

University of Nebraska - Lincoln

DigitalCommons@University of Nebraska - Lincoln

Public Access Theses and Dissertations from
the College of Education and Human Sciences

Education and Human Sciences, College of
(CEHS)

5-1-2006

DEFINING, IDENTIFYING, AND ADDRESSING ANTISOCIAL BEHAVIOR IN CHILDREN AGES 4-7: THE PERSPECTIVES OF SELECTED ELEMENTARY PRINCIPALS IN A MIDWESTERN CITY SCHOOL DISTRICT

Audre Lynn Zaroban

University of Nebraska-Lincoln, azaroban@epsne.org

Follow this and additional works at: <https://digitalcommons.unl.edu/cehsdiss>

 Part of the [Education Commons](#)

Zaroban, Audre Lynn, "DEFINING, IDENTIFYING, AND ADDRESSING ANTISOCIAL BEHAVIOR IN CHILDREN AGES 4-7: THE PERSPECTIVES OF SELECTED ELEMENTARY PRINCIPALS IN A MIDWESTERN CITY SCHOOL DISTRICT" (2006). *Public Access Theses and Dissertations from the College of Education and Human Sciences*. 2.

<https://digitalcommons.unl.edu/cehsdiss/2>

This Article is brought to you for free and open access by the Education and Human Sciences, College of (CEHS) at DigitalCommons@University of Nebraska - Lincoln. It has been accepted for inclusion in Public Access Theses and Dissertations from the College of Education and Human Sciences by an authorized administrator of DigitalCommons@University of Nebraska - Lincoln.

DEFINING, IDENTIFYING, AND ADDRESSING ANTISOCIAL BEHAVIOR IN
CHILDREN AGES 4-7: THE PERSPECTIVES OF SELECTED ELEMENTARY
PRINCIPALS IN A MIDWESTERN CITY SCHOOL DISTRICT

by

Audre Lynn Zaroban

A DISSERTATION

Presented to the Faculty of

The Graduate College at the University of Nebraska

In Partial Fulfillment of Requirements

For the Degree of Doctor of Education

Major: Educational Administration

Under the Supervision of Professor Donald F. Uerling

Lincoln, Nebraska

May, 2006

DEFINING, IDENTIFYING, AND ADDRESSING ANTISOCIAL BEHAVIOR IN
CHILDREN AGES 4-7: THE PERSPECTIVES OF SELECTED ELEMENTARY
PRINCIPALS IN A MIDWESTERN CITY SCHOOL DISTRICT

Audre Lynn Zaroban, Ed.D

University of Nebraska, 2006

Advisor: Donald F. Uerling

Children and youth are becoming involved in violent behavior at ever-younger ages. Early appearing behavior problems in a child's school career are the single best predictor of delinquency in adolescence, gang membership, and adult incarceration.

The purpose of this research was to identify successful interventions used by selected elementary principals which positively changed antisocial behavior in a kindergarten child. Face-to-face interviews were conducted with six elementary principals. The participants were chosen based on their district's view of their success and were also chosen due to the low social economic status of the children in their building.

Seven themes emerged from the interviews: the importance of parent involvement; building relationships with children; regular education functions; more restrictive environments; experience and training; early intervention; and all-day kindergarten.

The results of the study demonstrated a need for the training of elementary principals in the areas of defining and identifying antisocial behavior. Principals need

good preparation and inservice training to effectively deal with the behaviors of an antisocial child.

A need for early interventions was also a result of the study. Children as young as age three should be in quality preschool settings. Relationship building is also essential to the success of the children. If interventions do not make a difference by about age eight, antisocial behavior can become chronic disorders for which there is no cure.

Table of Contents

Chapter 1—Introduction 1

 Purpose Statement..... 5

 Research Questions 5

 Definition of Terms..... 6

 Assumptions..... 7

 Delimitations of the Study 7

 Limitations of the Study..... 8

 Significance of the Study 8

 Contributions to Research..... 10

 Contributions to Practice..... 10

Chapter 2—Review of the Literature..... 11

 History and Philosophy of Kindergarten 12

 Social Expectations in Kindergarten..... 15

 Antisocial Behavior, Stages, and Triggers..... 19

 Responding to Antisocial Behavior 24

 Quality Preschool Programs 29

 Summary of the Literature 34

Chapter 3—Methodology 38

 Assumptions of the Qualitative Research Design..... 38

 Design 38

 Role of the Researcher 40

Respondents	40
Participants.....	42
Pat	42
Lee.....	44
Robyn.....	45
Chris.....	49
Lynn	51
Marty.....	54
Data Collection	55
Data Analysis	56
Audit	57
Chapter 4—Results	59
Parent Involvement.....	64
Relationships with Children.....	67
Regular Education Interventions.....	69
More Restrictive Environments	73
Experience and Training.....	78
Early Intervention	81
All-day Kindergarten	83
Chapter 5—Summary and Conclusion	84
Parent Involvement.....	86
Relationships with Children.....	87

	iii
Regular Education Functions.....	88
More Restrictive Environment.....	89
Experience and Training.....	90
Early Intervention	91
All-day Kindergarten	92
Implications.....	93
Considerations for Future Research.....	94
References.....	96
Appendices.....	109

List of Appendices

Appendix A—Research Questions	109
Appendix B—Interview Guide and Demographic Questions	111
Appendix C—Initial Introductory Letter	114
Appendix D—Informed Consent Form	116
Appendix E—IRB Authorization Letter	118
Appendix F—External Audit Attestation	120

Chapter 1

Introduction

The U.S. Centers for Disease Control (2001) have declared violence the most pressing health issue facing our society. The American Psychological Association's Commission on Violence and Youth (APA, 1993), in an important study on youth, antisocial-aggressive behavior, and violence, found that children and youth are becoming involved in violent behaviors at ever-younger ages. The report states that parenting failure, school factors, and academic achievement are important casual influences.

