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Group Counseling for At-Risk Adolescent Girls to Improve Decision Making Skills

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Abstract

Adolescence is a time of increased risk taking and poor decision making. A counseling group was directed to introduce 9th grade adolescent girls identified as at-risk, to promote positive decision making skills through a combination of teaching from the group leader and learning through peer interactions. The girls self-reported only minor improvement in decision making skills. The group resulted in a greater understanding and acceptance of others, positive interactions and positive interpersonal change.

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At-Risk Youth

Counseling literature is flooded with information regarding at-risk youth. Despite the plethora of information, the criterion that determines at-risk status and who is qualified to identify children as such remains unclear. Various institutions define at-risk youth with respect to individual subscribed value sets (Bauer et al., 2000). For example, state regulations, administration, teachers, and parents all may define at-risk youth very differently according to each corresponding view. Within the school system, at-risk youth are defined on multiple levels, including state officials through mandates, district standards, administration, teachers and parents. In many cases, at-risk youth at the high school level are defined according to the risk of dropping out. These students often face concerns of truancy, teenaged parenting, delinquent behaviors, and poor academic ability and performance.

While researchers are often vague when defining at-risk, most literature on the groups of youth and adolescents identified as at-risk include common factors such as being a member of low income families or communities, being a member of a minority group, exhibiting antisocial behaviors, having physical or mental impairments, experiencing abuse (physical, mental or emotional), experiencing homelessness (living in a shelter, RV, hotel, temporary housing, or on the street), teenaged parenting, experiencing divorce or other family tragedies, and having low academic performance. (Jacobs & Klaczynski, 2005).

Brooks (1996), of the National Dropout Prevention Center, identified three general factors to classify at-risk youth: educational goals, student behaviors, and home life. Risk factors relating to educational goals included hopelessness, lack of confidence, school failure and an external locus of control. Factors relating to student behaviors included behavior/discipline

problems, aggressiveness, substance abuse, and lack of social skills, while environmental factors include poverty, inadequate housing, lack of resources and lack of parental involvement.

More children are exhibiting adjustment problems at school relating to the general ideas concerning at-risk students (Shechtman, 2002). These adjustment problems manifest in several ways including depression, sexual promiscuity, substance use, special education status, and delinquent behaviors (Ruffalo, Sarr & Goodkind, 2004). Adolescents today are often faced with difficult decisions. Faulty judgments can result in teen pregnancy, drug use and delinquency (Jacobs & Klaczynski, 2005). Many at-risk youth are involved with risk taking behaviors.

Decision Making Models

Four prominent theories exist regarding adolescent risk taking, and decision making (Botvin, 1986; & Petersen et al., 1993). The first theory examines dispositional traits and states that individual differences in personality and disposition account for variance in adolescent risks. The research is inconclusive as to how personality and disposition account for adolescent risk taking.

The second theory investigates biological factors. Genetics, neuroendocrine influences, and pubertal-hormonal changes are directly related to adolescent risk taking (Udry, 1988 & Udry, 1990).

The third theory embraces a developmental perspective. Adolescence is described as a time when young people are exploring and achieving autonomy. It is at this time that adolescents are seeking their own identity, opinions and values. These developmental goals influence adolescents in making decisions (Lavery et al., 1993 & Zuckerman et al., 1978). There are several suggestions regarding adolescent risky decisions based on the developmental perspective. One suggestion is that adolescents have not yet reached the formal operations stage

in Piaget's theory of development, as they have not yet begun to think abstractly enough to process potential risks thoroughly. Adolescents are typically very egocentric and feel invulnerable to harm. They often perceive themselves as unique and are immune to negative consequences of decisions. Adolescents typically use intuition as an information source for making decisions, rather than reason based thinking. Social status is also a significant contributor to adolescent risky decisions. Consequences of actions may be considered a minor price for the benefit of elevating social standing ("Cognitive development," 2005). Decision making may be more significantly related to peer evaluation.

The final theory regarding at-risk youth is the combination of sensation seeking drive and locus of control (Zuckerman et al., 1978). Sensation seeking is defined as a personality characteristic in which novel and intense experiences are sought out (Arnett, 1994). Sensation seeking is argued to be a stable component of personality, and is a significant predictor of adolescent risk-taking (Rolinson, 2002). Sensation seeking may often lead to faulty judgment in attempt to seek out an extreme experience. Locus of control is the perception one has of the control he or she has over the life events that occur in one's life (Crisp & Barber, 1995). Internal locus of control is the sense that an individual is in control of his or her life events through choices. Conversely, external locus of control is the sense that an individual does not have control of his or her life events and can contribute to a sense of powerlessness. Adolescent locus of control is related to vulnerability to risky decisions (Crisp & Barber, 1995), such that those with an external locus of control are more likely to make risky decisions. In contrast, an internal locus of control is inversely related to risky decision making. Finally, while not considered a fifth theory, parental monitoring of adolescent behavior has also been associated with risk-taking

(Rolinson, 2002). Children who are monitored by their parents are less likely to exhibit risky behaviors.

There are three major limitations to existing decision making models (Byrnes, 1998). First, existing models fail to take into consideration the limitations of the human mind. In essence, the current models are inaccurate. Second, current models are not powerful enough to capture a broad range of decisions. Although these models may be useful for some adolescent decision making, they are not practical for all purposes. The final downfall of existing models is that each fails to consider the ability to overcome the processing limitations of the human mind in such a way that effective options can be discovered and implemented.

Byrnes (1998) suggested a more complete model for decision making, designed to be broad enough to capture a variety of situations. This new model, Self-Regulation Model for Decision Making (SRMDM) includes three components; the generation phase, the evaluation phase and the learning phase. The generation phase represents the setting of one or more goals, and the creating of options to achieve these goals. This phase is significant for adequate decisions. Without established goals, decision making becomes a response rather than a choice. The evaluation phase of this model represents the weighing of the pros and cons of each option, and considers the likelihood that each will lead to a desirable outcome. The final part, the learning phase, represents the time after a decision has been made. This is the time when the individual directs attention to the consequence of action. This model suggests that all decisions are made using this model, no matter how quickly concluded. However, many individuals, particularly adolescents, may not pay attention to each step carefully. Byrnes (1998) suggested that SRMDM does not always run smoothly for several reasons, including that some individuals

may fail to set goals, lack the resources to make adaptive decisions, or perhaps an individual's impulsivity may lead to insufficient evaluation of options.

Adolescent Reference Groups

Adolescents use three primary reference groups in developing decision making skills; parents, other adults, and peers (Young & Ferguson, 1979). Parents are referenced typically for moral decisions. Adults outside of the family unit are referred to for informational decisions. Peers are approached for social acceptability and friendship choice (Bednar & Fisher, 2003; Young & Ferguson, 1979). Reference groups are chosen based on authority, perceived superior information, familiarity with environment (shared knowledge of social realities), and intimacy (closeness to adolescent) (Young & Ferguson, 1979).

Adolescent decision making appears to be less connected to the extent of relationships with peers, but more to the extent of relationships with parents (Bednar & Fisher, 2003). Adolescents who perceived their parents as authoritative were more likely to approach parents with questions regarding decisions concerning moral or informational issues (Bednar & Fisher, 2003). Conversely, adolescents who perceived their parents as neglectful were more likely to reference peers for all concerns, including moral or informational issues. Kim, Hetherington & Reiss (1999) suggested that adolescents whose parents were overly negative, or who were especially low on monitoring, tend to become oriented toward deviant peers, and to engage in more externalizing behaviors.

Regardless of parenting style, adolescence is a time when decision making reference groups shifts from parents to peers. The peer group is important in the psychological development of adolescents, serving as a guide in the formation of identity as adolescents begin to establish a sense of self that is separate from the family (Bednar & Fisher, 2003). This time

enables adolescents to test their new decision making skills in an environment in which there are few adults to monitor or control their decisions (Bednar & Fisher, 2003). All adolescents struggle with developmental issues and often need the support of a peer group (Rose, 1998).

