Adolescence*, 33 (1), 31-40.
- Wilburn, V.R., & Smith, D. E. (2005). Stress, self-esteem, and suicidal ideation in late adolescents. *Adolescence*, 40 (157), 33-45.
- Zinck, K., & Littrell, J.M. (2000). Action research shows group counseling effective with at-risk adolescent girls. *Professional School Counseling*, 40 (1), 50-59.

Appendix A



SUPPLEMENTARY HANDOUT

UNIVERSITY OF MINNESOTA ADOLESCENT HEALTH PROGRAM: MEASURING EMOTIONAL STRESS

Using Items from the Minnesota Adolescent Health Survey

For questions 1–14, check the box beside the statement that best represents your response.

1. How have you been feeling in general (during the past month)?

- 0 In an excellent mood
 1 In a very good mood
 2 My moods have been up and down a lot
 3 In a bad mood
 4 In a very bad mood

2. Have you been bothered by nervousness or your “nerves” (during the past month)?

- 4 Extremely so, to the point where I couldn't work/take care of things
 3 Quite a bit
 2 Some, enough to bother me
 1 A little
 0 Not at all

3. Have you felt in control of your behavior, thoughts, emotions, or feelings (during the past month)?

- 0 Yes, for sure
 1 Yes, sort of
 2 Not very much
 3 No, and it bothers me a bit
 4 No, and it bothers me a lot

4. Have you felt so sad, discouraged, hopeless, or had so many problems that you wondered if anything was worthwhile (during the past month)?

- 4 Extremely so, to the point that I have just about given up
 3 Quite a bit
 2 Some, enough to bother me
 1 A little bit
 0 Not at all



From Blum, Robert, and Michael D. Resnick. *The Minnesota Adolescent Health Survey*. (Minnesota: 107 Division, Adolescent Health Research Center, University of Minnesota Division of General Pediatrics and Adolescent Health, 1986.) Used with permission for a LEADER'S GUIDE TO READING OPPORTUNITY TIGERS, Connie L. Schultz with Earl Hipp, Free Spirit Publishing Inc., 1995. This page may be photocopied.

SUPPLEMENTARY HANDOUT

Measuring Emotional Stress continued

5. Have you felt you were under any strain, stress, or pressure (during the past month)?

- 4 Yes, almost more than I could take
 3 Yes, quite a bit of pressure
 2 Yes, some/more than usual
 1 Yes, a little/about usual
 0 Not at all

6. How happy or satisfied or pleased have you been with your personal life (during the past month)?

- 0 Extremely happy, could not have been more satisfied or pleased
 1 Very happy
 2 Satisfied, pleased
 3 Somewhat satisfied
 4 Very dissatisfied

7. Have you worried that you might be losing your mind or losing control over the way you act, talk, think, feel, or of your memory (during the past month)?

- 0 Not at all
 1 A little bit
 2 Some, enough to bother me
 3 Quite a bit
 4 Very much so

8. Have you been waking up fresh and rested (during the past month)?

- 0 Every day
 1 Most every day
 2 Less than half the time
 3 Rarely
 4 None of the time

9. Have you been bothered by any illness, bodily disorder, pains, or fear about your health (during the past month)?

- 4 All of the time
 3 Most of the time
 2 Some of the time
 1 A little of the time
 0 None of the time



From Blum, Behrens, and Michael D. Reintick. *The Minnesota Adolescent Health Survey*. (Minneapolis, MN: National Adolescent Health Research Center, University of Minnesota, 1988.) Used with permission in A LEADER'S GUIDE TO FIGHTING SUBSTANCE USE AND ADDICTION, 2nd Edition, by Richard L. Schickel with Earl Hipp. Free Spirit Publishing Inc., 1995. This page may be photocopied.