According to Dishion, French, and Patterson (1995) and Reid (1993) early appearing behavior problems in a child's preschool career are the single best predictor of delinquency in adolescence, gang membership, and adult incarceration. Lipsey and Derzon (1998) and Walker, Colvin, and Ramsey (1995) stated that children who grow into adolescence with challenging behaviors are likely to drop out of school, be arrested, abuse drugs and alcohol, have marginalized adult lives, and die young.

The prevalence of antisocial behavior among children and youth is substantial. Formal surveys by the Institute of Medicine (1987) indicated that between 2% and 6% of the general population of children and adolescents may demonstrate conduct disorders. Kazdin (1993) stated that this translates into a figure ranging from 1.3 to 3.8 million cases.

The topic of antisocial behavior was of interest to me because I work with staff, students, and parents when dealing with children who behave in an antisocial manner. The behavior problems begin early and can be violent in nature. Principals in other

districts deal with behavior problems as well. I wanted to examine successful interventions used when dealing with children who struggle with behavior issues.

Children begin the schooling process between the ages of four and seven. Children come to schools with complex needs, and some of the children come with severe deficits. The deficits may be manifested as antisocial behavior. The effects of antisocial behaviors in school is both extensive and destructive. There is evidence to show that young children with challenging behavior are more likely to experience:

- early and persistent peer rejection (Coie & Dodge, 1998);
- mostly punitive contacts with teachers (Strain, Lambert, Kerr, Stragg, & Lenker, 1983);
- family interaction patterns that are unpleasant for all participants (Patterson & Fleishman, 1979); and
- school failure (Kazdin, 1993; Tremblay, 2000).

Much research has been done about possible risk factors identified in young children. Bear (1998) indicated that children learn to be violent when neglected, abused, or living in homes or communities where violence is the norm. He continued by noting that the roots of violence are formed in preschool years. For young children, school may be the only safe haven in a coercive community of chaos. Other risk factors include poverty, parenting issues, family transitions, divorce, poor social responsibility, and the lack of appropriate adult care and supervision. Buff (2001) blamed the origin of antisocial behavior on the family. Moseley (1999) agreed with Buff and stated that children are coming from homes in which antisocial behavior is accepted. Dwyer (1999) reported that

children who frequently watch television violence and play video and computer games are at risk. These tools mesmerize children and yet are used frequently by parents as rewards. These tools brainwash the child to think violently and impulsively.

Offord (1987) stated that gender is a clear risk factor in multiple studies, with boys demonstrating more behavior problems than girls. Walker et al. (1995) concurred with Offord's (1987) research stating that boys demonstrated more behavior problems than girls.

According to Cadman et al. (1986), other risk factors include chronic illness and disability. Mrazek and Haggerty (1994), McCord and Tremblay (1992), and McCord (1993) stated that, in general, the greater the number of risk factors and the earlier they appear, the higher the risk for delinquency. The American Academy of Child & Adolescent Psychiatry (1997) found that children with behavior problems, while present in all economic levels, appear to be over-represented in lower socioeconomic groups.

Elementary principals attempt to deal with the antisocial behavior of these children using any strategies that are available. The antisocial child often demonstrates a lack of positive peer relationships, a lack of positive interactions with teachers, indifference to authority, and poor academic success even after an entire year in school. Some of the punitive interventions for these children include placement on behavior plans, prescribed medication, referral to behavioral consultants, allowed restricted access to school, and/or assigned to out-of-school placements for months or years.

Skiba and Peterson (1999) stated that suspension, expulsion, and other punitive temporary removals from education are failed responses to signs of aggression.

According to Rosell (1986), many, if not most, school discipline policies are a collection of suggested punishments that may or may not correct behavioral problems.

Jolivette, Stichter, Nelson, Scott, and Liaupsin (2000) stated that students with emotional and behavior disorders often display characteristics that do not support success in or out of school. Coleman and Vaughn (2000) added that these individuals characteristically experience academic difficulties during their school careers and that learning disabilities frequently co-exist with emotional and behavior problems and result in problems with understanding academic content.

According to the Chesapeake Institute (1994), many students with emotional and behavioral disabilities do not finish high school. A predictor that these students will drop out is a lack of competency with basic skills, including math and reading. In fact, its research shows that more than 50% of students with emotional and behavior disabilities drop out of school.

There must be alternative ways to meet the needs of children in a school setting. Methods should ensure social and academic success early in life. Kazdin (1993) argued that if we do not make a difference by about age eight, antisocial behavior and conduct disorders should be viewed as a chronic disorder for which there is no cure. Hergert (1991) reported that a school history of poor grades, grade retention, poor academic motivation, truancy, school behavior problems, poor relationships with students and teachers, and less involvement in extracurricular activities, are all indicators of later school failure.

Purpose Statement

The purpose of this study was to examine selected elementary principals' experiences with one or two kindergarten children who demonstrated serious antisocial behavior and subsequent interventions that were successful. The main question to principals was: "In their own personal experiences, which interventions have actually made a difference in reducing or eliminating antisocial behavior in children entering kindergarten?" What did the principals know about antisocial behavior? How did they identify these children and what programs or strategies used made a significant difference in the life of a child?