Positive peer relationships have been identified as a possible protector for at-risk adolescents (Lansford et al., 2003). Positive peer relationships may provide support against the dangers of negative parenting, may afford adolescents more opportunities for the mitigation of negative family experiences, and may be more suitable for such purposes (Lansford et al., 2003).

Working with At-risk Adolescents In the Academic Setting

According to Srebnek and Elias (1993), the strongest predictor of high school attrition is poor academic achievement, and serious behavior concerns. Administrative personnel have historically dealt with at-risk students' insubordinate behaviors during the academic day through punishment. These interventions include, but are not limited to, detention, suspension, repeated disciplinary warnings and referrals, attempts at counseling targeted at behavior modification, linking with families, and other behavioral interventions (Bemak et al., 2005).

Bauer, et al. (2000) posed the idea that at-risk students are lacking in important emotional concepts needed to study, live, and socialize effectively. Many students have socially or economically disadvantaged home lives that interrupt or obstruct social, emotional, and academic growth and development (Bauer et al., 2000). Bemak, et al. (2005) argued that at-risk students are not limited to exhibiting disruptive behaviors, but also show poor attendance records and often are overwhelmed with problems at home. Unfortunately, the academic system is limited in its ability to aid in student lives outside of school. However, schools may be able to complement challenges outside of the school building with relief during the school day. Praport (1993) suggested that the primary goal for school counselors is to promote the self-confidence

and self-worth of all students, especially those that may be considered at-risk. Lower performing students seem to need to resolve personal, social, and emotional needs before effective learning can be targeted.

The key to success and resiliency, especially for at-risk youth, is to have the opportunity to form basic relationships with an adult, developed from trust (Bauer et al., 2000; Werner, 1989). Because severe challenges at home may impede relationships with adults outside of the school environment (Bemak et al., 2005), perhaps the school system can offer more viable sources of developing a trusting relationship with an adult. With an average case load of 400:1 (DeLucia-Waack, 2000), school counselors are faced with the difficult challenge of reaching those students who need the most help. Often times, the students with the most need stay fairly invisible to educational staff. It is difficult for school counselors to make a connection with each individual student. Time has become an issue. School counselors are not granted the luxury of time to do therapeutic counseling with each individual student, which may cause the neediest of students to fall through the cracks.

Group Work in Schools

Group work provides an excellent opportunity for school counselors to reach many students at once. School counselors, in recent years, are turning more to group counseling in working with students (Crepeau-Hobson et al., 2005). Planned, purposeful, and effective counseling is available to greater number of students through group work (Becky & Farren, 1997; Phillips & Phillips, 1992). Group work is supported by a vast body of research (Akos et al., 2004; Barlow et al., 2000; Bauer et al., 2000; Bemak et al., 2005; De-Lucia-Waack, 2000; Gladding, 1995; Hall, 2004; Holmes & Sprenkle, 1996; LaFountain et al., 1996; Praport, 1993; Rose, 1998; Rosen & Bezold, 2001; Rosenthal, 1993; Shechtman, 1993; Shechtman, 1994;

Shechtman, 2002; Shechtman et al., 1996; Shechtman et al., 1997; Shechtman & Ben-David, 1999; Shechtman & Gluk, 2005; Whiston & Sexton, 1998; Yalom, 1995; and Zinck & Littrell, 2001). Group interventions have been shown to be successful in schools, and serve as a means of improving academic performance and attendance (Bemak et al., 2005). Group interventions are believed to be as successful as individual counseling and much more cost effective (Hoag & Burlingame, 1997; Shechtman & Ben-David, 1999). Group work has often been the treatment of choice in successful interventions to improve social acceptance and behavior (Bemak et al., 2005). It is thought to be more efficient than individual psychotherapy because of social learning through insight, peer modeling, problem solving and validation (Bemak et al., 2005). The development of these skills is less available to students who are involved in individual counseling. Group work offers the opportunity for students to solve problems together. Working together increases critical thinking and problem solving skills (Hall, 2000). Through group work, students are provided an opportunity to work collaboratively to uncover solutions to common problems and practice skills in solving their concerns (Hall, 2000).

Group counseling is suggested to result in the greatest benefit for meeting the needs of at-risk students (Becky & Farren, 1997; Bemak et al., 2005; Rosen & Bezold, 2001). Groups help students perceive their needs of belonging, power, freedom, fun, and responsibility through goal setting, and plan implementation (Kim, 2006). Counseling groups enhance self-esteem (Hlongwane & Bason, 1990), friendship skills (Rosenthal, 1993), and friendship intimacy (Shechtman, 1994) which are highly important factors in a child's wellbeing and academic success (Bemak et al., 2005; Shechtman, 1993; Shechtman et al., 1996; and Shechtman et al., 1997). Students, themselves, have reported moderate to strong progress in achieving personal

goals. They also reported a significant reduction in the severity of problems, and experienced meaningful changes in attitudes and in relationships with others (Zinck & Littrell, 2001).

Group Dynamics

Yalom (1995) identified 11 curative factors in group psychotherapy. Although the curative factors were identified for group psychotherapy, many of the factors are beneficial for all group types. These factors include instillation of hope, universality, imparting information, altruism, family recapitulation, development of socializing techniques, interpersonal learning, cohesiveness, catharsis, existential factors, and imitative behavior. Group cohesiveness, catharsis and interpersonal learning are the most significant elements of the group experience (Shechtman & Gluk, 2005; Yalom, 1995). Group cohesiveness is significant in that the group is a single unit with each individual being an active member, with equally significant roles. Catharsis is crucial because it validates the learning involved while working with peers. Group members learn from each other aspects about their relationships through interpersonal learning. Students learn through peer references, not through an adult or other source, making the learning more salient and rewarding.

The primary goal of groups is to help students feel a sense of empowerment through these curative factors and to encourage students to recognize that interpersonal problems are within their control. Groups offer students the opportunity for social learning in managing or avoiding situational precursors that limit academic success (Nelson et al., 1996). Students also have opportunities to receive social support. They gain the experience of being cared for, valued, included, and guided by their peers (Steese et al., 2006). These experiences are often not available for at-risk youth at home. Learning self-worth through the group process is crucial to emotional development.

Students who participate in groups experience extensive benefits. Groups offer students the opportunity to develop trust with peers, and feel a sense of connection with others (Steese et al., 2006). Resiliency, an important quality for at-risk youth to develop, is derived from a sense of connectedness with others along with feeling supported and cared for (Steese et al., 2006). Groups also provide support and acceptance, and promote peer interactions. Effective group experiences allow for safe risk-taking so that students may learn new skills (Akos et al., 2004). Group counseling and guidance contribute to students' ability to adapt, tolerate diversity of ideas and behaviors, and self-regulate personal thoughts, feelings, and actions.

Students help each other learn ways to handle life stressors, provide opportunities for feedback and support each others' growth and development (Akos et al., 2004). Group members can challenge each other and offer encouragement to make small, and progressive changes to move from harmful thoughts and behaviors to productive healthy functioning (Bauer et al., 2000). Students can effectively explore options and feelings, and problem solve in a safe atmosphere. Students can address invalid or inaccurate assumptions about their lives, and make initial steps toward change (Bauer et al., 2000).

Students can feel a sense of universality while learning that other students or teachers may share problems similar to their own. Careful listening and rational discussion promote personal growth, and understanding of others (Phillips & Phillips, 1992). Students can provide each other with unlimited support and suggestions. While students are engaged with each other, they are learning important social skills, and empathy. The repeated collaboration and encouragement may be a supplement for the absence of support in the lives outside of school (Praport, 1993). Groups offer a safe place to communicate concerns while trusting relationships

develop (Phillips & Phillips, 1992). Safe group conditions offer opportunities to be honest, and open while confronting fears and anxieties (Bauer et al., 2000).

Group work offers students a new found sense of self-efficacy. During group interactions, members learn personal responsibility (Rosen & Bezold, 2001; Steese et al., 2006). Students gain a sense of empowerment. They learn to embrace control in life. Students learn that their progress is a direct response to personal responsibility. In a world where at-risk youth are blamed for mistakes and poor choices, group work offers the opportunity to embrace powerful decisions that lead to positive behaviors, and emotional empowerment. These changes that occur during group counseling leave youth with permanent skills, providing an opportunity to continue to develop their new abilities and exercise them beyond termination of the group, (Zinck & Littrell, 2001).

