The Efficacy Of Group Counseling Interventions Employing Short- Term Rational Emotive Behavior Therapy In Altering The Beliefs, Attitudes, And Behaviors Of At-Risk Adolescents

CHAPTER ONE

Introduction

The increasing numbers of at-risk students in the schools are creating new challenges for education at the end of this decade. These students generally have failed to achieve academically. They have failed to obey the rules of the school. They may be involved in crime, alcohol, or drugs. They fail in their attempt to continue in school for many reasons. These students need assistance in getting their lives in order to face the daily rigors of attending a modern secondary school. Who are at-risk adolescents? What approaches should professional school counselors take in working with this difficult population? Questions such as these need to be posed since this group was first recognized in the 1970's and 1980's. Who leaves school and why are the critical questions for contemporary school counselors and all educators. It is crucial for counselors to determine what interventions and approaches will be the most effective in helping at-risk students continue their education. Counselors will be well advised to seek out methods and interventions that will enable adolescents to survive the stress and pressures that are placed upon them so that they can finish their high school education. It is hoped that proactive interventions with this population will help them to develop better interpersonal skills and more constructive ways of thinking so that serious incidents and situations in school could be avoided. Employing best practices in group counseling may also enable them to change some of the dysfunctional behaviors that have caused them problems in their school careers. The use of group counseling with adolescents, in general, has enhanced their resilience by helping them constructively face their daily challenges. By providing at-risk

adolescents with the tools they can use in daily life in school and beyond, the likelihood of their bringing their educational experience to a positive conclusion will be increased. The work in this study is an examination of group counseling interventions which may be useful for this population in helping them understand themselves and their environment better.

Background Of The Problem

Certain problems of some contemporary American youth are consistent with problems experienced by youth in the past. Dryfoos (1990) presents a comprehensive profile of present adolescent problems in the areas of delinquency, drug use, academic failure, and risky sexual behavior. Emotional problems could be added as a fifth category, including such problems as depression (Hart, 1991), suicide (Capuzzi & Gross, 1989), teen pregnancy (Dryfoos, 1990), anxiety, inadequate academic performance, legal problems, substance abuse, and physical/sexual abuse (Reinken,1989). Evidence of the occurrence of all of these problems has been summarized by a number of sources (Lerner, 1995; Rice & Myer, 1994; Lewinsohn, et al., 1990). Nicholson, Stephens, Elder, and Leavitt (1985) emphasize that many youth under the age of 18 experience emotional problems serious enough to justify special treatment. Other concerns plague educators and demand the attention of school boards and communities nationwide. The issue of school dropouts has been particularly problematic (Hahn, 1987).

Capuzzi and Gross (1989) suggest that the term at-risk describes a set of behaviors that place a person in danger of a future negative event. At-risk students are viewed as more likely to drop out of high school and to terminate their education abruptly. Gottfredson (1994) says individuals with many problems and those with few problems experience similar developmental changes over the life span. While the frequency and magnitude of these problems differ, both high- and low-risk groups peak in deviant behavior during late adolescence and early adulthood. Therefore, counselors should

employ proactive efforts to help these students succeed during the adolescent years (Manning & Baruth, 1995).

Counseling interventions, as well as many other programs, may be useful when problem behavior peaks during adolescence. Effective prevention and intervention efforts should be strategically targeted throughout this period of adolescent development especially in alternative programs which seek to help students stay in school. Group counseling has been employed with students in this age range with varying degrees of success (Brenner, 1984).

Young people have always had stress in their lives, but the number of students who are experiencing this stress with few or no coping skills seems to be escalating at an alarming rate (Brenner, 1984). These students are certainly at risk -- at risk regarding failure in school, at risk for turmoil in the home, and at risk for trouble in the community. Because of the rapid expansion of knowledge and technological change, coupled with change in attitudes and behaviors, today's young people face greater pressures. Nowhere are those pressures more evident than in the students who attend an alternative high school. These students in these settings have already experienced sanctions and failure in their regular high school, have been disappointing to parents, and may have been in trouble with the courts. The aim of the alternative high school is to provide a proactive approach to helping students achieve and provide them with a second chance to continue their education toward completion.

Elkind (1981) posits that children today are in a hurry to grow up too fast too soon. Pressure to achieve early in their lives often leaves them under considerable stress without the coping skills necessary to adapt to our changing world. Adolescents are becoming involved earlier in adult behaviors. These children are growing up without a childhood (Winn, 1983). They are no longer considered to be in the childhood stage. With all of this pressure to grow up faster, adolescents are involved in delinquency, pregnancy, drug

abuse, and school failure. Many of these young people are destined to drop out of today's schools with only limited potential for developing an appropriate set of skills and behaviors and becoming productive adults (Dryfoos, 1990).

Contemporary counselors need to employ interventions which are effective and designed to help students acquire the knowledge, attitudes, and skills for functioning more effectively in the school community, at home, and in society. Group counseling with at-risk adolescents can be viewed as one of the interventions that will enable these students to deal with problems that have already surfaced in their lives (Corey & Corey,1992). Wigtil and Wigtil (1991) point out that when effective group counseling with problem students is employed in the schools, the participants are better able to deal with some of their dysfunctional thinking and behaviors before these factors become disciplinary problems for them.

This study seeks to discover if there is a significant difference between two group counseling interventions from Rational Emotive Behavior Therapy and which is best suited for high school students. It will also determine if there are any significant differences between the genders in regard to which group intervention to employ. These students have already met with failure in their home schools and are required to attend an alternative school program. The study will examine the significant difference between the interventions in helping these students to discard their dysfunctional thinking, replace this with a more effective cognitive approach to their problems, and move forward toward completing their education in a timely fashion. This will enable them to enjoy a happier and more satisfying school life. Numerous schools of counseling are employed in the schools today and operate with various degrees of success (Corey & Corey, 1992). One of the approaches employed with young people is the cognitive-behavioral approach to counseling (Mahoney & Arnkoff, 1978) . A pivotal assumption of this theory is that perception and appraisal of events in the environment influences the psychological adjustment of the

individual . This approach also assumes that principles of learning can be applied to help clients develop a more effective manner of coping with life. The cognitive-behavioral model emphasizes the complex and continuous causal interaction between individuals and their environment (Bandura, 1977; Thoreson & Mahoney, 1974).

This study will employ the techniques, theories, and rationale of Rational Emotive Behavior Therapy, a short-term cognitive-behavioral approach to the problems imposed by modern life (Ellis, 1994). The comparison of two REBT interventions in group counseling to address the needs of at-risk adolescent students in an alternative high school is the focus of this study. The work will examine if there is a significant difference in the approaches employed in group counseling to more effectively help these students to more approach their problems at school and in life. It will also help them develop strategies to apply the principles of REBT to their behavior.

Statement Of The Problem

Research has shown that the use of Rational Emotive Behavior Therapy techniques with school age populations has been effective in reducing anxiety, increasing frustration tolerance, improving academic performance, reducing depression, improving self-concept and coping capabilities, and increasing rational thinking skills (Bernard & Joyce, 1984) . Therefore, it was hypothesized that at-risk adolescents who participate in 10 weekly, 50-minute group counseling sessions employing the therapeutic board game, Let's Get Rational (Wilde 1990) as a supplement and reinforcement to REBT group techniques would show a significant positive improvement in their rational thinking skills, develop a more positive attitude toward school, and decrease selected dysfunctional behaviors than in counseling groups that employ a more traditional REBT group counseling approach alone. The board game imparted to clients all of the basic ideas of REBT in a format that was enjoyable and non-threatening. The study examined the effects of short-term REBT group

counseling alone and short-term REBT counseling using the board game with two groups of students. One of the game's most attractive features is that it allowed participants to practice some of the new behaviors learned in the sessions and to develop new ways of thinking which may alleviate the stress and anxiety of dealing with school challenges.

Group counseling typically has the effect of enabling clients to deal with problematic dilemmas which impede their happiness and success in life and in their educational careers (Corey & Corey, 1992). Two methods of REBT (Ellis, 1957) group counseling with at-risk adolescents (Bernard & Joyce, 1984; Vernon, 1989; Wilde, 1992) were examined.

This study was conducted at the Washington County Evening High School in Hagerstown, Maryland during the period of March, April, May, and June, 1998. The students in the school had experienced academic failure and had been sanctioned for attendance and/or behavioral problems in their regular high schools and were currently attending this alternative evening high school to complete their secondary education. All of the participants in this study were volunteers who also had their parents' permission for their participation. Parents were completely informed verbally and in writing about REBT, the nature of this study, confidentiality issues, the risks, and the benefits of this for their sons and daughters.

Purpose Of The Study

The present study sought to answer some questions about the efficacy of group counseling interventions with at-risk adolescents in an alternative high school setting using the tenets of the Rational Emotive Behavior Therapy developed by Albert Ellis (1955). Since counselors in the schools prefer to utilize interventions that yield maximum results in the shortest possible time, the study was an examination of two of these REBT approaches. These were employed in working with students who already had displayed problems serious enough to warrant their attending this alternative high school program. The purpose

of this study was to determine the efficacy of two REBT group counseling interventions employing REBT interventions alone and one using a counseling board game to orient students to the foundations of REBT and reinforce those concepts of this cognitive-behavioral approach to group counseling. It was hoped that the work in this study would point the way to students coping more effectively with the problems they encounter in school, in their families, and in the community. The aim was to see if there was a significant difference between the two REBT interventions employed in the groups in rational thinking, attitude to school, social competence, and anti-social behavior. It also examined whether there was significant differences between the genders in regard to the group work and whether there was any significant interaction between the treatment groups and their gender.

Research Questions

This study sought to answer several questions concerning the use of REBT interventions with at-risk adolescents in a group setting. The thrust of the work examined the differences between REBT group counseling approaches alone and those employing the counseling board game, Let's Get Rational (Wilde, 1990) as reinforcement. There was also a control group in the
study with no treatment.

The questions in this study were:

Research Question 1:

Are there significant differences between the mean scores on the four dependent variables [rational thinking, attitude to school, social competence, and anti-social behavior] on the post-study assessments due to the treatment [REBT group interventions alone, a group employing REBT interventions reinforced by the therapeutic board game, Let's Get Rational, and a control group receiving no treatment at all] ?

Research Question 2:

Are there significant differences between the mean scores of the participants on the four dependent variables [rational thinking, attitude to school, social competence, and anti-social behavior] on the post-study assessment due to gender [REBT group interventions alone, a group employing REBT interventions reinforced by the therapeutic board game, Let's Get Rational, and a group receiving no treatment at all]?

Research Question 3:

Is there a significant interaction between treatment [REBT interventions] and gender in this study.

Significance Of The Study

School counselors have at their disposal many theories and techniques for use with adolescents in problem-solving and personal development. Particularly challenging are the problems surrounding the at-risk population in the school. The students in this study were for one reason or another had been removed from their regular school and were attending an alternative evening high school. The need to discover and develop the most effective way to assist this population in addressing many of the problems was the focus of this study. It was hoped that the findings of this study would point to some effective cognitive intervention for at-risk adolescents. Finding an intervention which helps these students to more adequately cope with the myriad of dilemmas that confront them was the foundation of this study.

This study was important in that it employed REBT techniques alone in a group counseling format or used a therapeutic board game with REBT techniques as reinforcement of the concepts for the first time with an at-risk population of adolescents to discover if there were significant differences in these approaches in helping them minimize their disturbances, helping them to think rationally, develop a positive attitude toward their schooling, and altered certain dysfunctional behaviors of these students.

This study investigated the comparative efficacy of using an REBT board game as a reinforcement of concepts and tenets or more traditional REBT group counseling in helping the students to reduce the self-defeating and dysfunctional beliefs thereby enabling them to move toward greater potential for growth and development. The aim of this work was to assist students utilizing rationally grounded hypotheses about themselves, others, and the world about them (Dryden, 1995). It was intended to assist them in sensing that nothing in this world is awful or terrible, horrible, or all-encompassing (Ellis, 1977). The work in this study was to enable the participants to become more tolerant of all humans, including themselves and others. It was supposed to enhance their ability to accept others as they are and never to completely condemn others for their acts, a real tendency on the part of this population.

Assumptions

Several assumptions contributed to the foundation of this study. First, it was assumed that adolescents benefit from having a forum in which to openly explore a range of their developmental and other personal concerns. Group counseling increases the probability that adolescents will learn how to cope with the increasing freedom and responsibilities that are part of this developmental milestone, as stated by Jacobs, Harville, and Masson (1994). Group counseling offers the opportunity for young people to share common problems and to find ways of making better decisions about their lives.

The comparative effectiveness of two REBT group counseling interventions in yielding the greatest success with at-risk adolescents was the central theme of this study. One of the approaches employed with young people is the cognitive-behavioral approach to counseling and psychotherapy (Wilson, 1978). A pivotal assumption of these theories is that perception and appraisal of events in the environment influences the psychological adjustment of the individual . This approach also assumes that principles of learning can be applied to impart a more effective manner of coping with life. The cognitive-behavioral

model emphasizes the complex and continuous causal interaction between individuals and their environment (Bandura, 1977) (Thoreson & Mahoney, 1974).

Feelings and behaviors depend upon the content of the individual's thoughts (Dryden, 1987). Therefore, counseling with clients in this manner of helping is directed toward cognitive modifications that will redirect and remake the thought pattern to develop an altered view of the universe. REBT (Ellis, 1957, 1977, 1994) is one of several cognitive-behavioral approaches for working with individuals that seek to identify and correct faulty thinking which, in turn, enabled the individual to move forward with a more useful outlook on life and empowered the person to make more useful and functional decisions.

The underlying assumption of Rational Emotive Behavior Therapy with children and adolescents is that they are disturbed by the views and beliefs they have toward the events in their lives and not by their events themselves (Ellis & Grieger, 1977) (Grieger & Boyd, 1980). We feel how we think. If a large number of young people endured an obnoxious or disturbing event, such as failing a subject in school, they would all experience that event differently. If events caused how we feel toward the world about us, we would all have very similar reactions to events in our lives. Since there is a wide range of emotional responses to things such as failing, the reactions of the young people must be caused by something else (Ellis, 1994). That something else consists of the attitudes, beliefs, standards, thoughts, and interpretations that people have about an event. Therefore, in order to create positive emotions and reactions to the difficult events of this world, it is essential to examine the beliefs and thoughts of these adolescents so that we may dispute those that lead to dysfunctional attitudes and reinforce those that lead to long-range happiness and responsibility for our actions.

The irrational beliefs that may be encountered in adolescents were identified by Waters (1981) and were a central focus of this study. These included:

1. It would be awful if peers didn't like me. It would be horrible to be a social loser.

2. I should not make mistakes, especially social mistakes.

3. It's my parents' fault that I am so miserable.

4. I can't help it, that's just the way I am, and I guess I'll always be that way.

5. The world should be fair and just.

6. It is awful when things do not go my way.

7. It is better to avoid challenges than to risk failure.

8. I must conform to my peers.

9. I cannot stand being criticized.

10. Others should always be responsible.

Many of the problems which adolescents experience can be related to these irrational beliefs. The use of REBT counseling with adolescents is to educate them about the nature of their beliefs and to apply disputational strategies which empowers them to eliminate their irrationalities, lessen their emotional distress, and overcome personal difficulties. With this, the students are more likely to have a set of coping mechanisms enabling them to function successfully in school.

At the beginning of this study, several other assumptions were made. First, students in the study were assumed to be of normal intelligence. No extreme groups [e.g special education students or gifted students] were employed in this study. Students in the study were identified as at-risk for terminating their secondary education prematurely. No students who were receiving special education services were employed in the completion of this research. Including these students would introduce the difficulty that these clients may have in understanding the concepts to be explored in this study.

It was assumed that the cohorts and the groups were evenly matched at the beginning of the study. Statistical analysis of the pre-study assessment showed that the

cohorts were similar with the exception of the differences in gender on the four variables. Descriptive statistics were employed to ascertain the similarity of the members of the groups.

It was also assumed that the participants would all be present for each of the group sessions in the course of the study. Consequently, only students who had excellent attendance at the school, defined as not having more than three absences in the previous semester, were considered for the original pool of candidates. It assumed that these adolescents could gain skills from the activities in each of the group sessions. Activities in the sessions were specifically designed to impart rational behaviors and thinking to adolescents. Age appropriate and school appropriate examples and situations were employed in the group sessions. The students were assumed to be volunteers in this study. Only volunteer group members who have permission of their parents to complete the project were considered for participation.

It was further assumed that meaningful baseline data were obtained by the first administration of the measurement instruments [Idea Inventory, Majoribanks Attitude-To-School Inventory, and The School Social Behavior Scales] before the group sessions began for the study. These data established what these students were like before the application of the treatment to the members of the groups. The experimental design of this study was rigorous, and because of that control it yielded meaningful comparisons in a controlled environment through random selection, assignment, and random assignment of techniques. Students whose attendance was good at the school and who had volunteered for this project were chosen for the original pool of 50 students. The members of each cohort and group were randomly selected and assigned from this pool of volunteers. The method of intervention used for each cohort in the study was also assigned randomly, either REBT group counseling only and REBT group counseling employing Let's Get Rational. It was critical for all of the cohorts to be chosen in the same way and that the

groups of participants be as alike as possible for the study.

Group sessions in each cohort [one group for males and one group for females] were conducted in substantially the same manner. Adherence to a set plan of topics was pursued in the REBT group and the group employing the REBT game as a reinforcement. The REBT alone group was exposed to group exercises for part of the time in the session with the remainder of the time allowed for group counseling and discussion. The game group was assumed to cover the same sets of exercises and topics as the other experimental group with respect to REBT, but would reinforce this work with playing the game for the time remaining in the group session. The use of the game occurred at the end of each group session to take some of the ideas and concepts learned in the group and reinforce them in light of interpersonal interaction.

This study employed faculty and administrative observers to complete two of the measures which make up the pre- and post-study assessments. These raters are familiar with each student in the study and either have the subject in class or are aware of them in the school. These raters were oriented to the process of completing the questionnaires and the expectations of the study. They did not know which students were in the REBT alone group and which were in the REBT group including the game. No indication of who was in which group was given to the raters. The observers did not evaluate the subjects on the side of favorableness or leniency but carefully considered the behaviors they have observed in their classroom settings and in the school at large. Also, it was assumed that these staff observers would not rate the subjects in the study on the side of severity or unfavorable impressions. Subjects were rated on a balanced view of the behaviors of the students by these professionals. These raters were oriented to the process of completing the questionnaires and the expectations of the study. This was held on March 12, 1998. Teachers and administrators were instructed in the use of the School Social Behavior Scales and what will be expected from them in the study. Questions were answered about any

aspect of the evaluation that was unclear. This limited any observer unfamiliarity or uncertainty with what is being expected of them.

Every effort was made to mask for the participants which of the three cohorts are the experimental cohorts. No indication of how the groups were progressing was given to the subjects at all. This reduced or eliminated the effect of having the subjects act or feel differently because they were in one cohort or another. It reduced the novelty of the groups as well as the appearance that the subjects were involved in an experiment. The subjects were not informed of their progress and were not informed of the pre-study assessment results. The subjects were made to feel that they were not "favored" or singled out for being in a specific cohort. Only two measurements were administered to the participants, a pre-study assessment and a post-study assessment.

The researcher did not shape the data by letting participants know what was expected in the study. Rigorous attention was applied to how the researcher and the group leaders interacted with the subjects to leave their own impressions and expectations in a neutral mode. All of these factors can have an effect upon the results of the study and therefore had to be rigorously controlled. Every effort was made not to allow the experimental groups to know which group they were in. This eliminated the effect of one group working harder than the other.

Instruments employed in this study were designed to measure the variables in this study. The instruments employed were not the only ones in the field that might have been used; however, they have been employed in other studies and are age-appropriate for the measurement of the thinking, attitudes, and behaviors of these subjects.

REBT With School-Aged Populations

REBT has been successful with adults and with school-aged students. Many students in the school setting have achieved progress with the benefits of this intervention. It was the foundation of this study that at-risk adolescents can benefit from the activities

and the concepts learned in an REBT group. One of the chief reasons that REBT works well in school is that its main aim is educational and focuses on teaching young people a model for helping themselves resolve their own problems (Ellis, 1977).

Protinsky (1976) takes issue with many of the medical model psychotherapies because REBT postulates that every person is responsible for their own thoughts, attitudes, and behavior. They have the ability to control their thoughts and, consequently, their emotions and behavior. REBT counseling is an educative process in which the client takes a very active part in self-change. Wagner (1966) and Bernard and Joyce (1984) pointed out that there are several advantages to using REBT with children and adolescents. First, REBT work is easier to learn and apply. With just minimal training, the average school counselor, can use its tenets as the theory basis of counseling with the school-aged populations. Second, some school problems of young people are urgent and require an immediate intervention. REBT employs many techniques associated with brief counseling. It permits immediate intervention and a direct attack on the present problem. Third, REBT teaches youth to live in their environment. It teaches these students to accept the fallibility of all people while realizing that they must make the best of an imperfect world. Fourth, REBT is a straightforward approach to the problems posed by modern life. Its basic principles are easy for clients of most ages and intellects to understand, apply, and adapt. Another advantage of REBT in working with young people is that children have lived in their environment less time than their parents and are usually less indoctrinated to dysfunctional thinking than adults. Therefore, they make excellent receptive clients for REBT because they lack many of the preconceived notions about living that adults embrace. Sixth, REBT permits greater and more effective use of a school counselor's limited time because this form of counseling is of shorter duration. Last, REBT makes no forays into the unconscious. It directly attacks and disputes irrational and anti-social behavior, and it discourages preoccupation with the past, thus encouraging clients to

responsibly face emotional and behavioral problems in the present. Additionally, Brown (1977) states that REBT lends itself to the school setting in several other useful ways. Workshops and professional training have been used to introduce and apply its principles to the work of school administrators, counselors, and teachers.

Ellis (1975) states that one of the chief reasons that REBT works well in school is that its main aim is educational and focuses on teaching young people a model for helping themselves resolve their own problems. The techniques used in REBT resemble work that is educational in nature, including guided discovery, didactic presentation, homework assignments, assertion training, behavioral rehearsal, and other activities and exercises that are appropriate to the education process. It is not external events which cause behavioral problems and emotional disturbance, but an individual's perceptions and evaluations about these events that cause the damage to people's lives (Weinrach, 1995).

Finally, the purposes for using REBT with these subjects can be described in terms of the benefits sought from the group counseling (Waters, 1982). The purpose of this counseling was to identify emotions, develop an emotional vocabulary, and distinguish between helpful and hurtful feelings. The work was aimed at differentiating between feelings and thoughts. It encouraged young people to tune into their own self-talk, and to make a connection between that self-talk and their feelings. It was also important to help these young people learn a set of rational coping statements. The study sought to accomplish these therapeutic goals by teaching the basic philosophy of REBT through two methods, disputing the awfulizing, shoulds, oughts, and musts of these young people. It challenged low frustration tolerance and taught self-acceptance. Overall, the thrust of the study was to correct misperceptions of reality that may cause emotional problems that lead to school difficulties.

Theoretical Framework Of The Study

The framework of the group counseling sessions and the techniques used here was

based on sound REBT counseling tenets. This formed the theoretical framework for working with the participants. REBT was developed from the theoretical belief that emotional disturbance is the result of illogical and irrational patterns of thinking (Ellis, 1962). Such ideas date back to the first century B.C. when the ancient stoic philosophers wrote that people are not disturbed by things but by the views they take of them (Ellis & Harper, 1975). It is not external events that cause emotional disturbance, but an individual's perceptions and evaluations about these events that cause the damage to people's lives. The group activities in this study (Bernard & Joyce,1984) (Vernon, 1989) centered upon a series of REBT group counseling approaches that were used exclusively in one segment of the sample. The REBT board game (Wilde's, 1990), Let's Get Rational, was employed with the other segment of the sample to compare and contrast the effectiveness of one approach over the other. At-risk adolescents are an extremely important segment of the school population which needs the attention of professionals in education today and would benefit from group counseling.

Adolescents have the ability to grow in self-acceptance and self-respect. They have the ability to be more tolerant of others, to respect the diversity of others, and to truly care about the welfare of their friends and associates. Adolescents can also learn to be sensitive to the needs of others. Adolescents can learn through group work to develop a set of positive values and examine their interactions with others within the school community and their philosophy of life. Group counseling can enable students to better cope with the struggles of life and teach them how to make decisions and accept the consequences of their life choices. This can be said for whatever the theoretical underpinning of group work a counselor might use, but is particularly relevant to groups guided by cognitive-behavioral principles (Bernard & Joyce, 1984). Bandura (1977); Thoresen and Mahoney (1974) emphasize that an underlying assumption of cognitive behavioral therapy is that of interactionism and reciprocal determinism, which emphasize the complex and continuous

causal interaction between individuals and their environment. Unlike those who advocate basic psychoanalytic and classic behaviorist views, Ellis (1977) postulates that the cognitive perspective puts individuals at the center of their universe and attributes to them a large amount of the responsibility for creating their own emotional disturbances and for determining their own destiny.

One of the primary tenets of REBT is that thoughts, feelings, and behaviors interact and significantly affect one another. Ellis (1979) states that thinking affects, and in some ways creates, individuals' feelings and behaviors. Their emotions have a very important impact on their thoughts and actions. Their actions distinctly influence their thoughts and feelings. If one of these processes is somehow altered, the other processes are influenced as well. REBT techniques and group counseling approaches have a significant impact on how at-risk adolescents think, their often distorted view of life, their disdain for organized learning and school, and their problematic behaviors which contribute to dysfunctional school performance. These attitudes and behaviors lead to the inability of the student to cope effectively with the school environment and with individuals in that environment. In view of this, this study sought to examine the effectiveness of two interventions in REBT group counseling will affect these students' thinking, their attitude toward school, and the behaviors that have led to their being placed in alternative education.

Beliefs are said to be rational if they (a) are true; (b) can be supported by evidence or proof; (c) are logical; (d) are not absolute commands; (e) are desires, wishes, hopes, and preferences; (f) produce moderate emotions such as sadness, irritation, and concern; and (g) help clients reach their goals (Walen, DiGiuseppe, & Wessler, 1980). Therefore, the pursuit of rational thinking is the lifeblood of REBT and guides the counselor in seeking answers to a client's problems. The goals of REBT practitioners are to make clients increasingly aware of their self-talk and internal dialogue so they will be able to think more rationally, clearly, and logically. Counselors also try to teach clients to evaluate the content

of their beliefs in hopes of allowing clients to experience fewer disturbed emotions. Finally, REBT practitioners attempt to help clients gain skills using rational emotive principles so they will act in a more appropriate manner and be better able to achieve their goals in life (Wilde, 1992).

Ellis (1977) postulated a series of irrational beliefs thought to be at the core of a majority of human problems. These beliefs also contribute to the at-risk adolescent view of their lives and was at the center of this study. Some adolescents believe that one must have the absolute approval at all times of those whom they find significant in their lives. They believe that they must be thoroughly adequate, never make mistakes, and always achieve at high levels if they are to be any good in anyone's view. At-risk adolescents rarely see that they can achieve anything in school at a high level. At-risk adolescents also repeatedly condemn others for various conditions and situations in their lives. Adolescents often have the notion that people who harm them or may not conform to their way of thinking are generally bad individuals and must be punished for their misdeeds. REBT teaches that people are not bad in and of themselves, but they may at times act badly. It would be useful for adolescents to become aware that people, including themselves, have the right to act badly occasionally.

One of the most difficult things for adolescents to accept is that life is rarely going to be fair (Ellis & Grieger, 1977). Because life is not fair, they view disagreement and inconvenience as catastrophic. This exacerbates the tension and anxiety with which they view many of their daily frustrations. The idea that problems they experience are engendered from external sources causes adolescents much emotional dissonance (Bernard & Joyce, 1984). Adolescents are talented at placing the blame for all of their difficulties at the doorstep of others.

Some adolescents view things that seem threatening and frightening as things with which they should be totally preoccupied with, to the exclusion of everything else. In these

cases nothing else in their lives has meaning because they view these things as more than 100% bad (Grieger & Boyd, 1980). Many adolescents have the tendency to avoid coming to grips with many of the difficulties they encounter. They avoid facing their responsibilities rather than adopting the more efficacious path of self-discipline when they are confronted with the challenges of modern life (Wilde, 1990).

Adolescents seem to prefer the notion that what has happened to them in the past is all-important and governs much of what occurs in their lives today. They tend to seek the root of their problems in the past and not to work toward solving their problems in the present (Ellis, 1994). Additionally, teens have a tendency to believe that people and things in their lives should turn out better than they really do, and it is a catastrophe if a solution to a problem is not found. They are impatient when things do not fall into their scheme of things and will react and rebel when the course of events does not follow their wishes (Bernard & Joyce, 1984).

Adolescents generally believe that happiness and many of the desirable things in life can be achieved simply by non-directionally "doing your own thing." At-risk students are rarely focused on an objective or goal. A more useful road to the future for these students is to be comfortably engrossed in some pursuit that they enjoy (Ellis & Bernard, 1985). Also, adolescents believe that there has to be a certain degree of order and function in life in order for life to be meaningful. Many obstacles and confounding factors contribute to the triggering of irrational beliefs in young people which result in inappropriate and dysfunctional emotions and behavior (Bernard & Joyce, 1984).

Ellis & Harper (1975) condense these irrational beliefs into four fundamental irrational core beliefs as practiced by REBT counselors: (1) Demandingess. A demanding philosophy displays language that includes "I should," "I ought to" "I must,", and "I have to". The demanding philosophy holds that you, other people, and other things in life must be a certain way. Emotional problems occur when people take a preference and transform it

into a demand making it a desperate necessity that must be fulfilled if the person is ever to achieve happiness. (2) Awfulizing. The language of awfulizing is rife with words like "awful," "horrible," "terrible," and "catastrophic." People take something that may admittedly be bad and explode it into something catastrophic. In contrast, the preferring philosophy is characterized by language such as "I prefer," "I want," "I'd like," "It would be better." (3) Low Frustration Tolerance. These beliefs are such that people must have what they want when they want it and cannot be denied, delayed, or frustrated in any way. Low frustration tolerance affects people, notably adolescents, who believe that they must never get what they do not want. This implies that they cannot stand unpleasant events. (4) Self-rating. People often believe that they must absolutely do perfectly well because to do less would mean that they may be worthless individuals. This belief implies that human beings can legitimately be judged either for good or bad. It also implies that there is some magical formula somewhere that will measure how good or bad we are. The present study shed some light on the effectiveness of REBT group counseling interventions in helping at-risk adolescents overcome some of these dysfunctional beliefs.

Definition Of Terms

The following are some operational and conceptual definitions of terms employed in this study. They are included here as a means of clarifying aspects of the study, the population, the interventions, the setting, and the characteristics of the participants that may be important to understanding the outcomes of the work in this project.

Alternative High School: An alternative high school, as found in this study, is a separate educational setting in which students who have exhibited dysfunctional behaviors and attitudes in the regular high school program are placed to continue their education. These students are prone to academic failure, significant truancy, and frequent behavior problems that necessitate their separation from their home high school.

At-risk adolescent: At-risk students are students who are more likely to drop out of

school than the general population. This concept includes at-risk factors such as behavior problems, low economic status, pregnancy, poor school attendance, low academic achievement, poor grades, and retention in grade level.

Attitude toward school: This implies that the student will have the ability to accept what is necessary to be successful in school. These interventions should help students to conform to all that school attendance entails. Young people can then be empowered to move more deliberately toward the completion of these tasks willingly and with understanding.

Awfulizing: This core belief phenomena seems to permeate human problems. The language of awfulizing is rife with words like "awful," "horrible," "terrible," and "catastrophic." People take something that may admittedly be less than optimal and inflate it into something catastrophic. Consequently, it adds to the urgency and the pressure of difficult situations in their lives.

Demandingess: This is one of the core beliefs of REBT which seems to be central to many human emotional problems and is just the opposite of the more rational preferring philosophy that REBT promotes. A demanding philosophy displays language that includes "I should," "I ought to," "I must,", and "I have to". The demanding philosophy holds that you, other people, and other things in life must be a certain way as well.

Group counseling: The counseling group centers on a particular problem or set of problems, which may be personal, educational, social, or vocational. It is generally employed in schools, college counseling centers, and community mental health agencies. This type of group work is contrasted with group therapy because it deals with conscious problems and is not centered on major personality changes. It is designed to deal with normal people who have normal problems. These counseling groups are aimed at resolving specific short-term issues. This group process is not intended to treat major psychological and behavioral disorders (Corey & Corey, 1992).

Irrational belief: An unreasonable or absurd thought that is false (Dryden and Yankura, 1995).

Let's Get Rational (Wilde, 1990): This is a board game that was developed to provide an effective therapeutic tool to be used in group counseling. It was designed to be used with adolescents and adults. Four to nine individuals can play the game at one time, and it is recommended that the group leader participate in the game for maximum therapeutic effect. It is based upon the REBT work of Albert Ellis to point out dysfunctional thinking and dispute it.

Low Frustration Tolerance: This core irrational belief is common to small children who demand that things in their life be a certain way and cannot tolerate anything less. These beliefs imply a demanding philosophy in which people must have what they want when they want it and can't be denied, delayed, or frustrated in any way.

Rational belief : A sensible and logical idea that seems to be true (Dryden & Yankura, 1995).