I selected elementary principals who work with young children as they enter public school for the first time. Kindergarten is the first exposure many children have in a structured classroom setting. Hopefully, this research will add to the literature and will benefit not only the antisocial child, but the child's family, counselors, classroom teachers, and elementary principals.

Research Questions

The following research questions were drawn from the literature and were used to guide the study:

1. What are the social and emotional expectations of children entering kindergarten?
2. How is antisocial behavior defined?
3. How is antisocial behavior identified in young children?

4. Are there programs available that have proven to positively impact social development thus reducing or eliminating antisocial behavior?

5. What information and skills are needed by elementary principals in order to reduce or eliminate antisocial behavior?

Definition of Terms

For the purpose of this study, the following definitions apply:

Principal: The chief administrator of a public elementary school.

Full-Day Kindergarten: Public school kindergarten programs in which the children attend classes for the entire day, every day.

Social competence: The degree to which children adapt to their school and home environments (Pellegrini & Glickman, 1990). Goleman (1995) defined social competence as being the capacity to solve social and emotional problems and/or to make something useful that is valued in one or more cultures. This means self-awareness, the ability to handle emotions, self-motivation, emphatic capacities and social skill development.

Young children: Children ages 4-7 entering kindergarten in public schools.

Antisocial behavior: This is defined as “recurrent violations of socially prescribed patterns of behavior” (Simcha-Fagan, Langner, Gersten, & Eisenberg, 1975, p. 7).

Antisocial behavior is demonstrated by physical aggression such as hitting, kicking, biting, attacking another child, and the use of obscene language. It may also be demonstrated by severe tantrums, hostile reactions to social bids by peers, defiance of adult directives, vandalism, disturbing others, ignoring correction attempts by adults, pestering or overactivity, and violating social norms. Behaviors that are typical of

childhood conduct disorder include aggression, property destruction (deliberately breaking things, setting fires), and poor peer relationships (Kazdin, 1995).

Head Start: The U.S. Department of Health and Human Services defined Head Start as being a comprehensive child development programs that serve children from birth to age 5, pregnant women, and their families. The program started in 1964 with a recommendation to develop a federally sponsored preschool program to meet the needs of disadvantaged children.

Assumptions

. It was assumed that the principals chosen to participate in the study had had successful experiences in dealing with the behaviors of antisocial children. It was also assumed that the participants were honest in reporting their perceptions, experiences, and skills, and were not biased by their personal feelings in regard to dealing with antisocial behavior in young children

Delimitations of the Study

I interviewed only elementary principals in a midwestern school district who were in varying stages of career development and experiences. The principals served in a K-3 public school attendance center. The principals had at least 3-5 years of experience in their current attendance center.

The study was also delimited to that fact that the principal's responses were based on their experiences in dealing with the antisocial behavior of young children. Only selected elementary principal specifically chosen by their school district were interviewed.

Another delimitation was the fact that not as many principals chose to participate as I had requested. Participation was voluntary.

Limitations of the Study

The results reflect the opinions of only elementary principals and not other professional staff. The results of the study are not transferable to other grade levels nor transferable to the general population of elementary principals.

Secondly, principals' perceptions are not factual information. Perceptions are biased based on a principal's personal experiences dealing with young children demonstrating antisocial behavior.

Four of the ten selected principals chose not to participate in the study.

Significance of the Study

Patterns of antisocial behavior are exhibited at a young age. Bodrova and Leong (2003) indicated that children who cannot control their emotions at age four are likely not to be able to follow the teacher's directions at age six and will not become effective learners in middle and high school. Research shows a joint effort by schools, families, and a community is necessary to address behavior concerns. Pellegrini and Glickman (1990) reported that assessment of children's social competence requires observation of their interaction with peers. Positive outcomes from early intervention services that address these challenging behaviors include:

- decreased risk of withdrawal, aggression, non-compliance, and disruption

(Strain & Timm, 2001);

- positive peer relationships including understanding of friendship, cooperation, and sharing (Denham & Burton, 1996);
- increased self-control, self-monitoring, and self-correction and improved social-emotional health (Webster-Stratton, 1990);
- academic success (Walker, Kavanaugh, Stiller, Golly, Severson & Feil, 1998); and
- reduced risk for teen pregnancy, juvenile delinquency, and special education placement (Strain & Timm, 2001).

According to Mendel (2000) the news about effective programs has been slow to bring about change in school, community, and juvenile justice system prevention efforts. Precious resources continue to be spent on ineffective programs. He continued: “While public spending has increased in recent years for prevention activities thanks to growing public concerns over youth violence, too few resources are being applied to programs that research shows actually work” (p. 65).

Time and money invested during the early years of schooling on social competency may reduce the amount of money and time required at later stages. Investing in social development in kindergarten provides greater efficiency than spending money later in juvenile programs. The assessment of kindergartners’ social competence may be a step in the right direction to address some of society’s ills. Certainly, investing in early intervention strategies and effective preschools may reduce or eliminate antisocial behavior in kindergarten.

Contributions to Research

A substantial amount of research and literature is available to elementary principals regarding kindergarten behavioral problems and social development. This study contributed to the research associated with practitioner approaches to dealing with antisocial behavior in children ages four to seven. This study was conducted in order to examine what elementary principals actually do to make a difference in children's lives.