Classifications of Group Work

There are three general classifications of groups: guidance/educational; counseling/interpersonal problem-solving; and psychotherapy/personality reconstruction (Gladding, 1995). The definition of group psychotherapy is often over-generalized and encompasses all types of groups (Shechtman, 2002). This affords a challenge in researching the literature, because the research does not always distinguish between group type (Akos et al., 2004). Guidance or educational groups, also known as psychoeducational groups, tend to be based more on thought development or skill learning. Counseling groups tend to be relational, and emotionally focused. Psychotherapy groups are often the most emotionally salient, and therapeutic in nature. The literature does not agree upon which style of group produces more salient results. The vast majority of groups are guidance, counseling, or some combination of both (Shechtman, 2002). Most groups are time limited, lasting less than 3 months, and are

cognitive behavioral in nature (Barlow et al., 2000; Hoag & Burlingame, 1997; and Shechtman, 2002).

Educational/guidance groups are typically a primary intervention (Shechtman, 2002). These groups often consist of “normal” students, offer training in social skills and are often lead by teachers. These groups serve to improve classroom behaviors, school performance, and peer relationships, but are less likely to affect intrapersonal gains including locus of control, and self-esteem (Shechtman, 2002). Cognitive based learning groups work better with students who are grouped heterogeneously, not according to developmental process. LaFountain, et al. (1996) argued that psychoeducational groups were more effective in the school system than therapy groups because psychoeducational groups decrease stigmatization of groups.

Cognitive based groups tend to focus on one or two particular pieces of a student’s being, usually a behavior or another tangible factor. Students typically have activities to perform and tasks to complete during group meetings. Cognitive groups are suggested to be effective in changing self-esteem, and academic self-concept (Bauer et al., 2000). These groups will often question how and why students think the way they do, they will offer skill-learning opportunities, and tend to be very concrete. They have also shown to produce clear changes in behavioral adjustment of students (Nelson et al., 1996). Cognitive based groups help students increase understanding of themselves and others, helping to break down stereotypes that members previously held of each other in the school (Phillips & Phillips, 1992). Cognitive based groups promote growth and development and often work to prevent future problems.

Although cognitive are supported by literature, this style of group narrowly targets a single problem area, which can be beneficial but often incomplete. These groups do not take into consideration all aspects of student lives. Cognitive based groups attempt to separate a piece

from the whole. These groups do not allow students to assume responsibility and ownership of long-standing problems (Bemak et al., 2005).

Counseling groups are often based on a person-centered theoretical approach of therapeutic change facilitated by support and connection with other group members and focus on self-esteem, social deficits (Holmes & Sprenkle, 1996), and developmental difficulties (Shechtman, 2002). Counseling groups are built on the premise of encouraging close relationships, sharing private information, and giving and receiving support and feedback. Key elements include genuineness, unconditional positive regard, and empathic listening and understanding (Bauer et al., 2000). These types of groups do not typically have a defined structure. Group members develop ownership and a sense of empowerment because of the choices they have regarding group discussions (Bemak et al., 2005). Group members are free to make collaborative decisions about meeting agendas as long as the purpose of the group is kept in mind. Students develop a sense of self control and ownership for their actions through facilitating their own groups. At-risk youth particularly benefit from this framework because it differs from what they are often used to; being told what to do without being given any choices to own responsibility (Bemak et al., 2005).

Counseling groups are an effective means of intervention and prevention (Rosen & Bezold, 2001). Group members reap all the benefits of group dynamics much more intensely than in cognitive based groups. Group members learn they are not alone in their experiences. Suddenly, a world in which they felt alone and abandoned now is put into perspective. Because the group is made of peers, no hierarchy exists (or minimal hierarchy, as students almost always develop one within any group). The group members can turn to each other for support. Students learn effective coping skills from one another through modeling, as what may work for one

group member can certainly work for another. Process groups develop a broader and deeper understanding of relationships through group interactions (Rosen & Bezold, 2001) and develop a sense of empowerment through their interactions (Bemak et al., 2005).

Empowerment promotes sharing of deep emotions, allowing adolescents to help each other heal from life's challenges. Discussions may not necessarily be directly related to school but are still considered beneficial because they may be closely related to academic failure (Bemak et al., 2005). Process groups touch upon all of the hidden factors that may be hindering student progress. All of the factors that play a role outside of the academic life can be put into perspective. This style of group is shown to have strong effects on behaviors of at-risk youth including improved attendance, more effective study habits, aspirations and thoughts of the future, fewer disciplinary referrals, and enhanced academic performance (Bauer et al., 2000; Bemak et al., 2005).

Therapy groups are often developed to assist those with severe behavioral, emotional, and adjustment concerns (Shechtman, 2002). These groups are typically very small (between 4 and 7 individuals) and are led by an expert (Shechtman, 2002). As mentioned above, research is often inconsistent with regard to type of group counseling. It is difficult to isolate therapy group as an integral part of the academic system.

The literature is not consistent regarding which form of group counseling works better for at-risk youth. LaFountain, et al. (1996) suggested that psychoeducational or cognitive based groups were more appropriate for the school setting, so much to the point that the authors stated school counselors should not even consider being trained in process group leadership. There are certain benefits to cognitive based groups. Educationally based groups may be easily set up as small classrooms. They are certainly more functional for the time management purposes of

schools. However, there is concern that a significant piece of the puzzle may be lost. Perhaps the behaviors are a consequence of something more considerable. As suggested by Bauer, et al., (2000), there may be emotional components to at-risk youth behavior. Therapeutic groups can be used to assist youth in recognizing and accepting their feelings. A therapeutic group may be a more promising way for these students to work through their difficulties, and find a voice.

The literature suggests that all forms of groups are beneficial to at-risk youth. However, the benefits do tend to differ. This study served to best match both the solution focused direction of the psychoeducational groups with the long lasting, growth enhancing process of the therapeutic group in introducing a decision making model to at-risk adolescent girls.

Method

Participants

The group consisted of six 9th grade girls from a public suburban high school. All of the participants were aged 14 and 15 years, and all were Caucasian. The students were from various backgrounds, and peer groups. Two students lived in single-parent families, two in non-divorced families and three in divorced and remarried households. The participants were recruited from corresponding high school counselors, and were identified as at-risk. At-risk qualities were left open to the interpretation of each counselor. Common themes as identified by the students' counselors were academic failure, truancy, family concerns, and suspicions of substance abuse, and sexual promiscuity.

Procedure

Each of the participants were interviewed, and asked if they would voluntarily participate in an all-girls group that could improve decision making skills. The researcher did not inform the girls that they were identified as at-risk by their school counselor. The students were

informed of the purpose of the group as being a thesis project for the primary investigator. The students were assured that their identities would be concealed in the written research paper. The significance of confidentiality was explained to the students. Confidentiality would be maintained by all group members, as well as the group leader. To assure confidentiality on written works, including Pre and Post Group Questionnaires, each student was assigned a numerical code. For the purpose of this research, each student will be identified by a pseudonym for the balance of this paper.

During the screening process, each student was read a screening script (Appendix A) to maintain consistency during each interview. Students were informed about confidentiality as a mandatory component to the safety, and respect of each group member. Each student was given the opportunity to ask questions regarding the group purpose, and process. Students were also assured that they may decline participation in the group at any time without penalty.

After expressing interest in participating in the group, each student was asked to sign an informed consent document (Appendix B), and asked to have a parent or guardian also sign an informed consent document (Appendix C). It was explained to the students that both documents must be signed prior to beginning the group. Students were also informed that the documents were necessary for their personal safety, understanding, and comfort regarding the group as a thesis project for the researcher.