SUPPLEMENTARY HANDOUT

Measuring Emotional Stress continued

10. Has your daily life been full of things that were interesting to you (during the past month)?

- 0 All of the time
 1 Most of the time
 2 Some of the time
 3 A little of the time
 4 None of the time

11. Have you felt sad (during the past month)?

- 4 All of the time
 3 Most of the time
 2 Some of the time
 1 A little of the time
 0 None of the time

12. Have you been feeling emotionally secure and sure of yourself (during the past month)?

- 0 All of the time
 1 Most of the time
 2 Some of the time
 3 A little of the time
 4 None of the time

13. Have you felt anxious, worried, or upset (during the past month)?

- 4 All of the time
 3 Most of the time
 2 Some of the time
 1 A little of the time
 0 None of the time

14. Have you felt tired, worn out, burned out, or exhausted (during the past month)?

- 4 All of the time
 3 Most of the time
 2 Some of the time
 1 A little of the time
 0 None of the time

SUPPLEMENTARY ILANDUOL

Measuring Emotional Stress continued

For questions 15–17, circle the number on the continuum which best represents your feeling.

15. How relaxed or tense have you felt (during the past month)?



16. How much energy, pep, vitality have you felt (during the past month)?



17. How depressed or cheerful have you been (during this past month)?



From Blum, Robert, and Michael D. Resnick. *The Minnesota Adolescent Health Survey*. (Minneapolis, MN: National Adolescent Health Research Council, University of Minnesota Division of General Pediatrics and Adolescent Health, 1986.) Used with permission in *A LEADER'S GUIDE TO FIGHTING DRUG-RELATED PROBLEMS*, edited by Schmitz with Earl Hipp, Free Spirit Publishing Inc., 1995. This page may be photocopied.

Appendix B

Copyright © 2013 by The McGraw-Hill Companies, Inc. All rights reserved. This page may be photocopied for individual classrooms or group work only.



SESSION 3 HANDOUT

TEEN INVENTORY ON COMMON STRESSORS AND STRESS SYMPTOMS

Use this self-inventory to gauge the amount of stress in your life. It is not a scientific instrument; there is no official score. Rather, simply count up the number of "symptoms" you have experienced in the last month, and the number of stressors that apply to you, and reflect on whether this number seems manageable or not. You may want to keep this inventory and review it in six weeks to see whether your stressors are more or less numerous, or your stress symptoms more or less severe. The results may also suggest a particular stressor or stress symptoms to focus on and improve.

Today's Date: _____

STRESS SYMPTOMS

Circle the degree to which you have experienced the following symptoms in the previous month. Circle 0 (zero) if you haven't experienced the symptom to any degree. Circle 1 if you have experienced the symptom to a minor degree, circle 2 for a moderate degree, and circle 3 if you have experienced the symptom to a major degree.

SYMPTOM	NONE	MAJOR
Chronic dissatisfaction.....	0	1 2 3
Loss of interest or pleasure.....	0	1 2 3
Excessive sleeping or sleeplessness.....	0	1 2 3
Always irritable, angry over small things.....	0	1 2 3
Reject positive comments or support from others.....	0	1 2 3
Difficulty concentrating.....	0	1 2 3
Major change in academic performance.....	0	1 2 3
Significant change in eating habits.....	0	1 2 3
Ongoing, recurrent worries.....	0	1 2 3
Nightmares or disturbing dreams.....	0	1 2 3
Increase in the number of mishaps, accidents.....	0	1 2 3
Obsessive-compulsive about routines, time, dress, grades, etc.....	0	1 2 3
Jittery, hyper.....	0	1 2 3
Withdrawal, aversion.....	0	1 2 3
Recurrent physical ailments (headaches, colds, etc.).....	0	1 2 3



Teen Inventory on Common Stressors continued

STRESSORS

Circle Y ("YES") or N ("NO") as appropriate for all the items below. Circle Y if you've experienced stress (see symptoms above) related to the item in the last month.

Stressors at Home

- Arguments with parent(s) or other adult at home Y N
- Conflicts with brother(s) or sister(s) Y N
- Significant change in family, such as:
 - Separation or divorce of parents Y N
 - Blending of two families (moving in with step-siblings) Y N
 - Remarriage of a parent Y N
 - Parent changes jobs Y N
 - At-home parent gets a full-time job outside of the home Y N
- Move to a new house or apartment Y N
- Home remodeling—invasion of your "space" Y N
- Alcohol or drug abuse by family member Y N
- Physical or sexual abuse by a family member of a sibling or other Y N
- Physical or sexual abuse by a family member of yourself Y N
- Parent or family member becomes seriously ill Y N
- Parent or family member dies Y N
- A pet dies Y N