Rational Emotive Behavior Therapy: Rational Emotive Therapy was developed by Albert Ellis in 1955 and has evolved into Rational Emotive Behavior Therapy today. This is a short-term cognitive-behavioral approach to the problems of modern life. It seeks to show clients how their irrational beliefs complicate their lives, how to dispute these beliefs, and how to move on into long-range happiness free of the self-defeating ideas that have plagued them in the past. It employs a number of behavioral, emotive, and evocative techniques to achieve new understandings in life through a relatively directive and didactic approach to therapy and working with a client.

Rational Emotive Group Counseling: Based upon the principles of REBT, Ellis (1973) describes this model of group counseling as strongly leader-centered with a combination of seeking to achieve specific objectives and utilizing the processes of group dynamics. The REBT group leader is directive and brings a structured approach to the

problems raised. One of the primary aims of REBT, the teaching of the ABCs of rational emotive thinking, is achieved by didactic methods with group members learning to tailor their contributions to rational concepts and structures.

Rational thinking: This describes functional cognitive processes that are free of several dysfunctional aspects. Rational thinking should not encompass these elements. Demandingness is a problem which turns healthy preferences in life into necessity thus creating the potential for dysfunctional thinking in humans. Awfulizing proposes that it is possible for things in life to be more than 100% bad or distasteful to humans. Low frustration tolerance describes instances in which human beings believe that there are things in this life that they can't stand. Self-rating equates our being and our essence with what we do in life so that when we fail we look on ourselves as failures who will never get any better and don't even have the capacity to improve ourselves. Rational thinking is true, logical, and can be supported by evidence or proof (Ellis, 1994).

Self-rating: This belief ultimately combines many of the aspects of the other three core irrational beliefs. We often believe that we must absolutely do well and sometimes perfectly well because to do less would mean that we may be a worthless individual who is unworthy of anyone else's consideration. This belief implies that human beings can legitimately judge either good or bad.

Summary Outline Of The Study

The remainder of this study consists of four major chapters. Chapter II encompasses a review of the relevant literature for this study and is delineated into several sections. These include evidence in the literature about the at-risk adolescent population and some of the programs designed to deal with the at-risk population. Group counseling, REBT group counseling, the use of Let's Get Rational, will be surveyed to determine the effectiveness of these interventions in the past. The variables of the study will be examined to ascertain their importance compared to what has been done in the past.

Chapter III consists of a description of the research methodology and the design of the study. A detailed description of participant selection, group assignment, the research plan, instrumentation and scoring, a description of the treatment including REBT group counseling and Let's Get Rational, data collection and analysis was included.

Chapter IV is made up of an exposition of the results of the study. The findings will be reported with respect to furnishing evidence for each research question asked or each hypothesis posed in the problem statement. Chapter V delineates the summary of the study, conclusions reached as a result of the work in the study, and points to appropriate recommendations that would be useful for school counselors in working with at-risk adolescents.

CHAPTER TWO

Review Of The Literature

Definition And Descriptive Characteristics Of At-Risk Adolescents

The term “at risk” designates those students who are in danger of terminating their education. There is no greater educational problem in our nation than improving the educational opportunities and outcomes for students who are placed at risk for educational failure (Willis, 1989). The vast majority of these students are poor and reside in the inner city, rural areas, or on Indian reservations. Many of the students have limited English proficiency. Because of circumstances often beyond their control, the students are likely to experience educational failure, drop out of school, or be involved in activities that are detrimental to their health, safety, and financial well-being. Various family, community, school, and personal factors can contribute to the risk of educational failure. The number may be rising due to increased immigration, poverty, family instability and divorce, teenage pregnancy, and violence. Educators and the public must pay attention to these children's needs, since the country's future is tied to the use of their talents.

Many counselors and educators who concern themselves with the at-risk population in our schools are advocating policies, programs and approaches which will meet the needs of these students in the schools (Hargroves, 1987). This study centered upon just one aspect of the school’s approach to this population. It centered on the use of REBT group counseling as a viable intervention with students whose beliefs, attitudes, and behaviors may contribute to terminating their education before they finish.

Despite the fact that adolescents have always had stress in their lives, the number of at-risk adolescents who experience inordinate pressure with no strategies to deal with this type of stressors seems to be increasing alarmingly (Brenner, 1984). The rapid technological metamorphosis of our way of life in addition to the increased social pressures in our country have had the profound effect of exacerbating the stress and pressure on the

adolescents in today's schools. They are in a hurry to get places, in a hurry to grow up, and in a hurry to get on with their lives. Adolescents are assuming adult roles earlier in their development. These drives have shortened these years of their development drastically. The students studied here are to the point where they would give up in their efforts to succeed in our schools and would relinquish any high probability that they will ultimately evolve into responsible, creative, and productive adults (Coulton & Pandey, 1991; Dryfoos, 1990).

The term "at risk" carries with it some important connotations. Capuzzi and Gross (1989) state that there are some major warning characteristics which indicate that a student may be at-risk for dropping out of school are evident. These students are frequently absent from class in the regular school setting, which may be for various reasons including school phobia, feigned illness or many other factors that remove them from the arena of learning that will contribute to their success in school. These young people have failed at least one grade or have failed a significant number of the subjects in their school programs. They are chronically late to their individual classes and to school itself. These students are experiencing and have experienced in the past academic failure and low performance in basic subjects of reading, writing, and mathematics.

The motivation of these students usually is at a very low level. They continually get low grades in school and seem to take it for granted that they will continue to get this caliber of grades despite what they may try to do. These are the students who are rarely involved in the on-going life of their school community. They rarely take part in extracurricular activities or sports and are almost never to be seen at school events or functions. These students have almost no concept that education may be essential for their later living a happy, healthy, and satisfying life. The at-risk student is generally bored with what goes on in his/her school and makes no pretense at obtaining much useful from the process (Capuzzi & Gross, 1989).

This segment of the school population is usually contemptuous of authority. These are the students who are always in the vice principal's office or suspended from school. They are increasingly the focus of more and more attention since sometimes their presence in the school is more disruptive for the other students in the school. There comes a point where these students, because of their behaviors, have forfeited the right to an education in a regular high school setting.

These students give educators other reasons for worry. They experience difficulties in their language and verbal skills and usually will not become involved heavily in academic tasks if they can avoid it. Their uncooperative nature in regard to order and structure in the school is well known. They usually lag behind their classmates in their progress through their school careers. They are prone to extreme examples of acting out behavior and will be absent from school without permission on a regular basis (Capuzzi & Gross, 1989). Other problems include physical or sexual abuse, chemical dependency, and poverty. The problems of these students are bad enough when the children are young, but they are somewhat compounded when the child reaches adolescence (Winn, 1983) with all of the attendant uncertainty that accompanies it. It is also a time when these students seek competence and achievement in their lives for the first time (Atwater, 1988). The fallout from all of the at-risk behaviors in young people frequently results in terminating their education.

Many of these at-risk students live in single parent households and in low income homes. They tend to be left alone a considerable amount of time because of the necessity of parents to work long hours. The parents of these students may not value education or have dropped out of school themselves. In many cases, the older siblings of these students have also terminated their education. Other concerns that are present are teen pregnancy, speaking limited English, having a health impairment, getting involved in substance abuse, and becoming involved with juvenile crime (Kushman & Hathaway, 1989).

The high school completion rate among 19- to 20- year- olds has remained relatively stable since a marked increase in the early 1980s. The high incidence of dropping out poses a serious problem to the social and economic health of the country and negative consequences for the individual dropout (Asche, 1993). As noted by Carson, Huelskamp, and Woodall (1991), the issue is more than number of dropouts. The point is that the world has changed, and the world's current employment needs do not tolerate dropout rates that have not changed over the last 20 years. First, as the pool of dropouts continues to grow, employment opportunities for them are more limited, because today's economy requires of the labor force increased literacy, more education, enhanced technological skills, and lifelong learning. Second, the rate of engagement in premature sexual activity, early pregnancy, delinquency, crime, violence, alcohol and drug abuse, and suicide has been found to be significantly higher among dropouts. Third, dropouts are more likely than other citizens to draw on welfare and other social programs throughout their lives. Fourth, income differences between dropouts and other citizens can be expected to widen as the economy evolves, pitting Americans with less education against computerized machines and people in low-wage nations (Arndt, 1994). Fifth, growth of unskilled laborers in low-wage jobs will increase the trend toward developing a large American underclass which some analysts argue threatens the continuing existence of a democratic way of life (Asche, 1993). Large numbers of adolescents dropping out of school results in lost productivity, lost taxes, and increased public assistance and crime.

Children and adolescents are expected to mature rapidly. The pressure to achieve and to compete causes considerable stress in at-risk students who have little or any coping skills to enable them to survive and adapt (Elkind, 1981). We have adolescents becoming more involved in more adult behaviors earlier in life than ever before (Manning & Baruth, 1995). Many of these students have not had the luxury of a childhood. With all of this increased pressure adolescents have become involved in all sorts of dysfunctional

behaviors (Magid & McKelvey, 1987). The young people coping with these problems make up a large part of the population that we recognize as at-risk. These students perform well below their potential in school, are alienated from school, drop out of school, fail at jobs and become a drain on society (Kushman & Hathaway, 1988). It is these students who have the highest propensity to terminate their education and will leave the school with unfulfilled potential for taking their places as productive adults in our society.

Interventions Employed By Schools To Help At-Risk Students: The Use Of Group Counseling

The school counselor plays an important part in coordinating and providing services which will enable at-risk students to complete a high school education. Manning and Baruth (1995) point out that the counselor role here is a very specific and is one including several important elements. Counselors need to understand the unique developmental and special needs of the at-risk adolescent and how events in their development may have contributed to their problems. Counselors must be available for individual and group counseling. Also, they must be competent in individual and group counseling strategies that work best with at-risk students and with culturally diverse students. Counselors must have a working knowledge of appropriate assessment instruments for making accurate and objective identification decisions. Counselors must be able to suggest to teachers and other school professionals ways to eliminate or reduce the at-risk condition and provide individual and group counseling to students addressing their at-risk conditions.

The programs described in the following section have been evaluated and found to be successful as measured by reduced dropout rates and increased school completion rates. Counseling, both individual and group, appear to be a vital part of most of the programs mentioned here to provide the necessary support for the students in the programs and to resolve personal and social problems that may arise in the course of their education.

The Adopt-A-Student Program, operating in Atlanta, Georgia since 1983, pairs

business volunteers as mentors with low-achieving high school juniors and seniors in a career-oriented support system. Students are helped to think about future employment, identify occupational interests, and begin taking steps to get a job that matches their interests. Group counseling has been an integral part of the program in providing support for the young people throughout the program. One result of this has been an increase in the graduation rate in contrast to a comparison group of nonparticipants (Orr 1987; Dryfoos 1990).

Project Coffee in Oxford, Massachusetts targets potential dropouts from 16 regional school districts. Components of the program include: comprehensive vocational instruction, integration of academics and occupational training, individual and group counseling, job training, work experience, and a school-business and industry partnership. Outcomes include improved attendance, increased academics, and a lower dropout rate. (Orr, 1987)

Rich's Academy, located in a major, downtown-Atlanta, Georgia department store, is an alternative high school serving former dropouts and near dropouts. The program, in which volunteers play a vital role, is administered by Exodus, Inc., an Atlanta-based nonprofit corporation. Students are placed at random into "family groups" of 20-30 members that meet daily for group counseling and mutual support. Staff members provide supportive counseling and referrals for the "extended day" program which runs until 6:00 p.m. Parents are encouraged to participate, and the staff visit each student's home at least once to share the program objectives with the students and the parents. The completion rate for the participants is 85 percent, with all graduates going on to jobs or post- secondary school. (Orr, 1987)

The Alternative Schools Network in Chicago, Illinois targets neighborhood school dropouts. Community-based alternative schools and youth centers provide a structured program of education, including GED preparation, employment preparation, job training

and counseling in both individual and group settings. The program illustrates an effective way for community-based organizations to target the needs of youth dropouts in their neighborhoods and to work together in raising funds and designing a focused program. A 60 to 70 percent high school or GED completion rate has been reported. (Orr, 1987)

Washington State-Funded Educational Clinics are local centers designed to provide short-term educational intervention services to dropouts aged 13 to 19. In addition to basic academic skills instruction taught in small groups or individually, the clinics provide employment orientation, motivational development, and support services. Sixty-six percent of the students successfully complete the program by obtaining a GED, transferring into another educational program, or obtaining full-time work. (Orr, 1987)

City-As-School (CAS) is an independent alternative high school program which combines academic learning with the world of work for students in New York City. Students learn in specialized, small classes which utilize community resources of a business, civic, cultural, social or political nature. Weekly counseling seminar groups serve as a forum for discussions of guidance, academic and social issues. Evidence of program effectiveness is an increase in the course completion rate of students (Dryfoos, 1990).

The Coca-Cola Valued Youth Program features cross-age tutoring designed to reduce the dropout rates among middle school children who are limited-English-proficient and at risk of leaving school. Commitment is created by involving students and parents with teachers in setting goals, making decisions, monitoring progress, and evaluating outcomes. The support strategy includes coordination, group counseling, and family involvement. (Orr, 1987)

The Lincoln Educational Alternative Program (LEAP) in Wisconsin Rapids, Wisconsin is an alternative educational program nested within a larger, traditional high school. For juniors who are "credit deficient and unlikely to graduate," this two-semester program combines intense academic skill building along with individual and group

counseling work on social as well as academic skills. Classes are small, and there is a conscious effort to build group unity among the students involved. Improved rates of graduation of the participants are reported (Bickel, Bond, & LeMahieu, 1986).

An example of a system wide, multi-component program to reduce the dropout rate operates in School District 60 in Pueblo, Colorado. The schools serve a working-class community where half the students are Hispanic. Early identification and intervention (as early as preschool) are high priorities, facilitated by a computerized tracking system. The program involves parents, and mentoring by volunteer adults and peers is stressed. Components include a teen mother program, group counseling meetings, and a program for dropout reentry for all students (Dryfoos,1990).

Upward Bound, a national program in operation since 1965, provides academic and other kinds of assistance to economically disadvantaged, underachieving students who show potential for completing college. Colleges and universities or secondary schools with residential facilities operate Upward Bound programs in cooperation with high schools and community action programs. Intervention strategies include remedial instruction, immersion in new curricula, summer tutoring that often extends into the school year, cultural enrichment activities, individual and group counseling. During summer sessions students reside in campus housing and undergo intensive training for six weeks or longer. Evaluations of the program conclude that Upward Bound is successful in helping students to graduate from high school. (U.S. Department of Education 1993).

At George Washington Preparatory High School, located in south-central Los Angeles, both parents and students are required to sign a contract. Parents must attend workshops on how to help their children and attend group sessions centered on how to cope with the stressors of keeping the student in school (U.S. Department of Education, 1993).

The New York City Dropout Prevention Program focuses on the transition from

junior high to senior high school, a stress point in the lives of adolescents that contributes to dropping out. The high schools have become social institutions which provide help for students and their families. Using a team approach, the resources of public and private agencies provide adolescents with support. (U.S. Department of Education, 1993)

"Skills For Adolescence (Green, 1989)," is a program for high risk middle and high school students that includes enhanced parent involvement to maintain a positive contact with the home. It also provides appropriate in service training for classroom teachers. The program encourages student service learning opportunities and develops partnerships with businesses in the community. Students are taught skills in critical thinking, problem solving, and goal setting. Group counseling was available for participants in the program.

The Washington County [Md.] Evening High School is a remedial and support program for students who have been removed from their home school environment because of failing grades, poor attendance, or disciplinary problems. The program offers a wide variety of courses and programs including a work internship, parenting classes, and many of the major classes offered in the high school. Individual and group counseling services are available to all of the students and offer personal, educational, and career counseling. This subjects who participated in this study were students from the Evening High School

Surveying the steps for a successful approach to helping at-risk adolescents centers upon several factors. Attention to overall school climate is supported in the work of Wehlage (1991), Smink (1990), Peck (19870, Asche (1993), and Bickel, Bond, and LeMahieu (1986). Successful at-risk interventions are student centered, and no one structure or set of activities works for all students. At-risk service delivery and instruction elements have been identified as effective in the work of Peck, et al. (1987), Asche (1993), Orr (1987), Wehlage (1991), Bickel (1986), Dryfoos (1990); The Dropout Information Clearinghouse (1989); and Smink (1990). The findings of their research supports the

practice of identifying potential dropouts as early as possible and providing intensive intervention to insure early success. Counseling groups with at-risk adolescents provide an atmosphere of acceptance, encouragement, and safe experimentation for new thought and behaviors (Landers, 1989). Young people in our society learn to socialize in groups; therefore, this medium can be readily employed (Santrock, 1990). Also, because adolescents are easily influenced by peers, group counseling enhances the possibility that the group members will attempt new behaviors practiced by their peers and significant others (Gadza, 1989).

Group counseling may be employed as an intervention for students in schools and centers upon the resolution of many life issues. It is intended to help those students who are already having personality or behavior problems. It may also be viewed as remedial (Thompson & Rudolph, 1992). It can be an effective way to keep difficulties from growing and can serve in a proactive, preventative role with at-risk students to enable them to try out new behaviors in the safety of the group (Hooper & Lynne, 1985). They can subsequently employ what they learn in the group to social situations they will encounter in school and at home. Group counseling is not the final answer for all students, and some adolescents need more intense, individual work to resolve problems. Nevertheless, group counseling offers an unique learning experience for young people, especially those who are contemplating the termination of their education (Carroll & Wiggins, 1990). Corey, Corey, Callahan, and Russell (1988), Corey (1990), Corey and Corey (1992) state that group counseling focuses upon a particular problem which may be behavioral, personal, educational, social, or vocational. These kinds of groups are often found in the schools. They seek to work with students to make better decisions about their lives and empower students to deal with conscious problems in a safe atmosphere. It is not concerned with the treatment of more severe psychological problems. It is for normal people who have normal problems (Elhy & Dustib, 1989).

Jacobs, Harville, and Masson (1996) have stated that group counseling has preventative and educational purposes as well as some remedial goals. The counseling group involves an interpersonal process and problem-solving strategies that stress conscious thoughts, feelings, and behaviors. The group counselor's task is to structure activities for the group to facilitate a climate favorable to productive work, to facilitate members' interactions, and provide information about alternative ways of being which might enable the person to live a more trouble-free existence (Rose & Edelson, 1987). This is especially true with peers and with school staff that may have contributed to their feeling alienated from the school environment. This alienation is one of the major causes of students being at risk for ending their education. Group counseling may be used to counter some of the more difficult problems of the at-risk adolescent (Duncan & Gumaer, 1980). Young people will generally grow toward more self-acceptance and self-respect. Group counseling will help students become more tolerant of others, respect the differences of others, and develop a genuine caring for others (Gumaer, 1984). It will help adolescents to become sensitive to the needs of others and to clarify their values in examining their philosophy of life (George & Dustin, 1988). Group work will enable these students to learn to live with adversity and ways to make decisions about it and to accept what may follow from these choices. It helps these teens to explore conflicts and seek answers for themselves (Ehly & Dustin, 1989).

Many recent studies have shed new light upon the problems of the at-risk adolescent and the use of group counseling in response to the concerns of this population. Sapp (1990) developed a way to more accurately classify students and delineate which of them should be thought of as at risk. He developed a profile for the classification of at-risk students. Gladding (1991) examined the influences of group social skills development on the attitudes and behaviors of at-risk adolescents and found that there was a strong correlation between students in group counseling and the competence of these students in

social groups. Dupper (1991) examined the need for new approaches to the behavior problems of at-risk students. He found that the social skills of students learned in a treatment setting could effectively be generalized to the classroom setting. Huey (1983) investigated the effectiveness of an eight-week school based cognitive group treatment for at-risk adolescents. He found that adolescents who completed the treatment experienced less dysfunction at the conclusion of the study. Moore (1989) used group work to investigate the resiliency, concerns, aspirations, and degree of risk in students at a middle school. It was found that group work contributed to students developing verbal portraits of themselves and the problems that plague them. Grayson (1989) focused upon measuring problem-solving behaviors, family stress, parent-child relationships, self-esteem, and social desirability. The findings of this study pointed to the effectiveness of group programs which include a strong family component. Anderson (1984) employed a group counseling intervention to determine the effects of social-cognitive group intervention on violence, avoidance beliefs, empathy, and social development among at-risk adolescents.

Adolescents And REBT: The Case For A Cognitive Intervention In The Schools

Wittmer (1993) states that there are sobering facts in the life of adolescents in America's schools. School counselors are aware of the need for effective prevention and intervention strategies to help adolescents cope with normal developmental problems as well as with the large number of more serious family or societal dilemmas. Doing nothing with these young people often leads to more serious situations (Vernon, 1993; Wittmer, 1993). According to Bernard and Joyce (1984), from 1960 to the mid-eighties the number of cases of emotional and behavioral maladjustment increased in adolescents. Also, counselors became aware that simply using adult intervention strategies with children and adolescents was not an effective practice (Vernon, 1993). As a result, there has been a concerted effort in recent years to identify what constitutes effective prevention and intervention with adolescent clients, especially those at risk for ending their education.

Many counselors interested in the mental health of children are practicing REBT in the schools. As Bernard and Joyce (1984) noted after an extensive review of the literature, there is now a sophisticated, systematic procedure for employing REBT with children and youth. REBT, formerly called rational emotive therapy, was developed by Dr. Albert Ellis in 1955. Early in the development of REBT, Ellis realized that it could be effectively employed with children as well as with their parents.

REBT has been used in both elementary and secondary schools and has been employed in settings around the world, particularly in Australia and in Europe (Bernard, 1990). A review of the literature reports the use of this type of counseling variously as rational counseling in a study done by Wagner (1965), rational behavior therapy and rational self counseling as reported by Maultsby (1971, 1975). Ellis (1971) and Knaus (1974) outlined the principles underlying rational emotive education as an approach to meeting the mental health needs of children and adolescents in the schools. They stated that it could form the basis for a whole mental health program for the school. Cangelosi, Gressard, and Mines (1980) reported the effectiveness of developing self-concept by utilizing rational thinking groups with adolescents. They found it to be effective in promoting self-concept in adolescents in their study. Protinsky (1976) employed rational counseling skills with adolescents in the high school to address a number of problems and concerns. He found many ways to employ it to address the needs of adolescents in anxiety, self-esteem, and self-worth. He also examined the use of REBT with adolescents in test anxiety, academic remediation, and social skills development. Most of the studies which look at the effectiveness of REBT with children and adolescents have been done since 1960. A limited number of studies have been reported in the late 1960's and early 1970's have reported that the techniques and principles that underlie REBT as it is today have been effective with children and adolescents according to Berkowitz (1975). It is also important to note that over the past twenty years RET and REBT have been employed with

various populations in settings other than the schools and have been employed successfully by a variety of counselors and practitioners (Ellis & Dryden, 1987).

Ellis and Bernard (1983) stated that in the school, REBT was introduced to administrators, teachers, or parents in either an individual or a group format. This served to enable adults who serve school populations to deal with some of their own personal issues so that these did not hamper the growth of the children they are working with. Also, after being exposed to the principles of REBT these professionals and parents were in a better position to immediately deal with some of the problems in the lives of students. REBT has been employed in the schools by a variety of professionals, including counselors, in individual and group settings for a variety of problems.

Using REBT in the schools has had significant beneficial effects for children and adolescents, as reported by Brown (1977) and Glicken (1967). Students seem to cope better with the stresses of school if they have learned some of the basic REBT principles. Brown indicated that he prefers teaching these principles to teachers and having them apply the principles of REBT to their students in the classroom. He also stated that he found REBT appropriate for use in groups in schools for students with a variety of problems.

REBT is appropriate for use in the schools because it views its major thrust as that of educating clients in ways which would enable them to help themselves resolve their own problems (Ellis, 1993). Ellis and Bernard (1985) describe the most frequently used techniques which would be appropriate in working appropriate with adolescents. These include guided discovery, didactic presentation, homework assignments. structured role play, assertion training, behavioral rehearsal, shame-attacking exercises, risk-taking and emotive exercises (Patton, 1977). Most of these techniques seem to be in accordance with many of the goals of education today. The approach that the REBT counselor takes in working with students emphasizes the principles of responsibility, independence, and self-reliance (Ellis & Grieger, 1977). These qualities seem to be scarce in the students who

have experienced failure in school, have been disciplinary problems in their educational careers, and have displayed a number of other dysfunctional behaviors which have placed them at risk for dropping out of school and abandoning their education in a society where education is more important than ever before.

Unlike other forms of counseling, an integral part of REBT is its emphasis on teaching and prevention (Dryden, 1987). Knaus (1974) described it as a therapeutic approach by which children can be taught sane mental health concepts and the skills to use these concepts. Dryden (1995) emphasized that this definition is the notion that there are identifiable, concrete concepts which should be presented to children. While it may seem that this is stating the obvious, a lot of counseling approaches do not emphasize skill acquisition in a deliberate manner; thus, the concept of teaching mental health skills to children and adolescents is an important distinguishing feature of REBT (Bernard & Joyce, 1984).

What makes this therapeutic approach so practical with children and adolescents is the fact that a wide variety of cognitive, emotive, behavioral, kinesthetic, verbal, and oral assessment and intervention techniques can be employed (Vernon, 1993). Given this latitude, the therapist is free to be very creative in adapting strategies to a younger population. Not only does this make the therapeutic process more interesting and engaging for both client and counselor, but it also allows the therapist to target the problem more specifically.

Wagner (1965) identified specific reasons why REBT is superior to other therapeutic approaches for children. REBT makes immediate, direct intervention possible, when needed, to deal with school problems. The basic principles can be easily understood, applied, and adapted to children of most ages and intelligence levels. Rational counseling generally takes less time than other therapies, permitting more effective use of the counselor's time. Rational counseling helps the child learn to live in the home or school

environment. All of these factors are valid today.

Rational emotive behavior therapy has been employed successfully with children and adolescents for numerous problems including disruptive behavior, school phobia (Webber & Coleman, 1988), fear (Hauck, 1975), aggression, low self-esteem (Weaver & Matthews, 1993), anxiety (Warren & Zquorides, 1991); (Haynes, 1983), interpersonal relationship issues (Zionts, 1996), withdrawal, impulsivity, cheating, lack of motivation, underachievement, anger (Wilde, 1990), depression (Bernard &Joyce, 1984; Wilde, 1992), and parents (Joyce, 1990) (McInerney, 1984). Some practitioners have questioned the applicability of REBT with younger children because of their limited ability to cognitively process concepts (Morris, 1976). Experience has shown that the thinking skills involved in REBT can be modified and modeled for children of any age, particularly if the practitioner is creative in adapting the approach to the child's level. In a review of research conducted over two decades ago, DiGiuseppe, Miller, and Trexler (1979) indicated that elementary school children are capable of acquiring knowledge of rational emotive principles and that the modification of a child's self-verbalizations or irrational self-statements can have a positive effect on emotional adjustment and behavior. Furthermore, because young children are in the concrete operational stage of thinking, the teachable concepts inherent in this theoretical approach offer a highly effective, concrete way of matching counseling style with cognitive development (Vernon, 1993).

Perhaps the most important reason to use REBT with children and adolescents is that it gets to the heart of the problem; it is not just a temporary approach to help kids momentarily feel better. As Wilde (1992) expressed that at one time it was felt sufficient for counseling to help young people feel better. However, it is more important to teach them to think better for themselves. Wilde (1995) noted that REBT empowers children by instilling in them knowledge and a set of skills. REBT stresses the skills that can be employed in the present can be used for problem situations in the future. DiGuiseppe (1990) states that

educating young people in how to help themselves overcome some of the problems of life fosters change that is deep and long-lasting.

In the late 1960's REBT was promoted by a number practitioners who demonstrated how it could be effectively employed with school-age children. Doress (1967) explored how a teacher may also perform many of the roles of a therapist by employing the educative aspects of REBT in the classroom. Ellis (1967) reviewed the use of RET with adolescents to discuss the subject of sex. Ellis, Moseley and Wolfe (1966) offered numerous examples of ways in which REBT may be employed with children and adolescents to enable them to recognize irrational thinking and to dispute the irrational thoughts they have. Glicken (1967, 1968) in two articles that sought to show the benefits of rational counseling with children and adolescents. The efficacy of this approach was delineated in this work. Hauck (1967) described how RET could be used in the management of children and that the therapy can be useful in empowering the young people to solve many of their own problems. It was found that as educative tool it served well as a method of managing children in various settings. Lafferty (1962) in a speech to The Eighth Inter-Institutional Seminar In Child Development maintained that the use of REBT may enhance the values of children and adolescents. Lafferty, Dennell, and Rettlich (1964) outlines the elements of what he believed to be an exemplary school mental health program. The thrust of his work is basically cognitive-behavioral and describes the use of RET with these populations. All segments of the school community are involved in the application of REBT to the school setting. McGory (1967) reports on the manner in which introspection is taught in the school setting. She ties this to self-talk employed with RET. He reiterates that learning to recognize self-talk and make some sense of it are some of the aims of REBT. Wagner (1966) reviews many of the theories of counseling with children and concludes that the tenets of RET hold a great deal of promise for the future of working with these young people.

During the 1970s, a large number of articles, chapters, and manuals appeared which encouraged the use of REBT with children and adolescents. Bedford (1974) devised an REBT method for talking to young people that seemed to successfully enable them to solve many of their own problems. Brown (1974; 1977; 1979), in several studies, sought to influence young people to achieve their optimal goals with rational success. Daley (1971) employed the tenets of RET to apply reason in working with deprived and disadvantaged young people. He found that anxiety and depression of these children can be reduced through the use of REBT interventions. DiGiuseppe (1975) employed behavior modification techniques to establish rational self-statements in children. He found behavior modification principles effectively supplemented the use of REBT concepts with children and adolescents. Edwards (1977) outlined instances where RET could be used in the high school setting and how this approach differs from the elementary level. Reviews of way in which secondary teachers can employ the work of REBT in their classrooms are outlined. Ellis (1971) sought to prove the efficacy of using RET with school-aged children in a private school. He found it highly effective in helping students cope with the daily routine of school. Ellis (1971) outlined a set of principles in employing RET in applying this therapy to emotional children. Ellis (1972) outlined the contribution of psychotherapy, especially cognitive-behavioral psychotherapy, to school psychology. he found it to be an effective intervention with most school-aged children. Ellis (1972) discussed the use of RET in developing an emotional education program for the classroom. Strengths and weaknesses of this approach were delineated. Ellis (1973) touches on the usefulness of RET in working with children and adolescents. It was seen as an educative process just as many of the tasks in school; therefore, it becomes easier for young people to get acclimated to the environment of RET. Ellis (1973) reviewed the implantation of an RET emotional education program at the Living School in New York City. He found that students did cope better with the stressors in their school lives when they were given an opportunity to learn

REBT principles. Benefits of the program used there were outlined. Ellis (1975) outlined the use of RET in the school and the role of the school counselor. Many different techniques and approaches are discussed concerning the use of this type of therapy in the school setting. He emphasized that counselors given a little focused and structured training can employ REBT in the schools in a wide variety of ways. Ellis (1975) delineated the steps, in RET terms, to raising a healthy and emotionally happy child. Ellis (1976) shows how RET can be employed to deal with conflicts in parent-child relationships. Grieger, Anderson and Canino (1979) mentioned the effective use of REBT with young people and how it can be a very effective and powerful force for change in the life of a child or an adolescent. Hauck (1974) shows how RET may be a vehicle for overcoming frustration and anger in children and adolescents. Hauck (1977) discussed irrational parenting styles that may impede healthy emotional development of children. Knaus (1974; 1977) wrote a complete curriculum employing RET as its theoretical basis for use with children and adolescents in the school setting. Knaus and McKeever (1977) showed that RET educational programs can be applied with the learning disabled population in the school. Its greatest contribution may lie in its ability to impart to the students new levels of positive self-concept. Kranzler (1974) wrote a series of emotional exercises for children based upon the tenets of RET. Maultsby (1974) showed how the use of cognitive-behavioral approaches to emotional education can transform the classroom into an emotional health center in the school. Maultsby (1975) outlined how RBT principles might be employed in dealing with the behaviors of acting-out adolescents. McMullin, Assafi and Chapman (1978) devised a cognitive restructuring training program for families and children. It sought to get families and children to recognize the thoughts that impeded the progress of these people and offered possible solutions for creating a more healthy emotional environment. Muirden (1976) talked about the use of RET as an emotional tool to decrease the incidence of violence in our schools. Protinsky (1976) concentrated on applying RET

principles to working with high school aged students. As stated before there were many areas of improvement for students who learned REBT as a way to overcome problems in their lives. Rand (1970) employed RET precepts to working with students who exhibit academic underachievement. He found that using REBT gave these students more confidence and developed increased risk-taking prowess on the part of these students. Rossi (1977) in this interesting article surveyed many of the techniques for applying RET with small children. Sachs (1971) described the use of RET in the Living School, a private lab school in New York City. It was found that RET was helpful in establishing a positive emotional climate in the school while empowering young people to solve many of their own problems. Shibbles (1978) explored the thought and emotions continuum employing the tenets of RET and concluded that this form of therapy had a lot to offer the practitioner in the field. Tosi (1974) showed how young people can grow emotionally by learning and applying some of the tenets of RET. Young (1974) outlined an emotional framework based upon RET principles in working with adolescents. Young (1977) explained the difficulties of working with working class adolescents and how RET can be useful as an approach to this population. Because of the observed success of REBT that was found in early clinical and experimental investigations, the Institute for Rational-Emotive Therapy in New York started The Living School in 1970, a small, private grade school where all the children were taught RET along with the usual elementary school curriculum. It was found that students displayed less anxiety about the school environment and were able to perform more effectively with regard to the development of their social skills.