In addition to informed consent documents, each participant was asked to complete a Pre-Group Questionnaire (Appendix D) to establish a baseline of self perceived decision making skills, and concerns for each group member. Each student was asked to list two concerns, and rate the significance of each. Students were also asked to rate their decision making skills, and list a personal goal for the group. Each pre-group questionnaire was reviewed by the primary

investigator. The researcher made note of common themes in problems, concerns, and goals identified by each participant. Following the conclusion of the group, participants were asked to complete a Post-Group Questionnaire (Appendix E) to assess group effectiveness. Both the Pre and Post-Group Questionnaires included numerical self rating and open ended response items. The researcher chose this method to capture as much information regarding each student as possible while continuing to keep a comparable theme for evaluation after termination of the group.

Design

The high school schedule rotated on a 4-day cycle. Group meetings were held on the first day of the rotating schedule. To limit academic neglect, and concern for academic failure, group meetings were conducted during a common open period for all individuals (both students and faculty). The girls' group was held for 5 consecutive rotations. This time frame was selected so that the group members would limit missed instruction time for classes. However, because the open period is short in duration, the group overlapped into the following block for 10 minutes, allowing the group to run for a total of 40 minutes. Students were responsible to make up any work from the 10 minutes of missed instruction.

Session 1: The first group meeting was an introduction into the purpose, and process of the group. Individuals were asked to introduce themselves, state why they decided to participate in the group and to give an interesting piece of information they would like to share about themselves. After each member was introduced, the group leader discussed the purpose of the group, the significance of confidentiality, and voluntary participation. The leader explained that the group was a place to investigate decision making skills. The goal of the group was to promote well thought out, conscious choices, and to avoid reactive decisions. Group members

were encouraged to contribute any thoughts or feelings regarding discussion. Confidentiality was discussed thoroughly. Members discussed why they felt confidentiality was significant, and necessary for an effective experience. Group members also established guidelines and rules to promote trust, and safety within the group environment. Group rules included maintenance of confidentiality (“what is said in group stays in group”), respect for others’ opinions (agree to disagree), only one person speaks at a time, and have respect for each other. The leader restated that participation was voluntary, and any member could withdraw at any time without consequence.

The leader concluded the primary group meeting with a review of the group purpose, goals, established rules and confidentiality. The leader gave each group member a list of calendar dates for group meetings, reminded each participant of the next meeting and released the group.

Session 2: The meeting opened with a brief mention of confidentiality. The second group meeting focused on how life events affect academic performance. Participants discussed how daily life and concerns with family and friends or other experiences of internal turmoil distracted attention from academics. Participants disclosed personal stories regarding examples of how school often was placed secondary to other challenges in life.

Session 3: Again, the group session opened with a reminder of the significance of confidentiality. The focus of this group meeting was to discuss coping mechanisms for the life distracters discussed during the previous meeting. Students examined each others’ stresses, and responses. The leader focused on choices each of the students made while disclosing an experience.

Session 4: The group meeting revisited confidentiality at the out-set of the group

meeting. The group leader described that the purpose of the group was to focus on how each participant made decisions. The group leader provided a simple outline for making decisions, following Byrnes' (1998) model of SRMDM. The leader described that each decision can be broken down into 3 components; goal and options, evaluation of options and consequences of each. This particular meeting was designed as a psychoeducational group than a process group. The leader used the group time to teach group members about decision making and opportunities to make better choices.

The group members were asked if they would like to volunteer a situation in which the group could break down the circumstance into component parts of SRMDM. Each example was broken down into a primary goal, potential options, consequence of each option, and then evaluation of the final decision. If the student had already made a decision, the leader asked the group to evaluate the decision in terms of the goal and consequences. Students who had not yet experienced the situation discussed were left to consider the consequences, and evaluation of the decision after the decision had been made. In these situations, group members were asked to bring their story back to group at a later date.

Group 5: The final meeting revisited confidentiality as a significant factor to be maintained upon the termination of the group. The girls were asked to revisit the components of decision making. The leader asked if the girls had used the decision making model within the last week. Students were asked to share their experiences with the SRMDM. The group concluded with the completion of the Post-Group Questionnaire.

Results

Pre-Group Questionnaire

Each student was asked to complete a Pre-Group Questionnaire. The girls were asked to

list 2 concerns they had and rate each on a scale of 1 to 5, with 1 being “very little” and 5 being “very much.” A rating of 3 was understood to be neutral. Each of the participants were given permission to use the examples provided, or to list another of their own. The leader provided examples in attempt to eliminate omitted items. Concerns were listed as follows:

- “My friends’ problems I relate to and they frustrate me.”
- “Sometimes I do stuff and I get mad and people take advantage.”
- “Depressed at times, sometimes for no reason.”
- “Don’t feel good enough for things or people. I don’t feel like I do anything right and there’s nothing good about me.”
- “None of my friends like each other and I’m stuck in the middle.”
- “People expect so much out of me and people can take advantage of me.”
- “I have a bad attitude towards everyone.”
- “When I get mad I let it bother me all day and it affects my school work.”
- “I get frustrated easy in classes when I don’t get things.”
- “I don’t get along well with my dad.”
- “I would like to have a better relationship with my mom.”
- “I would like to learn how to let my feelings out (of grief).”

The concerns listed by the group members seemed to fall into 3 general categories: relationship concerns, emotional challenges, and academic stresses. The most dominant concern for the girls was emotional challenges. Feelings of frustration, depression, and negative attitude were common themes. Relationship concerns followed in frequency. Several concerns were related to parent/child relationships. Others were related to peers. Academic stresses were the least significant to the group collectively, however, significant enough to be listed.

Each student was asked to rate her decision making skills on a scale of 1 to 5, with 1 being “very poor” and 5 being “very good.” A rating of 3 was understood to be neutral. The mean score for decision making before the group was 2.67 (n=6), range 1-4.

In addition to concerns, each participant was asked to list a personal goal for the duration of the group. Most of the goals listed by each group participant were in direct connection to a concern listed. Problem solving skills, learning positive affect, and relationship goals were suggested as common goals for the group. Goals were as follows:

- “Learn how to be less depressed and more happy about things.”
- “Learn how to deal with my problems in a better way than how I do now.”
- “Just to deal with my problems better.”
- “Not letting things get to me so much.”
- “Learn how to talk to my mom instead of arguing with her.”
- “I don’t know maybe I will learn.”

Post-Group Questionnaire

Each student was asked to complete a Post-Group Questionnaire after completion of the group. The girls were each provided the responses they offered on the Pre-Group Questionnaire in order to accurately assess their personal gains from the group. A comparison of the Pre and Post-Group Questionnaire with regard to self-rated decision making skills is listed in Table 1.

As mentioned above, the girls were asked to list 2 concerns they had and rate each on a scale of 1 to 5, with 1 being “very little” and 5 being “very much.” A rating of 3 was understood to be neutral. The girls were asked to revisit these concerns, and list the significance of the concern at the conclusion of the group. Each participant received a summary of the responses written on the Pre-Group Questionnaire to maintain consistency, and reduce forgetfulness. A

comparison of the self ratings for each group member on the Pre and Post-Group Questionnaires with regard to Problems 1 and 2 are listed on Table 2.

Table 1

Self-Reported Rating of Decision Making Skills on the Pre and Post-Group Evaluation

Student Name	Pre-Group Evaluation	Post-Group Evaluation	Change (Δ)
Julie	3	3	0
Janet	3	4	+1
Sarah	2	3	+1
Emily	1	2	+1
Melissa	3	4	+1
Erica	4	4	0
Total	16	20	+4
Mean	2.67	3.33	+0.66

Each student was asked on the Pre-Group Questionnaire to list a personal goal for the duration of the group. On the Post-Group Questionnaire, each student was reminded of the goal each listed and asked to rate how close they thought they were to achieving their goal on a scale of 1 to 5, with 1 being “no progress,” and 5 being “I achieved my goal.” Each group member, her respective goal, and self-rating on goal accomplishment are listed on Table 3.

A number of questions on the Post-Group Questionnaire were directed toward group evaluations. The girls were asked to rate each item on a scale from 1 to 5, with 1 being “no, not at all,” and 5 being “yes, very much.” A rating of 3 was understood to mean neutral. Each group evaluation item was written out. The mean group ratings, as well as the range of responses were provided. The results of the participants’ evaluation of group effectiveness are listed in Table 4.