Stressors at School

- Did less well in school (academically) than expected or desired Y N
- Underwent educational or psychological testing Y N
- Placed in special class (gifted, remedial, other) Y N
- Had confrontation with teacher, coach, or administrative staff Y N
- Was tardy for three or more classes Y N
- Was expelled from a class Y N





SESSION 3 HANDOUT

Teen Inventory on Common Stressors continued

Received a detention.....	Y	N
Received probation for academic or behavioral problem.....	Y	N
Felt frustrated with learning.....	Y	N
Was singled out for an award or special recognition.....	Y	N
Was elected to an honored position (captain, editor).....	Y	N
Was accepted to or promoted on an athletic team.....	Y	N
Was eliminated from or demoted on an athletic team.....	Y	N
Incidents of school vandalism occurred at your school.....	Y	N
Incidents of youth violence occurred at school or neighborhood.....	Y	N
Other disruptions in school (e.g., teacher's strike, resignation of principal, change in class size, school closings).....	Y	N

Stressors with Peers

Fell in love with someone new.....	Y	N
Lost a significant friend due to relocation or separation.....	Y	N
Felt your trust or confidence was betrayed by a significant friend.....	Y	N
Became disillusioned with a previous girlfriend or boyfriend.....	Y	N
Was "dropped" by a boyfriend or girlfriend you really care for.....	Y	N
No longer feel part of the same old crowd.....	Y	N
Don't have a group that you feel comfortable hanging out with.....	Y	N
Excluded from groups that you'd like to be part of.....	Y	N
Feel less adequate, compared to your friends.....	Y	N
Feel your friends make too many demands on you.....	Y	N
Engaged in unprotected sex with partner.....	Y	N
Became pregnant, or impregnated a partner.....	Y	N

Stressors with Self

Concerned about weight, height, physical development.....	Y	N
Concerned about clothes, other material things.....	Y	N
Change in employment or income status.....	Y	N



Copyright © 1999 by Corinne C. Anderson with Earl R. Hoyt, A.C.C. © 1999 by Corinne C. Anderson, published by Corinne C. Anderson Publishing Co. This work may be reproduced for individual classroom or group use.



SESSION 3 HANDOUT

Teen Inventory on Common Stressors continued

Received a detention.....	Y	N
Received probation for academic or behavioral problem.....	Y	N
Felt frustrated with learning.....	Y	N
Was singled out for an award or special recognition.....	Y	N
Was elected to an honored position (captain, editor).....	Y	N
Was accepted to or promoted on an athletic team.....	Y	N
Was eliminated from or demoted on an athletic team.....	Y	N
Incidents of school vandalism occurred at your school.....	Y	N
Incidents of youth violence occurred at school or neighborhood.....	Y	N
Other disruptions in school (e.g., teacher's strike, resignation of principal, change in class size, school closings).....	Y	N

Stressors with Peers

Fell in love with someone new.....	Y	N
Lost a significant friend due to relocation or separation.....	Y	N
Felt your trust or confidence was betrayed by a significant friend.....	Y	N
Became disillusioned with a previous girlfriend or boyfriend.....	Y	N
Was "dropped" by a boyfriend or girlfriend you really care for.....	Y	N
No longer feel part of the same old crowd.....	Y	N
Don't have a group that you feel comfortable hanging out with.....	Y	N
Excluded from groups that you'd like to be part of.....	Y	N
Feel less adequate, compared to your friends.....	Y	N
Feel your friends make too many demands on you.....	Y	N
Engaged in unprotected sex with partner.....	Y	N
Became pregnant, or impregnated a partner.....	Y	N

Stressors with Self

Concerned about weight, height, physical development.....	Y	N
Concerned about clothes, other material things.....	Y	N
Change in employment or income status.....	Y	N

Copyright © 1998 by Corinne G. Schaefer with Ted Tapp. All rights reserved. Contact: Psychology Resources, Inc., 4000 North 10th Street, Suite 100, Phoenix, AZ 85018. This page may be photocopied for individual classroom or group use only.



Appendix C

SESSION 1: RECOGNIZING THE BEAST

Breathe slowly and deeply. Concentrate on your breathing. Nothing is more important now than your breath and the quiet, calm feeling in your mind and body. You're very relaxed, but alert.

Remember this place, remember these feelings. Create a memory to use later when you need it. Remember: this feels good. Tell yourself, this feels good. Relaxation and quiet feel good.