REBT principles were used successfully in the 1970's and 1980's with children and adolescents in schools and were found to be an effective intervention with many problems. The use of REBT with school-age populations was found to be effective in reducing anxiety. Brody (1974) examined the effect of rational emotive affective education approach on anxiety, frustration tolerance, and self-esteem of fifth graders. He found it to

be an effective approach to working with this population especially with respect to reduction of anxiety and inappropriate behavior in these children. Cangelosi, Gressard, and Mines (1980) showed the effects of a rational emotive thinking group on self-concept in adolescents to be a positive one. DiGiuseppe and Kassinove (1976) looked at children's emotional adjustment and described what effect RET could have in helping children manage their problems. It was found that REBT allowed students to focus on the problems confronting them and allowed them to arrive at some meaningful solutions of their own. Haynes (1983) applied the tenets of rational emotive therapy to the use of behavioral assessment. Examining the behavior of children in psycho situational assessment, he found that children who were exposed to REBT had a better chance of displaying appropriate behavior than those who did not. Knaus & Bokor (1975) showed that the use of rational emotive therapy had a significant effect upon anxiety and self-concept of children and adolescents. Knaus and McKeever (1977) outlined the rational emotive approach to working with learning disabled students. Meyer (1981) carried the work a step further and analyzed the effects of rational emotive therapy on the self-esteem and anxiety of learning disabled children. He found that the self-esteem was elevated in the REBT group.

Omizo, Lo, and William, (1986) documented the successful use of rational emotive education with learning disabled students in the areas of self-concept and locus of control. It was found that the REBT students had increased self-control and had a better defined locus of control. Von Pohl (1982) did a study to assess the effects of rational emotive therapy with a selected group of emotionally disturbed children in day and residential treatment. The findings were that these students displayed far less inappropriate behaviors and exhibited more social skills than did those who were not exposed to REBT. Warren, Deffenbacher, and Brading (1976) found significant results in the use of rational emotive therapy to deal with test anxiety of elementary school children. REBT was found to be

successful in getting these students to understand the nature of the anxiety they were experiencing and help them overcome this problem. Watson (1983) looked at the development of self-directed behavior in children through the use of rational emotive therapy. He found that students exposed to REBT had a greater chance of being self-starters and followed through on tasks more readily than did other students in the study. Brody (1974) used rational emotive therapy to increase the frustration tolerance of children. Meichenbaum and Goodman (1971) used RET to alleviate and reduce impulsivity. Block (1978) showed the effects of rational emotive therapy and mental health program on poorly achieving, disruptive high school students. The use of this therapy with this population was deemed useful. Cangelosi, Gressard, and Mines (1980) showed how a rational emotive thinking group can influence the self-concept of adolescents in the school setting. It showed that REBT can help in dispute the ideas that when we do something bad we are all bad. Wilde, (1994) employed rational emotive solutions in working with depressed children. He found that depression could actually be alleviated by the use of this intervention. Both Reister (1977) and Rogers (1977) found significance in enabling students to deal with test anxiety in the school. Devoge (1974) outlined a behavioral approach to using RET with children. It was found that reinforcing the concepts of REBT made the acceptance of these ideas more immediate to the subjects and enabled them to use their thought more effectively. DiGiuseppe (1975) used behavior modification to establish rational self-statements in children. Principles of applied behavior analysis were employed to reinforce RET in the schools. He found that the use of this combination helped in defining the self-talk of the students. DiGiuseppe and Kassinove (1976) studied the effects of a rational emotive mental health program on the emotional development of children. Ellis (1979) talked about the practice of rational emotive therapy in working with children and adolescents. Katz (1974) studied the effects of emotional education on locus of control and self-concept. Rational emotive therapy was used in this study. It pointed

positively to the use of this form of therapy with school-aged populations. Maultsby, Knipping, and Carpenter (1974) examined the teaching of self-help in the classroom with rational self-counseling. It was found to be well-grounded in enabling students to function more effectively and to handle many of their own problems. Wasserman and Vogrin (1979) exaimned the relationship of endorsement of rational beliefs, age, months of treatment and intelligence to overt behavior of emotionally disturbed children. It was found that a significant relationship existed between the overt behavior and the child's rational beliefs.

Several studies have examined REBT and its effect on rational thinking in students. DiGiuseppe and Kassinove (1976) studied the effects of rational emotive school mental health programs on children's emotional development and adjustment. A positive correlation was found between the participation of the students and their personal adjustment to the school environment. Harris (1976) described a rational emotive education program used in the schools as a mental health development program. Illustrations of its success were delineated in this work. Knaus and Bokor (1975) examined the effect of rational emotive education on anxiety and self-concept. The use of REBT was found to increase self-acceptance and lessen the anxiety that the subjects experienced. Ritchie (1978) looked at the effect of rational emotive education on the irrational beliefs, assertiveness, and/or locus of control in fifth grade students. He found that there were less irrational beliefs espoused by these students and that their assertiveness grew as well. results were inconclusive about locus of control. Voelm (1983) talked about the substance of RET and its use with different populations and different ages.

Wilde's (1994) study has formed the basis of this research project. He examined the effects of the Let's Get Rational board game on rational thinking, depression, and self-acceptance in adolescent. It was found to have a significant positive effect on the development of rational thinking, alleviating the symptoms of depression and enhancing

self-acceptance in adolescents. Patton (1977, 1985, 1992, & 1995) presents three models for implementing REBT in the schools. These include the use of REBT in working with parents, REBT group counseling with students and the use of REBT education in the classroom to foster increased social competence and less demanding thought among the students. Other important studies have described the use of REBT with children and adolescents (Barrish & Barrish, 1989) concluded that RET can be a tool for adolescents to survive and enjoy these years. This is because it frees them from much of the demandingness, awfulizing, low frustration, and self-rating that are common in this time period.

Bedford (1974) developed Instant Replay as a method of counseling and talking to little people. This is an excellent picture book for children of all ages showing them how to tolerate frustration, do rational problem solving, and improved communication. Bernard and Joyce (1984) in their book provides a comprehensive handbook for the use of RET with children and adolescents. Many techniques and programs are outlined in this excellent work including foundations, assessment, counseling, group counseling, and working with parents. The techniques were employed as the basis of many of the activities in the groups in this study. Ellis and Bernard (1983) wrote a voluminous work that outlined and described RET approaches to the problems of childhood. Many useful observations were made by contributing authors in this work. Ellis, Moseley and Wolfe (1966) developed a manual to use the principles of RET to raise an emotionally healthy and happy child. Many everyday examples were used to show parents how to cope effectively with self-acceptance and low frustration tolerance, both in their children and in themselves. Hauck (1967) wrote a ground-breaking book about the rational management of children. Many ideas and techniques employed with these youngsters were described. He clearly presented many methods for dealing with a host of everyday situations, from thumb sucking to soiling to anger and shyness. Hauck (1983) also examined and reported on techniques from RET that

might be appropriate for use with parents. Vernon (1983) wrote an excellent volume on the RET approach to counseling children and adolescents. It was a comprehensive work that helps students to learn to use positive mental health concepts and overcome irrational beliefs and negative feelings and behaviors that may result. Waters (1982) developed an excellent series of pamphlets that show how to accept yourself and your child. They emphasized teaching the principles of rational thinking, building frustration tolerance, and rational problem solving skills in working with children and adolescents. Wilde (1992) developed a useful little guide that described the methods and techniques of rational counseling with school-aged populations. It was a casebook that provides practical help for the many problems faced by children and adolescents, as well as those with cognitive limitations. Conversations between the therapist and the student alone in the book makes it excellent reading in this field.

In past years, prevention programs based on rational emotive principles have been developed. Knaus (1974) developed a program of RET education for the schools that has been the subject of much research in the field. Studies have pointed to the effectiveness of Rational Emotive Education in alleviating self-downing and in increasing frustration tolerance of students in the school setting. Pincus (1990) outlined strategies to guide children and adolescents toward more positive, personal feelings. Vernon (1989) developed an excellent book of group exercises for use with children and adolescents. One volume is for grades 1-6 and the other is for 7-12. Basically, it is an emotional education curriculum for children and adolescents employing the tenets of RET. It enables children and adolescents to develop and use positive mental health concepts. There about ninety exercises in the book dealing with everything from feelings to self-acceptance. Portions of this work were included in the groups in this study. Waters (1979) (1980) developed children's stories employing RET problem-solving and coping. The themes of these stories adhere to REBT principles and deal with the problems of anxiety, frustration tolerance,

anger, and self-acceptance. REBT is currently being used with young clients in the United States and increasingly in Australia, England, Holland, and other Western European countries.

In the 1980s REBT was more fully incorporated into the practice of child counseling and therapy. Practitioners have described how REBT can be systematically employed with children (DiGiuseppe, 1981; DiGiuseppe & Bernard, 1983; Hauck, 1980; Waters 1982, 1982), adolescents (Young, 1983), parents (Bard, 1980; Hauck, 1983; Mclnerney, 1983; Woulff, 1983), and teachers (Bernard, Joyce & Rosewarne, 1983). REBT guidelines for treating childhood maladjustment (e.g., conduct disorders, fears, anxieties, phobias, low frustration tolerance, social withdrawal, impulsivity, underachievement,sexual problems) were presented in Rational Emotive Approaches to the Problems of Childhood (Ellis & Bernard, 1983) such as a sophisticated as well as a systematic procedure for employing REBT with children and youth.

In the 1990's, several issues which pertain to children and adolescents were addressed by the use of REBT. Patton (1992, 1995) presented models for implementing REBT in the schools as mentioned before. In recent years, prevention programs based on rational emotive principles have been developed (Pincus, 1990; Vernon, 1993, & Wilde, 1992). It has also been applied to working with handicapped clients (Gough, 1990).

In an article on anger management, Grant and Findley (1990) delineated the concept that the way one thinks affects the way one feels, and, therefore, affects what one does. A support system based upon REBT is described that includes keeping an anger chart to recognize the signs of anger, keeping an anger journal, and using other anger management techniques (Anderson, 1985). Wessel, Ineke, and Mersch (1994) has also used REBT to provide an effective treatment employing rational restructuring for test-anxious high school students in a group setting. It was found that the pretest use of REBT interventions had a significant effect on the ability of the students to concentrate and discard

feelings that they would not be successful on tests in school. Marcotte (1996) studies the effects of REBT group counseling when intervening with depressed adolescents. They found that use of this therapy effectively enabled students to deal with depression and dispute dysfunctional beliefs that may impede their mental health. Wilde (1992) described ways to deal with the problems of school-aged populations: depression, self-esteem, anxiety, anger, low frustration tolerance, and substance abuse. He also discussed ways to employ the therapy with teachers and with parents. Bernard (1990) outlined the role of group counseling in the school and how REBT concepts may be incorporated into helping adolescents and young people to overcome some of their major problems such as depression, self-acceptance, anxiety, anger, and low frustration tolerance . He also described the use of REBT with parents and with teachers. Also, Wilde (1990, 1995) described alternative for the counseling practitioner to employ in anger management in the schools. He also developed a board game which he used introduce the concepts of REBT and help students develop ways of disputing irrationalities in their lives.

REBT Counseling With Adolescents: What It Is And What Has Been Done

Rational Emotive Group Counseling

School counselors have used group counseling for dealing with the problems of children for many years. Almost from the beginning writers and researchers saw the value of this type of therapy in working with children and adolescents (Ellis, 1984). Bernard and Joyce (1984) suggested that the group setting may be a more natural setting for working with children than in individual sessions. We all are a part of a group in our everyday lives -- our families, the school, our place of employment, and our circle of peers and friends. In dealing with the at-risk population, one can readily see that the group may be highly amenable to working on problems in their world. Students in a group counseling setting may even show more appropriate behaviors in a safe environment and discard behaviors that may be inappropriate. It is the learning through interaction that makes the use of group

counseling with adolescents an attractive option.

Overall, REBT is a useful way to view the problems posed by modern life (Morris & Kanitz, 1975; Weinrach, 1995). It can be employed in groups in various formats (Ellis, 1977; Bernard & Joyce, 1984). Ellis (1994) has conducted hundreds of workshops which are aimed at the disputation of irrationalities in order to solve some problems (Maultsby, 1975). Ellis is also known for his numerous "talks" and tapes on the subject. REBT in its earlier days was applied to weekend marathon groups for adults and married couples. Wessler and Wessler (1985) stated that there are many advantages of group therapy with various populations. The counselor can meet with and teach REBT principles to many people at once, and they can learn that they are not unique in having a problem or in having specific kinds of problems. The group can provide a forum for preventive counseling because other members can hear group members discuss problems that they may have not experienced themselves. Group members can learn to help themselves by learning to help others. One of the best ways to learn a skill is to teach it to someone else. By teaching rational thinking skills to others clients are strengthening their own rational thinking skills. The group provides a safe laboratory to practice new ways of thinking and behaving and even risk-taking. Group exercises can be employed to elicit certain emotions which can be dealt and analyzed in the group setting. Group counseling can be viewed as a laboratory where the group members under the skillful leadership of an experienced leader can test new ways of relating to others and practice social behaviors that they have learned (Corey & Corey , 1992).

Dyer and Vriend (1980) have emphasized the utility of group counseling with youth by pointing out several elements: Children discover thoughts and their self-defeating behaviors and may set goals for themselves with the aid of the group leader and the other members of the group. The leader and the group members will be instrumental in helping the members set attainable goals. It is acceptable for students to try out new behaviors in

the safe atmosphere of the group and set expectations for employing what they have learned in group in the real world. Students may share with the group the results of some additional work they have done outside of the group session or some homework they have done to work on the issues that may have been brought from the group interaction. Students learn to help other people and to begin to recognize and accept their own problems and to share their feelings about them with other people of the group.

Cangelosi, Gressard, and Mines (1980) state that group counseling employing Rational Emotive Behavior Therapy seeks to educate clients to think rationally about the things that happen in their lives and to take responsibility for their own feelings and emotional shortcomings. REBT techniques lend themselves to group counseling very well. Group members are encouraged to confront their irrational thoughts and feelings, take new risks in their lives, try out new behaviors, and take advantage of the feedback of others to learn and reinforce the new skills that they are learning.

Rational Emotive Group Counseling is usually provided in response to existing problems in young clients, and therefore usually has specific counseling aims. The employment of Rational Emotive Group Counseling with adolescents usually is problem oriented according to the group member's needs. However, the underlying focus of the group is helping each members discover the dysfunctional aspects of their thinking and to learn to dispute these irrationalities moving on to more useful ways of living. Ellis (1973) described the goals of Rational Emotive Group Counseling with young people in this way. He said that the goals and objectives are continually taught, in the course of group counseling, that they can minimize their disturbances and achieve their maximum potential for growth and development. This is accomplished by employing empirically based, rather than magical, hypotheses about themselves and the world, and by seeing that nothing is awful, sacred or all-important. It changes clients by having them become thoroughly tolerant of all humans including themselves and others. It works toward their never

damning or denigrating people for their reprehensible or ineffectual acts and by learning how to stop proving themselves with silly ego games. Instead they can start enjoying themselves; by becoming self-directing, not overly conforming individuals who still can be kind, considerate and loving and rationally (and self-interestedly) aware of and somewhat devoted to social interests. These are the specific goals of the rational emotive group counseling process.

In adapting Rational Emotive Group Counseling for use with adolescents, the goal of the counseling is to help them challenge their irrational beliefs, learn disputational skills, and obtain the judgment of when to employ these methods. Bernard and Joyce (1984) point out that the two guiding principles in designing and selecting activities for use with adolescents in REBT groups have been the internalization and consolidation of rational thinking. This seeks to ensure that adolescents make the concepts their own by integrating them with their own ideas and experiences. It also implies repeated application of these concepts in a variety of situations. These abilities then will become a part of their repertoire of skills and habits for coping with situations and events which cause disturbances. Homework exercises are employed frequently with older children to shape their thinking and their behaviors.

REBT Counseling with Adolescents

The application of REBT to the treatment of children and adolescents was pioneered by Ellis in the mid-1950s (Ellis & Bernard, 1983) (Weinrach, 1980). Shortly after he began to use REBT with adults that he saw how it could be utilized to work with school-aged children and with the children's parents and teachers. Cognitive parenting techniques were included in his first book on REBT, How To Live With A Neurotic (Ellis, 1957). He tape recorded a number of sessions with young children, and these tapes, which were widely circulated, encouraged many practitioners to use RET methods with younger clients (Ellis, 1959).

Rational-Emotive Skills

Ellis and Bernard (1983) stated that thinking plays such a an important role in mediating a young person's feelings and behavior. Teaching the teen to think differently becomes the primary goal of REBT group counseling with adolescents and was one of the underpinnings of this study. Teaching students to think rationally means helping them develop a variety of skills and abilities that will allow them to see themselves, their world, and others in it in a realistic, adaptive, and a meaningful way (Warren, 1984). It means not only learning to think more logically and clearly, but also formulating a set of attitudes and beliefs about questions of human worth, personal values, and life goals.

Wessler and Wessler (1985) say that these skills could be examined and shown in a more rudimentary form, one that provides the practitioner some direction for assessment and treatment. This includes the ability to recognize and identify feelings, and then be able to assess the appropriateness of these feelings. Students should be able as a result of REBT to recognize and identify behavioral response patterns in their lives and be able to assess the appropriateness of their actions. Students will have a grasp on the understanding of thoughts, feelings, and actions. They will be able to recognize the existence of irrational beliefs and dysfunctional thinking in time to do something about it (Grieger & Boyd, 1980). Finally, as a result of the work in REBT counseling groups students learn to dispute such irrational thinking and correct their dysfunctional and distorted cognitions (Weinrach, 1996).

REBT Self-Instruction

Practitioners have come to appreciate the role that healthy self-talk can contribute to directing and controlling feelings and behaviors. Whether it is spoken in the safety of the group or uttered in the thoughts, self-talk can provide a young person with a blueprint that he or she can use in life to solve the personal and interpersonal problems that may be part of their lives (Tosi, 1974). It is known that many adolescents lack adequate self-statements

and coping statements that act as a guide in telling them what to do when confronted with problems. Lacking this kind of skill engenders emotional and behavioral troubles for the adolescent who is struggling in school (D'Zurilla & Golfried ,1971; Meichenbaum, 1977; Spivak, Platt & Shure, 1976).

As a result of the process of self-talk, young clients develop an array of skills that will serve them well. Problem-solving strategies are often lacking in the repertoire of the adolescent; therefore, the youth is ill-equipped to deal with the many adversities and seemingly horrible events that occur around them (Dryden, 1994). REBT group counseling relies on a level of self-instruction with members in that they are taught to recognize that a problem exists and conceptualizes problem-solving as an approach to eliminating the difficulties. The adolescent must be able to generate different solutions to problems and be able to choose from among these solutions. There must be a significant understanding of the means to reaching a goal and an awareness of the consequences and impact of embarking on one path over another. Ultimately, clients can develop a set of rational coping self-statements that will serve them well when faced adversity in their lives (Dryden & Tower, 1988).

Interpersonal Skills

Many adolescents lack the basic behavioral patterns necessary in daily life. This skill can range from the most simple form of social interaction to highly complex discourses which can be very sophisticated. Students sometimes fail to learn these skills and the lack of these abilities in their behavioral repertoire can play an important role in their later psychological adjustment and development. It is essential that any group counseling with adolescents should include some component that improves these skills for the young client. These include how to greet and converse with others, especially adults. The young person should be exposed to the skills that will allow them to assert themselves, make

requests, express disagreements with others, and have a healthy self-acceptance (Daley & Burton, 1983). Skills of cooperation should be a by-product of group counseling. The group can be a laboratory for the young person to deal with self-acceptance, disapproval, criticism, and rejection.

Applications

REBT has been used with both elementary and secondary level students in the United States and is being increasingly used at the primary and secondary levels in Australia, England, and other countries in Western Europe. When REBT is applied in a school setting, it has been variously referred to as rational counseling (Wagner, 1965), rational behavior therapy, rational self- counseling (Maultsby, 1971, 1975), rational emotive education (Ellis, 1971; Knaus, 1974), rational thinking (Cangelosi, Gressard & Mines, 1980), and rational-emotive counseling (Protinsky, 1976). During the past decade, REBT has been applied in other “child-treatment" settings such as community mental health facilities, child guidance clinics, child psychiatric out-patient units attached to hospitals, social welfare agencies, and in private practice by a variety of practitioners including psychiatric social workers, counselors, child psychologists and child psychiatrists.

REBT has been employed by different professionals concerned with the mental health of the child. In a school context, REBT is generally introduced by a practitioner (psychologist, counselor, social worker) to teachers, administrators, other special service personnel, and to parents on either one to one or group basis. REBT serves two general functions when introduced to these populations. It enables adults who interact with school-age children to solve their own personal problems in order that these problems do not interfere with the upbringing of children (Morris & Kanitz, 1975). Additionally, as a consequence of being exposed to principles of REBT, child care personnel are in an ideal position to introduce REBT concepts to children at the time they experience emotional

distress. Such involvement through modeling and other instructional devices helps children surmount personal crises, overcome disabling emotions and behavior and, over time, acquire REBT coping strategies that enable them to exercise self-control and to independently solve their own future problems (Roush, 1984). REBT is also used by a variety of the professionals directly with children. In schools, school and pastoral counselors, psychologists, principals, teachers, and social workers meet with children on an individual or group basis and employ REBT and REE in preventative or developmental counseling, as well as problem-oriented counseling interventions. In the case of a one to one practioner-child contact, REBT has been successfully employed with children and adolescents referred for a variety of problems (Sensor,1986). These include acting out, violently destructive and dissipative behavior, impulsivity, stealing, cheating, social withdrawal and depression (general unhappiness). It also includes public speaking, test taking and social anxieties, fear and phobias related to school, truancy, underachievement and learning disabilities, poor motivation and procrastination, parent - child and teacher-student discord, and a variety of other problems of childhood adjustment including sexual behavior, and sleep disorders (Dryden, 1987).

Teachers and parents counseled by REBT practitioners have reported significant beneficial changes (Brown, 1977) in up to 85% of children. Academic improvement existed in virtually all of these cases (Glicken, 1967). REBT has been employed with children who have ranged from five to 18 years of age and older. A school psychologist (Brown, 1977) has reported introducing REBT in many schools in Florida and indicates that he has used it mostly with children in grades six through twelve. For counseling children in earlier grades, he suggests teaching teachers the principles of REBT. A teacher (Daley, 1971) reported employing reason and REBT principles with deprived preschool children. It has been employed successfully with school-age children from both low income (Block, 1978) and middle income families (Brody, 1974). Recently, REBT has

been utilized with emotionally disturbed children (Waserman & Vogrin, 1979), hearing impaired adolescents (Giezhels, 1980), learning disabled students (Meyer, 1982; Staggs, 1979), intermediate special education students (Eluto, 1980), and maternally deprived adolescents living in a group home (Dye, 1980).

Block (1978) states that there are several purposes for which REBT can be employed with groups of children in the schools. REBT views its main purpose as educational and focuses on teaching students a model for helping themselves resolve their own problems. The techniques it employs in training are educational and include guided discovery, didactic presentation, homework assignments, structural role play, assertion training, behavioral rehearsal, shame attacking, risk taking and emotion-evoking exercises, and a variety of other exercises, activities and methods that are compatible with the educational process. Ellis (1975) says that REBT proves particularly applicable to the work of a school counselor, since it closely follows an educational rather than a medical or psychodynamic model of psychotherapy and counseling. It holds that humans become disturbed and malfunction mainly because of their erroneous and irrational beliefs, attitudes, values, and philosophies. The most elegant and efficient means of helping them solve their emotional problems lies in teaching and demonstrating to them specifically how they needlessly upset themselves and showing them how to dispute and surrender their self-defeating beliefs.

Another advantage of employing REBT in schools is that the approach reinforces many of the goals of independence, responsibility, and self-reliance that are endemic to the whole purpose of education. In accordance with this position, Protinsky (1976) says that in contrast to the medical model of psychopathology which views emotional disturbance as an illness that the therapist takes responsibility for curing, REBT maintains that people are responsible for and have the ability to control their thoughts and, thereby, their emotions and behavior. The role of the therapist is largely educational, and the client takes a more

active and responsible role in self-change.

Wagner (1966) has applied REBT with children in the form of Rational Counseling. He advocates the superiority of this approach over any other technique employed by school psychologists and school counselors, and has enumerated distinct advantages. Rational counseling is easier to learn and to apply (Dolliver, 1977). Experience has shown that the average school psychologist, having familiarized himself with the literature and listened to a few representative tapes, can do a respectable job with this technique after a few trial runs. School problems are often pressing and require swift intervention. Questions of transfer, promotion, discipline, suspension, etc., are sometimes imperative, and the counselor is not permitted the luxury of the months of therapeutic contact usually required with analytic or client-centered techniques. Dryden, (1994) states that rational counseling permits immediate intervention to solve the present problem. Rational counseling teaches the child to live in his school environment. The non-blaming attitude which is the essence of this technique helps the child to accept teachers, parents and peers, and to make the best of an imperfect world. The basic principles are easy to understand, apply and can be adapted to children of most ages and IQs. It gives the child tools to work with and provides immediate environmental reinforcement. The child is given a direct explanation of why his behavior is maladjusted and is shown, in simple terms, how to adjust that behavior. Children, having lived in this culture for a shorter period of time than their parents are usually less indoctrinated than adults and make good subjects. Rational counseling permits greater and more effective use of the counselor's limited time and does not necessarily require the cooperation of recalcitrant or hostile parents (Smith, 1983). Should the counselor fail to help the student, it is unlikely that he will hurt him. Rational counseling makes no dangerous incursions into the unconscious; it militates against irrational and anti-social behavior, and it discourages ruminations and a preoccupation with historical antecedents or dynamics (Dryden, 1987).

DuGuiseppi (1990) shows that REBT can be incorporated in schools in a variety of ways. Workshops and training sessions have introduced principles of REBT to administrators, school psychologists and counselors, social workers, and teachers. Brown (1977) has observed that through REBT, teachers are aware of the objective reality that students are only doing what they should be doing, given what they have learned. He has taught rational self-counseling in high school psychology classes as a new theory of personal psychology. His course has the goals of applying REBT theory to students, seeing if they see any value the theory may have for their own lives, and applying RSC in daily living. Students like the fact that they control their own emotions. REBT resource rooms have been set up in high schools where students can go when they feel over stressed and where students could read bibliotherapeutic material and/or conduct a rational self-analysis. Low achieving students enrolled in prevocational job training programs have attended REBT groups as a part of their work study program. In these groups, they learn how to solve problems of frustration in relation to their job experiences. Bernard and Joyce (1984) have worked with low achieving and low self-esteem students in the grades six through ten range, most of whom are enrolled in remedial reading classes. These groups are extremely successful, and the students express favorable opinions about the time they spend in the groups.

Edwards (1977), in seeking to reach the largest number of students as possible, employed the medium of the high school newspaper. Ellis (1975) proposed that REBT can be disseminated to students through the use of dramatic presentations. He says that school counselors can supervise the presentation of skits, plays, role-playing sessions, TV shows, movies and tapes presentations in the course of which children learn to differentiate between rational and irrational beliefs, and in which they see how the latter almost invariably lead to dysfunctional results.

Wilde (1990) developed a board game for use with clients aged 11 through

adulthood. The game, Let's Get Rational, designed to show students how to apply the tenets of REBT theory to their own lives and in the school setting. The game format is non-threatening and is very enjoyable for the students. It encourages many students to disclose and share in a group counseling experience. It provides students with many points of education about how they are upsetting themselves and how they alone had better take responsibility for their own change. Wilde points out that his creation had been used in groups for children of alcoholics, children of divorce, anger control groups, self-esteem groups, and social skills groups.

Research

Most of the controlled experimentation which looks at the application of REBT with younger populations has taken place since 1970. A limited number of case studies have been reported in the late 1960s and early 1970s that indicate that REBT principles can be effective with children (Ellis, 1970; Ellis, Moseley & Wolfe, 1966; Glicken, 1968; Hauck, 1967; Knaus, 1974). Beginning with a study of Albert (1972) and continuing for the next ten years (Meyer, 1982), experiments which have explored the effectiveness of RET with children and youth have followed a similar format. The experimental question of concern is generally an open-ended one: What is the effect of REBT on children? Subjects have been randomly selected for many of these studies. (Robbins, 1976; Ritchie, 1978). In this study the focus is on whether there is a significant difference between REBT group treatments and if there is a difference between genders in this form of group counseling. The interaction between the treatment and gender is also examined. A few studies (Babbitts, 1979; Warren, 1978) have used cutoff scores on an anxiety screening test as a basis for subject selection. By and large, subjects who participated in treatment groups varied greatly in a host of personality and cognitive characteristics. Subjects have been selected from populations of children with special problems. Dependent measures appear to have been selected in the hope of catching some effect and include personality tests,

measures of anxiety, measures of irrational thinking, measures of locus of control, and behavior rating scales.

Overall, independent treatments include a comparison of an experimental group which receives a regimen of REBT methods and materials often derived from Knaus' (1974) REBT materials with other mental health programs, attention-placebo, or no treatment control groups. There have been other attempts to isolate the effects of different components of REBT, including Rational-Emotive Imagery (Warren, 1978) and behavioral rehearsal and written homework (Miller, 1978). Experimental groups tend to be conducted by practitioners who vary widely in experience (zero years to practicing therapists). Several studies (Brody, 1974; DiGiuseppe & Kassinove, (1976) utilized one practitioner for experimental and control groups which may have biased the results. Sample sizes of each treatment group tend to be unaccountably small (eight to twelve) with within-group subject variability being quite high. Treatment groups are relatively short-term, tending to meet once or twice weekly for between 10 and 15 sessions, and very few studies report follow-up data (Brody, 1974; Robbins, 1976; Warren, 1978). Pre- and post-test change scores and post-test differences across groups are generally analyzed through an analysis of variance and analysis of covariance. DiGiuseppe, Miller, and Trexler (1979) that concluded that studies indicate that elementary school children are capable of acquiring knowledge of rational emotive principles and that the modification of a child's self-verbalization or irrational self-statements can have a positive effect on emotional adjustment and behavior.

A few of the summary descriptions of Rational Emotive Education (REE) also were found in dissertation abstracts. Albert (1972) looked at the use of REE to reduce anxiety in normal fifth grade students. He found that the effectiveness of REE was demonstrated by the study in allowing young people to reduce their own anxieties. Katz (1974) examined the use of REBT concepts and the use of small group counseling. This researcher found that self-esteem was boosted by participation in the REBT group. Brody (1974) compared

group work with REE to non REE groups of fifth grade students and found a lessening of anxiety and tolerance for frustration in this population. DiGiuseppe and Kassinove (1976) found in an experimental study that REBT concepts in groups setting reduced the neuroticism and anxiety of fourth grade students in the study but was not significant in eighth grade students. However, REE and REBT tenets did successfully instill in these students the ability to recognize and control irrational beliefs. Babbitts (1979) in a study with anxious 12-14 year olds discovered that REBT had a significant impact upon anxiety of students who had to make speeches. The REBT group showed the value of using these techniques in helping students deal with their apprehension for public speaking. Warren (1984) showed in a correlational study that the irrational beliefs of eleventh grade students was greater than those in grades 9, 7, and 5 in the group surveyed. It was found that a significant increase in irrationality occurred in grade 11 for whites, but not for blacks. Comparing males and females showed no significant difference.

It is very difficult to make generalizations concerning the findings of these studies. It is clear that some studies suffer from a lack of valid and reliable assessment instruments to measure changes in emotions just as this study does. Dependent behavioral measures have been too global, masking more specific changes in behaviors. The heterogeneous composition of experimental groups and the use of parametric statistics also serves to mask potential changes in individual subjects. This study employs gender-pure groups, pre and post study assessment along several variables. This study employs a control group and also uses data from self-reported sources and observational data. Certain early studies (Albert, 1972; Knaus & Bokor, 1975) suffered from a number of difficulties which limit their internal and external validity, including: (1) no pretest was administered to assess initial differences; (2) an attention-placebo group was lacking to control for the "Hawthorne" effect; and (3) only self-report dependent measures were used (DiGiuseppe, Miller, & Trexler, 1979). The use of these help to improve the sensitivity and power of

experiments. In addition, the lack of replication studies makes the confirmation of valid findings difficult to make.

There is little question that REBT concepts and emotional problem solving skills can be acquired by children as young as ten. With exposure in nearly all studies in groups of young people (roughly between six and ten in a group), it is clear that REBT can be imparted to adolescent clients that empower them to solve some of their own problems in life, either as part of the normal school setting or as an outside group effort. REBT can be employed with young people to reduce emotional problems of anxiety and low self-esteem either in individual or group settings. Wilde (1995) and Anderson (1985)have done a studies which looks at the effects of REBT on anger management in students that may be failing at school and at appropriate social behavior. However, there have been few if any studies that examine rational thinking skills of at-risk adolescents. There have also been no studies that specifically look at school attitude and many of the observed dysfunctional behaviors of the at-risk population. It may be that those studies which failed to find significant effects employed practitioners who were inexperienced or met with the children only briefly. A very strong and consistent finding is that children of all ages can acquire the content of REBT counseling and use such content to modify their beliefs as measured by the two available tests of irrationality in children, The Idea Inventory and The Children's Survey of Rational Beliefs. Changes in irrational beliefs of young people have not generally resulted in concomitant large-scale changes in behavior such as increasing assertiveness or reducing aggression. Present and future studies will need to examine changes in specific behaviors (e.g., talking more to peers, increasing study time, increasing attendance, decreasing inappropriate behaviors, attitude toward school, interpersonal skills and self-management skills) in relation to changes in specific irrational beliefs (eg. "I hate school", "That person has done something wrong to me and must be punished", "The world has to be fair to me", "It is horrible to be rejected"; "I can't stand homework").