Table 2

A Comparison of Self-Reported Rating of Problem 1 and 2 on the Pre and Post-Group Evaluation

Student Name	Problem	Pre-Group Rating	Post-Group Rating	Change (Δ)
Julie	My friends problems I relate to and they frustrate me.	4	4	0
	Sometimes I do stuff and I get mad and people take advantage.	3	3	0
Janet	Depressed at times, sometimes for no reason.	3	4	+1
	Don't feel good enough for things or people. I don't feel like I do anything right and there's nothing good about me.	2	4	+2
Sarah	None of my friends like each other and I'm stuck in the middle.	5	3	-2
	People expect so much out of me and people can take advantage.	5	4	-1
Emily	I have a bad attitude towards everyone.	No Response	5	N/A
	When I get mad I let it bother me all day and it affects my school work.	5	5	0
Melissa	I get frustrated easy in classes when I don't get things.	4	4	0
	I don't get along well with my dad.	4	4	0
Erica	I would like to have a better relationship with my mom.	5	3	-2
	I would like to learn how to let my feelings out (of grief).	4	3	-1
Total		44	41	-3
Mean		4	3.73	-.27

Table 3

Evaluation of Individual Goal After Termination of the Group

Student Name	Goal	Goal Achievement
Julie	I don't know maybe I will learn.	N/A
Janet	Learn how to be less depressed and more happy about things.	4
Sarah	Learn how to deal with my problems a better way than how I do now.	3
Emily	Just to deal with my problems.	3
Melissa	Not letting things get to me so much.	4
Erica	Learn ways to talk to my mom instead of arguing with her.	4
		Mean = 3.5

Table 4

Evaluation Results for Group Effectiveness

Question	Mean	Range
Did you find the group meetings helpful?	4.5	4-5
Did you find the group feedback helpful?	4	3-5
Did you think the counselor's feedback was helpful?	4	3-5
Could you trust group members to keep the group discussion confidential?	3.67	2-5

Group evaluation items that offered open ended questions were listed separately in Table

5. Each question is written out, and the mean and range for that item are listed. Below each

question are listed open ended responses to the corresponding item. Subsequent names for written responses were omitted.

Table 5

Evaluation Results for Group Effectiveness Items and Responses

Question	Mean	Range
Did you learn more effective decision making skills through the group? Written Comments: <ul style="list-style-type: none"> • I was able to do it well • Stand up for myself • I really start thinking before I act • Stand your grounds 	4	3-5
Did you learn things about yourself from the group? Written Comments: <ul style="list-style-type: none"> • Yes cause other girls were the same • Confidence • I already know who I am, nobody else could explain me. • Confidence 	3.33	1-5
Did you notice changes in yourself from what you learned from the group? Written Comments: <ul style="list-style-type: none"> • Yes being respectful • Confidence • I think before I react • I am a good person who can listen. 	3.5	3-4

Discussion

The group was formed to help at-risk adolescent girls develop better decision making skills. The results showed minor improvement in self-rated decision making skills. This minor improvement may be a result of several factors. First, the group meetings were fairly short, lasting only 40 minutes in duration, and for only 5 meetings. The first group meeting was not

focused on decision making skills, leaving the remaining 4 meetings to focus on helping the girls learn and develop problem solving skills. The remaining 4 meetings were not exclusive to decision making. Although the researcher referenced back to decision making and choices throughout group discussion, much of the group focus was of collaboration of concerns and support for one another. The researcher attempted to indirectly reinforce choices while allowing the group to continue on to reach deeper interpersonal levels. At times, the leader chose not to redirect the group back to goal setting and decision making because of emotionally potent group conversation. The premise of the group was to promote more positive decision making skills through opportunities to learn socially. However, effective groups provide support and acceptance to promote safe risk-taking (Akos et al., 2004). The leader was more concerned that each group members' needs of being heard and respected were prioritized above teaching the group about decision making. The leader referred back to the main focus of the group when emotional needs of each student were met.

Much of the 2nd and 3rd group meetings were focused on personal stories, experiences, and sharing with the group. This time was used to promote respect and connectedness among the group while setting a guideline for how each member made decisions as Bauer, et al. (2000) asserted. The leader noticed that most of the decisions the group members made were often situational, and reactive instead of well thought out goal setting and planning. The leader had anticipated this response from the group. The leader focused on choices during these groups. While each group member spoke, the leader would ask the speaker what the goal was, and then ask the group to provide other possible choices to the speaker. The group members were asked to brainstorm ideas. Although this was a step of decision making, it did not capture the full essence of conscious decision making. It was not until the 4th and 5th group meeting that the

leader fully discussed, and investigated the steps of decision making with the group. Perhaps, with more time, the group could have worked further in the direction of planning and implementing decisions.

The leader had planned the group meetings to have certain goals. Although the researcher could have introduced the full outline of decision making during the first or second group meeting, the researcher chose to slowly introduce the topic of choices first, to promote ownership of one's actions. Adolescence can be a time in which ownership of one's actions can be foreign or challenging at best. Perhaps, again, the limits of time were a barrier. The reactive nature of adolescence requires more time for understanding, and practice than the group allotted.

Each group member was asked to list two problems she felt was most concerning to them on the Pre-Group Questionnaire. The researcher asked this for a couple of reasons. The primary reason was to identify common themes and general concerns for the group members. The secondary reason was to frame a sense of awareness for each group member of their personal responsibility and power of choice through their decision making. The researcher shared with the group members common themes in the problems listed on the Pre-Group Questionnaire. This may have contributed to a greater sense of connection, and universality. The primary investigator observed that the group members seemed to be quite supportive of one another, regardless of the various social groups present in the group. Listing the problems with which each girl was concerned may not have been as effective as the researcher had expected. The researcher had hoped to promote decision making skills that could be practiced on the concerns each participant listed. However, according to the results, most of the problems were not alleviated. On the contrary, Janet's concerns for both of her problems listed increased. It is possible that through the group process, Janet's understanding or appreciation for her concerns

increased, perhaps through awareness and insight (Yalom, 1995). This could be the case for any of the changes regarding the listed concerns. Pre versus post ratings may be due to a true change in the situation, perhaps due to a difference in decision making skills. The difference in concern may be due to an overall decrease of interest in the situation. Perhaps, over the 4 week spread of the group, the situation may no longer be an issue for the student. Sarah, for example, listed that her friends didn't like each other, and she was stuck in the middle. Sarah's problem decreased in concern for her. Perhaps Sarah's friends now know how to tolerate each other, and the difference involves her friends instead of a change within herself. Erica expressed a slight change in problem concern. It is possible that her difference in concern may be due to a better working relationship with her mother, either from her own doing, her mother's, or perhaps some other cause.

In an attempt to avoid limiting each participant by offering a closed set of problems, the researcher opened the realm of the group to capture various aspect of each individual student, as long as the student wished to share with an open ended question. This allowed the researcher to see each individual as more complete, however, making the results difficult to explain through a quantitative paradigm.

Each group member reported some progress toward achieving their goals. Although none of the group member reported achieving their goal, perhaps attempts were made to strive for this goal. The leader did not ask what steps were taken in achieving each goal. Possible reasons for self-ratings on goals are left to speculation. Positive ratings on goal achievement may be related to learning, and practicing how to set goals and take responsibility for achieving them. These changes may represent improvements in a new-found sense of self-efficacy (Rozen & Bezold, 2001). Part of group discussions was focused on establishing, and setting goals. It is

quite possible that these students have not practiced this skill in life. Goal setting is a skill that needs to be learned and practiced. Because these particular students were identified as at-risk, it is quite possible that goal setting and identifying appropriate steps to achieve any given goal was not a skill learned in this amount of time. This group resembled a counseling group more so than a cognitive group. A strict adherence to a cognitive model may have produced stronger results (Nelson et al., 1996). However, stronger initial results may not allow students to develop the responsibility for long-standing problems due to the narrow focus of cognitive based interventions (Bemack et al., 2005).