It's time to come back now. Remember where you've been, then decide to come forward. Nourished and ready to return, begin by assuming control of your breathing. Take a good deep breath, spread energy

throughout your system. Feeling positive, charged, visualize this new energy as it moves out from your center and spreads over your body. See it going down your arms into your hands—now let your fingers move.

Continue these deep energizing breaths. Take deep inhalations and strong exhalations, a bit faster than before. You need new energy. It's moving down the front of your body and into your legs. Now let your feet move. Feel this energy move into your face and head. Your body is ready to move. Arrive fully in the moment. Let your eyes open. Let a smile grow on your face as you sit up. Stretch...you feel good! Let's stand up now. You're done.



PROGRESSIVE RELAXATION SCRIPT #2

Begin by lying on your back with your eyes closed, hands at your sides, facing upwards. Let your feet fall apart naturally as you begin to breathe slowly and deeply. Take a long, deep inhalation, then release it with a sigh. You're starting to let go of all of your tension. You're going to allow yourself to relax.

As your body relaxes, you begin to feel gravity pressing you into the floor. Under your heels, calves, and thighs, you'll feel the weight of your legs. Under your buttocks, back, shoulders, and arms, the feeling of weight is pressing down. The floor will support you. Your head becomes heavier and heavier as the muscles in the back of your neck and face relax, soften, and release. Your whole body is heavy and relaxed, with the floor doing all the work of supporting you. Gravity does the work as the body lets go and allows itself to rest completely. Your mind is very alert. The body is resting quietly. Be still now, focus on your breathing; breathe through your nose in long, steady breaths.

Become aware of your hands now—first your right hand, then your left hand. Slowly let each hand tighten into a fist. Be careful to tense only the muscles in your hands and arms. Make those fists tight, but keep your face relaxed; your stomach and shoulders are loose. Tighter, tighter, as tight as possible, hold all the tension

in those two fists; feel all the work, all the energy that's required to hold in that tension.

Now slowly relax your hands. Feel the tension gradually leaving your fingers. Feel your arms and hands loosening and softening. Continue to say (silently) to yourself, "Let go, relax; let go, relax, even after you have uncurled your hands and can no longer feel any tightness. Open your hands wide in a stretch, then allow them to return to a "normal" position. As your arms and hands again become heavy and relaxed, experience the difference between the work of holding, and the naturalness of letting go.

Lying still, body relaxed and calm, slowly tighten the muscles in your face. Tighten the muscles around your eyes, your forehead, your jaw, your mouth. Feel your expression scrunch up hard, getting tight, getting as tight as possible. It's uncomfortable, but just for a moment feel this tension and the cost in energy. Feel your lips and teeth. Your eyes, scalp, throat, and especially your forehead are aching, they're working so hard. Make sure the tension is contained just in the face, that the shoulder and stomach muscles are relaxed.

Ever so slowly and gradually, begin to release. Learn to experience tension leaving the muscles. Release this tension slowly, saying to yourself, "Let go, relax."

Forehead and eyes let go; mouth, jaw and scalp relax. Let go and relax, even after you can no longer feel any tightness in your face. The muscles in your face are soft and relaxed again. Your head is heavy and relaxed. Take a deep breath and exhale slowly, releasing any leftover tension. Another deep inhalation and long, slow exhalation, letting relaxation spread through your whole body.

Now pull your shoulders up toward your head. Take a deep inhalation and hold it, then tighten your stomach and back. Hold this tension. Your breathing will be shallow, but hold it. Make your shoulders, chest, stomach, and back as tight as possible. Again, be sure to contain the tension in these areas only. Your face, arms and hands, legs should remain calm and relaxed. Experience the tension in the trunk of your body. Make it tighter, tighter. Notice the difficulty with your breathing. This is how many people unknowingly carry tension in their bodies. Notice how much work is required to maintain this tightness, this unpleasant tension.

Again now, slowly release this tension, as slowly as you can. Feel the tension leaving your shoulders, your chest, your stomach, your back. Say to yourself, "Let go, relax; let go, relax." Feel the process of letting go, the return of natural breathing, the loosening and softening of your muscles. Keep letting go, even after your body feels relaxed. Take a long deep breath, then release it. No tensions now, just quiet. Focus on your breath.