In terms of bringing about cognitive change, there are consistent findings which indicate that REBT does not bring about changes in causal attributions from external to internal. As such, present and future REBT treatments should more fully emphasize how emotional control and responsibility increase the potential for behavioral self-direction (Dryden, 1988). Ellis (1977) stated that if you are feeling okay (not overly upset), you can do many different things you never thought possible if you set your mind to it (and with a little practice). The individual can control the world as much as the world controls the individual.

Changes that are brought about by REBT have up to date currently been limited to changes in specific emotions and behaviors. Large-scale changes, as measured by standardized personality measures, have generally not been found. This has been probably due to the relative inexperience of practitioners who conducted the studies. Few experimenters have received either formal training in REBT at any of the Institutes for Rational-Emotive Therapy and Rational Living across the United States or intensive supervision in RET at their university or college-and to the limited time spent with children. Specific emotive-cognitive-behavioral change can be brought about by relatively inexperienced REBT practitioners who see children for no more than 10 to 12 sessions. Master's and Ph.D.'s should probably be designed accordingly. More extensive change should only be attempted by "seasoned" REBT practitioners who have longer periods of time available to them. This is especially the case when subjects are drawn from abnormal populations. Common sense would dictate this. We are a long way from knowing which components of REBT are the important ones. Recent studies suggest that the more methods you utilize the better. The use of rational-emotive imagery, behavioral rehearsal, and written homework is advisable. The optimum package of REBT for school-age children needs to be determined before we separate active ingredients.

Because of a limited number of studies with equivocal and, at times, contradictory

results, it is impossible to make any statements concerning whether the age, sex, race, and intelligence of young subjects/clients interacts with the effectiveness of REBT. While such variables differentially correlate with the incidence of specific and overall irrational beliefs, little guidance can be provided concerning optimum client-treatment matches (Mahoney & Lyddon, 1988).

It has only been within the past few years that a limited number of studies have appeared in the area of special education. One study (Elluto, 1980) suggests that students with lower intelligence have some difficulty in acquiring basic rational-emotive principles in a short time period. Work with learning-disabled students (Meyer, 1982) suggests that REBT group counseling can have positive effects when the concepts are graded and appropriately structured. There appears to be great promise into the next millenium for the modification of a REBT program for use with this school-aged populations.

Let's Get Rational As An Approach To Working With Students

This is advertised as a counseling board game that can be used with both groups and individuals (Wilde, 1990). It can be used with clients aged 11 through adulthood. Actually, a more accurate statement would be to say that individuals who can use abstract reasoning skills are appropriate for this game. Up to nine individuals can play at one time. The game is played like most standard board games. A die is rolled and a player moves the required number of spaces and performs whatever action is requested depending upon the square on which the player lands. Approximately one-half of the squares have very clear directions designed to encourage self-disclosure. Examples include: Tell the group about a conflict you had this week. Move to a square of your choice and follow those directions. Tell the person to your left one thing you've learned about him/her through this group. Tell the group what is most on your mind today. Tell the group what you would like to improve about yourself.

The four Affirmation squares (one at each corner) have a special purpose. When a player lands on an Affirmation square, the other players in the group take turns stating one positive, affirming statement about the player. Finally, the player who landed on the square makes a self-affirming statement. Affirmation squares can have a dramatic effect on the group. The sharing of affirming statements can be a very emotional experience and can draw a group closer together in a hurry.

Two Role-play squares are included. These are designed to give players practice performing an action that is difficult for them. Some of the Role-play cards focus on the A,B,C system discussed throughout REBT. The group performs an A,B,C, and D analysis of a situation where a group member finds it easy to make themselves angry. Players perform an A,B,C, and D analysis of a situation where a group member puts themselves down because of their behavior. Role-play being assertive in a situation where it would be best to stand up for yourself. Role-play resolving a conflict with a friend or family member. These are examples of the utility of the game's components to present members many teachable moments and reinforcing moments in group counseling.

Ten squares are entitled "Rational Reminder Pick-up Cards." When a player lands on one of these squares he/she picked up a Rational Reminder Pick-Up Card and read aloud the card's saying. Some examples are as follows: Life does not have to be better or different because you want it to be that way. You can either accept life or make yourself miserable with your own irrational thinking. No one likes frustration but we can darn well stand it. There are no "bad" people, just people who at times act badly. We do not run the universe; therefore, we cannot get what we want just by demanding it. You can make it without love. Few people like it but we all

can stand it. Nothing in life is so bad that you can't stand it. You can make things seem worse than they really are by exaggerating the problem. No one ever guaranteed that life would be totally fair. Accept life's bad breaks with its good fortune. Group members are

asked to read the card aloud and then say the message in their own words inviting comments from other group members.

Let's Get Rational has many advantages for working with adolescents. The game is enjoyable and non-threatening counseling is attended more regularly. The game format is encouraging enabling even the most resistant clients to "open up." The forced communication of squares and cards gives people permission to share. Many so-called, "tough" kids will open up and chatter continuously once they've landed on a game square. In formal therapy this would be a violation of their image but when it is in a game format, it seems acceptable. "Let's Get Rational provides a great many "teachable moments." The game is merely a tool and can be used to emphasize certain points. Blank cards are included, and counselors are encouraged to make up their own cards that apply to their groups. The game is generic enough in its concepts that nearly any problem can be addressed through these cards. This is what some have referred to as the "horoscope effect." For example, a Rational Reminder Pick-up card may read "You can be your own worst enemy. No one else can make you feel worthless." Many times a player read a card and it appeared that the group was just discussing such a topic. The game is timely and appropriate for these young people. LGR can be used in a wide variety of groups: children of alcoholics, children of divorce, anger control groups, self-esteem groups, at-risk students, and social skills groups.

Wilde (1993) investigated the effects of use of Let's Get Rational with adolescent students in the areas of rational thinking, depression, and self-acceptance. Students in the experimental group played the board game for one 52 minute period each week for seven weeks. Three dependent measures were examined: rational thinking, depression, and self-acceptance. The results indicated that use of the game in a group setting had a significant impact for the participants on the three variables. Ninth grade subjects reported less irrational thinking than did the control group of ninth grade students. Finally, tenth grade

experimental subjects were significantly less depressed than the control group of tenth grade students. The results of the study suggest that Let's Get Rational was an effective therapeutic tool for use with adolescents. Younger experimental participants seemed to benefit more from the sessions than older experimental subjects. It was suggested that future research could focus upon the effectiveness of the game with other school-aged populations, various clinical populations, and with elementary-aged children. The present study was based upon some of the major ideas in Wilde's work. The study examined rational thinking, attitude to school, social competence, and anti-social behavior.

Dependent Variables

Rational Thinking

Goldman and Maultsby (1974) have compiled a list of the consequences that may result from irrational thinking. The behaviors included here are prevalent in the at-risk adolescent populations as well as adults. These people may experience a high degree of interpersonal difficulties. Emotionalism governs their approach to daily problems. People regularly want what they cannot have in life; therefore, they upset themselves about their inability to get this all-important thing. Similarly, these people do not want or do not appreciate what they have or are capable of getting. There is a tendency of people who harbor irrational beliefs to blame all of their difficulties on others. These people view themselves as worthless. They are trying to achieve goals that are sometimes contradictory. They simply tolerate situations that are dysfunctional rather than try to help the situation at all. These people are continually dependent upon others. They may have intense and prolonged bouts of anger. They demand perfection from themselves and from others. These people may engage in behavior that may cause themselves injury of further retards the person's growth and development. These persons live largely in the past and continually obsess about the past and torment themselves over real or imagined failures.

These persons have a high rate of depression and anxiety, unreasonable fears and excessive anger.

Bernard and Joyce (1984) state that the determination of whether a given belief will lead to one or more emotional and behavioral problems in children depends upon the number of irrational beliefs the child holds, the range of situations in which the child applies his ideas, the strength of the child's belief, and the extent to which the child distorts reality as observed in errors of inference about what has happened or what will happen. Ellis, Mosely, and Wolfe (1966), Ellis (1973), and Ellis and Bernard (1983) have identified three major groups of irrational beliefs in childhood. The first group deals with personal identity and self-worth. Adolescents who hold this view feel it is a dire necessity to be loved by everyone for everything they do. The feel that they should be thoroughly competent, intelligent, and achieving in all possible ways. Youth who hold this set of beliefs will have feelings of inferiority, worthlessness, guilt, and anxiety, and will work compulsively to succeed in everything they do. The second group deals with demandingness, and awfulizing. These students believe that they should always get what they want, and it is horrible when things do not turn out the way they want them. This manifests itself in feelings of anger, hostility, and jealously and is shown in aggressive behavior and underachievement. The third group of irrational beliefs centers around the concept of discomfort anxiety (Ellis, 1973).Some adolescents cannot stand being uncomfortable for any reason. They believe that it is catastrophic to be frustrated and that life must be easy and comfortable for them all of the time. It has been noted many times that students avoid schoolwork very frequently find it impossible to tolerate or endure these feelings of discomfort when confronted with the many tasks that are part of attending school (Waters, 1982).

Many current studies have pointed to the development of rational thinking and how this can have positive empowering effects upon the students under study. Kochman and

Mazer (1990) examined the effects of REBT on the rationality, the neuroticism and the defense mechanisms of adolescents. LaConte (1993) employed REBT to test its effects upon at-risk middle school students. A similar study was done by Maultsby (1986) in which he sought to teach rational self-counseling to middle school students. Ozimo (1986) investigated the use of rational emotive education with the self-concept and locus of control of adolescents. Bernard and Joyce (1984) have employed REBT in dealing with issues of loss and divorce. Kornfield (1996) used computers to teach rational thinking skills to 61 students who for one reason or another were experiencing low self-esteem. It focused on rational thinking in four major categories: peer relations, academic ability, role in the family, and body image. Ayers and Hopf (1987) have endorsed REBT for use in instilling rational thought patterns in children and adolescents. Brawner (1987) found that the use of group REBT techniques made only a small contribution to the school performance and self-concepts of adolescents.

Sabotta (1980) stated that school counselors seemed to be moving away from band-aid approaches in favor of programs of deliberate psychological to offer developmental guidance to high school students. The results were inconclusive, but two points emerged from the study. The contribution of rational thinking skills to academic achievement was significant. Also, the contribution of rational thinking alone was significant, but only for males and not females. However, the other contributions were not significant. More research was recommended by the author. Morris (1992) compared 281 adolescent leaders to normal, at-risk, and early school leaver groups on a measure of rational/irrational thinking. Student leaders possessed fewer irrational beliefs than did the other groups. Cangelosi, Gressard, and Mines (1980) found that a Rational Emotive group experience based primarily upon cognitive restructuring exercises significantly increased the self-concept of the subjects in the study. It also showed significant effectiveness in increasing scores on behavior, anxiety, happiness, and satisfaction scales. Kordacova (1994)

examined the degree that rational/irrational beliefs that us independent of the correctness/erroneousness in formal, logical reasoning. He also wanted to see the relationship between irrational beliefs and the creation of a common core of reasoning (common sense). The work in the study indicated that irrational beliefs were formed in spite of the subjects' ability to deduce logically correct conclusions from the point of view of formal rules of logic. The author concluded that in spite of the fact that irrational beliefs have the character of inadequate attributions of other thinking distortions, it does not seem psychologically satisfactory to define irrational beliefs in terms of logical thinking.Laconte, Shaw, and Dunn (1993) evaluated the impact of rational emotive counseling on the self-concept and grades of 23 middle school students who were identified as being at high risk for dropping out of school. The curriculum was Thinking, Feeling, and Behaving by Vernon (1989). Inconclusive results were seen from this study.

Attitude To School

Another variable that was examined in this study is the attitude of the at-risk adolescent to school. Several researchers have looked at this variable in many different ways. Bass (1981) examined student attitude toward school. The study centered upon five categories: motivation fro schooling, academic self-concept -- performance based and referenced based, student's sense of control over performance, and student's instructional mastery. The major finding of this study indicated that there was no significant relationship between students' attitude toward school and attendance in grade nine through twelve. Females indicated that they were more highly motivated toward school than males. Bowman (1993) did an exploratory study that traced the relationship attitude to school to student self-reported moral behavior. It was found that students recognize principled moral judgments significantly more often than does the normative sample. These students expressed more positive attitudes toward school, in particular, positive regard for teachers.

Shrum (1987) demonstrated that training in positive attitude awareness with high school students can yield very positive results in the area of self-concepts. Kirkland (1978) examined the impact of a divorce on secondary students' self-esteem and attitude toward school. The study indicated that students who have experienced a divorce in their family had lower and more negative attitudes toward school and less self-esteem than students from intact families. Sierer (1988) investigated the concerns and attitudes of ninth grade students in a high school. In the study 190 students were surveyed to obtain information on the attitudes toward school and concerns arising from their transition from middle school. Results of the study were factor analyzed and indicated that such factors as the need for self-direction, confidence about academic performance, friendship, belongingness in the school, poor progress in school, general dislike of school, and positive attribution all were indicated from the sample population of the study. The students indicated that not being accepted by their peers and their teachers as the two most important reasons that students failed to adjust to school.

Lorenzen (1986) evaluated the effectiveness of short-term adolescent group counseling on underachievement, coping skills, and school attitudes. The objectives of the study were to improve students' attitudes toward authority, responsibility for academic performance, and attitudes toward coping strategies. The study recognized the importance of group programs to change student attitude and adjustment. However, researchers must recognize the limitations of their programs goals. Macquigg (1986) investigated relationships which might exist between variables measuring alienation feelings in high school students and variables measuring attitude exhibited by those students toward the school environment. Findings revealed that the single most influential environmental factor related to student alienation in this study was a feeling of pressure in the school setting. Most of this was related to both personal incapacity and feelings of guidlessness. The greater the student's feelings of personal incapacity the more unpleasant students felt their

experiences were with the school. Guidelessness was associated inversely with both students' attitudes of pleasantness/unpleasantness and the attitudes of importance/unimportance toward the school curriculum and others at the school. Miller (1982) sought answers about the in-school suspension setting that involves personal counseling, bibliotherapy, and writing therapy results in better attitudes toward school attendance. It was found that those students in therapeutic discipline held less positive attitudes toward school attendance. They had better records of attendance in classes and had fewer truant absences. They also demonstrated greater insight into attendance problems.

Charles (1981) investigated the attitude, school-related experience, and feelings of alienation of in-school suspended, and non-suspended students. Suspension status, race, and sex were the independent variables in this study. The findings showed that there was a significant difference in attitude toward school between suspended and non-suspended white and black students. There was no difference between suspended and non-suspended blacks. Black non-suspended students showed a higher level of alienation to the school environment than did white non-suspended students. Loughrey and Harris (1992) examined adolescent alienation and attitudes toward school of 466 students including Hispanics, Native Americans, and Whites in 4 public high schools in a southwestern state. Results showed that Hispanics and Native Americans scored higher on involuntary dimensions of alienation (personal incapacity and guidelessness), whereas Whites scored higher on voluntary alienation (cultural estrangement). There were also significant effects found for sex, grade point average, support at school, pressure at school, and interactions between sex and support at school and between ethnicity and pressure at school. Brandt (1985) compared the attitudes of adolescents in secondary schools in the United States and in Grenada [729 students] and found that the Grenadians had a significant enthusiasm for continuing their education. with a penchant for technical careers such as engineering and

science.

Selected Social Behaviors

One of the major aims of this study was to effect changes in the kinds of observed behaviors that have plagued at-risk adolescents in school and have led to their inability to continue attendance in a regular day school. The instrument employed in identifying this is The School Social Behavior Scales (Merrell, 1993). This was an observational questionnaire that was filled out by professional school personnel [teachers, administrators, and counselors] about students with whom they are working. The data derived from this instrument was divided into two major parts, social competence and anti-social behavior. The scale was designed to measure the social competence of the students in three areas. They are interpersonal skills, self-management skills, and academic skills. Social competence is described as adaptive or positive social behaviors that are likely to lead to positive social outcomes. The scale also measured anti-social behavior including hostile/irritable behaviors, antisocial/aggressive behaviors, and demanding/disruptive behaviors. These behaviors refer to concerns that either are other-directed in nature or are likely to lead to negative social consequences such as peer rejection or to strained relationships with teachers.

Social competence is a complex, and multifaceted concept that has been explained several different ways in the literature. A cognitive definition proposes that social competence includes overt behaviors, cognitive processes, and cognitive structures (Meichenbaum, Butler, & Gruson, 1981). Foster and Ritchey (1979) have offered a more behavioral definition and referred to it as responses which, within a given situation, maximize the probability of producing, maintaining, or enhancing positive effects for the interactor. Hops (1983) also proposed that social competence implies a summary term which reflects social judgment about the general quality of an individual's performance in a given situation.

The concept of social competence is related to other constructs like social skills, social acceptance, and rejection. Some writers view social skills as a subcategory of social competence (Gresham, 1986; Gresham & Reschly, 1987). Social acceptance and social rejection are concepts that reflect an individual's social status with peers and may be measured by means of a sociogram according to Landau and Milch (1990).

Importance And Contribution Of This Study

The work in this study is of importance to educators and school counselors today as more and more of our young people are faced with the hard choice of staying in or leaving school. The school counselor is in a position to provide increased services to these students through a variety of educational and counseling means. This study compared group counseling interventions employing REBT to serve students who are definitely at risk for dropping out of school. Jacobs, Harville, and Massen (1996) have stated that it is important for a counselor who is embarking upon work with clients to have a theory of disturbance and a regimen of help as a guiding direction for approaching the multi-faceted problems of these troubled young people. REBT was the basis of the group counseling in this study.

This study was of significance because it attempts to examine the effectiveness of REBT interventions in a group setting with at-risk adolescents. It addressed the problems they may be experiencing in their lives, examined the beliefs that engender their feelings and emotions, and disputed those beliefs that are irrational and dysfunctional. Moreover, it taught participants to analyze these dilemmas in their lives on their own and imparted to them a set of skills, attitudes, and beliefs. These will serve them well in coping with the completion of their school experience by providing them with tools to handle daily frustrations and set-backs that plague young people who wish to be out of school prematurely. The work in the study helped them move toward living the remainder of their lives, free of irrational and dysfunctional thinking.

There are many approaches open to school professionals in dealing with this population. The school counselor is at the heart of many of these efforts and should have effective tools with which to face a myriad of adolescent problems. REBT group counseling may present one of the most useful tools available for use with these students. The use of the board game, Let's Get Rational, may be the most inviting and non-threatening way of introducing the student to the concepts of REBT. The ultimate aim of this study was to determine how useful this was with the at-risk population and to compare its effectiveness with more traditional REBT group counseling interventions. This study is a search for answers about just one set of tools for use with the adolescent population that no longer values education or who have behaviorally disqualified themselves from continuing their progress in a regular school setting. It also will gave the counselor the advantage of meeting the challenges of the at-risk population with new resolve. This empowered adolescents to begin to see the common threads of dysfunction in their current behaviors and provided them with the rationale and methods of doing something about their problems themselves. It was hoped that this group counseling served them well as they moved closer to completion of their high school education, in a regular or an alternative setting.

Summary

This review of the literature examined the nature of the population under study and concluded that the need is urgent to apply reliable methods to helping at-risk young people over difficult points in their lives. All children and adolescents are at risk at one or more junctures in their lives. A litany of problems plague the at-risk adolescent including adolescent depression, which by itself is a most debilitating condition and which can be treated to allow students to move on with their lives. Blaming the victim too often becomes the fall back for many educators rather than seeking answers to the problems of adolescent dysfunction. Teen suicide, sexual behavior, increased stress and pressure,

substance involvement, low school achievement, and delinquency have too often taken center stage in the lives of young people as a way for them to drop out of a society that they view as no longer relevant. Arresting this spiral of despair may be one of the more important things we as educators and counselors can do for the at-risk adolescent. Providing these young people with alternative ways to handle situations that might escalate into major problems in their lives can be very useful in enabling them to fulfill a successful end to their school careers.

Adolescence is a time when the youth is both seeking to conform and daring to be different. They have one foot in the world of adults and one foot rooted in the midst of childhood. Academic skills and the transforming of one-time failures into adolescents that can point proudly to their accomplishments. Discovering the root causes of this underachievement and changing the thinking of these young people toward excelling in their work is extremely vital for their own success and feelings of self-worth.

This writing has examined some of the more successful programs employed by schools around the country in serving at-risk populations. Many of these programs of educational and emotional support employ group counseling. Group counseling with adolescents, in general and at-risk adolescents in particular, can play a meaningful and useful role in achieving satisfactory results by empowering these young people to move ahead with their education and their lives. It examines counseling that is problem-focused and centers upon a particular dilemma which may be behavioral, personal, educational, social, or vocational. Group counseling has preventive and educational purposes as well as some remedial aims. The group involves an interpersonal process and problem-solving strategies that stress conscious thoughts, feelings, and behaviors.

REBT is useful and appropriate for use in the schools because it views its major thrust as that of teaching clients the ways that would enable them to help themselves resolve their own problems. The most noted techniques of REBT empower these students to better

face the continuing trials of life. The techniques seem to be in accordance with many of the goals of education today. REBT maintains an emphasis on teaching and prevention which imparts to clients sane mental health concepts and the skills to use in school and in life. Most counseling approaches do not emphasize skill acquisition in a deliberate manner such as this; thus, the concept of teaching mental health skills to children and adolescents remains an important distinguishing feature of REBT. The basic principles of REBT can be easily understood, applied, and adapted to children of most ages and intelligence levels. REBT is more time-efficient than other therapies, permitting more effective use of the counselor's time. Overall, rational counseling helps the child learn to live in her or his own environment free from dysfunctional thoughts and behaviors.

REBT employs a wide range of techniques and procedures in reaching therapeutic understanding of problems of life. A board game, Let's Get Rational (Wilde, 1990), has been employed with young people in many different settings to act as a non-threatening way to encourage even the most resistant clients to "open up." The game is merely one of many tools that can be employed effectively with adolescents. Nearly any problem can be addressed through this game.

The variables in this study were practically related to being successful in school. Which intervention is most effective in relieving the consequences that may result from irrational thinking? At-risk adolescent populations seem to have a high rate of interpersonal difficulties because emotionalism governs much of their daily lives.as well as adults. Irrational beliefs cause young people to blame much of their difficulty on others. Young persons sometimes view themselves as worthless. Despite contradictory goals, these adolescents tolerate situations that are dysfunctional rather than try to help the situation. Young people are continually dependent upon others and may have intense and prolonged bouts of anger. There are students who demand perfection from themselves and from others which may cause themselves injury of further retards the person's growth and

development. Many adolescents live largely in the past and continually obsess about the past and torment themselves over real or imagined failures. These students have a high rate of depression and anxiety, unreasonable fears and excessive anger.

Another variable in this study was the attitude of the at-risk adolescent toward school. Several researchers have looked at this variable in many different ways. Such factors as the need for self-direction, confidence about academic performance, friendship, belongingness in the school, poor progress in school, general dislike of school, and positive attribution have been indicated as elements of the attitude of at-risk adolescents toward their school experience. Many have recognized the importance of group programs to change student attitude and adjustment. One of the most influential environmental factors related to student alienation was a feeling of pressure in the school setting which was related to both personal incapacity and feelings of guidlessness. The greater the student's feelings of personal incapacity the more unpleasant they feel their experiences were with the school. Therapeutic group counseling has shown that students can be empowered to hold more positive attitudes toward school attendance.

One of the major aims of this study was to determine if there is a significant difference between two REBT interventions in ameliorating the kinds of behaviors existent in at-risk adolescent population. The study viewed these behaviors as having two dimensions. One was social competence, and the other was anti-social behavior. The work in this study was designed to measure the social competence of the students in three areas: interpersonal skills, self-management skills, and academic skills. Social competence is adaptive or positive social behaviors which include hostile/irritable behaviors, antisocial/aggressive behaviors, and demanding/disruptive behaviors. These are other-directed in nature or are likely to lead to negative social consequences such as peer rejection or to strained relationships with teachers.

This chapter was designed to acquaint the reader with studies that have been done

regarding REBT interventions that have been done with children and adolescents. The use of group counseling to empower these students to overcome many of their difficulties was the overall setting for this study, and the use of REBT interventions brought that setting into focus. The ultimate results of this investigation showed that these interventions may work well with a rather difficult and amorphous population that tends to end education in their lives prematurely. It was the ultimate goal of this effort to impart to these adolescents the tools to be successful in school and, as an extension of this, in society.

CHAPTER THREE

Methodology

Design

This study was an investigation that was experimental in its design and execution. Some of the data gathered depended less upon standardized instruments or questionnaires than it did on teachers' and administrators' observation reports. The object of the study was to observe the effects of two group counseling interventions from REBT upon the thinking, attitudes, and behaviors of at-risk adolescents in a controlled situation to determine which was significantly more effective in helping them to develop more rational thought, to foster more positive attitudes toward school, to enhance observed social competence and to alter several of the more anti-social behaviors that may have contributed to these students being in an alternative high school.

This study was experimental because it investigated possible cause and effect relationships by exposing the two experimental cohorts, each composed of two counseling groups of eight students which were gender pure, to REBT group counseling techniques alone, to REBT group counseling techniques employing a counseling board game, Let's Get Rational (Wilde, 1990), and with a third cohort of two groups serving as a control. The variables were rigorously managed by direct control and random assignment. It concentrated on control of the study in order to maximize the variance of the mean scores on the variables of rational thinking, attitude toward school, social competence, and anti-social behavior. It sought to minimize the variance of unwanted or extraneous variables which might affect the experimental outcomes, but are not themselves the object of the study. The study avoided errors of measurement by careful collection and analysis of the data. This was facilitated through selection of the subjects from the school who had good attendance records, random assignment of the subjects to each of the two experimental

cohorts and the control cohort, and random assignment of the treatment. The major question to be answered in this study was whether there were significant differences in the pre and post study mean scores for at-risk adolescents by employing REBT group counseling interventions alone and those employing the therapeutic board game, Let's Get Rational (Wilde, 1990) as reinforcement of concepts learned in the group across four variables. A control cohort was also chosen randomly and received no treatment. The four variables chosen may be central to the understanding and helping at-risk students in an alternative high school.

Internal validity of this type of design was of the utmost importance. It was intended to answer the questions: Are there significant differences in the mean scores along four variables between three cohorts -- one employing REBT alone, one employing REBT and the game, Let's Get Rational , and one receiving no treatment at all. Secondly, are there significant differences in these mean scores between males and females. Finally, is there a significant interaction between the treatment groups and the genders on the dependent variables of rational thinking, attitude toward school, and the behavioral variables of social competence and anti-social behaviors?

Threats to internal validity centered upon several factors that may have had the effect of confounding the experiment. Confounding historical effects sometimes have a bearing upon an experimental study. Specific events may have occurred between the time that the participants are given the pre-study assessment and when they are administered the post-study assessment. There appeared to be no factors in this category would affect the outcome of the study. Maturational factors such as growing more restless or less attentive might have an impact on the results of the study. No evidence of this was present to affect the results. Pretesting factors were taken into account particularly since the same instruments were employed for the pre-study assessment as well as the post-study testing. The pre-study assessments may cause the students to changes their responses to the items

on the post-study assessment. Instrumentation factors that were important included changes in the obtained measurement due to changes in the observers (teachers and administrators). If the same person judges the performance of the individuals in the groups in succession or after the application of the experimental intervention, the observer's judgment may be changed because he/she becomes more experienced and discriminating, or more fatigued or careless. This factor was kept at a minimum since only teachers and administrators who were present at the school for the study were asked to complete questionnaires. The instructors and administrators were very familiar with each student and would be aware of any changes in observed behaviors they would display. There was a 10-week time period between the pre-study assessment and the post-study assessment. Innformed consent was obtained from the student volunteers' parents after their being oriented to the study orally and in writing.

Statistical regression was minimized by refraining from choosing subjects on the basis of extreme scores. There were no students in this study who were receiving special education services at the school. Selection issues were addressed by randomly choosing 48 students from a pool of volunteer students from the school who have good attendance records and then randomly assigning them to each of two groups in three cohorts. Then, the groups were randomly assigned as to whether they were REBT group counseling alone, REBT techniques using Let's Get Rational , or no treatment at all. Students at the school were employed for this study. Group members were selected from the students who have high rates of attendance at the school. This was an attempt to maximize the attendance at the group sessions, and consequently to increase the effectiveness of the work in the sessions and give the subjects the best opportunity to understand the concepts in the group. These students were substantially the same students as those who have been absent from class more than three times. Most of the students who attended the Evening High School were there for academic remediation rather than attendance issues.

External validity was also a concern of this design. The study answered the question of how representative the findings of this study were for this population of adolescents and if the results obtained in this study could be generalized to similar subjects and settings? Cautions regarding the external validity and representativeness of the study will be observed to avoid following confounding factors. The interaction effects of selection biases may not be generalizable to other schools or settings. The subjects in any subsequent use of these techniques must be as close as possible to the students originally chosen. Pretesting sometimes changes the participant in such a way that he/she responds differently to the experimental interventions than students who are not pretested. This was because of the caution that giving a pre-study assessment makes the participants more sensitive to the experimental intervention. Since all of the participants were pretested, differences that constituted this threat to external validity were kept to a minimum. Reactive effects to experimental interventions are important to note and to control. This included effects that may emerged from the experimental setting and would not be present in an non-experimental setting. There were specific limitations on how well this study could be replicated in other settings. Teacher-administrators-observers should not be apprised of the experimental nature of the study. If they alter their estimation of the behaviors they observe because of their belief that a student is part of an experimental group or a control group, there can be no claim that the effect of the experimental interventions for the participants in the groups will be the same as those who experience the REBT interventions in a non-experimental setting. In subsequent studies the procedures and findings may be generalized to students who have experienced the same sequence of treatments and interventions. For example, in this study, any replication should include the exact sequence of group sessions in both the REBT group counseling cohort and the Let's Get Rational cohort.

The experimental design is noted for its holding all variables constant except the

treatment variables. This determined if REBT group interventions are more effective when accompanied by the use of the game, Let's Get Rational in reducing rational thinking, improving students attitude toward school, fostering social competence, and diminishing anti-social behaviors of the subjects. The approach in this study was one of the most powerful that can be employed because it allowed control over all of the relevant variables. However, this design was the most artificial and restrictive, which was one of major weaknesses of this design. When conducting studies on human subjects in seemingly real-world situations, human beings sometimes behave differently from what is normal encountered if their behavior is artificially restricted, manipulated or exposed to systematic observation and evaluation. This was kept firmly in mind throughout the course of this study.

The internal validity of this design centered upon measurement of the variance between the pre and post study assessments of the four independent variables. A more powerful conclusion was made about both interventions with a control group comparison. Internal validity of the study was strengthened with this design because between-session factors are controlled since they affect all groups equally. Both of the group counseling cohorts were conducted with as identical a procedure, environment, and wording of assessment instructions.

The experimental design in this study was a randomized, control group, pretest-treatment-postest method which is diagramed as follows:

Group		Pretest	Treatment	PostTest
A	REBT Counseling Techniques Cohort*			
	Male Group [8 members]	T1	Xa +	T2
	Female Group [8 members]	T1	Xa+	T2
B	REBT Counseling Techniques &			
	Let's Get Rational Cohort*			
	Male Group [8 members]	T1	Xb#	T2
	Female Group [8 members]	T1	Xb#	T2
C	Control Cohort *			
	Male Group [8 members]	T1		T2
	Female Group [8 members]	T1		T2

*Subjects were randomly selected for participation in the study and randomly assigned to the groups.

+ Treatment Xa employed techniques from REBT group counseling alone with the members of Cohort A.

Treatment Xb used the therapeutic REBT board game, Let's Get Rational as a reinforcement of the REBT concepts rather than other group exercises from REBT with the members of Cohort B.

Within-session variations involve differences that the experimental and control groups may experience when they are tested and treated separately. The subjects in the study were selected from the students in the school who exhibited goo attendance defined as having miss onlt three or less days during the previous semester. They were randomly

assigned to the six groups [3 males groups and 3 female groups]. The treatment for the groups was also randomly selected as well. Each group met for its sessions in a separate room and continued to meet there throughout the duration of the study. The effects of any unwanted situational factors were thus randomly distributed among the subgroups, allowing them to be largely ignored.

To control for within-session differences, it was necessary to assign students, counselors, and treatments to the groups randomly. Participants were unaware of which groups were used for control and which were used for experimental purposes. Differential selection was controlled by random selection. Maturation and pretesting effects occurred equally for all groups.

The external validity of this design centered on whether valid generalizations to other persons and situations could be made. In the interaction of pretesting and the treatments, if the pre-study assessment altered the subject so that he or she responded to the treatment differently, then the external validity will be compromised. The students in the study should be as similar as those students to whom one wishes to generalize the results. It was assumed that the procedures employed in this study would be generalizable to groups, populations, and schools. The reactive effects of experimental procedures may hamper this generalization. If subjects know they are in a study they react differently, such as putting forth unusual effort]. This was controlled for by not allowing the participants to know which of the three cohorts would be tested for the experimental treatment and which would not.