In general, the girls rated the group as effective. Each of the girls participated in group discussions. They all appeared to be very engaged and interested in sharing. The girls reported that the group meetings as well as the groups' and the leader's feedback were helpful. The researcher did not ask how the feedback was helpful from both the group and the counselor. There is not enough information to speculate what exactly was useful for the group participants.

The girls reported moderate improvement in decision making skills. This was consistent with individual decision making skills ratings. Written comments suggested that the girls appreciated being able to discuss with the group members various steps of decision making. The girls used most of their decision making discussions to consider various options each had with personal conflicts. The girls reported that they greatly appreciated the social support and collaboration available during the group process. The girls assisted each other in processing their problems by offering support and feedback (Akos et al., 2004; & Bemack et al., 2005).

The girls rated the group just above neutral on trusting the group members to keep confidentiality. The girls were associated with different peer groups. It is quite possible that a higher level of trust was not established due to this notion. Confidentiality was discussed during

every group meetings. Rules were established to promote trust. Unfortunately, trust is a factor that needs to grow, and develop. The leader would not necessarily have been able to promote a stronger feeling of trust. An open-ended component to this question would have been useful in assisting a trusting group atmosphere in future groups. The girls had also described the high school as an environment where rumors spread quickly, and privacy is hard to maintain. This may be a factor in many high school environments. There may be few options available to challenge this notion other than allowing the group to process, and develop trust. Gossip and rumors have been described by the group as a part of high school, possibly feeding an undercurrent of distrust that confidentiality would not be maintained. Although friendship skills (Rosenthal, 1993) and friendship intimacy (Shechtman, 1994) are an integral component of academic success (Bemack et al., 2005; Shechtman, 1993; Shechtman et al., 1996; & Shechtman et al., 1997), they cannot be thrust upon group members, they must be developed.

Two items on the Post-Group Questionnaire were directed toward introspection on personal learning, and change. The group collectively reported some learning and change. The item specifically targeting personal learning ranged from “no, not at all” to “yes, very much.” The written comments were interesting, providing insight to each participant. For example, while one group member stated that she learned that she was more similar to other members than previously thought, representing Yalom’s (1995) curative factor of universality, another group member insisted that no one could know her more than she knew herself. The latter student suggested that there was nothing for her to learn about herself. Each of the group members interpreted this item quite differently than the rest. Two of the girls stated that they increased their sense of self confidence. These two students expressed that the group experience fostered learning through Yalom’s (1995) social learning, which helped to develop this personal attribute

each found to be positive. The second item directed toward introspection was related to personal change. The personal rating scores suggested that every participant recognized some amount of personal change. One member wrote that she was beginning to think before reacting, which counters traditional adolescent decision making theories that intuition, rather than reason is the main decisive factor (“Cognitive development”, 2005; Praport, 1993; & Yalom, 1995).

suggesting that the purpose of the group, improving decision making skills, was a positive learning experience for her. Again, confidence was mentioned as an attribute gained from the group. All of the changes listed in written comments were positive. Other responses suggested an improvement in self concept, “I am a good person who can listen” and “being respectful.” These positive changes support the social interaction of group counseling as beneficial to the learning and development of these adolescent girls.

A secondary goal of the group was to promote an opportunity for the girls to share concerns about school and outside life in an environment that was safe and perhaps not otherwise available. The group served this purpose for the students, as suggested by most of the written explanations on the group’s effectiveness asked on the Post-Group Questionnaire. The girls reported that they learned confidence, respect, and listening skills. During the final group meeting, during closure, the girls asked to continue meeting concluding the requirements of this research. The girls expressed that they all wished to continue meeting because they found the climate of the group to be inviting, and beneficial; the students requested to continue meeting during the same rotating scheduled time frame, and the leader explained that group meetings would only be held during free periods, and would not result in missing class time. Each group member continued to be enthusiastic about continuing to meet.

Limitations

A number of limitations to this study are worthy of mentioning. The group only lasted for 5 group meetings. This time frame was appropriate to establish a sense of connectedness. However, it was not significant enough time to focus specifically on decision making skills. The group meetings were significant enough for the group members to actively discuss concerns and the effects on academics, but did not allow for thorough processing and change. The group members required more time in order to fully explore decision making, and promote positive learning and adjustments to decision making skills.

The group leader did not focus group discussions solely on decision making. It was thought to be to the benefit of the group members to allow discussion to follow the needs of each participant. In order to capture the needs of each member, the leader promoted personal responsibility of group discussions to each member. Discussion was not limited to the leader's goals, but to the needs of the group members. In essence, the leader focused the group on the needs of the members, and not directly on decision making. Although the purpose of the group was to promote positive choices, as the group progressed, it became a secondary purpose. The primary focus became promotion of connectedness, and a safe place to discuss personal challenges. This limited group effectiveness with regard to promoting decision making skills, even while providing a group process that the girls chose to continue after termination of the study.

The Pre- and Post-Group Questionnaires were vague in retrospect. Although there was much information to obtain regarding thoughts and feelings, many more questions developed as a result. The researcher attempted to simplify the questionnaires in order to promote interest for the group members. However, in attempt to shorten the questionnaires to keep interest and honesty, each became oversimplified, serving an injustice to the reliability of the results.

Many of the items on the questionnaires were not consistent with regard to pre and post evaluation. The single item regarding decision making skills was worthy of assessment. This item was alone in the use of group effectiveness, as related to empirical data, not personal ratings. The researcher intended to promote positive decision making with regard to the two problems each individual listed. However, because group discussions were not always focused on decision making, and each individual concern was not always mentioned in group, it is difficult to assert that any changes in ratings of those concerns are related at all to the group experience.

Implications for Future Research

More research needs to be directed toward promoting positive decision making in the academic setting. Group work continues to be a positive intervention for at-risk youth. However, perhaps a more structured group setting would be more successful with regard to decision making. Future research may consider reevaluating the Pre and Post-Questionnaires used in this study. Assessment tools that are more consistent and specific with regard to direct influence on decision making would be helpful.

Decision making is only a piece of the challenges at-risk youth face. Perhaps an inclusive group intervention connecting various aspects of adolescent life would be positive for this group of adolescents. A holistic approach with the primary focus on decision making skills was attempted in this study. More group research focused on connecting at-risk youth to personal responsibility and choices is needed. The combination of psychoeducational groups with counseling was beneficial for the group members. However, the extensive amount of limitations requires adjustments and reevaluation in order to search for appropriate methods in working with at-risk youth.

Perhaps a qualitative paradigm would be more encompassing for future research with adolescents. At-risk youth continues to be a challenge to define. A qualitative perspective may open doors to a realm of life that is not measurable by quantitative standards. The results of the present study offered more questions than answers. A replication of the present study, with minor adjustments, and a qualitative perspective may portray remarkable results and useful suggestions for the field of counseling.

Implications for Counseling

Decision making may be considered a variable factor for adolescents. Because adolescence is a time of significant change and development, decision making abilities may not be stable. Perhaps constant focus on choices and decisions would be beneficial for all students, particularly those identified as at-risk.

Group work in this area is a positive intervention for at-risk youth. Counselors may consider using group work with students as a way to promote support and connectedness. Students respond well to group atmospheres. An increase use of groups in an academic setting may help students to effectively learn how to manipulate change in their lives. Counselors may use group interventions as a means of teaching students various skills. Every interaction with students in a school setting can be viewed as a teachable moment. Group work is not excluded from this notion. Counselors may use the benefits of group work, in collaboration with teaching life skills to promote the welfare of students.

Conclusion

Group work is an effective means of working with various human demographics, especially adolescents. The focus of group work need be related to individual needs as well as the needs of the counseling group as a whole. By taking a broader, more inclusive perspective of

students as complete individuals, rather than limiting interpretations based on behavioral concerns, school counselors may be able to more successfully attack the challenges of at-risk youth.