On your next inhalation, let your buttocks begin to tighten along with your legs. Tighten your thighs and calves. Point your toes hard so your legs are rigid. Make the muscles in your seat and legs hard, but keep your face, shoulders, and other areas relaxed. Make your breathing soft and natural as you hold this tension in

your lower body. Feel the tension in your feet, calves, thighs, and buttocks get tighter and tighter.

Ever so slowly, allow the tension to release a little at a time. Experience varying degrees of tension as you continue to release, saying to yourself, "Let go, relax." Feel your buttocks and thighs and calves and feet releasing, your toes coming up into a more normal position. Take a deep breath, hold it, then release, letting go of any remaining tension in your body. Again experience the heaviness in your body. Completely let go and feel waves of relaxation with each breath. Like a gentle, warm ocean wave that washes over you, starting from the soles of your feet up to your head and back, these waves of calmness and peace spread over you.

Remember how much work and discomfort there was in holding. Remember how restful and natural letting go was. Experience this calm in your body now. Remember what this place is like, to make your return easier. Quietly, focus on your breath now, the sound and sensation of your breath passing. Thoughts may come but do not attach to them; decide to stay focused on your breath. Your body is quiet; your mind is alert.

Prepare to return now by taking control of your breath. Make your breath stronger and quicker with each inhalation. Imagine with each breath that you're bringing fresh, positive energy into your body. With each exhalation, you're releasing old, tired energy. Feel the energy you have created flowing through your body, going down into your fingertips, going down to your toes. Another deep inhalation... move this new energy into your face, allowing your eyes to open and a smile to grow. One more deep inhalation, sit up, smile. The exercise has ended.



Appendix D

SESSION 2 HANDOUT

THREE TYPES OF STRESS SITUATIONS

Psychologist David Elkind suggests that there are three basic kinds of stress situations: *Foreseeable/Avoidable*, *Unforeseeable/Unavoidable*, and *Foreseeable/Unavoidable*. How would you classify the following situations? In which "box" would you put each one?

Hitchhiking	Auditions	Physical changes of puberty
A final exam	First date	Breaking curfew
Death of a pet	Parent's divorce	Unprotected sex
Illness	Parent's expectations	Getting a "bad" teacher

Foreseeable/Avoidable	
Unforeseeable/Unavoidable	
Foreseeable/Unavoidable	<p style="text-align: center;">Appendix E</p> <p style="text-align: center;">Appendix E</p>

What are some other examples of these three kinds of stress? Do you think there is such a thing as *Unforeseeable but Avoidable* stress (the fourth possible box)? Why or why not?

The labels for the three types of stress situations are from Elkind, D., *All Grown Up and No Place to Go* (Reading, MA: Addison-Wesley Publishing Co., 1984), pp. 165-168.

Copyright © 1985 by Corinne C. Schmitts with Bari Hips. A LEADER'S GUIDE TO FIGHTING INVISIBLES VIGILS. Free Spirit Publishing Inc. This page may be photocopied for individual classroom or group work only.

Appendix E

All done? Okay, that took approximately 1.5 seconds. Somebody tell me how the candy tasted. What color was it, by the way? Was it good? Was it very satisfying?

EATING THE SECOND M & M

Okay, in a moment we're going to eat another M & M, but before you do, I want you to think about eating this one slowly. I want you to think about what the candy really tastes like by letting it sit in your mouth for a while and chewing it as slowly as possible. Become as focused as you can on this one piece of candy, and this one piece of candy alone. Try to be as aware as you can of everything about this one M & M. How does it feel going down your throat? How does it feel in your stomach? I will time you again with the stopwatch. Let me know when you are completely done with eating this candy by raising your hand.

(When the group is ready...)

Okay, that took (X number of seconds). Somebody tell me now what they noticed about the candy this time around that they didn't notice the first time. Did the candy taste better, or different? What was the experience like? Was the eating experience more pleasurable? Is there more of an aftertaste?

EATING THE THIRD M & M

As you can probably guess, we're going to do this again. This time I'm going to tell you to slow down the process of eating even more. This time, I want you to look at the M & M before you eat it, and notice everything you can about its appearance. How big is it? What is its shape, color, texture? Think about nothing but this one M & M. Concentrate on what it tastes like and how it feels in your mouth. Once it is in your mouth, see if you can really feel its different parts as well as taste it. This time, it took most of you (X number of seconds) to eat this M & M. Let's see if you can spend twice that number of seconds this time around.