Selection Of Subjects

Volunteer students in grades 10, 11 , and 12 at the Washington County Evening High School in Hagerstown, Maryland were identified and interviewed briefly for inclusion in this group counseling study at the school. An important criteria for inclusion in

the study was that their attendance at the school be very good, with each member not having missed more than three days in the previous semester. Attendance records were employed to verify that each student had not been absent more than the three days during the first semester. In order for this study to show meaningful results, the subjects had to be in attendance for the sessions. From these students 24 males and 24 females were selected. The subjects in this study were these 48 adolescent students, age 14 - 18, all of normal intelligence, who were enrolled at the Washington County Evening High School, a program for at-risk students administered by the Washington County [Maryland.] Board of Education and at risk of dropping out of school. The schedules of these students were surveyed to find out if they were compatible with the times the groups would meet. It is important for the students to attend the sessions regularly because group counseling does little good if the member is absent. Permission for this study was secured from all of the parents and guardians, the assistant superintendent for instruction, and the school's principal.

These students all have been at risk for several years for dropping out of school and were enrolled in this alternative setting to either complete their high school education or to improve their academic standing so that they can return to their regular high school programs. They had experienced a variety of problems in their home schools including academic failure, attendance problems, and behavior problems requiring administrative disciplinary action and suspensions. Each of the students voluntarily agreed to be a participant in this study, and appropriate permission forms (Appendix A) were signed and information letters were given to the students and to their parents prior to the students' participation (Appendix B). The procedures for the group sessions were thoroughly explained to the student and to each student's parents by the researcher. A letter to the faculty was prepared and distributed (Appendix C) before a faculty meeting was called to explain the procedures of the study.

Students in the two groups in each cohort were randomly assigned according to gender. Each of the identified student's preliminary information was placed on color coded 3 x 5 inch cards [Red for females and Blue for males]. The information included the name of the student, a code number, and the age of the student. Attendance information was also noted. A teacher selected at random from the faculty was asked to randomly select the cards for assigning each student to one of the groups. The cards were placed in a box from which she selected them one at a time and placed them in three boxes labeled A, B, and C. She selected 8 blue cards and 8 red cards for Cohort A. She then proceeded to select 8 red cards and 8 blue cards for Cohort B. Last, she selected 8 red cards and 8 blue cards from the remaining eighteen cards for Cohort C. The information on the cards was hidden from her by having the cards folded and sealed with tape. She then had three piles of 8 red cards and 3 piles of 8 blue cards. She then placed the piles in a configuration on a table, which allowed her to continue to randomly assign the groups of 8. She then placed the first 8 red cards under Cohort A and then placed the second group of red cards under Cohort C and then also 8 red cards under Cohort B. She performed the same procedure for assigning the blue cards. Therefore there were now three cohorts of two gender-pure groups each randomly selected and assigned. She then picked up three white cards which had on the reverse side the treatments of the study. She placed one card on the top of each pile of eight blue and eight red cards so that the subjects were selected from the volunteers who had good attendance records, randomly assigned to groups, and then randomly assigned the treatment or control groups. Cohort A was designated in this manner as the cohort which employed REBT group counseling interventions alone. Cohort B was assigned as the cohort which employed REBT group counseling reinforced by the therapeutic board game, Let's Get Rational. Cohort C was the cohort which acted as a control for the study and included no treatment at all. After the this procedure, the students were ready to be informed about which group they would be in. A schedule of meeting dates was also made

available to the students and their parents (Appendix D). Permission for students to be absent from class was negotiated individually with their teachers (Appendix E).

Orientation

The students chosen for this study were invited to attend orientation meetings on two evenings during the week prior to the beginning of the group sessions. Parents were also invited, and the students were encouraged to bring their parents to the meeting. Eleven parents were in attendance on the two evenings. The remaining parents were contacted by letter, phone, or in person to inform them of the study and secure their consent for their children's participation. The purpose and procedures of the study were reviewed again with the students. It was pointed out that group members would learn and practice interpersonal skills, discuss feelings, share ideas, practice new behaviors and, learn how to recognize behaviors that are not useful, and how to alter thinking that might lead to behaviors that would cause concerns in school. Participants were told that no rewards, penalties, or paid compensation would be forthcoming for being in this study. It was explained that all responses in the groups, on the student questionnaires, and on the teacher checklists would be held strictly confidential and that names will not be used on any of the student questionnaires. Instead, ID numbers were used to merge the data. These ID's were destroyed as soon as all of the data was gathered.

The parents and students were told that the results of the study would be group results with no individual student results available. A copy of the group results was made available upon request to anyone who would like to see them. Parents and participants were informed that group leaders would keep confidential all information shared in the group sessions and the information gathered from the questionnaires, except in situations where there was an ethical or legal responsibility to limit confidentiality. They were also told that if any student felt disturbed or uncomfortable with anything done in the group, individual counseling would be made available for that student. The researcher and the

counselors reemphasized that participation in this study was strictly voluntary and that a student may withdraw at any time and may also skip any items on the questionnaires that he/she preferred not to answer. None of the subjects withdrew or refused to answer the questions. It was also stated that if there were incompatibility issues between any of the group members, appropriate random reassignment would be done to remedy the situation. Any of these concerns meant that the students would be reassigned to other groups randomly. There were no incompatibility issues reported by the students. Students were given information on the schedule of group meetings and the importance of their regular attendance at the sessions (Appendix D). Parents were invited to the orientation meeting, as well was the administration of the school. The two principle master's level counselors who conducted the groups were introduced. Parent consent forms were explained, completed, and signed. The group sessions were not begun until all of the participants' consent forms had been signed and were received by the researcher.

These meetings were held the week before the group sessions would begin, important issues of confidentiality were reviewed and discussed with the student participants and the parents. The researcher reminded the parents that their son or daughter was part of a study and that the study was to be part of the work of the researcher in completion of a doctoral degree in counselor education at Virginia Polytechnic Institute And State University. The parents and students were reminded that the groups would be meeting for one 50 minute period once a week for 10 weeks and that the students in the study had been randomly selected from a pool of volunteer students. These students had also been randomly assigned to the groups and the treatments employed in the three cohorts had also been randomly assigned. Parents were informed that if their son or daughter was not chosen for one of the active cohorts [Cohort A or Cohort B] and was chosen for inclusion in the control cohort [Cohort C], these students would also be given the opportunity to participate in a counseling group after the study had ended.

The pre-study questionnaires were then explained to the participants and the parents in attendance. In addition, it was made clear that their teachers would be asked to complete observation checklists before and after the study about each of the participants in the study. The possible benefits of group participation were outlined again for the parents and students. An orientation meeting was done immediately the next evening for parents who could not attend the first meeting.

During the same evening an orientation meeting for participating faculty and administration was held. A letter had been given to the members of the faculty who had the students in class (Appendix C). Expectations for completing the questionnaires and general directions for the observers were outlined. Questions and answers cleared up any problems they had in understanding how to complete the observational questionnaire, the School Social Behavior Scales. A schedule of the meetings was distributed to the faculty members involved (Appendix D). The faculty and administration also agreed to allow students to participate in the study with no penalty. A form was provided for this purpose (Appendix E). Parents were provided with a copy of an information brochure which described almost every aspect of the study (Appendix L).

At the close of their orientation meeting, parents were dismissed and the the pre-study assessment was started. All of the participants from all three of the cohorts were administered the pre-study assessment on two evenings consisting of two instruments to measure a number of dependent variables. Instruments used were The Idea Inventory (Kassinove, Crisci, & Tiegerman, 1977) and The Majoribanks Attitude-To-School Inventory (Majoribanks, 1986). Students were assigned ID numbers which consisted of their first, middle, and last initials and the cohort letter and group number in which they would participate [Example: A.1.J.H.K.]. The two students who were absent on the two evenings of pre-study assessment were administered the questionnaires the next week and prior to their participation in the group work. Assessment conditions were identical for all

of the participants. Subjects were shown the room where the group session would take place.

Permission was obtained verbally and in writing to conduct this study at the Washington County Evening High School. A letter to the superintendent, Dr. Herman Bartlett, was sent early in the preparation process and a personal meeting was arranged in early December, 1997 (Appendix F) with him to discuss the aims of the study and the impact it would have on the school. After an enthusiastic appraisal of the study, he said he had no reservations to completing the study, but would have the Deputy Superintendent for Instruction, Dr. Teresa Flak, review the proposal and would let her decision stand as his. Dr. Flak approved the study on December 10, 1997 (Appendix G, Appendix I). The principal of the Evening High School approved the study on December 9, 1997 (Appendix H, Appendix J)

Instruments

Dependent Variables

The dependent variables for this study were rational thinking, attitude toward school, social competence [interpersonal skills, self-management skills, academic skills] and antisocial behavior [hostile-irritable behaviors, antisocial-aggressive behaviors, and demanding-disruptive behaviors] . Also, the comparative differences between male and female groups were noted to determine which techniques are more effective with males and which are more effective with females. The Idea Inventory and the Attitude-To-School Inventory were administered to each participant, and a copy of the School Social Behavior Scales for each student were given to participating faculty members to complete who had these students in class and were familiar with the students. Names of the participants were included on these observational checklists but were converted to code numbers after the questionnaires were completed and submitted.

The Idea Inventory (Kassinove, Crisci, and Tiegerman,1977)

The Idea Inventory by Kassinove, Crisci, and Tiegerman (1977) was employed to assess the variable of rational thinking. This scale is a brief assessment device that determines the degree of endorsement of a number of irrational ideas and can be administered to students in grades 4 through 12. It consists of 33 items which measures client endorsement of 11 irrational beliefs. Respondents are asked to answer A [agree], U [uncertain], or D [disagree]. Each of the items is stated as an irrational idea so that disagreement with each item purportedly represents rational thinking. A study by Kassinove, Crisci, and Tiegerman (1977) has indicated that irrationality decreased with age, although the relationship between individual irrational ideas and grade level was variable. In investigating grade, race, and sex differences in rational thinking, Briley (1980) found that the Idea Inventory correlated highly with the Children's Survey Of Irrational Beliefs (Form C) by Knaus (1974). Total irrationality scores on the Idea Inventory may vary from 33 [highly irrational] to 99 [highly irrational]. Each of Ellis' (1994) 11 core irrational beliefs was represented by three items in the inventory. Scores on each individual idea can be calculated ranging from 3 [irrational] to 9 [rational]. Only very limited validity and reliability data was available on the instrument; however, it has been employed widely in studies seeking to evaluate the outcome of REBT counseling interventions.

The Majoribanks Attitudes-To-School Inventory, Revised (Majoribanks, 1986)

This inventory is designed to assess students' affective and cognitive school-related attitudes. Affective attitudes center around emotionality and feelings that the individual has about school. These are measured by the 10 odd numbered items on the scale. Cognitive attitudes center around the student's positive or negative thoughts about school. The cognitive attitudes are measured by the 10 even numbered items. The inventory is a refined and revised version of an inventory that has been used in a number of studies such as

(Majoribanks 1986 & 1987). This study relied on the total final raw score as a method of determining significance between the groups. The students involved in the group counseling would begin to think differently about school and arrive at some new conclusions about continuing their education. The data showed both the degree of improvement in their attitudes toward education and their cognitive attitudes of the participants toward school. The validity and reliability of this instrument is very limited; however, it has been employed in many studies, including those listed previously.

School Social Behavior Rating Scales (Merrell, 1993)

The School Social Behavior Scales (SSBS) (Merrell, 1993) is a behavior rating scale specifically for use by professionals in school settings. It provides an integrated rating of both social skills and antisocial problem behaviors through ratings of students. The SSBS is designed to be used as an assessment instrument for detection of developing social behavior problems and as part of a multi-method assessment battery for conducting comprehensive assessments, determining program eligibility, and developing intervention plans. The scales are hand-scored with an easy-to-use key provided adjacent to the ratings. Scale raw scores may be converted to standard scores and percentile ranks. Sub-scale score are converted to Social Functioning Levels. The SSBS was standardized on more than 1858 students in grades K through 12, who represented all U.S. geographic regions. The SSBS is individually administered and takes about 10 minutes to complete. Internal consistency reliability ranges from .94 to .98 for the two scale totals and the six sub-scales. Median test-retest reliability is .77. Median inter rater reliability is .72. Validity was established by significant correlations between the SSBS and four other behavior rating scales and a direct behavioral observation procedure and by discriminant ability of the scales to identify at-risk students. The content validity of the SSBS measures how relevant its contents are to the construct being measured. The item-total correlations for Scale A

ranged from .62 to .82, and the item-total correlations for Scale B ranged from .58 to .86. Overall, the procedures used to develop the contents of the SSBS appear to be technically sound, and the resulting item-total correlations strongly substantiate the content validity of individual items.

Limitations

One of the major advantages of REBT is that it is very straightforward and direct. When students need assistance with a particular problem in the school setting, REBT offers a time- efficient way to deal with the problem. Only a short period of time is required before the counselor and students are focusing upon the problem and aiming at a solution. The focus of the problem-solving is in the present. Therefore, REBT group counseling is highly appropriate for use with adolescents in any group in the school setting. A limitation of this type of therapy may be that students might be as non-cooperative as they would with school in general since the thrust of REBT with school-aged populations is educative. However, it is an appropriate approach to counseling groups of adolescents such as acting out students, children of divorce, students who have suffered loss, and children of alcoholic parents.

Another limitation of this approach is that clients must have sufficient intelligence to understand the concepts and ideas that frame the work in counseling. All of the subjects in this study are of normal intelligence. It would not, for example, be appropriate for students who were developmentally delayed. The students in this study were chosen at random from the general population of the Evening High School who exhibited good attendance [defined as three or less days missed during the first semester]. Sufficient reasoning skills are essential for learning behaviors that will change success into failure, at school and at home. The type of group counseling may be generalized to apply to various populations such as children of divorce, children of alcoholics, self-esteem groups, or motivational

groups in the school. REBT empowers students with the knowledge and skills that will enable them to deal with the daily problems that each must face. REBT's approach to group counseling is highly adaptable to almost any intellectually normal population who can think through their problems and arrive at more functional and useful conclusions. It is highly amenable to young people who accept the fact that they are responsible for their own emotional upset and that they can indeed do something about the problems in life that confront them.

There are certain limitations to the generalizability of the results of this study to other populations and settings. It might be a challenge to find students who are willing to volunteer for a project like this in an alternative high school. Their attendance might also be uneven. The greatest strengths of an experimental research design, due largely to random assignment, is its internal validity. One can be more certain than with any other design about attributing cause to the independent variables. The greatest weakness of the design may be this external validity. It may be hard to generalize results beyond the laboratory. The selection procedures and randomization procedures employed in this study might not be appropriate for other settings. The subjects in any subsequent use of these techniques must be as close as possible to the characteristics of the students originally chosen for this research study, and they must also be students who have good attendance records.

The major limitation in this study centers upon the lack of reliability and validity of two of the instruments employed. The Idea Inventory (Kassinove, Crisci, and Tiegerman,1977) assesses the variable of rational thinking. Although very limited validity and reliability data are available on the instrument, it has been employed widely in studies seeking to evaluate the outcome of REBT counseling interventions. The Majoribanks Attitudes-To-School Inventory, Revised (Majoribanks, 1986) was designed to assess students' affective and cognitive school related attitudes. Affective attitudes center around emotionality and feelings that the individual has about school. These are measured by the

odd numbered items on the scale. Cognitive attitudes center around the students' positive or negative thoughts about school. The validity and reliability of this instrument is very limited; however, it also has been employed in several studies to gauge school climate and outcome studies such as this one. The School Social Behavior Scales (Merrell, 1993) is a behavior rating scale specifically for use by professionals in the school setting. It provides an integrated rating of both social skills and antisocial problem behaviors through observer ratings of students.

Procedures

Students enrolled in the Washington County Evening High School in Hagerstown, Maryland were selected for this study beginning as soon after school started for semester II. Classes resumed after the winter vacation break on March 23, 1998. Preliminary selections of the pool of participants were selected from among students who regularly attended the Evening High School program. A total of 48 students who had excellent records in the school were selected and assigned to the experimental and control groups. Parent permission forms and student consent forms were completed and signed before any of the activities in the study were started. When the potential participants were identified and proper permission forms were signed and returned, the participants were randomly chosen and assigned the treatment and given the pre-assessment. Selection of these students occurred on March 20, 1998 and followed the procedure outlined in the section on selection of participants. Orientation meetings were held for group members and parents were held on March 23 and 25, 1998. Pre-study assessments were held during the week of March 23. The group sessions met according to the following schedule to a published schedule (Appendix D)

One masters-level school counselor who is oriented in the use of REBT group counseling led Cohort A. This counselor conducted two of the groups that are REBT in approach without the aid of the game, Let's Get Rational. A second masters-level counselor

conducted two groups with the students in Cohort B employing the REBT board game, Let's Get Rational. On-going training and consultation was held with the two group counselors, and an understanding of the approach was made clear to each of these leaders. A pre-group session was held with each of the groups to orient them to the group itself. The group leaders outlined and coordinated the topics and the exercises that were explored in the group sessions and suggested some ground rules for group members. The topics employed in both cohort groups were as close to identical as possible with some latitude about when and how the topics were explored by each group.

The pre-group orientation session was important because it also allowed the participants the opportunity to see who is going to be part of the group and look into the potential of this experience. If any member objected to being in a group with any other member, they would have been randomly assigned again to one of the other groups. This did not occur. Sufficient information was presented to each prospective group member about the purpose of the group, the length of each group session, and the number of sessions that would be conducted. The pre-group session was held in the room where the group sessions took place. Each group of eight students met separately for this session. A schedule of the dates and times of the sessions was given to each participant. Student questions were answered. Students were reminded that only volunteers were included in the study. They had agreed to be a part of the study and it was made clear that attendance would be a factor that affected the outcome of the work. The students were urged not to miss any of the sessions. The groups included in this study were closed groups which did not add additional members over the course of the sessions and were conducted for 50 minute periods each week for 10 weeks of the study.

REBT Group Intervention Techniques

The emphasis of REBT group counseling with adolescents is to help them learn rational self-statements and also to learn to challenge their own irrational beliefs. The goals

of designing and selecting activities and materials for use in an REBT group setting was to promote internalization and consolidation of rational thinking, to ensure that the students make the concepts their own by integrating them with their own ideas and experiences (Bernard & Joyce, 1984). By repeatedly applying these concepts in a variety of situations, the ideas became part of their repertoire of skills for coping with situations and events in the school setting that cause problems. The problems include demands upon self, demands upon others, making situations much worse than they are, and self-rating. These skills also are useful in living outside of school.

REBT groups with adolescents focused on several themes and objectives (Bernard 1979). The topics of the sessions with the REBT-only and the REBT-Let's Get Rational groups in this study centered on the following directional objectives:

Session 1**:** The group members explored human feelings through interaction under some leader direction. Students were free to describe feelings and the role that these play in their lives (Diguiseppe and Bernard, 1990). Students stated the words that describe common feelings and identified situations which engender various feelings. The group learned the difference between strong and weak feelings and developed a way of classifying their feelings in regard to intensity. Exercises from Thinking, Feeling, and Behaving: An Emotional Education Curriculum For Adolescents. (Vernon, 1989). Students in the game group substituted Let's Get Rational for some of the more conventional REBT discussion activities.

Session 2: Members learned that thoughts cause feelings (Ellis, 1994). They became aware that pleasant thoughts can cause pleasant feelings and unpleasant thoughts can engender unpleasant feelings. The group work enabled the members to give examples and discuss their own pleasant and unpleasant thoughts and how they gave rise to unpleasant feelings. The members were encouraged to relate examples from their school experience (Ellis, 1994). Groups in Cohort A employed these approaches alone while

Cohort B employed Let's Get Rational as a reinforcement of the concepts learned (Vernon 1989).

Session 3: Group members identified which of their own thoughts led to pleasant and which led to unpleasant feelings in the school and at home (Dolliver, 1977). The group applied the happening--thought--feeling--reaction diagram (Bernard & Joyce, 1984) in analyzing their own feelings in certain situations and in helping to analyze the feelings of other members of the group. Students were encouraged to express the thought that had preceded the feeling because the thought occurs very quickly. Members were encouraged to express the thought that they tell themselves when life situations arise. They came to realize that what they thought guided what they did and how they felt in many instances in life. The point was made that by changing your thoughts you can change your feelings (Ellis, 1994).

Basically, student feelings and behavior in the school setting can be looked at in this way:

HAPPENING + THOUGHT ------> FEELING / BEHAVIOR

* An event happens to the group member
* The member thinks about what happened
* The thought that the member has leads to a feeling
* The feeling engenders some type of behavior, either good or bad

Group members explored this model by sharing examples from their school experiences and their daily lives, and they recognized that by changing their thoughts they can also affect their feelings and behavior. Exercises were employed from Thinking, Feeling, and Behaving: An Emotional Education Curriculum For Adolescents. in both Cohort A and Cohort B (Vernon 1989).

Session 4: Group members were introduced to the concept of rational and irrational thought. Group members' examples were analyzed to determine the the character of rational and irrational thinking thinking. The question was asked "Is there enough evidence for the thought to be rational?" If there is not, the thought is irrational (Dryden, 1994). Exercises were used to facilitate discussion of these salient points in REBT and how they applied to their lives.

Session 5: Members became aware of the unhappiness, worthlessness, anger, and frustration when they experience irrational thoughts. Irrational thoughts create unhappiness, worthlessness, anger, and frustration (Ellis, 1973). Work in the group centered upon making the connections between irrational thoughts and these dysfunctional feelings and behaviors.

Session 6: By analyzing their behavior in example situations, group members were introduced to the concept of irrational thoughts increasing the upset of individuals by analyzing their behavior in example situations. They explored and disputed the idea that when they get too upset they cannot do anything about improving a situation. The connection between irrational thought and emotional upset was discussed (Ellis, 1973). Group members were made aware of how to change irrational thoughts to rational thought (Greiger and Boyd, 1980).

Session 7: Group members identified some positive and negative characteristics about themselves and shared them with the other members of the group. The concept of being all good or all bad was explored (Ellis, 1994). Members were introduced to the concept of negative thoughts producing more negative thoughts. Members explored positive and negative characteristics of themselves, their teachers, and the school. The members of the group became aware that when they feel negative about a teacher or the school, it does not mean that the teacher or the school is all bad, but it does show that the member will feel worse about the school or the teacher (Ellis & Grieger, 1977; Goodman,

1978).

Session 8: The groups focused upon the negative thoughts about people and how those thoughts were not helpful in order to see that people are not all good or bad (Ellis, 1994). The group work emphasized that focusing only upon the negative aspects of their teachers in school is irrational because both teachers and the school have positive aspects or qualities. People are not all good nor all bad (Ellis, 1973). Teachers, administrators, or school are not all good nor all bad. We as people are not all good or all bad. When we get upset about the negative aspects of our lives, we sometimes equate this negativity with our lives and feel that life is all bad. Disputing (Ellis, 1994) this was the key to this session and the goal of this session. Exercises (Vernon 1989) were employed to help students understand these concepts.

Session 9: Group members were introduced to the concept that when someone else disagrees with them, that does not make that person bad or worthless (Ellis, 1994). Examples from school were used. Members were shown that when they have disputes with other people, it doesn't make sense to become angry, upset, or behave stubbornly. People are going to have different opinions than those of the group members. This does not mean that the person is bad or deserves to be punished. Group members were shown that we all are fallible and make mistakes in our lives (Ellis, 1977). No one is perfect. Mistakes do not change the good aspects of a person. The members discussed the concept that a person is not the same as his performance and that people are not bad because they make mistakes (Ellis & Grieger, 1977). People who are not perfect, as none of us are, do not deserve to be blamed or punished. Group members explored why people make mistakes. Members saw that it was irrational to rate people as good or bad as a result of their making mistakes. Exercises were employed to illustrate the points made in the groups (Vernon 1989).

Session 10: The group members were introduced to the assumptions that might

form the foundation of their beliefs. Members were shown that some of the things they believe are based upon unsound assumptions (Morris & Kanitz, 1975). Members were asked to give examples of their beliefs, and the group examined them in light of the foundations that support them. A belief is a conviction that something is true. An assumption is a belief that is likely to be true. Unsound assumptions exist when an individual believes something is true when, in reality, it is actually not true (Ellis, 1994). Work began on attempting to alter unsound assumptions about school and replacing them with some assumptions that are fact and are true. Exercises (Vernon, 1989) were employed to guide the study of these concepts.

REBT Group Interventions Employing Let's Get Rational (Wilde, 1990)

The board game, Let's Get Rational by Wilde (1990), is a therapeutic tool for use in REBT group counseling. The game was designed to be used with ages 11 through adulthood. It is intended to be part of a group counseling experience with four to nine individuals participating at any one time. The group leader may also act as one of the players. Cohort B was exposed to this game as a way to get the group members to learn rational self-statements and the REBT concepts in the study, in addition to learning to challenge their irrational beliefs. The game reinforced in group clients substantially the same content of REBT as discussed in Cohort A, but in a non-threatening format and with less deliberate session planning. It reinforces these ideas in the group sessions. There were many occasions in the use of this game where the emphasis was on learning rational self-statements and also on learning how to challenge irrational beliefs. Selecting activities and materials for use in an REBT adolescent group setting promoted the development of rational thinking, ensured that the students make the concepts their own and integrated them with their own ideas and experiences (Bernard and Joyce, 1984). By repeatedly applying these concepts in a variety of situations the skills became part of their repertoire of coping skills for coping with events in the school setting. The problems include demands upon

self, demands upon others, making situations much worse than they are, and self-rating.

This game is rather simple. There is no score kept, and there are no losers, just winners. There are no time limits for the game, but time limits for the group session were observed. The game is based upon the theories and practices of REBT (Ellis, 1957, 1977, 1994). The game has been used in therapeutic and non-therapeutic settings. It has been used by REBT group leaders and non-REBT group leaders with more than satisfactory results (Wilde, 1993).

The game was chosen for this research because group members like to play it. The game-playing format was not threatening and helped accomplish things that more formal REBT group counseling procedures may not have. The game usually helps clients open up more readily which may help bring about a more cohesive and trusting group. The game teaches students not to be overly critical of themselves and fosters self-acceptance. It helps to promote rational decision making. Finally, the game is an excellent tool to teach adolescents that their thoughts and beliefs influence their emotions (Wilde, 1992). The game was employed as reinforcement with two groups of students [B1 and B2] in teaching the tenets of REBT with these group members. Cohort A group members had substantially the same exercise in each session as those in Cohort B, but was followed by open discussion rather than the game format.

Data Collection And Recording

All data were collected and recorded on the specially designed sheet (Appendix N) created for this purpose. These sheets were called group tracking forms and they contained a great deal of data to be derived from this study. The Cohort and the group were indicated in the space provided at the top of the page. On the group tracking form (Appendix K) there were places for the student ID Numbers and a column for checking that consent forms had been returned. The first column recorded the scores on the Idea Inventory before the study began. The second column recorded the scores on the Majoribanks Attitude To

School Inventory score before the group sessions started. Column three recorded the Social Competence score from the SSBS, and column four contained the Ant-Social Behavior scores from the pre-study assessment. The next 10 columns recorded the group member's attendance for the 10 sessions. All of the relevant data needed for the pre-study assessment and the post-study assessment were contained on this sheet. One of the sheets was completed for each group throughout the study.

This study is an experimental, randomized, control-group, pretest-posttest design that examined the effect of two treatments on several variables that cause problems for adolescents in school. The study answered the question of whether the addition of an REBT board game to the group sessions as reinforcement of the concepts in group counseling made a significant difference in the outcomes of the groups along four variables [rational thinking, attitude to school, social competence, and anti-social behavior]. The two variations of treatment, one using REBT group counseling techniques alone and the other employing REBT techniques and the therapeutic board game, Let's Get Rational as reinforcement of the concepts from the group session. A control group was added that received no treatment at all.

Pre-study scores and post-study scores on each of the variables were analyzed to answer the main research questions. A factorial analysis of variance (ANOVA) was performed on data from the pre-study assessments to find the answers about any differences in the groups before the study began. It was found that the groups were essentially the same at this point in the research. A factorial analysis of variance (ANOVA) was performed on the post-study assessment data to provide answers for the research questions in the study. Here the questions to be answered were:

1. Are there significant differences among the post-study mean scores of the treatment groups on four variables [rational thinking, attitude to school, social competence, and anti-social behavior] between three groups in the study [REBT, REBT and the game,

Control]?

If there are significant differences, it may be concluded that the differences were due to the treatment employed in the work. The level of significance in the study was $p<.05$, which means that the odds are less than five percent that the differences were due to chance factors. The smaller the p-value of the analysis, the greater the likelihood that the differences were not merely due to chance but to the treatment itself. Therefore, the probability that the results of this study could have been produced by chance is less than five percent (.05). If the mean scores on the dependent variables of the REBT + game group are greater than the mean scores on the dependent variables on the group employing REBT alone, and the differences between the two groups are statistically significant, it can be assumed that the REBT group employing the game, Let's Get Rational (Wilde, 1990) is more effective in enabling at-risk adolescents in an alternative high school to learn and apply the principles of REBT in group counseling. The answer to research question 1 would be positive if there are significant differences in the scores among the treatment groups on four variables [rational thinking, attitude to school, social competence, and anti-social behavior] between three groups in the study [REBT, REBT and the game, Control]. If the differences in this study between the groups was not significant, the variance in the mean scores of the pre- and post-assessments were likely due to chance. Therefore, in that case, the answer to this question would be that there were no significant differences in the scores on four variables [rational thinking, attitude to school, social competence, and anti-social behavior] among three cohorts in the study [REBT, REBT and the game, Control]? This would signify that the use of this game in group counseling with at-risk adolescents would make no difference in the their ability to learn and practice REBT in school and in their lives.

2. Are there significant differences in the mean scores on four variables [rational thinking, attitude to school, social competence, and anti-social behavior] between males

and females in the study.

The pre-study mean scores indicated that there were significant differences between males and females in all six of the groups in the three cohorts. The mean scores of the pre-study assessment did show that males and females differed significantly at the beginning of the group sessions. All conditions were the same for both Cohort A, Cohort B, and Cohort C exposing the treatment groups [A REBT alone; B REBT plus game] to the group sessions. Males and female were treated equally in that they were members of a group and functioned as a member of their assigned group for a 50-minute session for a period of ten weeks. Males and females were tracked separately. There were 24 males and 24 females in this study.

The level of significance in the study was $p<.05$, which means that the odds are less than five percent that the differences were due to chance factors. The smaller the p-value of the analysis, the greater the likelihood that the differences were not merely due to chance but to gender. Therefore, the probability that the results of this study could have been produced by chance is less than five percent (.05). If the mean scores on the dependent variables of the REBT + game group are greater than the mean scores on the dependent variables on the group employing REBT alone, and the differences between the two groups are statistically significant, it can be assumed that the REBT group employing the game, Let's Get Rational (Wilde, 1990) is more effective in enabling male or female at-risk adolescents in an alternative high school to learn and apply the principles of REBT in group counseling. The answer to research question 2 would be positive if there are significant differences in the scores among the treatment groups on four variables [rational thinking, attitude to school, social competence, and anti-social behavior] between three groups in the study [REBT, REBT and the game, Control]. If the differences in this study between the groups was not significant, the disparity in the mean scores of the pre- and post-assessments were likely due to chance. Therefore, in that case, the answer to this

question would be that there were no significant differences in the scores on four variables [rational thinking, attitude to school, social competence, and anti-social behavior] among males and females in the study [REBT, REBT and the game, Control]? This would signify that there is no difference between the genders regarding the effectiveness of one REBT group intervention over another with at-risk adolescents, and it would make no difference in the their ability to learn and practice REBT in school and in their lives.

3. Is there a significant interaction in the mean scores on four variables [rational thinking, attitude to school, social competence, and anti-social behavior] between males and females in the groups and the group in which they were placed [REBT only, REBT + game, Control].

If there is a significant interaction between mean scores of the genders and the group in which they were assigned differences, it might be concluded that either of the two genders might have met with more success in improving rational thought, improving their attitude toward school, increasing social competence, and decreasing anti-social behavior because of the group to which they were assigned. The level of significance in the study was $p<.05$, which means that the odds are less than five percent that the differences were due to chance factors. The smaller the p-value of the analysis, the greater the likelihood that the interaction between the genders and the groups were not merely due to chance but may be due to the group to which each gender was assigned. Therefore, the probability that the results of this study could have been produced by chance is less than five percent (.05). If the mean scores on the dependent variables of the REBT + game group are greater than the mean scores on the dependent variables on the group employing REBT alone, and the differences between the two groups are statistically significant, it can be assumed that the REBT group employing the game, Let's Get Rational (Wilde, 1990) is more effective in enabling male or female at-risk adolescents in an alternative high school to learn and apply the principles of REBT in group counseling. The answer to research question 2 would be

positive if there are significant differences in the scores among the treatment groups on four variables [rational thinking, attitude to school, social competence, and anti-social behavior] between three groups in the study [REBT, REBT and the game, Control]. If the differences in this study between the groups was not significant, the disparity in the mean scores of the pre- and post-assessments were likely due to chance. Therefore, in that case, the answer to this question would be that there were no significant differences in the scores on four variables [rational thinking, attitude to school, social competence, and anti-social behavior] among males and females in the study [REBT, REBT and the game, Control]? This would signify that there is no difference between the genders regarding the effectiveness of one REBT group intervention over another with at-risk adolescents, and it would make no difference in the their ability to learn and practice REBT in school and in their lives.