References

- Akos, P., Goodnough, G.E., & Milsom, A.S. (2004). Preparing school counselors for group work. *The Journal for Specialists in Group Work, 29*(1), 127-136.
- Arnett, J. (1994). Sensation seeking: A new conceptualization and a new scale. *Personality and Individual Differences, 16*, 289-296.
- Barlow, S.H., Burlingame, G.M., & Fuhriman, A. (2000). Therapeutic application of groups: From Pratt's "thought control classes" to modern group psychotherapy. *Group Dynamics, 4*, 115-134.
- Bauer, S.R., Sapp, M., & Johnson, D. (2000). Group counseling strategies for rural at-risk high school students. *The High School Journal, 83*(2), 41-50.
- Becky, D., & Farren, P.M. (1997). Teaching students how to understand and avoid abusive relationships. *The School Counselor, 44*, 303-308.
- Bednar, D.E., & Fisher, T.D. (2003). Peer referencing in adolescent decision making as a function of perceived parenting style. *Adolescence, 38*(152), 607-621.
- Bemak, F., Chung, R., & Sirosky-Sabdo, L.A. (2005). Empowerment groups for academic success: An innovative approach to prevent high school failure for at risk, urban African-American girls. *Professional School Counseling, 8*(5), 377-389.
- Botvin, G.J. (1986). Substance abuse prevention research: Recent developments and future directions. *Journal of School Health, 56*, 369-374.
- Brooks, K.W. (1996). Too much fun for therapy: Therapeutic recreation as an intervention tool with at-risk youth. *A Series of Solutions and Strategies, National Dropout Prevention Center, Number 11*.
- Byrnes, J.P. (1998). *The nature and development of decision making: A self-regulation model*.

Hillsdale, NJ: Erlbaum.

Cognitive development and adolescent decision making. (2005). *Alcohol Research & Health, 28(3), 144-145.*

Crepeau-Hobson, M.F., Filaccio, M., & Gottfried, L. (2005). Violence prevention after Columbine: A survey of high school mental health professionals. *Children & Schools, 27(3), 157-165.*

Crisp, B.R. & Barber, J.G. (1995). The effect of locus of control on the association between risk perception and sexual risk-taking. *Personality and Individual Difference, 19, 841-845.*

DeLucia-Waack, J. (2000). Effective group work in the schools. *Journal for Specialists in Group Work, 25, 131-132.*

Gladding, S.T. (1995). *Group work: A counseling specialty.* (2nd ed.). Columbus, OH: Merrill.

Greshman, F.M. (1997). Social competence and students with behavior disorders: Where we've been, where we are, and where we should go. *Education and Treatment of Children, 20, 233-249.*

Hall, K.R. (2004). *A comparison of traditional group counseling and problem-based learning interventions for 7th grade victims of bullies.* Ann Arbor, MI: ProQuest Information and Learning Company.

Hlongwane, M.M.; & Bason, C.J. (1990). Self-concept enhancement of Black adolescents using transactional, analysis in a group context. *School Psychology International, 11, 99-108.*

Hoag, M.J., & Burlingame, G.M. (1997). Evaluating the effectiveness of child and adolescent group treatment: A meta-analysis review. *Journal of Clinical Child Psychology, 26, 234-246.*

Holmes, G.R.; & Sprenkle, L.T. (1996). Group interventions in schools. *Journal of Child and*

- Adolescent Group Therapy*, 6, 203-223.
- Jacobs, J.E. & Klaczynski, P.A. (Eds.). (2005). *The Development of Judgment and Decision Making in Children and Adolescents*. Mahwah, NJ: Lawrence Erlbaum Associates.
- Kim, J. (2006). The effect of a bullying prevention program on responsibility and victimization of bullied children in Korea. *International Journal of Reality Therapy*, 26(1), 4-8.
- Kim, J.E., Hetherington, E.M., & Reiss, D. (1999). Associations among family relationships, antisocial peers, and adolescents' externalizing behaviors: Gender and family type differences. *Child Development*, 70, 1209-1230.
- LaFountain, R., Garner, N., & Eliason, G. (1996). Solution-focused counseling groups: A key for school counselors. *The School Counselor*, 43, 256-267.
- Lansford, J.E., Criss, M.M., Pettit, G.S., Dodge, K.A., & Bates, J.E. (2003). Friendship quality, peer group affiliation, and peer antisocial behavior as moderators of the link between negative parenting and adolescent externalizing behavior. *Journal of Research on Adolescence*, 13(2), 161-184.
- Lavery, B., Siegel, A.W., Cousins, J.H., & Rubovits, D.S. (1993). Adolescent risk-taking: An analysis of problem behaviors in problem children. *Journal of Experimental Child Psychology*, 55, 277-294.
- Nelson, J.R., Dykman, C., Powell, S., & Petty, D. (1994). The effects of a group counseling intervention on students with behavioral adjustment problems. *Elementary School Guidance & Counseling*, 31(1).
- Petersen, A.C., Compas, B.E., Brooks-Gunn, J., Stemmler, M.E.S., & Grant, K.E. (1993). Depression in adolescence. *American Psychologist*, 48, 155-168.
- Phillips, T.H., & Phillips, P. (1992). Structured groups for high school students: A case study of

- one district's program. *The School Counselor*, 39, 390-393.
- Praport, H. (1993). Reducing high school attrition: Group counseling can help. *The School Counselor*, 40, 309-311.
- Rolinson, M.R. (2002). Factors influencing adolescents' decisions to engage in risk-taking behavior. *Adolescence*, 37(147)
- Rose, S.R. (1998). *Group work with children and adolescents*. Thousand Oaks, CA: Sage.
- Rosen, K.H., & Bezold, A. (2001). Dating violence prevention: A dyadic support group for young women. *Journal of Counseling & Development*, 74, 521-525.
- Rosenthal, H. (1993). Friendship groups: An approach to helping friendless children. *Educational Psychology in Practice*, 9, 112-120.
- Ruffalo, M.C., Sarri, R., & Goodkind, S. (2004). Study of delinquent, diverted, and high risk adolescent girls: Implications for mental health intervention. *Social Work Research*, 28(4), 237-245.
- Shechtman, Z. (1993). School adjustment and small group therapy: An Israeli study. *Journal of Counseling & Development*, 72, 77-81.
- Shechtman, Z. (1994). The effect of group psychotherapy on close same-sex friendships among preadolescent boys and girls. *Sex-Roles: A Research Journal*, 30, 829-834.
- Shechtman, Z. (2002). Child group psychotherapy in the school at the threshold of a new millennium. *Journal of Counseling & Development*, 80, 293-299.
- Shechtman, Z., Bar-El, O., & Hadar, E. (1997). Therapeutic factors and psychoeducational groups for adolescents: A comparison. *The Journal for Specialists in Group Work*, 22, 203-213.
- Shechtman, Z., & Ben-David, M. (1999). Group and individual treatment of childhood

- aggression: A comparison of outcomes and process. *Group Dynamics*, 3(4), 1-12.
- Shechtman, Z., Gilat, I., Fos, L., & Flasher, A. (1996). Brief group therapy with low achieving elementary school children. *Journal of Counseling Psychology*, 43, 376-382.
- Shechtman, Z., & Gluk, O. (2005). An investigation of therapeutic factors in children's groups. *Groups Dynamics: Theory, Research, and Practice*, 9(2), 127-134.
- Srebnik, D., & Elias, M. (1993). An ecological, interpersonal skills approach to drop-out prevention. *American Journal of Orthopsychiatry*, 63(4), 526-535.
- Steese, S., Dollette, M., Phillips, W., Hossfeld, E., Matthews, G., & Taormina, G. (2006). Understanding girls' circle as an intervention on perceived social support, body image, self-efficacy, locus of control, and self-esteem. *Adolescence*, 41(161), 55-74.
- Udry, J.R. (1988). Biological predispositions and social control in adolescent sexual behavior. *American Sociology Review*, 53, 709-722.
- Udry, J.R. (1990). Biosocial models of adolescent problem behaviors. *Social Biology*, 37, 1-10.
- Werner, F. (1989). High risk children in young adulthood: A longitudinal study from birth to 32 years. *American Journal of Orthopsychiatry*, 59(1), 180-193.
- Whiston, S., & Sexton, T. (1998). A review of school counseling outcome research: Implications for practice. *Journal of Counseling & Development*, 76, 412-426.
- Yalom, I.D. (1995). *The Theory and Practice of Group Psychotherapy*. (4th ed.). New York: Basic Books.
- Young, J.W. & Ferguson, L.R. (1979). Developmental changes through adolescence in the spontaneous nomination of reference groups as a function of decision context. *Journal of Youth and Adolescence*, 8, 239-252.
- Zinck, K., & Littrell, J.M. (2001). Action research shows group counseling effective with at-risk

adolescent girls. *Professional School Counseling*, 4(1).