Contributions to Practice

The results of this study may provide insight for elementary principals. The shared experiences of principals may lead to greater awareness of the problem and to successful interventions. School districts could use this information to promote a change in the way they offer social development skills in the curriculum. Results of this study might define best practices used to promote positive social development and to identify antisocial behavior. A significant result of this study is to highlight the importance of quality preschool programs and encourage funding agencies to support this cause. Additionally, all-day kindergarten programs in the schools may have a major impact on the lives of children socially, emotionally, and academically. And finally, children, schools, families, and society overall could benefit from early identification and successful intervention programs.

Chapter 2

Review of the Literature

This literature review is divided into five specific areas of research: the history and philosophy of kindergarten; social expectations of kindergarten children; antisocial behavior, the stages and triggers; responding to antisocial behavior; and possible preventative measures before a child enters kindergarten.

The history and philosophy of kindergarten research revealed the origin of kindergarten programs and how these programs have changed over the years.

Child development research and psychology provided an understanding of the social expectations of kindergarten children. Child development research and psychology also provided an understanding of antisocial behaviors young children may exhibit. This research provided information about the stages and triggers of antisocial behavior. Child development research led to methods available to respond to antisocial behaviors at a young age.

A review of the literature in the area of early prevention led to research regarding one successful, federally funded program called Head Start and its impact on low-income children and their early childhood experiences in the area of social development. Additional research by Crane and Barg (2003), compared different approaches to social development and academic learning and tracked children over time. The research confirmed the statement that, "If we as a society made a major investment in early intervention programs, there would be a high probability that it would pay off many fold by reducing crime and other social problems in the future" (p. 15).

History and Philosophy of Kindergarten

Watson (1997a) credited Friedrich Froebel as saying:

To learn a thing in life and through doing is much more developing, cultivating and strengthening than to learn it merely through the verbal communication of ideas. The purpose of education is to encourage and guide man as a conscious, thinking and perceiving being in such a way that he becomes a pure and perfect representation of that divine inner law through his own personal choice; education must show him the ways and meanings of attaining that goal (p. 2).

Richie-Sharp (1999) stated that the first kindergarten programs were developed by Friedrich Froebel in Germany in 1837. Froebel invented the term kindergarten, which means garden of children in German. Watson (1997a) said Froebel developed theories and practices that continue to facilitate early education. Froebel believed that children need to have time to play in order to learn, and he believed that kindergarten children learn from other children. He wanted to teach children about art, design, mathematics, and natural history. Froebel's original philosophy for the kindergarten program was based on his belief in natural laws of learning. He believed that young children, like plants, hold the seed of their own later development. Froebel stated, "The young human being is looked upon as a piece of wax, a lump of clay which man can mold into what he pleases" (cited in Watson, 1997a, p. 8).

Watson (1997b) wrote that Froebel's vision was to stimulate an appreciation and love for children and to provide a new but small world where children could play with others of their own age group. Watson added that this early educational vision laid the

foundation for the framework of Froebel's philosophy of education, which encompassed these four basic components: (a) free self-activity, (b) creativity, (c) social participation, and (d) motor expression. Self-activity set the direction for children's development and enabled them to be actively creative and social participants. Motor expression, on the other hand, referred to learning by doing rather than following instructions.

Through the efforts of many, kindergarten worked its way into our schools in America. Richie-Sharp (1999) related that the first kindergarten programs helped children of poverty and children who had special needs. The average poor child in 1860s St. Louis completed three years of school before being forced to begin work at age 10. Susan Elizabeth Blow was instrumental in establishing kindergarten programs in America. She opened the first public kindergarten in St. Louis in 1873. By 1883, every St. Louis public school had a kindergarten program, making the city a model for the nation. By 1885, Blow had established 60 public kindergartens. She taught students in the morning and teachers in the afternoon. By 1910, most major American cities offered public kindergarten education.

According to Cremin (1961), the middle class did not always welcome the idea of kindergarten for their own children. Kindergarten was more widely accepted as a means of training immigrant children and children of the slums. The advocates of kindergarten programs suggested that proper training of these children might lead to the elimination of urban poverty. This group of children could be socialized and taught "proper" middle-class ideals. The belief was that recovering a child early could prevent the creation of future generations of paupers and criminals.

Reeves (2001) reported that all-day kindergarten used to be universal. During World War II, kindergarten programs were shortened to a half day because of a shortage of teachers, building space, and a growing birth rate. Reeves added that by the 1960s and 1970s, the demand for all-day kindergarten emerged as a response to programs like Head Start. Educators and lawmakers observed the benefits to children enrolled in Head Start, and they began to demand the same programs for all children. Changes in American society and education over the last 20 years have greatly impacted the demand for quality kindergarten programs.

Cremin (1961) added that once Kindergarten was established in public schools, the underlying philosophy evolved and changed. Schools began to include more preacademic training and preparation for first grade. Educators continued to debate the extent to which kindergarten curriculum include basic skills as phonics, reading, and arithmetic.

Elkind's (1986) research contributed to a more current understanding of kindergarten as it evolved. The academic expectations in kindergarten are vastly different from that which was taught two decades ago. The shift from a "play-and group adjustment-oriented setting," to kindergarten classrooms characterized by direct teaching of discrete skills and specific expectations for achievement is being reinforced by calls for reform of public education.