(Proceed with the exercise. When the group is done, comment on the increase—or decrease—in time.)



Did you discover anything new about the candy? What was the experience like? Was the candy as good, or better? Or did your mind start to wander? What did you think about, if you stopped thinking about the candy? Did you start to have parallel thoughts—that is, thoughts about the candy, and thoughts about yourself eating the candy?

EATING THE FOURTH M & M

We're going to do this activity again for the last time, and this time I want you to close your eyes. I want you to focus on nothing but yourself, as you hold on to the M & M and put it in your mouth. See if you can "see" the whole event from beginning to end, and experience everything about the eating of this M & M that there is to experience. Make it a complete, seamless activity, as though every part of it had tremendous meaning. Proceed at your own pace.

(When the group is done...)

Okay, that was interesting; as a group, you generally spent a (longer or shorter) amount of time eating the candy compared to the previous time. Why do you suppose that is? What happened? Did you notice anything new about the candy? Could you see yourself eating the M & M? Now, quickly scan your body state; how are you feeling? Do you feel relaxed? Do you feel kind of curious, but calm?

This activity was a simple way to introduce the notion to you that we often go through life by not paying much attention to it. We're doing so many different things simultaneously, we have to block out our awareness. Life can actually seem to have more richness—food can taste more delicious, breathing can feel more invigorating—if we slow down and concentrate on what we are doing. When we do this, we may find our bodies relaxing as our minds become more focused.

EATING THE FIFTH M & M

You may eat the fifth M & M any way you want to.

Appendix F

SESSION 5: THE EYE OF THE HURRICANE

**MEDITATION SCRIPT**

Everyone please find a firm chair and turn it toward a blank portion of the wall. Sit as far apart from the next person as possible. Sit facing the wall with your back relaxed but straight. Your feet should be flat on the floor. Fold your hands in your lap or lay them along the tops of your thighs. Keeping your head upright, tuck your chin back and in. Keep your eyes open and look down at about a 45-degree angle. You should be staring at the wall directly in front of you. The purpose here is to align your body so it feels balanced and strong. This position may seem tiring at first, but over time it is easier because spinal alignment allows the back muscles to be more relaxed. It also allows the diaphragm to expand more fully when breathing, which helps calm and slow the body.

This is the basic training posture. When you assume it, you join a company of meditators all over the world. To do this meditation exercise, maintain this posture in silence and count your breaths. Please breathe through your nose as we learned to do in the previous relaxation exercises. You'll inhale and silently count "one," then exhale and silently count "two," and so on up to "ten."

When you reach "ten," start over again on "one" with the next inhalation. Think of yourself as "riding the waves" of your breath, just as a rubber raft goes up and down on a gentle ocean swell. The only thing you have to do is "go with the flow."

Here are some guidelines for first-time meditators:

1. Don't try to manipulate your breathing, just let it come naturally. Your body knows how to breathe. Let your body do what it knows how to do.
2. Keep your body still. A restless body creates a restless mind.
3. Keep counting and keep focused until I tell you it's time to stop.
4. If your mind wanders, gently bring it back to the number "one" and start counting again, along with the breath.
5. Don't worry about doing it "wrong." That's just a thought—a distraction. Go back to "one" and start counting again.



Appendix G

STATEMENT OF INFORMED CONSENT FOR MINORS

Dear Student,

As part of my internship in School Counseling at Gates Chili Middle School, I will be doing a project for my school, SUNY Brockport to find out more about how group counseling helps students lessen their levels of stress and nervousness. The purpose of the group is to determine things in your life that cause you stress, give you a place to talk about these issues with other students, and to help you learn how to manage your stress and anxiety. If you choose to participate in the project you will be asked to fill out a questionnaire to find out about the stress and nervousness you feel in your life. You will then participate in an eight-week stress/anxiety group with other students and fill out the same worksheet when the group is completed. The group sessions will be forty minutes long and will take place during the school day once each week for eight weeks. The group sessions will take place during flex time.