Zuckerman, M., Eysenck, S., & Eysenck, H.I. (1978). Sensation-seeking in England and America: Cross-cultural, age and sex comparisons. *Journal of Consulting and Clinical Psychology*, 46, 139-149.

Appendix A

Screening Script

You have been recommended by your counselor as potentially benefiting from an all girls group. The group will be formed with between 5 and 8 of your peers and will run for 5 consecutive weeks. In addition to the 5 consecutive weekly group meetings, you will be asked to complete both a Pre-Group Questionnaire and a Post-Group Questionnaire to help in my understanding of the group's effectiveness.

The purpose of the group is to promote positive decision making skills through group interaction. If you decide to participate, you and the other group members will be given opportunities to discuss how life events affect academic performance, your coping skills and your decision making process. The goal is to promote and enhance your ability to make active decisions with a clear objective instead of reactions that may hinder your academic success.

As I have already stated, if you choose to participate, you will be interacting with a group of your peers. Confidentiality is crucial to your success, the success of the group and everyone's sense of safety. I want to promote an active and open environment where everyone feels safe and the group can be trusted. Without a clear understanding of confidentiality the group will be ineffective.

The group meetings will be held during Advisement and will roll over into the beginning of the 2nd block. Any missed work will be your responsibility to make up.

You are under no obligation to participate. There is no consequence for your declining to participate in the group. Also, if you begin the group and decide to no longer participate, you may resign from the group without penalty.

Would you be willing to participate in this group?

Appendix B

Student Informed Consent

To: Student

This form describes a research study being conducted with High School girls. The purpose of the research is to learn about the stresses or problems that adolescent girls face and provide an opportunity for you to learn decision making skills socially through a group experience to enhance academic performance. You have been selected by your counselor as potentially benefiting from and all girls group. The person conducting the research is a Counselor Education Graduate Student at SUNY College at Brockport completing an internship at Spencerport High School. If you agree to participate in this study, you will be participating in 5, 40 minute group meetings with your peers during advisement and the beginning of second block, and asked to complete two questionnaires about your concerns and goals regarding feelings and behaviors, family, friends, and school. You will be responsible for missed assignments, but shall not miss more than 20 minutes of the instructional period for your class. You will also be asked to complete the first questionnaire prior to the beginning of the group, and the second after termination of the group.

A possible risk of being in this study is the potential for emotionally difficult conversation to arise during the group meetings. If group discussions elicit strong feelings for you, you will have the opportunity to discuss these feelings with the group, or if you would prefer, talk individually with a counselor. You are under no obligation to discuss anything that you would not feel comfortable discussing. If at any time you will to terminate your participation in the group, you may do so without penalty.

A possible benefit from participating in this group could be that you may learn and strengthen skills relating to decision making. You may develop new or enhance existing coping strategies, and make interpersonal connections, strengthening peer relations and social support.

Any information that you give in this study remains confidential and will be known only to the project staff. The only exception that there could ever be to this is that if in talking to you, the researcher 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, the researcher may have to contact your parents and possibly another professional. We would always talk to you about this first. Except for this consent form, all questionnaires/interviews will be given a code 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.

If you have any questions during this study you may call Jennifer Daka, Graduate Intern at 349-5245, or Heidi Morgan, Spencerport High School Counselor at 349-5212.

Your participation in this study is completely voluntary. You are free to change your mind or stop being in the study at any time without penalty.

You are being asked whether or not you want to participate in this study. 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 study. 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 participant	Date
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Birthdate of participant

Signature of a witness 18 years of age or older	Date
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If you have any questions you may contact:

Primary researcher	Faculty Advisor	Group Co-Leader
Jennifer Daka	Dr. Tom Hernandez	Heidi Morgan
School Counselor Intern 349-5245	Counselor Education SUNY Brockport 395-5498	High School Counselor 349-5212

Appendix C

Parent Informed Consent

To: Parents/Guardians:

This form describes a research study being conducted with High School girls. The purpose of the research is to learn about the stresses or problems that adolescent girls face and provide an opportunity for the girls to learn decision making skills socially through a group experience to enhance academic performance. Students have been selected by their corresponding school counselor as having potential to benefit from an all girls group. The person conducting the research is a Counselor Education Graduate Student at SUNY College at Brockport completing an internship at Spencerport High School. You are being asked to give permission for your daughter to participate in this research. If you agree to allow your daughter to participate in this study, she will be participating in 5, 40 minute group meetings with her peers during advisement and the beginning of 2nd block, and asked to complete two questionnaires about her concerns and goals regarding feelings and behaviors, family, friends, and school. She will be responsible for missed assignments, but shall not miss more than 20 minutes of the instructional period for her class. She will also be asked to complete the first questionnaire prior to the beginning of the group, and the second after termination of the group.

A possible risk of being in this study is the potential for emotionally difficult conversation to arise during the group meetings. If group discussions elicit strong feelings for your daughter, she will have the opportunity to discuss these feelings with the group, or if she would prefer, talk individually with a counselor. She is under no obligation to discuss anything that she would not feel comfortable discussing. If at any time your daughter would like to terminate her participation, she may do so without penalty.

A possible benefit from participating in this group could be that your daughter may learn and strengthen skills relating to decision making. She may develop new or enhance coping strategies, and make interpersonal connections, strengthening peer relations and social support.

Any information that your child gives in this study remains confidential and will be known only to the project staff. The only exception that there could ever be to this is that if in talking to your child, the researcher finds that there is something happening in her life that is an immediate and serious danger to her health or physical safety. In that case, the researcher may have to contact you as parents and possibly another professional. We would always talk to your child about this first. Except for this consent form, all questionnaires/interviews will be given a code and your names 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 your child cannot be identified.

If you have any questions during this study you may call Jennifer Daka, Graduate Intern at 349-5245, or Heidi Morgan, Spencerport High School Counselor at 349-5212.

Your child's participation in this study is completely voluntary. You and your child are free to change your mind or stop being in the study at any time without penalty.

You are being asked whether or not you want to have your child participate in this study. 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 study. Your child can refuse to participate even if you as parent/guardian give permission for your child to participate.

I understand the information provided in this form, agree to participate in this project and to have my child _____ participate.

If you have any questions you may contact:

Primary researcher	Faculty Advisor	Group Co-Leader
Jennifer Daka	Dr. Tom Hernandez	Heidi Morgan
School Counselor Intern 349-5245	Counselor Education SUNY Brockport 395-5498	High School Counselor 349-5212

Signature of parent/guardian	Date
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How would you rate your decision making skills?

1

2

3

4

5

very poor

very good

What is one goal you hope to gain in participating in the group? (You may use the examples below, or write your own.)

- Learn effective ways to calm myself during anxiety provoking situations.
- State my needs directly.
- Learn ways to talk instead of argue with my parents.

Appendix E

Post-Group Questionnaire

From the two problems you listed on the Pre-Group Questionnaire, how much does Problem #1 bother you currently?

1	2	3	4	5
very little				very much

From the two problems you listed on the Pre-Group Questionnaire, how much does Problem #2 bother you currently?

1	2	3	4	5
very little				very much

You listed a goal on the Pre-Group Questionnaire. How close are you to achieving your goal?

1	2	3	4	5
no progress				I achieved my goal

Did you find the group meetings helpful?

1	2	3	4	5
no, not at all				yes, very much

Did you find the group feedback to be helpful?

1	2	3	4	5
no, not at all				yes, very much

Did you think the counselors' feedback was helpful?

1	2	3	4	5
no, not at all				yes, very much

Could you trust group members to keep the group discussion confidential?

1	2	3	4	5
no, not at all				yes, very much