Egertson, in 1987, observed that kindergarten was a program supported by schools, both public and private, whose objectives were to develop self-esteem, develop a child's academic ability, and teach social skills. Schedules ranged from half-day

programs to full-day programs depending on the availability in each school system. For many children, kindergarten was a first step toward developing some independency from their parents. Whether children attend kindergarten half day or all day is an ongoing debate. Some states are in the process of mandating all day kindergarten for all children.

According to Olsen and Zigler (1998), kindergarten students are typically four or five years of age. In class, they are introduced to the alphabet, numbers, colors, the body, families, and communities. They listen to stories and make art projects. The students participate in skits and dramatic productions. They learn about holidays, plants, animals, and other related social studies and science topics. Kindergartens strive to offer a foundation for the development of social skills, self-confidence, motivation, and cognition.

Most children entering kindergarten today have much wider experiences outside the home than children of the past. Preschool programs are becoming increasingly important. According to Bully-Cummings, Gorcyca, Wriggelsworth, Schweinhart, and Pelleran (2001), preschool programs lead to better educational performance. Every day, kindergarten teachers witness the difference between children who received high-quality preschool and those who did not. Children who have access to preschool programs appear to be better prepared to succeed in school than those who do not have access to such programs.

Social Expectations in Kindergarten

Zill, Collins, West, and Germino-Hausken (1995) declared that kindergarten is a critical period in children's early school careers. It sets them on a path that influences

their subsequent learning and school achievement. For most children, kindergarten represents the first step in a journey through the world of formal schooling.

Attending kindergarten is a big change for young children. Incoming children are encountering a new situation in which they learn the expectations for behavior in school. According to the Center for Early Education and Development (2004), the “school-ready” child should be developmentally able to:

- trust other adults and children
- play with, not just next to, other children
- learn and play in a group
- demonstrate some degree of independence and self-direction
- demonstrate some degree of self-control
- be willing to try new things and learn new things
- understand and follow directions
- express needs and communicate with adults and children
- express thoughts in sentences, and has had some experiences with the environment (store, library, post office, etc.).

According to Bradley (1984) and LeCompte (1980), kindergarten teachers expect children to function within a cooperative learning environment in which children work both independently and as members of small and large groups. Children are expected to attend to and finish a task, listen to a story in a group, follow two or three oral directions, take turns, share, and care for their belongings. They are expected to follow the rules, respect the property of others, and work within the time and space constraints of the

school program. It is important that children learn to distinguish between work and play, knowing when and where each is appropriate.

LaForge (1999) said a kindergarten child should be able to separate from a parent fairly easily. Many children may cling or cry when being left in the kindergarten class on the first few days of school. Usually the crying stops and the child starts enjoying the events in school. LaForge emphasized that children should be interested in playing with children, their own age. Children should be able to control their impulses enough to cooperate and compromise with peers.

Termine (1997) stated that most children at this age begin to see themselves as a part of a larger social network that includes pleasing an increasing number of unrelated adults and peers. Since children spend eight or more hours a day in the company of unrelated people, there is an increased demand on children to master social skills.

According to Farrington (1987), the ability to interact successfully and cooperatively with others is a central life skill. When a child acts in ways that reflect concern and consideration for others, that behavior tends to lead to social responsibility.

Zahn-Waxler, Radke-Yarrow, and King (1979) listed two personal characteristics—empathy and the ability to interpret what is going on in a social situation—that contribute to a child’s effective social behavior and peer acceptance.

According to Eisenberg and Mussen (1989), empathy is the capacity to share in another person’s emotional response, in essence, to “feel with.” Children who have empathy with others are less likely to develop antisocial behavior both during childhood and later in life. Empathy and the desire to offer comfort are human qualities that can be

observed in children as young as two or three years old. The ability to perceive and understand another's point of view (social perspective) is a related skill that is also helpful in social relationships.

Chandler (1973) stated that children who are able to take another's perspective behave more cooperatively in all situations. This ability to perceive another person's point of view helps children determine their responses in a given situation.

According to Dodge (1980, 1985), cooperative children take in and process social information differently than do aggressive children. Cooperative children pay more attention to social cues and are more likely to maintain friendly interactions.

Bowman and Zvetina (1992) believed social and emotional development must be understood as cumulative, contextually driven, and based on the interaction among multiple variables. Social and emotional development is contingent upon the match between (a) children's feeling states and their social knowledge, and (b) the expectations of the social situation in which they find themselves. Variables associated with social development include cooperation, understanding the rights of others, the ability to treat others equitably, the ability to distinguish between incidental and intentional actions, the willingness to give and receive support, and the ability to balance one's own needs with those of others. Social development also includes the creation of opportunities for affection, intimacy, companionship, as well as the ability to solicit and listen to other's points of view.

Bodrova and Leong (2003) declared that teaching "self-regulation" is the work of preschool and kindergarten teachers. Self-regulated children can delay gratification and

suppress their impulses long enough to think ahead to the possible consequences of their actions.

Elam, Rose, and Gallup (1996) stated that 98% of the public believe that a primary purpose of public schools should be to prepare students to be responsible citizens. The American public's belief that schools should play a primary role in teaching self-discipline has never been greater than it is today. According to Hartup (1991), the adequacy with which a child gets along with other children may well be the single best predictor of adult adaptation in society.

Antisocial Behavior, Stages, and Triggers

According to a report from the Council for Exceptional Children (2001), many students come to school with serious behavior problems. They are challenging to work with and can cause worry and stress for adults and other students. Educators care about such students, but they also want to make school a safe and pleasant place for all students. Many educators as well as the parents of these children are left wondering what to do.