A possible risk of being in this study is your feeling that some questions asked of you are of a personal nature. You might feel some embarrassment in discussing the issues with the other students in the group. There are no other anticipated risks. You do not have to answer any question you do not want to. You will have a chance to discuss any questions you have about the study with Miss Kurlan before you sign this form.

The possible benefit from being in this study could be that information will be learned that would allow counselors to better help students deal with their stress and anxiety. Your own stress and anxiety may improve by participating in the group.

Any information that you give during the group will be confidential. This includes information written in the questionnaire and survey. The only exception is that if in talking to you, Miss Kurlan finds that there is something happening in your life that is an immediate and serious danger to your health or physical safety. In that case, your parents or another professional might have to be contacted. Miss Kurlan would always talk to you about this first. Except for this consent form, all questionnaires will be given a confidential code number and your name will not be on them. If publications in scientific journals arise from this research, results will be given anonymously and in group form only, so that you cannot be identified.

Your participation in the group is your choice and you are free to change your mind or stop being in the project at any time. Remember, this research is not part of your regular school program, is not being conducted by the school, and your participation will not affect your grades in any way.

You are being asked whether or not you want to participate in this project. If you wish to participate, and you agree with the statement below, please sign in the space provided. Remember, you may change your mind at any point and withdraw from the project. You can refuse to participate even if your parent/guardian gives permission for you to participate.

I understand the information provided in this form, agree to participate as a participant in this project.

Signature of student participant	Date
----------------------------------	------

Birthdate of student participant

Signature of a witness 18 years of age or older Date

If you have any questions you may contact:

Melissa Kurlan
(585) 256-3768

Patricia Goodspeed Grant (Faculty Advisor)
(585) 395-2366

Appendix H

STATEMENT OF INFORMED CONSENT FOR PARENTS

Dear Parents,

As part of my internship at Gates Chili Middle School, I will be conducting a research project for my thesis requirement for my Masters in Counselor Education from SUNY Brockport. The research project involves group counseling as a way to alleviate stress and anxiety among middle school students. If you agree to have your child participate they will be asked to take a pre-group questionnaire about their levels of stress and anxiety and then participate in an eight-week long stress/anxiety group with others students. The group will meet once a week during flex or lunch time. Ms. Hunt will supervise the group. The purpose of the group is to identify stressors that cause anxiety in students, give them a forum to discuss these issues with other students, and to help them learn how to manage their stress and anxiety. After the completion of the group a follow-up questionnaire will be given.

A possible risk of the student being in this study is the feeling that some questions asked are of a personal nature. Students may feel some embarrassment in discussing the issues with the other students in the group. There are no other anticipated risks. Your child has a right not to answer any questions they do not want to.

A possible benefit from being in this project could be that information will be learned that would allow counselors to better help students deal with stress and anxiety. Also, it is hoped that students will learn how to identify causes and symptoms of stress and learn coping skills to better manage their stress and anxiety.

Any information that your child gives will be kept confidential. The only exception is that if in talking to your child I find that there is something happening in her/his life that is an immediate and serious danger to her/his health or physical safety. In that case, I may have to contact you as parents and possibly another professional. We would always talk to your child about this first.

Please read the following statements:

I understand that:

- My child's participation is voluntary and s/he has the right to refuse to answer any questions. S/he will have a chance to discuss any questions s/he has about the study with Miss Kurlan after completing the questionnaire and before consent for participation is given.
- My child's confidentiality is assured. A code number will be given to each student in order to collect and organize data anonymously. The code number- not the students name will be used on the questionnaire and the questionnaire will be kept confidential. In any publication results from this study, s/he would not be identified by name. Results will be given anonymously in group form only.
- My child's participation involves taking two written questionnaires and participating in an eight-week, once a week, forty-minute counseling group.

- This research is not part of my child's regular school program, is not being conducted by the school, and participation will not affect my child's grade.

If you wish to give permission for your child to participate, and you agree with the statement below, please sign in the space provided. Remember, you (or your child) may change your mind at any point and withdraw from the project.

I understand the information provided in this form and agree to allow my child to participate in this project. I am at least 18 years of age or older. All my questions about my child's participation in this project have been answered to my satisfaction.

If you have any questions you may contact:

Melissa Kurlan
(585) 256-3768

Patricia Goodspeed Grant (Faculty Advisor)
(585) 395-2366

Signature of Parent

Date

Child's name _____