Data Analysis

This study is basically a determination if there is a significant difference in how effective one REBT group intervention is over another in improving the rational thinking skills, the attitude toward school, and selected behaviors necessary to function well in school. Therefore, this was a

measure of the difference between the mean scores on the pre and post study assessments of each group to determine the extent of the variance, which is a measure of spread or dispersion of the scores on the variables in the study. There appear to be no questions about differences in groups, in gender, or an interaction at the pre-study stage. An factorial analysis of variance (ANOVA) was employed on the scores of the assessment at both the pre-study and the post-study evaluation. Pre-study assessment was aimed at determining whether or not the groups were substantially alike. They seemed to be similar with the exception of the differences in gender. There were significant differences between males and females at the beginning of the study.

This factorial ANOVA was employed to analyze data from the pre and post study

measures. The analysis of variance is a test of statistical significance of the differences among the mean scores of two or more groups on one or more variables. It is used to assess the significance of the interaction between categorical independent variables such as males and females in Cohort A [use of REBT group counseling techniques only], Cohort B [use of the REBT game, Let's Get Rational], Cohort C [Control Group] and continuous dependent variables such as rational thinking, attitude toward school, social competence, and anti-social behavior. The procedure in ANOVA involves the computation of an F-ratio of the variance within the groups. This is any uncontrolled or unexplained variability and is also known as random error. This is compared with the variance between groups [the effectiveness of REBT only, group sessions with the REBT game, and the control groups]. This is basically variance in the dependent variable [rational thinking, attitude toward school, and the behavioral variables mentioned previously] accounted for by the variance of the independent variables, the interaction between the genders and the treatment in Cohort A, the treatment in Cohort B, and Cohort C which had no treatment at all with $p < .05$.

In this study, all of the participants in the groups will be learning and applying the same set of principles but will be employing two different group counseling interventions from REBT. If there is a significant difference between the results of the interventions employed in this study the mean scores of one cohort will be higher than those of the others. Therefore, if there is a significant difference, the means tables would indicate which of the interventions made a more significant difference. For example, if Cohort B [REBT + game] is more effective in empowering students through the use of REBT, as the hypothesis of the study suggests, they will get higher mean scores on the measures for rational thinking, attitude toward school, and social competence. This group will also have lower scores on the measure of anti-social behavior. What is critical is knowing whether the differences are statistically significant, or whether they are bigger than they would likely be due to chance alone. The level of significance in this study is $p < .05$ which means that

the odds are less than five percent that differences in the groups' mean scores were due to chance factors. Thus the smaller the p value, the greater the likelihood that the result expressed was not merely due to chance but to the treatment itself. Therefore, the probability that the results of this study could have been produced by chance is less than five percent (.05). If the mean scores on the dependent variables of the REBT + game group are greater than the means of the dependent variables of the REBT alone group, and the differences between the two groups are statistically significant, it could be assumed that the REBT group treatment employing Let's Get Rational is likely to be more effective in enabling at-risk adolescents in an alternative setting to learn and apply the principles of REBT in a group counseling setting.

Comparisons of mean scores at the post-study stage were also made on whether there are any significant differences in the scores between males and females in the use of these interventions. Mean scores from the total group of males and the total group of females was provided. If the table of means indicated that the scores of the genders in this study differed from each other significantly, then it could be assumed that gender played a larger part in the success of these students in learning and applying REBT to their lives. If they are not significant, it would show that the treatments were as effective for males as they were for females.

Finally, a measure of interaction between the genders and the treatment groups was found in the data results. If there was a significant interaction between the genders and the treatment groups, it might be assumed that males may have performed better employing one intervention as opposed to another. If significance does not exist in the interaction between the treatment groups and the genders, it could be assumed that by placing students randomly by gender in the six groups had no effect upon the outcome of the study.

Summary

In this section, questions of methodology were described and delineated. A detailed description of the research method was provided. The research design was examined with respect to the subjects in the study, the use of a preliminary interview to screen participants, and questions about the selection and assignment of the subjects to the three cohorts in the study. After outlining an operational hypothesis, the study design was discussed along with the actual procedures to be employed in conducting the study, the instruments to be used in the pre and post study assessments, and a description of the variables under observation. Descriptions of the instruments employed and the the additional factors to be observed in the course of this study were outlined. Field procedures were summarized along with the delineation of a time line for completion of the study. The activities of the two groups were thoroughly described in this section. Procedures for collection, recording, and analyzing of the data were also described. The methodological assumptions and the limitations of the study were outlined.

In the next chapter, the results of the pre and post study assessments will be reported. Also, demographic data will precede the discussion of the study results along with attendance characteristics of the sample and a characteristic profile of a subject involved in this study.

CHAPTER FOUR

Results

This chapter presents a description of the sample, a compilation of the data in the study, and analyses of data gathered by the pre and post-study assessment measures in this study. Presentation of the results of this work centered upon answering the original research questions introduced in Chapter One. The study began with 48 randomly selected and assigned at-risk adolescents in an alternative high school program divided into six therapy groups. The groups met for one 50 minute period each week for 10 weeks. Cohort A in the study was made up of two groups of eight students each [one group male and one group female] and employed REBT group counseling activities alone in the sessions. Cohort B in the study was made up of two groups of eight students each [one group male and one group female] employing REBT activities that were reinforced by playing the therapeutic board game, Let's Get Rational (Wilde, 1990). Cohort C was used as a control group and was given no treatment during the study. There seemed to be no significant differences among the three cohorts at the beginning of the study.

Profile Of The Sample

The first section of this chapter describes the characteristics of the participants in the study including their gender, age, educational level, and attendance. Data were summarized using descriptive statistics.

Description Of The Subjects

A pool of 50 volunteer students in grades 10, 11 , and 12 at Washington County Evening High School in Hagerstown, Md. was identified and interviewed briefly for inclusion in this group counseling study at the school. The primary criteria for inclusion in the study was that their attendance at the school was very good with each member not

missing more than three days in the previous semester school year. Attendance records for 1997-1998 from Semester I were employed to verify that each student was not absent more than the three days. In order for this study to show meaningful results, the subjects have to be in attendance for the sessions. From these students 24 males and 24 females were randomly selected. The subjects in this study were these 48 adolescent students [age 15 - 18], all of normal intelligence who are enrolled at the school.

These students all had been at risk for a period of time for dropping out of school and have enrolled in this alternative setting to complete their high school education or to improve their academic standing so that they can return to their regular high school programs. They have had a variety of problems in their home school including academic failure, attendance problems, and behavior problems requiring administrative disciplinary action and suspensions. Each of the students agreed to voluntarily be a part of this study and appropriate permission forms were signed by the student and by the parents prior to their participation. The procedures for the work were thoroughly explained to the student and to each student's parents by the researcher and the two counselors. All of the groups in this study were substantially similar when the study began. The description of the cohorts includes the following characteristics:

Cohort A [REBT only]

This cohort included two counseling groups [one male and one female]. The average age of the male group [A 1] is 16 years 9, months. All of the members of this group are Caucasian. There are four 16 year olds, two 17 year olds, and two 18 year olds. All of the members of this group attend the Evening High program exclusively as their source of education.

The average age of the female group [A 2] is 16 years 8 months. All of the members of the group are Caucasian with the exception of one participant who is Asian.There were three 16 year olds and five 17 year olds. All of the members of this

group attend the Evening High program exclusively as their source of education.

Cohort B [REBT and Let's Get Rational]

This cohort included two counseling groups [one male and one female]. The average age of the male group [B 1] is 16 years 5 months. All of the members of this group are Caucasian with the exception of one who is African American. There are two 16 year olds and six 17 year olds. All of the members of this group attend the Evening High program exclusively as their source of education.

The average age of the female group [B 2] is 16 years 5 months. There are four 16 year olds, three 17 year olds, and one 18 year old. All of the members of the group are Caucasian with the exception of one participant who is African American. All of the members of this group attend the Evening High program exclusively as their source of education.

Cohort C [Control]

This cohort included two counseling groups [one male and one female]. The average age of the male group [C 1] is 16 years 5, months. All of the members of this group are Caucasian with the exception of one who is African American. There are three 16 year olds and five 17 year olds. All of the members of this group attend the Evening High program exclusively as their source of education.

The average age of the female group [C 2] is 16 years 7 months. All of the members of the group are Caucasian.There were two 16 year olds, five 17 year olds, and one 18 year old.All of the members of this group are Caucasian. There are two 16 year olds, five 17 year olds, and one 18 year old. All of the members of this group attend the Evening High program exclusively as their source of education.

Table 1 shows detailed information on the demographic characteristics of the subjects in the groups within the three cohorts.

Table 1
Demographic Characteristics Of The Sample+

	Cohort A [REBT only] n = 16		Cohort B [REBT + Game] n = 16		Cohort C [Control] n = 16	
	f	%	f	%	f	%
Gender						
Male	8	50	8	50	8	50
Female	8	50	8	50	8	50
Race						
African American	0	0	2	12	1	6
Caucasian	15	94	14	88	15	94
Asian	1	6	0	0	0	0
Education Level						
Grade 10	7	44	6	38	6	38
Grade 11	7	44	9	56	9	56
Grade 12	2	12	1	6	1	6
Attendance Characteristics*						
No Days Absent	12	75	14	88	14	88
One Day Absent	1	6	0	0	1	6
Two Days Absent	2	13	1	6	1	6
Three Days Absent	1	6	1	6	0	0

+ based upon Semester I, 1997-1998 attendance records at EHS.

Attendance Record Of The Subjects In The Study

Table 2 shows a frequency distribution of attendance for each of the group members in the treatment groups throughout the 10 weeks in the study. The overall average attendance was 91.6% with the mean attendance at 7.3. Attendance for the study seemed to be overall very good. When one of the subjects was absent, the/she was given a copy of the exercise that was employed in the session missed with the opportunity to have

o have their questions answered. All students were exposed to all of the activities and exercises throughout the study in cohorts A and B.

Table 2
Attendance Data For The Group Sessions+

Week	Date	A1 Male [REBT alone]	A2 Female [REBT alone]	B1 Male [REBT + Game]	B2 Female [REBT + Game]
Week 1 -	March 30, 1998	8	8	8	8
Week 2 -	April 6, 1998	8	6	7	7
Week 3 -	April 13, 1998	8	6	8	6
Week 4 -	April 20, 1998	8	8	7	7
Week 5 -	April 27, 1998	7	6	8	6
Week 6 -	May 4, 1998	8	7	6	8
Week 7 -	May 11, 1998	7	7	7	7
Week 8 -	May 18, 1998	8	7	6	7
Week 9 -	May 25, 1998	8	8	8	8
Week 10 -	June 1, 1998	7	8	8	8
Group Attendance		96.3%	88.8%	91.3%	90%
Cohort Attendance		92.5%		90.6%	
Overall Attendance		91.6%			

+ Attendance was taken before each session began.

Subject Profile

The profile of the typical subject in this study is about 17 years old. There is an equal chance of the subject being a male or a female [8 males and 8 females in each of three cohorts]. The subject is most likely to be Caucasian and have an education level of at least grade 10. The subject has experienced problems in their home school necessitating attendance at the evening high school. The average subject attends school 86.7% of the time. This indicated profile also includes the fact that the typical subject in this study has a good attendance record for the evening program [less than three absences] and an 91.6% attendance rate for the group sessions. Table 2 also notes the attendance record of each group participant throughout the 10-week study. Attendance was not kept on the Control group.

Comparison Of The Pre-Study Scores On Rational Thinking [Idea Inventory (Kassinove, Crisci, & Tiegerman, 1977)]

This comparison of the subjects in the study was used to determine if there are any significant differences in the pre-study assessment scores of these subjects in the three cohorts. A two-way factorial ANOVA , a test of statistical significance, was performed on the treatment data in the area of rational thinking [Idea Inventory (Kassinove, Crisci, & Tiegerman, 1977)] and the results are indicated in Table 3. The F-Value was computed and was found to be .111 for rational thinking for the subjects at the beginning of the study. The p - Value = .8950 for the treatment when $p < .05$ indicating no significant difference between the groups on this variable at the beginning of the study. The F-Value was also calculated for the differences in gender and found to equal 5.202 with $p = .0043$ when $p < .05$. This indicates that there was significant difference between the genders on this variable of rational thinking in this study with males scoring higher on this variable than females. A Scheffe post hoc examination of the data confirmed the above results. There was a significant difference between the genders with regard to rational thinking. There appeared from the data to be no significant differences between Cohort A and B, Cohort A and C, or Cohort B and C. Consequently, the groups within these cohorts were substantially the same at the beginning of the study in the area of rational thinking.

Comparison Of The Pre-Study Scores On Attitude To School [Majoribanks Attitude To School Inventory - Revised (Majoribanks, 1986)]

This is a comparison of the subjects in the study to determine if there are any significant differences in their pre-study assessment scores on the measure of attitude to school [Majoribanks Attitude To School Inventory - Revised (Majoribanks, 1986)]. A two-way factorial ANOVA was performed on this data as well. Again the ANOVA table [Table 4] appears to show no significant difference between the cohorts on this variable at

the start of the work in this study. The F-Value was computed and was found to be .893 for attitude to school for the subjects at the beginning of the study. The p - Value = .4170 for the treatment when $p < .05$. This indicates that there is no significant difference between the groups on this treatment variable at the start of the work in the study. The F-Value was also calculated for the differences in gender and found to equal 9.131. This indicates that there was significant difference between the genders with $p = .0043$ when $p < .05$ on this variable of rational thinking. A Scheffe post hoc examination of the data confirmed the above results. There was a significant difference between the genders with regard to attitude to school. There appeared from the data to be no significant differences between Cohort A and B, Cohort A and C, or Cohort B and C. Consequently, the groups within these cohorts were substantially the same at the beginning of the study in the area of attitude to school. Significant differences between the genders is present in the measure of attitude to school at the beginning of the study.

Comparison Of The Pre-Study Scores On Social Competence [School Social Behavior Scales (Merrell, 1993)]

Table 5 is a comparison of the subjects in the study to determine if there are any significant differences in their pre-study assessment scores for the social competence variable in the study. The two-way factorial ANOVA was again performed on the pre-study data in this variable and the results are shown in Table 5. The F-Value was computed for the treatment and found to be 2.855 with $p = .0688$ when $p < .05$. This indicates that there appears to be no significant difference between the groups on this variable at the start of the work in the study. The F-Value was also calculated for the differences in gender and found to equal 9.079 with a p value of .0044. This indicates that there was significant difference found between the genders on the results of this teacher questionnaire measuring social competence. A Scheffe post hoc examination of the data confirmed the above results.

There was a significant difference between the genders with regard to social competence. There appeared from the data to be no significant differences between Cohort A and B, Cohort A and C, or Cohort B and C. Consequently, the groups within these cohorts were substantially the same at the beginning of the study in the area of social competence.

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Comparison Of The Pre-Study Scores On Anti-Social Behavior (Merrell, 1993)

Table 6 indicates the result of a two-way factorial ANVOA performed on the opening scores for the subjects on the ant-social behavior. This variable is measured for how much the scores on the teacher checklist [The School Social Behavior Scales (Merrell, 1993)] decreased during the study. Faculty and administration were asked to complete this instrument about each of the subjects in the study. Their observations produced these data results. The Factorial ANOVA was performed on the pre-study data in this variable and the results are shown in Table 6. The F-Value was computed for the treatment and found to be .829 with $p = .4435$ when $p < .05$. This indicates that there is no significant difference between the groups on this variable at the start of the work in the study. The F-Value was also calculated for the differences in gender and found to equal 2.863 with a p value of .0980 when $p < .05$. A Scheffe post hoc examination of the data confirmed the above results. There was no significant difference between the genders with regard to anti-social behavior. There appeared from the data to be no significant differences between Cohort A and B, Cohort A and C, or Cohort B and C. Consequently, the groups within these cohorts were substantially the same at the beginning of the study in the area of anti-social behavior. This indicates that there was no significant difference found between the genders on the results of this teacher questionnaire measuring anti-social behavior.

Table 3
Pre-Study Comparison Of Rational Thinking [Idea Inventory] Of The Three Cohorts [Factorial ANOVA with Scheffe's Post Hoc Analysis]

	df	Sum Of Squares	Mean Square	F-Value	P-Value
Treatment	2	33.9	17.0	.111	.8950
Gender	1	792.2	792.2	5.202	.0277*
Interaction	2	114.9	57.4	.377	.6881

Scheffe Post Hoc Data Analysis

	Mean Difference	Critical Difference	P-Value
Male, Female	- 8.125	7.189	.0277*
Cohort A, Cohort B	- .062	11.071	.9999
Cohort A, Cohort C	1.750	11.071	.9228
Cohort B, Cohort C	1.812	11.071	.9175

Means Table	Count	Mean	St. Deviation
Treatment Cohort			
REBT alone	16	67.9	12.8
REBT + game	16	68.0	12.7
Control	16	66.1	12.6
Gender			
Male Subjects	24	71.4	9.2
Female Subjects	24	63.3	14.1
Group			
REBT alone [Male]	8	70.9	10.7
REBT alone[Female]	8	64.9	14.8
REBT + game [Male]	8	70.9	6.2
REBT + game [Female]	8	65.0	6.0
Control [Male]	8	72.4	11.1
Control [Female]	8	59.9	11.5

* = Significant at the .05 level.

Table 4

Pre-Study Comparison Of Attitude To School [Majoribanks Attitude To School Inventory - Revised] Of The Three Cohorts [Factorial ANOVA with Scheffe's Post Hoc Analysis]

	df	Sum Of Squares	Mean Square	F-Value	P-Value
Treatment	2	171.3	85.7	.893	.4170
Gender	1	875.5	875.5	9.131	.0043*
Interaction	2	86.5	43.2	.451	.6399

Scheffe Post Hoc Data Analysis

	Mean Difference	Critical Difference	P-Value
Male, Female	8.542	5.705	.0043*
Cohort A, Cohort B	- 4.625	8.786	.4173
Cohort A, Cohort C	- 2.188	8.786	.8198
Cohort B, Cohort C	2.438	8.786	.7816

Means Table	Count	Mean	St. Deviation
Treatment Cohort			
REBT only	16	58.5	10.8
REBT + game	16	63.1	10.4
Control	16	60.7	10.4
Gender			
Male Subjects	24	56.5	11.8
Female Subjects	24	65.0	6.9
Groups			
REBT alone [Male]	8	52.7	10.2
REBT alone [Female]	8	64.2	8.3
REBT + game [Male]	8	60.6	13.1
REBT + game [Female]	8	65.6	6.5
Control [Male]	8	56.1	12.0
Control [Female]	8	65.2	6.4

* = Significant at the .05 level.

Table 5
Pre-Study Comparison Of Social Competence [School Social Behavior Scales]] Of The Three Cohorts [Factorial ANOVA]

	df	Sum Of Squares	Mean Square	F-Value	P-Value
Treatment	2	2033.8	1016.9	2.855	.0688
Gender	1	3234.1	3234.1	9.079	.0044*
Interaction	2	294.3	147.1	.413	.6643

Scheffe Post Hoc Data Analysis

	Mean Difference	Critical Difference	P-Value
Male, Female	16.417	10.995	.0044*
Cohort A, Cohort B	- 12.812	16.933	.1708
Cohort A, Cohort C	1.812	16.933	.9638
Cohort B, Cohort C	14.625	16.933	.1029

Means Table	Count	Mean	St. Deviation
Treatment Cohort			
REBT only	16	95.0	18.5
REBT + game	16	107.8	21.8
Control	16	93.2	20.4
Gender			
Male Subjects	24	90.5	20.1
Female Subjects	24	106.9	18.7
Group			
REBT alone[Male]	8	89.9	22.8
REBT alone [Female)	8	100.1	12.4
REBT + game[Male]	8	96.6	18.7
REBT + game [Female]	8	119.0	19.5
Control [Male]	8	84.9	19.3
Control [Female]	8	101.5	6.7

* = Significant at the .05 level.

Table 6

Pre-Study Comparison Of Anti-Social Behavior [School Social Behavior Scales] Of The Three Cohorts [Factorial ANOVA with Scheffe's Post Hoc Analysis]

	df	Sum Of Squares	Mean Square	F-Value	P-Value
Treatment	2	1115.0	557.5	.829	.4435
Gender	1	1925.5	1925.3	2.863	.0980
Interaction	2	807.3	403.7	.600	.5533

Scheffe Post Hoc Data Analysis

	Mean Difference	Critical Difference	P-Value
Male, Female	- 12.667	15.107	.0980
Cohort A, Cohort B	- 9.688	23.266	.5764
Cohort A, Cohort C	- 10.688	23.266	.5124
Cohort B, Cohort C	1.000	23.266	.9941

Means Table	Count	Mean	St. Deviation
Treatment Cohort			
REBT alone	16	55.1	20.6
REBT + game	16	64.8	25.4
Control	16	65.8	31.6
Gender			
Male Subjects	24	68.3	28.5
Female Subjects	24	55.6	22.4
Group			
REBT alone [Male]	8	59.3	25.8
REBT alone [Female]	8	50.9	14.2
REBT + game [Male]	8	76.9	26.8
REBT + game [Female]	8	52.8	18.0
Control [Male]	8	68.5	11.3
Control [Female]	8	63.1	33.2

* Significant at the .05 level.

Comparison Of Post-Study Scores On Rational Thinking [Idea Inventory (Kassinove, Crisci, & Tiegerman, 1977)]

The same procedures [Factorial ANOVA] was performed on the post study data on the subjects after the work in the study was completed. Table 7 indicates the result of a factorial ANVOA performed on the final scores for the subjects on the rational thinking variable. This variable is measured for how much the scores improved over the course of the study. The factorial ANOVA was performed along with Scheffe's post hoc analysis on the post-study data in this variable and the results are shown in Table 7. The F-Value was computed for the treatment and found to be 5.967 with $p = .0052$ when $p < .05$. These results points to a significant difference in the groups with regard to the treatment in this study on the rational thinking variable at the conclusion of the work. The F-Value was also calculated for the differences in gender at this point and found to equal 3.524 with a p value of .0675 when $p < .05$. These results point to no significant difference between the genders as a result of the work in this study on the variable of rational thinking. A Scheffe post hoc examination of the data confirmed the above results. There was a significant difference only between Cohort B and Cohort C with a p value of .0064 when $p < .05$ between the genders with regard to rational thinking. There appeared from the data to be no significant differences between Cohort A and B and Cohort A and C indicating that neither of the REBT treatments failed to have a significant positive impacty on the Cohorts alone the four variables.

Comparison Of Post-Study Scores On Attitude To School [Majoribanks Attitude To School Inventory - Revised (Majoribanks, 1986)]

Table 8 indicates the result of a factorial ANVOA performed on the last scores for the subjects on the attitude to school variable. This variable is measured for how much the scores improved over the course of the study. The Factorial ANOVA was performed on the post-study data in this variable and the results are shown in Table 8. The F-Value was

computed for the treatment and found to be 4.252 with p = .0208 when p < .05. These results pointed to significant difference in the groups with regard to this measure on the attitude to school variable at the conclusion of the work. A Scheffe post hoc examination of the data confirmed the above results. There was a significant difference only between Cohort B and C in these results. The differences between Cohort A and B or Cohort A and C were not significant. There was no significant difference between the genders with regard to attitude to school. The F-Value was also calculated for the differences in gender at this point and found to equal 3.540 with a p value of .0668 when p < .05. This indicates that there was no significant difference found between the genders as a result of the work in this study on the variable of attitude to school.

Comparison Of The Post-Study Scores On Social Competence [School Social Behavior Scales (Merrill, 1993)].

Table 9 indicates the result of a factorial ANVOA performed on the final observational scores for the subjects on the social competence variable. This variable is measured for how much the scores improved over the course of the study. The factorial ANOVA was performed on the post-study data in this variable and the results are shown in Table 9. The F-Value was computed for the treatment and found to be 15.901 with p = <.0001 when p < .05. These data point to a significant difference in the groups with regard to this measure on the variable of social competence as reported by faculty and administration on the checklist for this observation of the subjects at the conclusion of the work. The F-Value was also calculated for the differences in gender at this point and found to equal 7.844 with a p value of .0077 when p < .05. This indicates that in the area of social competence that there remained a significant difference between the genders in this variable with females consistently scoring higher than males. Scheffe's post hoc analysis was performed on these data, and the results indicated that there was a significant difference between Chort A (REBT only) and Cohort B (REBT + the use of the game) with

the group whose work was reinforced by the game scoring substantially better. The p-value of these data was p = . 0003 when P < .05. The post hoc analysis also revealed a significant difference between Cohort BN (REBT + use of the game) and Cohort C (control). A Scheffe post hoc examination of the data confirmed the above results. The p-value of these data was p = <.0001 when P > .05.

Comparison Of The Post-Study Scores On Anti-Social Behavior [School Social Behavior Scales (Merrill, 1993)].

The results of a factorial ANVOA performed on the final observational scores for the subjects on the ant-social behavior variable. This variable is measured for how much the scores decreased over the course of the study. The Factorial ANOVA was performed on the post-study data in this variable and the results are shown in Table 10. The F-Value was computed for the treatment and found to be 3.179 with p = <.0518 when p < .05. This indicates that there was no significant difference in the groups with regard to this measure of anti-social behavior as reported by faculty and administration on the checklist for this variable at the conclusion of the work. The F-Value was also calculated for the differences in gender at this point and found to equal 1.962 with a p value of .1687 when p < .05. This indicates that in the area of anti-social behavior that there was no significant difference between the genders in the area of anti-social behavior with males consistently scoring higher than females. Application of the Scheffe post hoc examination of the data confirmed the above results. It indicated that there was no significant difference between any of the cohorts with regard to anti-social behavior. the genders with regard to observed anti-social behaviors.

Table 7
Post -Study Comparison Of Rational Thinking [Idea Inventory] Of The Three Cohorts [Factorial ANOVA]

	df	Sum Of Squares	Mean Square	F-Value	P-Value
Treatment	2	1192.5	596.2	5.967	.0052*
Gender	1	352.1	352.1	3.524	.0675
Interaction	2	219.3	109.6	1.097	.3431

Scheffe Post Hoc Data Abalysis

	Mean Difference	Critical Difference	P-Value
Male, Female	- 5.417	5.823	.0675
Cohort A, Cohort B	- 3.750	8.969	.5738
Cohort A, Cohort C	8.188	8.969	.0800
Cohort B, Cohort C	11.938	8.969	.0064*

Means Table	Count	Mean	St. Deviation
Treatment Cohort			
REBT only	16	74.3	9.8
REBT + game	16	78.1	9.7
Control	16	66.1	11.3
Gender			
Male Subjects	24	75.5	8.8
Female	24	70.1	12.9
Group			
REBT only [Male]	8	74.9	9.2
REBT only [Female]	8	73.8	10.9
REBT + game [Male]	8	80.0	6.7
REBT + game [Female]	8	76.1	12.2
Control [Male]	8	71.8	9.2
Control [Female]	8	60.5	10.9

* Significant at the .05 level.

Table 8

Post-Study Comparison Of Attitude To School [Majoribanks Attitude To School Inventory - Revised] Of The Three Cohorts [Factorial ANOVA with Scheffe's Post Hoc Analysis]

	df	Sum Of Squares	Mean Square	F-Value	P-Value
Treatment	2	661.8	330.9	4.252	.0208*
Gender	1	275.5	275.5	3.540	.0668
Interaction	2	188.0	94.0	1.208	.3089

Scheffe Post Hoc Data Abalysis

	Mean Difference	Critical Difference	P-Value
Male, Female	4.792	5.139	.0668
Cohort A, Cohort B	- 6.812	7.915	.1044
Cohort A, Cohort C	1.182	7.915	.8452
Cohort B, Cohort C	8.625	7.915	.0298*

Means Table	Count	Mean	St. Deviation
Treatment Cohort			
REBT only	16	63.2	9.0
REBT + game	16	70.0	8.6
Control	16	61.4	9.7
Gender			
Male Subjects	24	62.5	11.3
Female Subjects	24	67.3	7.2
Group			
REBT alone [Male]	8	59.8	8.0
REBT alone[Female]	8	66.6	9.5
REBT + game[Male]	8	70.4	10.0
REBT + game[Female]	8	69.6	7.5
Control [Male]	8	57.3	12.2
Control [Female]	8	65.5	3.9

*Significant at the .05 level.

Table 9
Post-Study Comparison Of Social Competence [School Social Behavior Scales] Of The Three Cohorts [Factorial ANOVA]

	df	Sum Of Squares	Mean Square	F-Value	P-Value
Treatment	2	12987.3	6489.1	15.901	<.0001*
Gender	1	3201.3	3201.3	7.844	.0770
Interaction	2	664.0	332.0	.814	.4501

Scheffe Post Hoc Data Abalysis

	Mean Difference	Critical Difference	P-Value
Male, Female	16.333	11.769	.0077*
Cohort A, Cohort B	- 32.188	18.125	.0003*
Cohort A, Cohort C	4.875	18.125	.7932
Cohort B, Cohort C	37.062	18.125	<.0001*

Means Table	Count	Mean	St. Deviation
Treatment Cohort			
REBT only	16	105.2	17.8
REBT + game	16	137.4	23.6
Control	16	100.3	23.0
Gender			
Male Subjects	24	106.1	27.3
Female	24	122.5	24.3
Group			
REBT only [Male]	8	102.0	21.5
REBT only [Female]	8	108.4	13.9
REBT + game [Male]	8	125.3	27.8
REBT + game [Female]	8	149.5	9.3
Control [Male]	8	91.1	23.0
Control [Female]	8	109.5	20.2

* Significant at the .05 level.

Table 10
Post-Study Comparison Of Anti-Social Behavior [School Social Behavior Scales] Of The Three Cohorts [Factorial ANOVA]

	df	Sum Of Squares	Mean Square	F-Value	P-Value
Treatment	2	129278.3	1785.9	15.901	<.0001*
Gender	1	3201.3	1102.1	7.844	.0077
Interaction	2	664.0	271.9	.814	.4501

Scheffe Post Hoc Data Analysis

	Mean Difference	Critical Difference	P-Value
Male, Female	- 9.583	13.808	.1687
Cohort A, Cohort B	.938	21.265	.9938
Cohort A, Cohort C	- 17.812	21.265	.1170
Cohort B, Cohort C	- 18.750	21.265	.0939

Means Table	Count	Mean	St. Deviation
Cohort			
REBT only	16	47.6	15.8
REBT + game	16	46.7	23.0
Control	16	65.3	30.1
Gender			
Male Subjects	24	58.0	28.2
Female Subjects	24	48.5	20.2
Group			
REBT only [Male]	8	47.8	15.5
REBT only [Female]	8	47.5	17.2
REBT + game [Male]	8	54.6	30.1
REBT + game [Female]	8	38.8	9.0
Control [Male]	8	71.8	34.0
Control [Female]	8	59.1	26.9

*Significant at the .05 level.

Chapter Five in this study will take account of these presented data and add some interpretation to the figures in the study. A brief recapitulation of the study will begin the chapter which will highlight the milestones of the work. Major conclusions based upon the data findings will be outlined and discussed with respect to answering the basic research questions that began this work. Commentary on the generalizability of this study to other

settings and other populations will be speculated upon. Recommendations for further research will be presented and other approaches proposed for future studies. Finally, a discussion of the implications for counselors will summarize the study results by informing professionals in the field of the usefulness of this brand of cognitive-behavioral group work with adolescents.

CHAPTER FIVE

Summary Discussion And Conclusions

The final chapter in this study employs the presented data and adds some interpretation to the figures in this study. A brief recapitulation of the study highlights the milestones of the work. Major conclusions based upon the data findings are outlined and discussed with respect to answering the basic research questions that began this work. Commentary on the value of this study and its use with adolescents are described along with recommendations for use of the interventions with adolescents.

Recapitulation Of The Study

This study examined the efficacy of REBT group counseling interventions with two cohorts of at-risk adolescents in an alternative high school setting while employing a third cohort as a control with no treatment. An introductory group experience using REBT was made available to the control group after the study concluded. Group counseling typically has the effect of empowering clients to deal with problematic dilemmas which impede their happiness and success in life and in their educational careers (Corey & Corey, 1992). This assertion remained valid throughout this study. Four variables related to students' success or failure in the school setting were employed: rational thinking, attitude to school, social competence, and anti-social behavior. Interventions from Rational Emotive Behavior Therapy (Ellis, 1957) group counseling were examined to answer three major questions: Is there a significant difference in the dependent variables due to treatment interventions employed? Is there a significant difference in the dependent variables due to the gender of the subjects in the study? Is there a significant interaction between treatment and gender with regard to the four dependent variables?

This study was conducted at the Washington County [Md.] Evening High School in Hagerstown, Maryland from March through June, 1998. It was completed with the

permission of the county superintendent of schools, the county assistant superintendent for instruction, and the principal of the Evening High School. The students of the school who participated in this study have experienced academic failure and have been sanctioned for attendance and/or behavior problems in their regular high school and were attending the evening program to complete the requirements for their high school diplomas. All of the subjects in the study were volunteers who also had parent permission for their participation. Parents and subjects were completely informed verbally and in writing about the REBT interventions, the nature and purpose of the study, confidentiality issues, and any risks and benefits for their sons or daughters.