Family physicians are increasingly treating a broader array of psychiatric conditions including common pediatric mental health problems (Miranda, Hohmann, & Atkisson, 1994).

Moseley (1999) said that children are exposed to risk factors early in life. Some of these factors include poverty, harsh parenting, and family transitions. Also mentioned were neighborhood, school, and societal problems. Pryer (1999) added other triggers to this list. She included poverty, fighting parents, divorce, and a mother's postnatal

depression as factors. Dwyer (1999) included too many guns, media glorification of violence, poor social responsibility, and the absence of adult care and supervision as additional causes of antisocial behavior.

Nelson (2000) stated that the connection between academic and social behaviors appears to be reciprocal, with failure in one precipitating failure in the other. Many youth who cannot read, write, or relate to others tend to wind up in the juvenile justice system when they drop out or are expelled from school. Skiba and Peterson (1999) reported that when we fail to adequately educate students with emotional and behavior problems, we are in fact deferring them to the next system to social failure, the criminal justice system.

Walker et al. (1995) listed several facts in their research. They said that early antisocial behavior is a predictor of adolescent delinquency. Antisocial behavior can be identified as early as the age of three or four. Antisocial behavior persisting beyond the age of third grade has now become a chronic problem. Early intervention is the only hope. They also reported that certain specific antisocial behavior patterns and high levels of aggression exhibited in preschool and kindergarten are not just correlated, but are highly predictive of violent, delinquent, and criminal behaviors in middle school, later adolescence, and adulthood.

Buff (2001) blamed the origin of antisocial behavior on the family. Moseley (1999) agreed with Buff and stated that children are coming from homes where antisocial behavior is accepted. These youth enter school with the belief that violence is acceptable. Moseley continued by saying these children are convinced that the actions of others are biased against them personally and this distorts their ability to correctly interpret

behavior. As a defense, these children act aggressively when they feel frustrated. Buff and Moseley both thought schools have the responsibility of socializing children and helping them become good citizens. Usually, the first opportunity the schools have to work with young children is in kindergarten.

Marshall (2000) reported that antisocial behavior manifests early and persists. Serious behavior problems are three times more common in boys compared to girls.

The Center for Effective Collaboration and Practice (2001) provided a list of warning signs of possible behavior problems. The list included but was not limited to social withdrawal, excessive feelings of isolation or being alone, excessive feelings of rejection, being a victim of violence, and feelings of being picked on or persecuted. Other warning signs were low school interest and poor academic performance, expression of violence in writing and drawing, uncontrolled anger, patterns of impulsive and chronic hitting, intimidating, and bullying behaviors. Additionally, children can exhibit a history of discipline problems, violent and aggressive behavior, intolerance for differences and prejudicial attitudes. Drug or alcohol use, affiliation with gangs, access to or possession of firearms, and serious threats of violence were also mentioned as warning signs of behavior problems.

Patterson, DeBaryshe, and Ramsey (1989) identified three predictable stages of antisocial behavior. The researchers stated that the first stage involves parents who fail to discipline, monitor, and supervise their children effectively. Inept parenting encourages children to avoid work and responsibility.

The second stage occurs when these children enter school and experience both social rejection and academic failure. Because they are deficient in social skills, they have difficulty figuring out what is expected behavior, responding inappropriately, and misinterpreting social cues. Although they are often able to manipulate teachers so that they can avoid work on responsibility, they begin to fall behind academically.

The final stage of delinquency, often occurring in late childhood or adolescence, is membership in a deviant peer group, which provides reinforcement for antisocial attitudes, rationalizations, and actions. The most serious delinquent acts and substance abuse often emerge at this stage.

Moffitt (1994) identified a group of children referred to as “early starters.” These children engage in such antisocial behaviors as defiance of adults and cruelty toward peers. Particular behaviors include taunting, bullying, hitting, yelling, teasing, and temper tantrums.

Patterson, Reid, and Dishion (1992) reported that the children’s problems generally worsen due to the negative effect the problems have on their teachers and peers. Rejection by teachers and peers is a key developmental stage on these children’s path toward school failure and delinquency. Walker (1995) indicated that almost all of the at-risk children do not possess even minimal interpersonal skills or behavioral competencies needed to ensure success in school.

A common theme throughout the writings of Buff (2001) and Moseley (1999) was that schools have the responsibility to both identify at-risk children early in their school careers and to intervene with the students. Society pays a far greater price when dealing

with delinquency and criminal behavior. Reinvesting our resources into social programs could strengthen families, reduce substance abuse, decrease poverty, and increase a spirit of community belonging. With an effective foundation in place, most schools can look toward a significant reduction in student behavioral problems.

Whether or not children succeed in school is in part related to events and experiences that occur prior to their entering kindergarten for the first time (Kagan, Moore, & Bredekamp, 1995). These researchers stated that children's preparedness for school and their later school success are related to multiple aspects of their development. Children's physical well-being, social development, cognitive skills and knowledge, and approach to learning, are all factors that contribute to their chances for success in school. The researchers further added that the differences we see in children's knowledge and skills as they enter kindergarten can be attributed to variations in family characteristics (e.g., maternal education, family type) and home experiences (e.g., home educational activities, nonparental care).

Maccoby (1992) reported that a complex and continuous collaboration exists between the child and the family. The family can provide the resources and support that children require, increasing their chances of succeeding in school. For some children, the absence of resources and support places them at increased risk for school failure.