The data gathered as a result of the study were employed to answer the research questions about the effectiveness of REBT group interventions with the at-risk adolescent population at an alternative high school. The search for interventions which make a significant difference in helping students enjoy more success in school is at the heart of this study. Since contemporary school counselors prefer to utilize interventions that yield maximum progress in the shortest possible time, the study focused on two REBT group counseling interventions. The study examined the efficacy of REBT techniques employing a more traditional group counseling format and one reinforced by the use of a therapeutic board game to increase rational thinking, improve attitude toward school, increase social competence, and decrease anti-social behaviors of the subjects in the study. It was hoped that the study would point the way to coping more effectively with the problems they encounter in the schools, in their families, and in the community, ultimately having them remain in school longer.

The Efficacy Of Using Group Counseling In The Schools

Group counseling in the schools with various categories of clients has a special set of advantages as shown by the results of this study. This paradigm lends itself to working

with many populations including adolescents who are at risk. The results of this study show the benefits of this type of group counseling in the school setting and provide a great many helping options for students. This can enable them to work for change in their lives and develop better coping strategies in life and in the school community. A number of advantages emerged which bolster the case for employing group counseling in high schools and in schools designed for students at risk.

The first advantage of using groups with the population in this study is the efficiency of the paradigm. Efficiency has always been a sound rationale for the use of groups in a private practice and in the school setting where practitioners are being asked to take more and more time away from actual counseling to do many of the more mundane duties required by the modern high school. Bringing together a group of clients to explore some common concerns is sound justification for group counseling. This researcher believes wholeheartedly in the value of group counseling at the high school level. It offers an excellent forum to discuss common concerns and problems, solve a dilemma, explore feelings and beliefs, and consider a lot of different viewpoints.

It is almost impossible for young people to assess similar information and ways of viewing the world elsewhere. Because of this fact, groups are an efficient vehicle for generating new ideas and solving problems. The variety of opinions and viewpoints make the group experience closer to what life is really like. The participants in this study have indeed experienced this. Third, many times students like groups because they make a great contribution to a feeling of commonality among group members. Many times group members discover that they are not alone, that others experience many of same trials and tribulations of life. This is what Yalom (1985) described as universality. One of the first revelations of group participation is that there are others out there who have some of the same concerns as they do. Developing this togetherness is one of the functions of a group,

a commonality that is very reassuring and very therapeutic in its manner to help people cope with the problems that are imposed by modern life. The results of this study clearly demonstrated the effectiveness of group counseling interventions in making a difference along a number of variables related to success in school.

Fourth, group counseling provides a sense of belonging. Adler (1927), Berne (1964), Maslow, (1962) and Rogers (1961) have said that human beings have a real and dynamic need to belong. Group members often identify themselves with the group and feel that they are a meaningful part of the whole. This was especially true of the subjects in this study. They liked participating in something where they were not put down and were heard for perhaps for the first time in their lives. Many of the subjects were sad that the groups came to an end at the close of school. Fifth, groups provide members with the opportunity to practice new behaviors in an environment that is nurturing and supportive. This was especially true of the groups [B1 & B2] which employed the game, Let's Get Rational (Wilde, 1990). Subjects were given ample opportunities to examine new behaviors and motivation for behaviors. It was also a place to practice these behaviors with the aim of assisting them to examine and change dysfunctional behaviors that have caused them problems in school. They will probably feel better about using them in the real world. Sixth, these groups provided the opportunity for members to receive feedback from other members. It is through the expression of this feedback, reactions, and viewpoints that members perhaps begin to think about altering their behavior. That seems to have happened in this study. Group members did think about the subjects we were talking about and did remember basic tenets of REBT from week to week. Seventh, the groups afforded members the opportunity to talk about things that mean a great deal to them. They were allowed to compare the important things in life with those of other people. Members experienced new realizations through the sympathetic expression of the experiences of others. Eighth, the groups were a reflection of the society around them. A whole range of

everyday emotions was experienced by members of the groups. Last, the group meetings were a place where members made decisions to do different things in their lives. Members declared their intention to change and became aware of ways that they could improve the likelihood of their continuing their education until completion.The groups provided support for making new decisions and also encouraged the members to keep those promises, alter dysfunctional thinking, and change those behaviors that are of importance. All of these universal tenets concerning group counseling were evident in this study with at-risk adolescents.

The Usefulness Of REBT With School Aged Children

Rational Emotive Therapy [RET] was the theoretical focus and provided the guiding set of principles for this study. It was developed by Albert Ellis in 1955, and it has evolved into Rational Emotive Behavior Therapy. This is a short-term, cognitive-behavioral approach to the problems posed by modern life. It seeks to show clients how their irrational beliefs complicate their lives, how to dispute these beliefs, and how to move on in life free of the self-defeating ideas that have plagued them in the past. It employs a wide range of behavioral, emotive, and evocative techniques to help clients achieve new understandings in life through a relatively directive and didactic approach to therapy. The educational character of this form of counseling makes it a good and time-effective form of intervention for use with students in the school setting. The use of the of two REBT group counseling interventions was superior to the employment of no treatment at all.

Contemporary counselors in the schools have used group counseling for dealing with the problems of children for many years. Almost from the beginning researchers saw the value of this type of therapy in working with children and adolescents (Ellis, 1984). Bernard and Joyce (1984) suggested that the group setting may be a more natural setting for working with children than are individual counseling sessions. The results of this

study have confirmed that group counseling interventions employing REBT are appropriate for a variety of mental health growth opportunities. The use of these group interventions enables members to deal with dysfunctional thoughts and behaviors that lead to problems in the school. We all are a part of a group in our everyday lives -- our families, the school, our place of employment, and our circle of peers and friends. Students in these group counseling sessions showed that they can learn new ways of thinking. They can demonstrate more appropriate behaviors in a safe environment and discard behaviors that may be problematic to them. It is this learning through interaction that made the use of REBT group counseling with adolescents an effective intervention approach with these students who have not succeeded in the regular school setting.

REBT proposes a useful way to examine the problems posed by modern life (Morris & Kanitz, 1975; Weinrach, 1995) and to outline ways to face these problems (Ellis, 1994). The data in this study showed, as Wessler and Wessler (1985) emphasized, the many advantages of group therapy with various populations. The group sessions were employed effectively to teach REBT principles to group members. Members learned that they are not unique in having a problem or in having specific kinds of problems. The group setting provided a forum for proactive counseling interventions because group members discussed problems that they may have not experienced themselves. Group members learned to help themselves by learning to help each other in strengthening rational thinking skills, improving their attitude toward school, increasing skills of social competence and decreasing the incidence of anti-social behavior. These groups provided a safe laboratory to practice new ways of thinking and behaving. Group exercises were used to elicit certain emotions which were examined in the group setting. The groups in this study served as forums where members tested new ways of relating to others and practiced social behaviors that they have learned.

These data derived from the study emphasized the utility of group counseling with

youth by pointing out several elements. The adolescents who participated in this study discovered thoughts and their self-defeating behaviors, and many set goals for themselves with the aid of the group lleader and the other members of the group. The leader and the group members were instrumental in helping the members set attainable goals. Students in these groups learned to help other people and to begin to recognize and accept their own problems and to share their feelings about them with other members of the group.

The results of the study supported the assertion of Cangelosi, Gressard, and Mines (1980) that group counseling employing Rational Emotive Behavior Therapy seeks to educate clients to think rationally about the things that happen in their lives and to take responsibility for their own feelings and emotional shortcomings. REBT techniques worked well in these groups. Group members were encouraged to confront their irrational thoughts and feelings, take new risks in their lives, try out new behaviors, and take advantage of the feedback of others to learn and reinforce the new skills that they are learning.

The underlying focus of the groups in this study was to help each member discover the dysfunctional aspects of their thinking and to learn to dispute these irrationalities moving on to more useful ways of living in the school environment. The results demonstrate what Ellis (1973) described as the goals of Rational Emotive Group Counseling with school-aged populations in that the objectives enabled group members to minimize their disturbances and achieve their maximum potential for growth and development.

In using REBT group counseling with adolescents, the goal of the counseling is to help them challenge their irrational beliefs, learn disputational skills, and to help them recognize and change dysfunctional attitudes and behaviors that are problematic in the school setting. The findings of this study reinforced what Bernard and Joyce (1984) said about designing and selecting activities for use with adolescents in groups. The results

showed that group counseling using REBT led to internalization and consolidation of rational thinking. This facilitated a process in which adolescents made the concepts their own by integrating them with their own ideas and experiences. These skills became a part of their repertoire of skills and habits for coping with situations and events in school and in life which cause disturbances.

The Efficacy Of REBT Groups In The School And The Findings Of This Study

Unlike other forms of therapy, an integral part of REBT is its emphasis on teaching and prevention. Knaus (1974) described it as a therapeutic approach by which children can be taught sane mental health concepts and the skills to use these concepts. Inherent in this definition is the notion that there are identifiable, concrete concepts which should be presented to children. The essence of this study was to determine if significant differences existed in groups employing REBT interventions with at-risk adolescents. Many therapeutic approaches do not emphasize skill acquisition in a deliberate manner; thus, the concept of teaching mental health skills to children and adolescents is an important distinguishing feature of the interventions employed in this study. What makes this therapeutic approach so practical with children and adolescents is the fact that a wide variety of cognitive, emotive, behavioral, kinesthetic, verbal, and oral assessment and intervention techniques can be employed. The therapist is free to be very creative in adapting strategies to a younger population. Not only does this make the therapeutic process more interesting and engaging for both client and counselor, but it also allows the therapist to target the problem more specifically.

The research questions in this study pertained to finding out if significant differences existed in these interventions with regard to this population. The resulting evidence gathered from the post-study data showed that there were mixed results. With

the exception of increasing observed social competence, the data pointed to no significant differences with regard to treatment interventions across the fours variables under study: rational thinking, attitude to school, social competence, and anti-social behavior. Scheffe's post hoc analysis was employed to reveal the areas where where the differences appeared to be significant between the cohorts.

Research Question 1:

Is there a significant difference between the mean scores on the four dependent variables [rational thinking, attitude to school, social competence, and anti-social behavior] on the post -study assessments with a cohort employing REBT group interventions alone [A], a cohort employing REBT interventions reinforced by the therapeutic board game, Let's Get Rational [B], and a control cohort receiving no treatment at all [C]?

A. Rational Thinking

Results indicate that there is no significant difference in post-study mean scores only which means that the use of REBT group counseling alone or REBT group counseling as an intervention supported by reinforcement of the work in the group by the game, Let's Get Rational (Wild, 1990), seems to make no difference. In this study rational thinking was originally described as functional cognitive processes that are free of several dysfunctional aspects. This indicates that with regard to rational thinking, the game was not substantially different in results from REBT alone, but was better than no treatment at all.

The conclusion that can be drawn is that the use of REBT group counseling interventions alone and the use of REBT group counseling interventions reinforced by the use of Let's Get Rational (Wilde, 1990), a therapeutic board game appropriate for this population, enabled students to live and practice some of the concepts more fully in the group setting. If used with adolescents

who are at risk for terminating their education, it is a better approach than doing nothing at all to reinforcing rational thinking and behaviors. The differences in the REBT only and the REBT+ game cohorts appeared to be not significant and indicated that the use of this game technique with these students had no greater impact on these students in making the concepts of rational thinking introduced in the group counseling sessions real to them and part of their own thought patterns. The ability of these students to grasp the concepts introduced and employ ways to have these ideas and thoughts become part of their daily living was doubtfully enhanced by the use of REBT alone and the use of REBT reinforced by this non-threatening and amusing way of reinforcing their counseling work in their. The game as well as the work in the other groups was always anticipated by the members of the REBT alone group and REBT + game cohort. They actually enjoyed playing the game, but realized somewhat subconsciously that the use of this exercise did have a point in getting them to live some of the new ideas and concepts that were introduced in the group. This researcher was not aware of one time when a group member refused to perform any of the activities that are outlined in the game.

Getting these young people to simply change a few behaviors is at times problematic. The use of REBT techniques and REBT techniques and the game with the subjects in the study helped them choose more rational thinking skills. They increased their propensity to rely on rational thinking and reduced the tendency to think dysfunctional thoughts that tend to cloud their development of good mental health.

B. Attitude To School

Results from The Majoribanks Attitude To School Inventory - Revised (Majoribanks, 1986) administration before and after the study indicate that there are no significant differences in the post -study mean scores in the treatment cohorts. In this study attitude to school was originally described as the student's ability to accept what is necessary to be successful in school. These interventions helped the students to effectively

function in the school setting over no treatment at all. The subjects in this study were empowered to move more deliberately toward the completion of these tasks willingly and with understanding.

Here again the tenets of REBT have a direct bearing on the at-risk adolescent in school. Attitude to school in REBT terms would encompass these elements. Students would not engage in demandingness which turns healthy preferences in life into necessities thus creating the potential for dysfunctional thinking in humans. Students are demanding of themselves, their peers, and of the school. When their demands are disappointed their dysfunctional reactions to this event cause anger, frustration, and rebelliousness in these students. Students also engage in awfulizing which proposes that it is possible for things in life to be more than 100% bad or distasteful to humans.

Teenagers are quick to make everything in their lives completely horrible or terrible when in actuality these times are just as easily described as an inconvenience. REBT group counseling is aimed at creating in the student the ability to recognize when clients make things worse than they really are and what would be a more rational view of their behaviors. Low frustration tolerance describes instances in which human beings believe that there are things in this life that they can't stand. Students sometimes feel that they can't stand a class or a teacher, and that is that. The groups showed that we can stand much more than we think we can.

With regard to whether or not one treatment made a more significant impact in the area of school attitude on the subjects, it is clear that there were no significant differences in the results from both sets of groups REBT alone [A] and REBT + game [B]. There was , however, a significant difference between the use of REBT reinforced by the game when compared with the Control [C] groups indicating that the use of this intervention made a greater impact on these students than no treatment at all. The differences in the post study

mean scores of the REBT + game cohort are significant and indicate that this type of intervention with these students had an impact on their understanding and improvement of their attitudes toward school. It helped them make the concepts introduced in the group counseling sessions real to them but was no more successful in doing this than employing REBT group counseling interventions alone. The ability of these students to more quickly grasp the ideas introduced and have them become part of their daily living seem to be clearly enhanced by the use of this non-threatening and amusing way of reinforcing their group counseling experiences. The REBT counseling with the game seemed to positively improve their attitudes toward attending school and reduced the tendency to think of school as a place where they feel uncomfortable. Consequently, the use of this game as a reinforcement tool to change some attitudes to school of the subjects in this study was demonstrated positively.

C. Social Competence

Social competence is a rather complex, multidimensional construct that has been defined a number of ways in the professional literature. For the purposes of this study, social competence includes the components of (a) overt behaviors; (b) cognitive processes; and (c) cognitive structures. It can be viewed as those responses, in a given situation, that maximize the probability of producing, maintaining, or enhancing positive social involvement for the individual. To measure this variable with the subjects in the study, The School Social Behavior Scales - Social Competence (Merrell, 1993) was employed. This instrument consists of an observational checklist on each of the subjects that was completed by the faculty members who had each student in class and the two administrators of the school before the groups began and after the groups ended. The development of adequate social skills in childhood and during the adolescent years enhances the student's ability to flourish in the school environment. The results showed that there was a significant

difference between the mean scores between the treatments on this variable. Post-study mean scores for the School Social Behavior Scales - Social Competence indicate that REBT only cohort [A] was 105.2, the REBT + game [B] was 137.4, and the Control [C] was 100.3. The p-value for this measure equaled <.0001 indicating that the differences in the mean scores between the cohorts on the variable of social competence as observed by faculty and staff was significant. Post hoc analysis of the data showed that there was significant difference between the use of REBT group counseling interventions alone and the use of the game, Let's Get Rational (Wilde, 1990) with these students. This shows that in imparting to at-risk adolescent group counseling clients was more easily accomplished using the game as opposed to using no reinforcement at all. The game results also showed significant differences over employing not intervention at all.

Once students understood that they alone can change their behaviors for the better, they were able to capitalize on the success they experienced. Teachers, administrators, and staff reported being impressed by students in the study treatment groups who exhibited adequate interpersonal skills, competent self-management skills, and appropriate academic behaviors. The REBT + game cohort [B] showed more improvement than the REBT alone cohort The Control cohort [C] showed almost no improvement at all. The respondents were unaware of which students were in each group. Social competence in the school setting was the topic of many of the examples employed in the group sessions. Cooperation, understanding, cooperation, and self-restraint were the major parts of this construct that improved and was reported by the observational checklists. The use of the game, Let's Get Rational (Wilde, 1990), in cohort B, as reinforcement, did had a significant impact on altering the attitudes and behaviors of the subjects to such an extent that staff members noted marked improvements in the overall classroom behavior of the subjects. The mean scores add evidence to the supposition that the use of the game in

Cohort B with those subjects with regard to improving social competence and how they are perceived by others can be substantially enhanced by the use of the game along with REBT group interventions.

D. Anti-Social Behavior

Anti-social problem behavior can be described as those behaviors that impede adequate socialization and produce negative social outcomes such as peer or adult rejection. These behaviors usually have an antisocial component such as disregard of the rights and property of others, or may directly lead to negative social outcomes. Examples of other types of anti-social behaviors include self-stimulation, self-injury, depressive-withdrawal, and substance abuse. Anti-social behavior also includes blaming others for problems, defying teachers or other school personnel, cheating on homework or tests, lying, complaining, disrupting ongoing activities of the class, and getting into fights. These all detract from the productivity of the student in school and may contribute to the loss of the student from school through voluntary or involuntary termination. To measure this variable regarding the subjects in the study The School Social Behavior Scales - Anti-Social Behavior (Merrell, 1993) was employed. This instrument was distributed to the faculty and administration of the school for them to complete about each of the subjects in the study prior to and following the treatment in the study. The results showed a reduction of anti-social behavior in these students which greatly enhanced their ability to sustain their school experience, reduce altercations in the school, minimize the inappropriate behavior that makes it difficult for these students to be successful. Success in curbing these behaviors will add to the positive aspects of their time in school. The results showed that there was no significant difference between any of the interventions or between the interventions and no treatement at all. Post hoc analysis of the data confirmed these results. The results showed that there was no significant reduction in observable anti-social

behaviors between the treatment groups and between the treatment groups and the group which had no treatment at all on this variable.

Research Question 2:

Is there a significant difference between the genders in these counseling groups on the mean scores on the four dependent variables [rational thinking, attitude to school, social competence, and anti-social behavior] on the pre and post study assessments with the groups.

Rational Thinking

The results of this study show no significance between mean scores of these gender-pure groups in using one intervention from REBT over another; therefore, the treatment regimen performs as well with males as with females. Male post-study mean scores were 75.5 and those for females was 70.1 with P value = .0675 with $p < .05$. The differences in the mean scores indicate no real significance. This would allow a counselor to employ this model with almost equal effectiveness in pure male or pure female groups or even in mixed groups. Gender plays no part in whether these REBT group counseling methods increase rational thinking as a result of the work in this study.

Attitude To School

In the area of attitude to school, here again there appears to be no significant difference between the groups with regard to gender. The male mean score was 62.4 and the female post-study mean score equaled to 67.3 with a P = .0668 is the p value when $p < .05$. Gender plays no part in whether these REBT group counseling methods improve attitude to school as a result of the work in this study. Post study assessment with the subjects in the study indicated that there was no significant difference in their mean scores.

Social Competence

In the area of social competence, there appears to be no significant difference

between the genders. Gender plays no part in determining which REBT intervention makes the greatest difference in improving observed social competence as a result of the work in this study. Male mean score indicated was 106.1 while female mean scores on this variable was 122.5 with the $p = .0770$ when $p < .05$. The results of the study show that both methods may be employed with either gender with similar results.

Anti-Social Behavior

Again, in the area of anti-social behavior, there appears to be no significant difference between the groups with regard to gender. Male post-study mean score equaled 58.0 and the female mean score was 48.5 with $p = .1687$ when $p < .05$. Therefore, it can be concluded that gender plays no part in determining which REBT intervention makes the greatest difference in reducing observed anti-social behavior as a result of the work in this study.

Research Question #3: Interaction Between Treatment and Gender

Is there a significant interaction between gender and treatment in this study? Interaction between treatment and gender is the joint effect of one or more independent variables on a dependent variable. This occurs when independent variables not only have separate effects but also have combined effects on the dependent variable. Interaction occurs when the relation between two variables significantly differs depending upon the value of another variable. In the case of this study it would include the effect that gender and treatment cohort placement together would have on the mean scores of the four variables.

Rational Thinking

No significant interaction was found in the area of rational thinking. This means that there was no joint effect of gender and treatment group placement that caused a significant increase in the means scores at post-test in the measure of rational thinking as measured by the Idea Inventory (Kassinove, Crisci, and Tiegerman, 1977). P equals .3431 when $p < .05$ indicating that there was no significant interaction between the gender of the subjects, the treatment group of the subjects, and their effect upon the post-study scores. Males and females could have performed as well in one group as in another.

Attitude To School

Again, no significant interaction was found in the area of attitude to school. This means that there was no joint effect of gender and treatment group placement that caused a significant increase in the means scores at post-test in the measure of attitude to school as measured by the Majoribanks Attitude To School Inventory (Majoribanks, 1987). P equals .3089 when $p < .05$ indicating that there was no significant interaction between the gender of the subjects, the treatment group of the subjects, and their effect upon the post-study scores in attitude to school. Males and females could have performed as well in one group as in another.

Social Competence

No significant interaction was found in the area of social competence. This means that there was no joint effect of gender and treatment group placement that caused a significant increase in the means scores at post-test in the measure of social competence as measured by the School Social Behavior Scales (Merrell, 1993,). P equals .4501 when $p < .05$ indicating that there was no significant interaction between the gender of the subjects, the treatment group of the subjects, and their effect upon the post-study scores in attitude to

school. Males and females could have performed as well in one group as in another.

Ant-Social Behavior

No significant interaction was found in the area of anti-social behavior. This means that there was no joint effect of gender and treatment group placement that caused a significant increase in the mean scores at post-test in social competence as measured by the School Social Behavior Scales (Merrell, 1993,). P equals .4501 when $p < .05$ indicating that there was no significant interaction between the gender of the subjects, the treatment group of the subjects, and their effect upon the post-study scores in attitude to school. Males and females could have performed as well in one group as in another.

Conclusions And Usefulness Of This Study

Group counseling can have a significant impact on developing thinking , attitudes, beliefs, and altering the behaviors of students who are experiencing difficulties in their daily school careers. Group counseling in high school and in an alternative high school setting offers an effective laboratory to maintain and enhance skills which add to the resiliency of adolescents enabling them to cope with the many dilemmas in the school setting.

The adolescent period is a time of searching for an identity and developing a system of values which, in many cases, will influence the course of one's life. One of the most important developmental needs of this period is to experience successes that will lead to a sense of self-confidence and self-respect. One of the by-products of this study was that the subjects began to develop a self-respect and a self-confidence that was not present in their school lives before. Adolescents need to recognize and accept the wide range of their feelings, and they need to learn how to communicate with significant others in such a way that they can make their wants, feelings, thoughts, and beliefs known.

Group counseling such as the work in this study is useful in eliminating self-doubt and changing beliefs, attitudes, and behaviors at this critical time in life. These data from the study indicate that the type of intervention employed with these subjects did make a difference in helping them understand and eliminate dysfunctional thinking and behaviors that are problematic in the school. The work in this study provided better understanding of the adolescent dilemma. It provided a more suitable solution to working with the problems encountered. It also developed strategies for dealing with the school environment and relationships with significant others in their lives. The results of the study showed that through the use of REBT group counseling, especially reinforced by the use of a therapeutic game, students can begin to make decisions about their own lives and to better cope with their school environment.

Adolescents tend to be more aware of what the world does to them than of what they do to the world. Thus, they can be highly critical and fault finding. At times they may want to drop out of society; yet at other times they may idealistically strive to reform society. Employing REBT groups in the secondary school and an alternative high school helps adolescents to understand this phase of life better and enables them to make more rational decisions about their lives in school.

When this study was outlined originally, the aim of the work was to answer several questions about the use of REBT alone and the use of REBT along with a therapeutic board game with adolescents who are considered at risk for terminating their education before graduation. Three conclusions can be drawn from the work in this study.

The data from the study show that with the exception of enhancing social competence in these students, there was no significant differences in the two REBT interventions in group counseling with the at-risk adolescents in the areas of rational thinking, attitude to school, social competence, and anti-social behavior of the participants. The study indicates that REBT group interventions which are reinforced by use of this

game, Let's Get Rational (Wilde, 1990), make a significant difference only in the ability of the student to grasp concepts and practice more socially competent behavior more effectively than from REBT group intervention techniques alone. This improves their resiliency in the school setting and will lead to the completion of their high school education. The REBT group counseling intervention reinforced by the game, Let's Get Rational (Wilde, 1990) was significantly better than no intervention at all in the areas of rational thinking, attitude to school, and in social competence. This, however, is an insubstantial set of results. One would assume that these students would succeed better in learning and applying the concepts of these three variables more readily than group members who have had no group counseling experiences at all.

No significant differences were found at all in male and female mean scores at the post-study assessment of these at-risk subjects on the variables of rational thinking, attitude to school, social competence, and anti-social behavior. This means that gender plays almost no part in group members' understanding that the tenets of REBT and practicing these ideas. Males and females can benefit equally well from inclusion in counseling groups which seek to increase rational thinking, improve attitude toward school, increase observable social competence, and reduce observable ant-social behavior in an alternative setting.

No significant interaction existed between the genders in the study and the treatment interventions employed in this study to effect changes in the four dependent variables. The indication is that regardless of gender, the treatment interventions employed in this study would have yielded similar results in the case of either gender viewed in the context of each treatment.

There are numerous studies available about the use of REBT with school-aged children and adolescents. Many have shown dramatic results which have pointed to the usefulness of these interventions. The results of the present study have shed some new

light on two interventions with at-risk adolescents. This work has demonstrated the effectiveness of treatment employing a REBT counseling and the therapeutic board game, Let's Get Rational (Wilde, 1990) as a group counseling intervention with these group members in developing social competence. The use of this intervention was interesting, reinforcing, and effective in altering the beliefs, attitudes, and behaviors of the participants. The findings of this study were consistent with the findings of many other REBT studies which looked at outcomes of group counseling with adolescents. The findings have shown that using this game makes a significant difference in how adolescent group members experience a group and learn the tenets of social competence in a group. The data in the study showed REBT group interventions employing the game as a reinforcer were superior to no treatment at all in increasing rational thinking, improving the members' attitude to school, and in increasing the social competence of the group members.

There seemed to be no significant difference between genders with regard to the interventions used in this study. Males and females performed in much the same manner in whatever cohort they were in throughout the study. This suggests that both genders would respond equally well to either intervention and would score in a similar manner on the pre- and post- study assessments for the independent variables.

Replicating The Study

This study may be easily replicated in similar or diverse groups in the schools. It was an experimental design which called for rigorous control and procedures. Almost any group counseling situation can lend itself to an outcome study such as this. One can formally or informally note student/clients' scores on a few assessment instruments measuring variables of interest. The effectiveness of the group sessions may be shown in a wide range of settings and group types. These data in this study have shown that the use of differing treatment interventions make a significant difference in facilitating the learning of

new ways of thinking, attitudes, and social skills. School counselors need to select interventions which offer the greatest hope of success in helping students grow within the school setting. This study demonstrated interventions that are effective in helping students to understand themselves better, understand others, and examine their own interaction with their environment. It is hoped that when these students are exposed to this helping process that they will be better equipped to deal with problems that arise. Consequently, it would be appropriate for the counselor to look at the effectiveness of almost any group counseling intervention in a similar manner followed in this study.

This study was particularly concerned with examining at-risk adolescents in an alternative high school setting. The design of the study could also be employed with other groups in the alternative high school or in the regular secondary program. It may be particularly appropriate for use with conduct disordered students who continually have problems interacting with the school environment. The use of REBT and the game format would enable students to readily understand and practice more appropriate attitudes and behaviors in a safe environment. Counseling groups in the secondary schools are effective and efficient ways of helping students deal with problems in their lives. Groups in the regular high school program that might benefit from this type of intervention include children of divorce, children of alcoholics, self-acceptance groups, anger groups, conflict resolution groups or groups of students who are behavior problems. The use of the REBT game was interesting and reinforced the concepts and skills that the group intended to address. The use of this game intervention might, in all probability, lend itself to any counseling group in the school with clients who are 11 years or older. It may not work as well with students who are intellectually limited. Subjects should be intellectually capable of learning new ways of thinking, new attitudes, and new behavioral skills.

Implications For Counselors

The use of REBT group counseling interventions with at-risk students can serve

counselors well in the high school setting, especially with the use of the non-threatening and reinforcing game, Let's Get Rational (Wilde, 1990). It is very well suited to the school setting because it employs an educational model to achieve its goals along with the reinforcement of an enjoyable activity where students are afforded the opportunity to practice what they have learned. REBT is a teaching therapy which has as its basis the imparting of a set of basic ideas that seeks to enable the student to make some basic philosophical changes in their thinking, attitudes, or behavior. Groups employing this therapy and this game intervention will serve the students well in building resilience while completing their high school education. Counselors should be aware that these cognitive-behavioral interventions seek to instill in adolescents an appreciation of good mental health and ways for dealing with the problems of life.

Counselors should know that throughout the use of this form of group work employing a game format to reinforce new learning, students develop their maximum potential for growth and employ fact-based hypotheses about themselves and the world around them.

Counselors must know that the use of REBT and Let's Get Rational (Wilde, 1990) the game targets irrational beliefs and philosophies and designates these for change. It is helpful if the counselor does realize that the use of this type of intervention in this study will aim at reversing several basic philosophies of life that can lead nowhere except to problems in the school and replace them with more rational thinking, more accepting attitudes to school, and social skills that help students thrive in the school environment.

Counselors should be aware that the use of REBT and the game, Let's Get Rational (Wilde, 1990) is grounded in the ideas that demandingness, awfulizing, low frustration tolerance, and self-rating are central to many of the problems encountered by students in the high school. They must know what these concepts are and what they do to people who practice them. The game offers many teachable moments where personal illustrations and

skills are appropriately discussed and practiced.

In summary, counselors need to know that the use of this REBT intervention in the schools is that students take ownership in their mental health progress when learning is accompanied by reinforcement providing opportunities to practice new thinking and new philosophies. The data in this study showed that in working with the at-students in groups is more useful and enjoyable when the concepts and new learning was reinforced by the use of Let's Get Rational (Wilde, 1990). It makes it easier to provide opportunities to examine dysfunctional thinking and behaviors which cause problems for students in the high school setting.

Recommendations For Further Research

The REBT game, Let's Get Rational (Wilde, 1990), was developed to provide group leaders with an effective therapeutic tool to be used in group counseling. It was designed to be used with adolescents and adults from ages 11 through adulthood. The game is appropriate in a wide variety of settings and populations. The game is highly adaptable and flexible as a reinforcement of group learning and development. Further research could center around the use of this game with other groups of students.

This game could be employed as reinforcement in counseling groups from almost any segment of the middle school, high school, or alternative school population. It could be employed with groups of children of alcoholics. It would be interesting to see the effect of the use of this game in group counseling with these students in helping them to focus on their negative evaluations of themselves. It might be useful to examine the effectiveness of the game format in understanding overgeneraliziation issues where students associate their parents' behaviors with the behavior of others. Using this intervention to deal with low frustration tolerance of these students might provide an opportunity for increased understanding of this phenomena among the COA population. Comparing the results of the use of this intervention with other REBT approaches may be informative as a guide to

follow in selecting appropriate group activities with this population.

The use of the game might be examined with adolescents and early adolescents whose parents have divorced. Here the game might be a suitable forum to examine the student awfulizing that accompanies the break-up of the student's family. It would be interesting to see if the use of the game in group sessions made any difference in reducing the catastrophizing that students experience at these times. Data could be gathered and examined to show the success of the game in helping students realize that the divorce of their parents may not be horrible although undesirable. Let's Get Rational (Wilde, 1990) can be useful in helping students alleviate the self-downing that accompanies divorce in the family. The game could also be employed as a practice field for rational problem solving. Divorce changes the world of children and adolescents. It would be useful to find out if the game is a more effective approach to helping students produce coping strategies and practice them in the safe environment of the group.

The game might be particularly useful in working with anger groups in the middle school, high school, and alternative high school settings. Incidents of anger could be explored in group work with these students and new ways of reacting practiced by employing the game as a point of departure to explore and alleviate this very troubling part of some students' lives.

Employing Let's Get Rational (Wilde, 1990) with self-esteem or self-acceptance groups could offer opportunities for further research. Comparison of the game approach with other methods in eliminating self-rating, stopping self-downing, and teaching more rational decision-making could shed some light upon more effective group methods for use with students experiencing these problems.

Other areas where the game might be examined as a group intervention would parallel many of the research studies that have been done in the past. The use of the game

in a group setting could be compared with other interventions with regard to alleviating general anxiety of students, improving self-concept, developing locus of control, increasing assertiveness, developing personal adjustment, conflict resolution, and fostering interpersonal problem-solving skills.