Walker (1995) reported that perhaps spending more time and resources in preschool and kindergarten programs could provide principals and teachers the opportunity to identify and intervene with at-risk children before the child develops

habitual antisocial behaviors. He stated that prevention and early intervention are the best hopes we have of diverting children from the path of antisocial behavior patterns.

Bully-Cummings et al. (2001) stated that law enforcement leaders know from experience that intervening early in a child's life is the best way to prevent crime. When children do not get the right start in life, we are all at risk. There is no longer any doubt about the value of high-quality preschool programs. Recent long-term studies show that at-risk children who attend high-quality preschool and educational child care programs are far less likely to become criminals than those who do not attend such programs.

Responding to Antisocial Behavior

Some of the research of Bodrova and Leong (2003) noted that preschoolers who show early signs of anti-social behavior do not outgrow them. As the children move through their school careers, the children grow into behavior patterns that are disastrous to themselves and others. To do nothing and wait until children become more mature results in unmanaged and chaotic classrooms. The "at-risk" children need extra attention and assistance just to progress at minimally accepted levels.

Dwyer (1999) noted that most children needing services are not diagnosed until they create a serious problem for themselves or others. Less than half of our schools provide any psychological services beyond diagnosis.

Dwyer, Osher, and Warger (1998) stated that an early warning sign is not necessarily a predictor that a child will commit a violent act toward self or others. They continued by saying that adults should be able to use their knowledge of early warning signs to address problems before they escalate into violence.

Schools must act early to identify students who show signs of antisocial behavior. Interventions should begin as soon as possible. Kazdin (1987) argued pervasively that after about age eight, antisocial behavior and conduct disorder should be viewed as a chronic disorder for which there is no “cure.”

Public schools are charged with educating all children and may not be set up to cope with many of these behavior problems. According to Grosenick and Huntze (1984), schools often use a variety of discipline strategies that have questionable if not harmful effects. While suspension and expulsion are most often thought of in this regard, a number of other strategies may be used in such a way as to effectively exclude a student from the school environment. These include in-school suspension, home-bound instruction, shortened school day, referral to alternative schools, ignored truancy, and administrative transfer. Despite the questionable/harmful effects of these strategies, use of them by administrators and faculty often increases as a result of the “pleasantness” of having the behavioral problem excluded from the environment for a period of time.

Dwyer et al. (1998) reported that schools continue to use 1950s remedies to address complex risk factors children may exhibit. Skiba and Peterson (1999) stated that suspension, expulsion, and other punitive temporary removals from education are failed responses to signs of aggression. Aside from the ineffectiveness of these techniques, the numbers of anti-social students populating our schools makes this approach untenable. So, what else should be done?

Skiba and Peterson (1999) stated that children whose families set no limits for them soon become uncontrolled and uncontrollable. In the same way, schools and

classrooms in which aggressive, dangerous, or seriously disruptive behaviors are tolerated will almost inevitably descend into chaos.

Bodine, Crawford, and Schrupf (1995) said we must begin with long-term planning aimed at fostering nonviolent school communities. Prevention efforts such as conflict resolution and school wide behavior management can help establish a climate free of violence.

A review of the research by Bear, Telzrow, and deOliveira (1997), presented information about the practices used by American teachers to achieve two traditional educational goals concerning school discipline. First, schools are expected to develop self-discipline or the self-regulation of behavior, among students. Self-discipline connoted internal motivation for one's behavior and the internalization of democratic ideals and is most evident when external regulators of behavior are absent.

Second, schools are expected to use discipline when children fail to exhibit self-discipline. Externally imposed discipline, especially the use of positive strategies for promoting pro social behavior, helps to create and maintain safe, orderly, and positive school environments. Wentzel (1991) stated that such environments promote not only learning and positive peer relations, but help schools achieve the long-term goal of developing self-discipline.

The importance of teaching self-discipline and maintaining positive school environment is evident in several federal initiatives. For example, Goals 2000: Educate America Act (National Education Goals Panel, 1994) stated that every school "will offer a disciplined environment conducive to learning" (p. 13).

Marshall's (2000) review of the literature concluded clearly that education, prevention, and early intervention are key factors in the social development of our children. In the absence of these three factors, a child's problems are typically entrenched by late childhood when referral to specialist agencies usually occurs.

Marshall (2000) continued to identify three inter-related adaptive systems emerging in the development of competence and resilience in children. These adaptive systems involve strong relationships with caring, pro social adults, social and emotional competence, and good cognitive functioning.

Marshall (2000) reported successful prevention programs include home-visits, quality child care, parent support groups, social competence, and child cognitive development and mastery. Solutions point to the need for a whole new approach to the way society treats and cares for their young children and their families.

Dwyer (1999) made note that a child should be assessed thoroughly and completely to determine reasons for a child's behavior. The intervention should match the severity of the need and interventions should be culturally appropriate. The student's strength and interests must be taken into account.

Marshall (2000) said planning and policy for successful prevention are required for a whole new approach to the way society treats and cares for their young children and their families. High-quality early support and intervention can make all the difference to the health and well-being of young children, and in their ability to thrive in school and throughout their lives.

Marshall (2000) added that short-term, pro-active, focused, and well-timed program components are more effective than long-term unfocused programs. Successful strategies will have long-term program commitment and will be multi-year for longer-term impact. Short programs have limited longer-term benefits, especially for high-risk groups and there is a need to sustain improvements. Policy needs to ensure that services are delivered with equal access for equal need across geographical areas, and for different socioeconomic and cultural groupings.