Final Note

This study demonstrated the effectiveness of a board game, Let's Get Rational (Wilde, 1990), as a reinforcement to more traditional REBT group counseling techniques, in helping at-risk high school students in an alternative high school setting become more socially competent. The REBT group counseling intervention along with the use of the game also made a significant difference in increasing the rational thinking, improving attitude to school, and improving social competence over no interventions at all in the alternative high school school setting. It showed that confidence can be placed in the use of these techniques to reinforce the learning of REBT principles, which can lead to changing the thinking, attitudes and behaviors of students at risk of not completing their high school education. The study showed that there is a significant difference with regard to which treatment is employed in groups of at-risk adolescents with respect to improving the social competence of the group members. This finding will help counselors at the secondary level evaluate the efficacy of this REBT intervention employing this particular therapeutic game in improving the social competence of the individual student. It will show counselors that this approach holds promise for increasing the responses which, in a given situation, maximize the probability of producing, maintaining, and enhancing positive effects for the students in the school environment thus eliminating or reducing many of the dysfunctional social behaviors which cause these students to be sanctioned by the school administration and increase the likelihood that the student will terminate their education. Counselors are

charged with helping to retain these students in school until they achieve their high school diplomas. The use of group counseling and interventions such REBT and REBT along with this board game can be advantageous in allowing these students to develop new cognitions, new attitudes toward what they must do in school, and to develop and practice more appropriate behaviors in the school community. Students deserve the best that can be provided in the school including meaningful services at alternative settings to help them cope with the travails of their lives and their association with school which might impede their completing a high school education.

Appendices

Appendix A

Consent Form

Appendix A

The Washington County Evening High School
EDUCATION AND LIFE Hagerstown, Maryland 21740
The Future Is Now! 1(301) 791-4171

20 MAR 98

Dear parent,

Thank you for your permission allowing your son/daughter to be a part of one of the groups we are having at Evening High School. As I said before, these groups are part of my work toward completion of my doctoral program at Virginia Tech in counseling. What I neglected to mention to you about this activity is that it will be part of a study I am conducting that will shed some light on the effectiveness of a group counseling method from Rational-Emotive Behavior Therapy with students at an alternative high school. Your son/daughter was randomly selected to participate in this 10-week study.

The students in the groups will be chosen at random from a pool of students at the Evening High School, and your son/daughter may or may not be included in one of the groups. If your son/daughter is not chosen to be in one of the groups and is part of one of the control groups, he/she will benefit from the same material that the other students will learn except it will be offered after the study is finished. Questionnaires will be given to each student before and after the study, and their teachers will be asked to complete a checklist about the students as well. Group members will have the chance to learn new skills and behaviors that may be helpful to them in staying in school. The groups will be led by myself and two other counselors.

There are no known risks for being in this study. The group members will learn and practice interpersonal skills, discuss feelings, share ideas, practice new behaviors, learn how to see behaviors that are not useful, and how to do something about them. There will be no rewards, penalties, or paid compensation for being in this study. All responses in the groups, on the student questionnaires, and on the teacher checklists will be strictly confidential. Names will not be used on any of the student questionnaires. Instead, random ID's will be used to merge the data. These ID's will be destroyed as soon as all of the data have been gathered. The results of the study will be group results with no individual student results available. I would be happy to send you a copy of the group results and discuss them with you. To do this please complete the attached form, and a copy of the results will be mailed to you. No individual student results will be available. Group leaders will keep all information shared in the group and the information gathered from the questionnaires private except in situations where there is an ethical and legal responsibility to limit confidentiality. In the unlikely event that any student feels disturbed or uncomfortable with anything that is done in the group, individual counseling will be available. Participation in this study is strictly voluntary. The student may withdraw at any time and may also skip any items on the questionnaires that he/she prefers not to answer.

If you have read the above and agree with its provisions, please consider signing the voluntary consent statements on page two of this form.

Voluntary Consent: I certify that I have read the preceding or it had been read to me, and I understand its contents. Any questions that I have about its contents have been clarified. Any questions that I have about this study have been or will be explained by **Budd Moore, Counselor at the Evening High School at 1(301) 766-8374, 8375, or 8113**. My signature below indicates that I have freely agreed to allow my son/daughter to participate in this study under the terms outlined here.

Parent Signature_____ Date _____

As a student at the school and a participant, I certify that I have read the preceding statement or had it read to me and I understand its contents. Any questions that I have about its contents have been clarified. Any questions that I have about this study have been or will be explained by **Budd Moore, Counselor at the Evening High School at 1(301) 766-8374, 8375, or 8113**. My signature below indicates that I have freely agreed to participate in this study under the terms outlined here.

Student Signature _____ Date _____

I certify that I have explained to the above individuals the nature and purpose, the potential benefits, and the possible risks pertaining to this study. I have answered any questions raised by the parents or the subject.

Investigator Signature _____ Date _____

Budd A. Moore NCC NCCC NCSC CPC
Counselor
Washington County Evening High School
c/o South Hagerstown High School
1101 South Potomac Street
Hagerstown, MD 21740-7396
1(301) 766-8374 or 8375 [8:30 - 3:30] or 766-8113 [after 4:30]

REQUEST FOR A COPY OF STUDY RESULTS

The Efficacy Of Group Counseling Interventions Employing Short-Term Rational-Emotive Behavior Therapy In Altering The Beliefs, Attitudes, and Behaviors Of At-Risk Adolescents

I hereby request a copy of the results of the above study and understand that any concerns that I may have about the study will be answered by the investigator.

Signature

_____

NAME

_____

ADDRESS

_____

CITY/TOWN _____ STATE _____ ZIP_____

A copy of the results of this study will be sent to you immediately along with an explanation of the results. If you have any questions or comments about the study or the results of the study, please do not hesitate to call me at 1(301) 766-8374 or 8375 daily from 8:30 - 3:30.*

Budd A. Moore, NCC NCCC NCSC CPC, Counselor

*** These phone numbers will also be included on the results pages you receive.**

Appendix B

Parent Letter

Appendix B

The Washington County Evening High School
EDUCATION AND LIFE Hagerstown, Maryland 21740
The Future Is Now! 1(301) 791-4171 OR 766-8113

Dear Parent,

I have been a counselor for the last ten years in the Washington County School System and am now a counselor at South Hagerstown High School and also at the Washington County Evening High School. I have found that working with the students at the Evening High School to be one of the most interesting parts of my job. I am also a doctoral candidate at Virginia Polytechnic Institute And State University and want to complete a research project studying better ways to serve the population at the school and make it easier for them to continue their education until they finish it.

Part of our job at the Evening High School is to attempt to keep students in school pursuing their high school diploma as long as we possibly can, hopefully to graduation. Noone wins when a student decides to drop out of school. We want to make progress toward the day when no student decides to end their education without first going through all of the possibilities and getting all of the services that may give them the tools to continue.

Kids who drop out of school in Washington County have many different characteristics:
* 60% are boys; 40% are girls.
* 81% dropped out by grade 11.
* Of the 81% mentioned, 36% dropped out in grade 10.
* 81.4% of those that dropped indicated that the lost interest in their schooling.
* 13.7% of the Black population dropped out.
* 5.6% are white.
* At least 37% of kids who dropped out failed courses in middle school.
* 58% failed subjects in high school.
* 97% of the students who dropped out had a grade point average of less than 2.5 [C average]
* 51.3% had failed no functional tests at the time they dropped.
* 28.5% had failed only one functional test.
* 27% of the students who dropped out received special education services in the school.
* 23% live with both parents. 42% live in single parent homes.
* At least 42% of these students had received special referrals to the Support Services Department.

As you can see these numbers are very interesting. We have tried many different

approaches to help reduce this problem and to have more students successfully complete their education; however, there are some methods and services that have not been tried that

may help keep kids in school. Group counseling with the population at Evening High School is something that has not been tried for various reasons. In fact, this is the first year the school has had a counselor at all. Group counseling usually centers upon a particular type of problem, which may be personal, educational, social, or vocational. It is usually done in schools, colleges, and community mental health clinics. The problems addressed in group counseling involves normal students who have normal problems, many of which in this case will have an effect on their continuing their schooling. I have had a great deal of experience working with young people in group counseling settings in the high school and feel that the results of this approach have been good in providing students with a place to explore problems in private and develop ways for them get on with their lives and their education. Group counseling may be used to prevent something from happening, but also it can be used for educational and remedial reasons. Students learn the behaviors that cause them to leave school. They also can learn to change these behaviors.

The activity that I wish to tell you about is a group counseling project to see which of two methods work best with students at the Evening High School in keeping these students in school, giving them reasons to stay in school, improving their attitudes to school, and helping them solve some of their problems themselves. The focus is upon groups which use Rational Emotive Behavior Counseling as a way to better help with the pressures that contribute to students' dropping out. This is a short-term problem-solving counseling approach to the problems in life (Ellis, 1996). Through finding new ways to deal with problems in school and their lives, it is hoped that students at the school will be better able to face and solve problems that may stand in the way of their finishing school, develop a better attitude toward school, and to make changes in their behaviors that may improve their chances of finishing school.

I would like to ask you to consider allowing your son or daughter to be in one of the groups. With your permission, these groups will meet in a 50 minute session each week for a total of 10 weeks throughout Semester II of this year. Students will be placed in the groups totally at random with a different set of activities in each group. The goal is to see which of these methods and activities works best with students in helping them recognize and solve problems in school and in their lives. The sessions will meet during one of the periods of the Evening High School program and will be completely voluntary. Noone will force any student to be in one of the groups. Participation is strictly voluntary . The students who are chosen for this activity will be picked completely at random. Group members will be asked to interview with me and to complete some questionnaires before the groups start and after the groups finish.

I hope that you will agree with me that anything we can provide students to enable them to continue their education is valuable and should be tried. We are hopeful that the students who are in the groups will develop some more effective ways of thinking, some new ways at looking at school, and give the students some different ways of meeting the frustrations of school and life.

Please read the Parent/Guardian Consent Form thoroughly and return it by _____.

If you have any questions or concerns, please call me at the numbers and the time listed below. Thank you very much for considering this opportunity for your son/daughter.

Respectfully yours,

Budd A. Moore, NCC NCCC NCSC CPC
Counselor
South Hagerstown High School
1101 South Potomac Street
Hagerstown, MD 21740-7396
1(301) 766-8374 or 8375
Washington County Evening High School
1(301) 791-4171 [before 4:30 p.m.] and 766-8113 [after 4:30 p.m.]
buddm4cnsl@innernet.net or bmoore@vt.edu

Appendix C

Faculty Letter

Appendix C

The Washington County Evening High School
EDUCATION AND LIFE Hagerstown, Maryland 21740
The Future Is Now! 1(301) 791-4171

Dear Colleague,

I am reaching the stage in my doctoral studies where I need to complete a research project and defend it as my dissertation. The project I have chosen is entitled The Efficacy Of Group Counseling Interventions Employing Short Term Rational Emotive Behavior Therapy In Altering The Beliefs, Attitudes, And Behaviors Of At-Risk Adolescents. I plan to randomly choose 32 students that will be randomly assigned to four groups for this experimental study. I am trying to examine the effectiveness of one Rational Emotive Behavior Therapy group technique over another with students who are considered at risk in an alternative school setting. Therefore, the project will center around conducting 10, 50 minute group counseling sessions with each of the four, eight-member groups. Pre and post assessment of certain variables under study will be done. You as the students' teachers will be asked to fill out some pre and post study observation checklists about each student in the project.

Group counseling has been found to be effective in assisting certain youths in learning important personal and social skills. Counselor(s) will work with 8 students during one session for a fifty minute period. The sessions will meet once a week for ten weeks.

It is important to distinguish be between group counseling and group guidance. Group guidance involves the imparting of information to a large group of students, such as an entire class. This information can help students make better decisions about their lives, about career paths, about the use of drugs and alcohol, and many other areas. Group guidance is designed to prevent issues from becoming problems and is something that every student needs and deserves on a regular basis. Group counseling, on the other hand is remedial in nature. It is meant to help those who are already experiencing problems with developmental issues and to prevent such problems from growing.

Group counseling is not the best choice for every student who has problems. Some young people need more intense, individualized help and would best be served by individual counseling or family therapy. So, even though the student may need help very badly, group counseling might not be the best kind of service. The sessions will focus on the things that have caused students problems in the past with the hope that some of these behaviors can be changed for the better. Some of the topics include: Discovering Feelings, Events Do Not Cause Feelings, Thoughts Cause Feelings, My Own Thoughts, Thoughts Can Be Rational Or Irrational, Thoughts Can Make You Feel Bad, Thoughts And Beliefs, Challenging and Disputing Irrational Beliefs, Wants and Needs, Beliefs About School, and Overgeneralizing Is Irrational.

You will be notified when a student is scheduled for a group session and will not be in attendance in your class. If you have students who you think will benefit from this experience, please let me know as soon as possible. Thanks in advance for your cooperation.

Respectfully yours,

Budd A. Moore, NCC NCCC NCSC CPC, Counselor, Washington County Evening High School

Appendix D

Schedule Of Group Sessions

Appendix D

Schedule of Group Sessions

A1 [no game - male]	B1 [game group - male]
Monday, March 30 [pd.2]	Tuesday, March 31 [pd.2]
Monday April 6 [pd. 2]	Tuesday, April 7, [pd.2]
Monday, April 13 [pd.2]	Tuesday, April 14 [pd. 2]
Monday, April 20 [pd. 2]	Tuesday, April 21 [pd.2]
Monday, April 27 [Pd. 2]	Tuesday, April 28 [pd. 2]
Monday, May 4 [pd. 2]	Tuesday, May 5 [pd. 2]
Monday, May 18 [pd.2]	Tuesday, May 19 [pd.2]
Monday, May 25 [Pd. 2]	Tuesday, May 26 [pd. 2]
Monday, June 1 [pd. 2]	Tuesday, June 2 [pd. 2]
Monday, June 8 [pd.2]	Tuesday, June 9 [pd.2]
A2 [no game - female]	B2 [game group - female]
Wednesday, April 1 [pd.2]	Thursday , April 1[pd 3]
Wednesday, April 8 [pd. 2]	Thursday, April 7 [pd 3]
Wednesday, April 15 [pd 2]	Thursday, April 16 [pd. 3]
Wednesday, April 22 [pd. 2]	Thursday, April 23 [pd.3]
Wednesday, April 29 [Pd. 2]	Thursday, April 30 [pd. 3]
Wednesday, May 6 [pd. 2]	Thursday, May 7 [pd. 3]
Wednesday, May 13 [pd.2]	Thursday, May 14 [pd.3]
Wednesday, May 20 [Pd. 2]	Thursday, May 21 [pd. 3]
Wednesday, May 20 [pd. 2]	Tuesday, May 21 [pd. 3]
Wednesday, May 27 [pd. 2]	Thursday, May 28 [pd. 3]

Appendix E

Permission Of Teachers

Appendix E
Washington County Evening High School
50 West Oakridge Drive
Hagerstown, MD 21740

Date: _____

To: _____

Re: Students selected for group counseling study at Washington County Evening High School.

_____, a student in my class, _____ has permission to participate in the group counseling study conducted by Budd Moore at the Washington County Evening High School. He/she will be permitted to make up work from the class and will not be penalized for participation in this study. Assignments will be provided for this student and will be accepted until the end of the group study.

_____ Student

_____ Teacher

_____ Assistant Principal

Textbook and Materials:

1._____

2._____

3. _____

4. _____

5._____

6. _____

7. _____

8. _____

9. _____

10. _____

Appendix F

Letter To Superintendent

Appendix F

The Washington County Evening High School
EDUCATION AND LIFE Hagerstown, Maryland 21740
The Future Is Now! 1(301) 791-4171

1 DEC 97

To: Dr. Herman G. Bartlett
Superintendent
Washington County Board Of Education
P.O. Box 730
Hagerstown, MD 21740

Dear Dr. Bartlett,

I have been a teacher and counselor in the Washington County Schools for 28 years. I am currently a school counselor at South Hagerstown High School and have been at the school for the last three years. I am also working as a counselor at the Washington County Evening High School since September of this year and am much interested in the success of this population. I have been a doctoral student at Virginia Polytechnic Institute And State University at the Northern Virginia Center at Falls Church since 1994 and have completed all of my course work and passed my Prelims in April, 1997. I am now at the dissertation stage of my program with the hope of passing prospectus in January, 1998 and conducting my study in February, March, and April.

I would like to discuss with you the use of the Evening High School population as clients in my dissertation research and your approval for conducting this study at the school. The study focuses on at-risk youth and ways to help them develop more appropriate behavior, rational thinking, and attitudes toward education through the use of group counseling. My topic is: The Efficacy Of Two Methods Of Short Term Rational Emotive Behavior Therapy Group Counseling In Increasing Rational Thinking, Improving Attitude Toward School, And Altering Selected Dysfunctional Behaviors Of At-Risk Adolescents. It is an experimental study employing a pre and post assessment of the variables that are relevant to students' behavior and success in the school setting.

I would appreciate a small amount of your time to discuss this matter with you, and also would welcome any input and assistance you could offer me. I am

Respectfully yours,

Budd A. Moore, NCC NCCC NCSC CPC
Counselor
South Hagerstown High School
1101 South Potomac Street
Hagerstown, MD 21740-7396

Appendix G

Letter To Assistant Superintendent

Appendix G

The Washington County Evening High School
EDUCATION AND LIFE Hagerstown, Maryland 21740
The Future Is Now! 1(301) 791-4171

1 DEC 97

To: Dr. Teresa M. Flak
Assistant Superintendent For Instruction
Washington County Board Of Education
P.O. Box 730
Hagerstown, MD 21740

Dear Dr. Flak,

I have been a teacher and counselor in the Washington County Schools for 28 years. I am currently a school counselor at South Hagerstown High School and have been at the school for the last three years. I am also working as a counselor at the Washington County Evening High School since September of this year and am much interested in the success of this population. I have been a doctoral student at Virginia Polytechnic Institute And State University at the Northern Virginia Center at Falls Church since 1994 and have completed all of my course work and passed my Prelims in April, 1997. I am now at the dissertation stage of my program with the hope of passing prospectus in January, 1998 and conducting my study in February, March, and April.

I would like to discuss with you the use of the Evening High School population as clients in my dissertation research and your approval for conducting this study at the school. The study focuses on at-risk youth and ways to help them develop more appropriate behavior, rational thinking, and attitudes toward education through the use of group counseling. My topic is: The Efficacy Of Two Methods Of Short Term Rational Emotive Behavior Therapy Group Counseling In Increasing Rational Thinking, Improving Attitude Toward School, And Altering Selected Dysfunctional Behaviors Of At-Risk Adolescents. It is an experimental study employing a pre and post assessment of the variables that are relevant to students' behavior and success in the school setting.

I would appreciate a small amount of your time to discuss this matter with you, and also would welcome any input and assistance you could offer me. I am

Respectfully yours,

Budd A. Moore, NCC NCCC NCSC CPC
Counselor
South Hagerstown High School
1101 South Potomac Street
Hagerstown, MD 21740-7396

Appendix H

Letter To Principal Of Washington County Evening High School

Appendix H

The Washington County Evening High School
EDUCATION AND LIFE Hagerstown, Maryland 21740
The Future Is Now! 1(301) 791-4171

1 DEC 97

To: Mrs. Joyce M Rath
Principal - Washington County Evening High School
Washington County Board Of Education
P.O. Box 730
Hagerstown, MD 21740

Dear Mrs. Rath,

I have been a teacher and counselor in the Washington County Schools for 28 years. I am currently a school counselor at South Hagerstown High School and have been at the school for the last three years. I am also working as a counselor at the Washington County Evening High School since September of this year and am much interested in the success of this population. I have been a doctoral student at Virginia Polytechnic Institute And State University at the Northern Virginia Center at Falls Church since 1994 and have completed all of my course work and passed my Prelims in April, 1997. I am now at the dissertation stage of my program with the hope of passing prospectus in January, 1998 and conducting my study in February, March, and April.

I would like to discuss with you the use of the Evening High School population as clients in my dissertation research and your approval for conducting this study at the school. The study focuses on at-risk youth and ways to help them develop more appropriate behavior, rational thinking, and attitudes toward education through the use of group counseling. My topic is: The Efficacy Of Two Methods Of Short Term Rational Emotive Behavior Therapy Group Counseling In Increasing Rational Thinking, Improving Attitude Toward School, And Altering Selected Dysfunctional Behaviors Of At-Risk Adolescents. It is an experimental study employing a pre and post assessment of the variables that are relevant to students' behavior and success in the school setting.

I would appreciate a small amount of your time to discuss this matter with you, and also would welcome any input and assistance you could offer me. I am

Respectfully yours,

Budd A. Moore, NCC NCCC NCSC CPC
Counselor
South Hagerstown High School
1101 South Potomac Street
Hagerstown, MD 21740-739

Appendix I
Memorandum Of Permission To Conduct The Study
Assistant Superintendent For Instruction
Washington County Board Of Education

Appendix I

Memorandum

Date: December 10, 1997

To: Joy Rath, Coordinator, Adult Education, Drop-out Prevention Programs

From: Theresa M. Flak

Re: Dissertation Research for Mr. Budd A. Moore

CC: Dr. Herman G. Bartlett
Mrs. Martha Roulette

As you are aware, the issue of drop-out prevention has garnered a great deal of interest from our superintendent, the members of the Board of Education, and the press in recent weeks. We are in need of solutions to this problem from many quarters if we are to continue to demonstrate the effectiveness of our school improvement efforts. Of the twelve data-based areas of the Maryland School Performance Program, Washington County has shown improvement in all but the drop-out rate. This is indeed a timely and vexing problem which requires our concerted efforts toward a solution.

I have reviewed with great interest Mr. Budd Moore's proposal for his doctoral dissertation and will await the contribution that this study can make to our overall effort in this important area of school improvement. Since Mr. Moore has substantially answered my questions about the nature and substance of the study, permission to complete the study is hereby granted. Joy, I trust that you would be working very closely with Mr. Moore throughout his research study, and I will rely upon you to assist him with thinking through the implications of his findings for our school. I strongly feel that his study may ultimately have some clues to offer our county in order to retain students in the Evening High School program. Thank you for your leadership in this arena.

Sincerely,

Theresa M. Flak
Assistant Superintendent For Instruction
Board Of Education Of Washington County
P.O. Box 730
Hagerstown, MD 21740

Appendix J
Evening High School Principal's Permission Memorandum

Appendix J

Memorandum

December 9, 1998

To: Ms. Theresa M. Flak
Assistant Superintendent For Instruction
Washington County Board Of Education
P.O. Box 730
Hagerstown, MD 21740

From: Joyce Rath, Coordinator, Adult Education, Drop-Out Prevention Programs

Re: Dissertation Research of Budd Moore.

CC: Mrs. Martha Roullette, Director Of Pupil Services

Dear Ms. Flak:

Mr. Budd Moore, the counselor for the Washington County Evening High School Program, is a doctoral student in counselor education and student personnel at Virginia Polytechnic Institute And State University at the Northern Virginia Center at Falls Church, Virginia. He is now at the dissertation stage of his program and plans to conduct his study in February, March, April, and May, 1998.

Mr. Moore requests that he be permitted to employ students at the Evening High School in his dissertation research. Parents will be fully informed of the study and will be asked to give written and informed consent for their son or daughter to participate in the study. Students will not be missing class time as the groups will be conducted by masters' level counselors during the early part of each Evening High School session.

I am enclosing a copy of his proposal. If you require further information, please feel free to call me a 1(301) 791-4171. Thank you for your kind consideration in this matter.

Sincerely,

Joy Rath
Coordinator, Adult Education/Drop-Out Prevention Programs
Washington County Board Of Education

Appendix K

Study Tracking And Record Form

Appendix K

REBT Study Tracking Form

Cohort:_____
Group: _____
Description:_____
_____

NAME/CODE:_____

PRE

II	AS	SC	AB	1	2	3	4	5	6	7	8	9	10	II	AS	SC	AB

POST

II	AS	SC	AB	1	2	3	4	5	6	7	8	9	10	II	AS	SC	AB

Appendix L

Parent Brochure

Appendix L

Parent Brochure
The Efficacy Of Group Counseling Interventions Employing Short-Term Rational Emotive Behavior Therapy In Altering Dysfunctional Beliefs, Attitudes, And Behaviors Of At-Risk Adolescents.

Budd A. Moore
NCC NCCC NCSC CPC
Counselor
South Hagerstown High School
Washington County Evening High School
1101 South Potomac Street
Hagerstown, MD 21740
March 1, 1998

Virginia Polytechnic Institute And State University
Institutional Review Board Protocol

Justification For The Project

Contemporary counselors in the schools need a wide array of interventions to work with the students they encounter in their settings everyday. This is especially true for the group of students who for many reasons are at risk for ending their school careers. These students have been described as at once disturbed and disturbing. A substantial number of these students leave their regular school and enter alternative education programs because of poor academic progress, attendance problems, excessive disciplinary referrals, and many other serious infractions of school rules. This study examines counseling interventions for use with these students who are attending an alternative high school. The focus of this study is to determine which of two group counseling interventions from Rational Emotive Behavior Therapy [use of REBT group counseling interventions as described by Bernard and Joyce (1984) and Vernon (1989) or the use of the therapeutic board game, Let's Get Rational by Wilde (1990)] is more effective for helping at-risk adolescents learn to use the principles of REBT in reducing irrational thinking, improving their attitude toward school, and decreasing selected dysfunctional behaviors caused them problems within the regular school community. Rational Emotive Behavior Therapy, as devised by Albert Ellis in 1955, has been shown to be effective with adolescent populations in various settings and for a variety of problems. The study will seek to prove that the use of this REBT board game intervention is more effective with this particular set of clients than more traditional REBT group counseling. This is because the game presents a non-threatening way for them to learn more useful ways to approach the problems in their lives and to practice new behaviors that will be the product of the work in the groups.

The expected outcome of this study will show that the use of a board game format with at-risk adolescent students will be more effective in helping these students learn and apply the principles of REBT in the school and in their lives. The group employing the

board game will demonstrate more rational thinking, a more favorable attitude toward school, enhanced social competence, and decreased antisocial behavior. The significance of this work for school group counseling is that it will point to the effectiveness of this type of intervention with at-risk students for the first time. It is hoped that this study will provide counselors with evidence that a board game can be an effective tool for working in group counseling with students who are at risk for ending their education. If the board game intervention is more effective than more traditional REBT with these students the participants will be able to more effectively cope with stressful situations that contribute to their dysfunctional association with the school. Data from the study will point to which groups are empowered to continue their education with a more effective set of coping skills based upon rational thinking skills, a more positive attitude toward school, and the altering of behaviors that may not be useful in the school setting.

Procedures

A pool of 50 volunteer students at Washington County Evening High School in Hagerstown, Md. will be identified and interviewed for inclusion in group counseling at the school. From these students 16 males and 16 females will be randomly selected. The subjects in this study will be these 48 adolescent students [age 14 - 18] all of normal intelligence who are enrolled at the evening school, a program for at-risk students administered by the Washington County [Md.] Board of Education. These students all have been at risk for a period of time for dropping out of school and have enrolled in this alternative high school setting to complete their high school education or to improve their academic standing so that they can return to their regular high school programs. They have had a variety of problems in their home school including academic failure, attendance problems, and behavior problems requiring administrative disciplinary action and suspensions. Each of the students agreed to voluntarily be a part of this study and appropriate permission forms will be signed by the student and by the parents of each student prior to their participation. Students in the two groups in each cohort will be randomly assigned according to gender. This means that there will be one therapy group of eight males and one therapy group of eight females in Cohort A [REBT group counseling alone] and and one therapy group of eight males. Cohort B [REBT group counseling employing the therapeutic board game, Let's Get Rational (Appendix I)] includes eight males and eight females in the two counseling groups. Prestudy assessments employing the Idea Inventory (Appendix II) and the Majoribanks Attitude To School Inventory (Appendix III) will be administered to the students in their groups and will not include the names of the participants. The School Social Behavior Scales (Appendix IV) will be given to the students' teachers and administrators but will display the name of the students for teacher identification purposes. Teachers will be unaware of which students will be included in Cohort A or Cohort B. Cohort C will act as a control in the study receiving no treatment at all.

Students enrolled in the Evening High School in Hagerstown, Maryland will be interviewed for this study beginning after the spring break on or about March 23, 1998. Preliminary interviews will be conducted with each of the 50 students. At this point, 32 students will be randomly selected as previously described. Parent permission forms and student consent forms will be sent home when a student is deemed suitable for inclusion in the groups. When 32 potential participants have been identified and proper permission forms are signed and returned, the pre-study assessment will be administered and the group sessions will begin. Each participant will be administered the instruments previously described (Kassinove, Crisci, and Tiegerman, 1977) (Majoribanks, 1987). At the same

time the teachers of these students and the administrators will be administered the School Social Behavior Scales on each of the students in the project to ascertain their social and behavioral functioning levels (Merrell, 1993).

One masters level school counselor who is oriented in the use of REBT procedures with adolescents in a group setting will lead Cohort A. This counselor will conduct two of the groups that are REBT in approach. A second masters level counselor will conduct two groups with the students in Cohort B employing the REBT therapeutic game, Let's Get Rational. In addition to the pre-group interview for each selected participant, a pre-group session will be conducted with each of the groups to orient them to the group itself. The group leader will outline the topics that will be explored in the group sessions and suggest some ground rules for group members. It also affords the participants the opportunity to see who is going to be part of the group and look into the potential of this experience. The group leaders in this study will be the ultimate judges of who will be the participants in the study.

Since this study centers upon interventions with at-risk students that will affect behavioral change, an important criteria that will be observed will be the extent to which each candidate wants to make changes and is willing to expend the necessary effort to effect that change and will be ascertained in the pre-study interviews. The leader must also weigh how much the candidate wants to become a member of the group after he/she gets the information. There should be sufficient information presented to each prospective group member about the purpose of the group, the length of each group session, and the number of sessions that will be conducted. Only voluntary students will be included in the study. The groups included in this study will be closed groups which will be conducted for 50 minute periods each week for ten weeks of the study. Post-study assessment will include a repeat administration of the Idea Inventory, the Majoribanks Attitude Toward School Inventory - Revised, and The School Social Behavior Scales.

Discussion of the results will center upon the utility and efficacy of the REBT board game intervention in working with at-risk students including the possibility of its being used in other settings with at-risk students. Directions for future studies will be outlined along with implications for counseling with this population.

Risks And Benefits

Risks in this study are minimal. Participants will benefit from inclusion in group counseling and changing some of the dysfunctional behaviors that have caused them problems in the past. They will be shown that it is not the things that happen to them that cause them emotional upset, but the views that they have of these occurrences that present them with difficulties. The major irrational beliefs that people employ in life situations will be explored with the groups and the participants will be encouraged to illustrate these with behavioral examples from their own life and from their experiences from school. Strategies to make better decisions about these events will be examined in the group and will serve as avenues of future behavior. Group members will have the opportunity to learn new skills and behaviors that may help their personal development and progress toward receiving their high school diploma.

Confidentiality/Anonymity

Because counseling is based upon a trusting relationship between the counselor and the client, the group leaders will keep the information shared by group members confidential except in certain situations in which there is an ethical responsibility to limit confidentiality. In the following situations, parents will be notified.

1. If the student reveals information about hurting himself/herself.
2. If the student reveals information about hurting someone else.
3. If the student reveals information about child abuse.
4. If the student reveals information about criminal activity.

The group will provide an opportunity for members to learn and practice interpersonal skills, discuss feelings, share ideas, practice new behaviors, learn how to recognize dysfunctional behaviors, and how to do do something about them in a safe and confidential environment. Anything group members share in group will be kept confidential by the group leader(s) except in the above-mentioned cases.

Names will be omitted from the pre-study and the post-study assessments except the School Social Behavior Scales, which will be completed by the teachers and the administrators of the school. Teachers will be unaware of which students will be assigned to Cohort A and Cohort B.

Informed Consent

Since this is a study employing minor students as subjects all ethical and legal precautions will be taken with regard to minimizing risks, enhancing benefits, and insuring the anonymity and confidentiality of the participants. Both parent and participant permission will be secured before the study begins (Appendix V and VI).

The Investigator

Budd A. Moore, a counselor at South Hagerstown High School and at the Washington County Evening High has had a career that spans 29 years of working with students in the secondary school. He holds graduate degrees in History (European), Special Education (Learning Disabilities), School Counseling and is pursuing a doctorate in Counseling at Virginia Polytechnic Institute And State University. He holds membership in all of the major national, state, and local Counseling professional organizations an is a member of Chi Sigma Iota, the International Honorary Counseling Society. He is board certified by the National Board For Certified Counselors holding the designations of National Certified Counselor, National Certified Career Counselor, and National Certified School Counselor. He is a certified Professional Counselor in the State Of Maryland and received primary training in Rational Emotive Behavior Therapy at the Mid-Atlantic Institute For Rational Emotive Therapy. He is also a Certified Cognitive Behavioral Therapist and a member of the National Association of Cognitive Behavior Therapists, The American Counseling Association, The National Career Development Association, The Association for Counseling Supervision, and the Association for Specialists in Group Work.

Mr. Moore started as a history teacher, but he almost immediately became interested in students who had difficulty in learning in the school or who were sanctioned in the school for behavior problems. He began teaching students with learning problems

in 1969 and continued in that pursuit for almost twenty years. In 1988 he became a school counselor and continued to be intrigued by the unique characteristics of students who did not fit the school mold. In working with students in group counseling settings, he became convinced that if students understood that it is their dysfunctional beliefs that often cause their emotional upset and not the obnoxious events that happen in their lives, they could begin to change some of their beliefs so that dysfunctional and reactive feelings and behaviors would diminish. This idea provides the foundation for the present study.

He will be assisted by two masters level counselors both of who have had school experience, C. Michael Sweeney and Peggy Rohrer. They have both been oriented to the aims of this study and have been trained in the use of REBT with adolescents.

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Professional Vita

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