Marshall (2000) continued by saying programs need to be offered in communities to reduce isolation, to strengthen social support networks, and to improve community collaboration. Families and communities need to be a part of the decision-making structure. Services need to be efficient and integrated. We live in a complex society. Stresses on our families and children vary and are often multiple. We need to do more to monitor and evaluate progress and effectiveness of attempted interventions.

Dwyer (1999) stated that together we can turn this epidemic of violence around or we can tolerate the unnecessary toll on our children. Simple solutions alone, such as metal detectors or school uniforms, will not work. Punitive measures will not work, and failed solutions will draw tax dollars away from effective prevention programs. Teaching children appropriate ways to communicate and behave begins very early, even before school. We must invest in effective child care and primary grade education.

According to Dwyer (1999), there is no vaccine for violence. It will take years to curb this epidemic. It took years for us to allow it to be created through the proliferation of guns, media violence, and the destruction of the family. Now is the time to teach each

child to think before acting, to care about others, to use their words to problem solve. Now is the time to act and educate our teachers, principals, families, and communities how to respond to antisocial behavior in young children.

Hawkins, Doueck, and Lishner (1988) stressed the importance of building relationships with children and youth. When teachers, administrators, support staff, pupil services staff, and parents build close, caring, and supportive relationships with children and youth, they increase the likelihood that a child who is in trouble will reach out for help.

Quality Preschool Programs

According to Child Trends (2003), kindergarten teachers rate about 20% of all entering kindergartners and 30% of very low-income kindergartners as having poor social development.

Bronson (2000) reported that children enter kindergarten unable to learn because they cannot pay attention, remember information on purpose, or function socially in the classroom environment. West, Denton, and Reaney (2001) found that these children are hard to manage and cannot get along well others, follow directions, or delay gratification. They show belligerence and aggression in the classroom and on the playground. The problems begin before kindergarten. In some studies, as many as 32% of preschoolers in Head Start programs, had behavioral problems. These missing social and emotional skills meant that teachers spend too much of their time trying to rein in unmanageable children and too little time teaching.

Ladd, Birch, and Buhs (1999) stated that early childhood teachers report that they are extremely concerned about growing classroom management problems and that they are ill-equipped to handle them. Rimm-Kaufman, Pianta, and Cox (2000) said kindergarten teachers reported that more than half of their students come to school unprepared for learning academic subjects. If these problems are not addressed, the result can be growing aggression, behavioral problems, and for some, delinquency and crime through the school years and into adolescence and adulthood.

Boyd et al (2004) listed the following requirements for quality preschool programs. They stated that preschool programs need to maintain high standards of quality in the areas of social and academic adjustment to elementary school. High-quality preschool is organized in ways that allow children to form close, sustained relationships with teachers and that encourage positive interactions with peers. Small group sizes and high adult-child ratios, competitive staff compensation and benefits, professional development, and other aspects of the program should be geared toward fostering strong relationships and reducing teacher turnover. These components have been associated with positive social and emotional outcomes for children, including greater compliance, sociability, attention, self-regulation, and peer relations, as well as lower rates of negative affective and behavior problems.

These researchers continued by stating a program's quality may be determined by the qualifications required of the teachers and staff. Teachers with four-year degrees and specialization in early childhood are better prepared to develop meaningful relationships with their students and to create safe, nurturing climates that support children's emotional

well being. Children cared for by teachers who are highly involved and invested during their preschool years are less likely to display behavior problems in kindergarten and demonstrate increased social skills through elementary school.

Boyd et.al. (2004) pointed out that policy makers should design programs and make decisions regarding early education. They should invest in programs that support development of the whole child, including academic, social, and emotional skills, because these skills reinforce one another. Policy makers should include enhanced social and emotional development as a key goal of preschool education programs. Standards should spell out the outcomes that preschool programs are expected to achieve for social and emotional development. Access should be expanded to high-quality preschool programs so that more children can benefit from educational experiences that will improve their socio-emotional development. And finally, policy makers should ensure that all preschool programs are high-quality, because only high-quality programs will support children's social and emotional development.

According to Barnett (2005), no area in education has grown like preschool in recent decades. Since 1965, when fewer than two in ten four-year olds attended preschool, the number of such programs had risen to the point where seven in ten now receive some sort of education before kindergarten. Preschool education with its patchwork quilt of programs and funding has reached the point where the traditional K-12 public education may soon expand to pre-K-12 programs.

Barnett (2005) continued by saying the idea of sending preschoolers to public school is nothing new. Preschool roots, like those of kindergarten, reach back to

Massachusetts in the mid-19th century, where preschool-aged children were permitted to go to school with their older siblings. The first kindergarten for four-year-olds was established in Wisconsin in 1873. The early preschools didn't survive the establishment of today's public system.

Barnett (2005) added that the great leap forward for preschool education came with President Lyndon Johnson's war on poverty and the development of the federal Head Start program in 1964. For over 40 years, Head Start has served disadvantaged young children with comprehensive services aimed at improving their health and nutrition, social and emotional development, and cognitive development.

According to the United States Department of Health and Human Services (2005), in 1964 the Federal Government asked a panel of experts to draw up a program to help communities meet the needs of disadvantaged preschool children. Project Head Start was launched as an 8-week summer program in 1965, and was designed to break the cycle of poverty by providing preschool children of low-income families with a comprehensive program to meet their emotional, social, health, nutritional, and psychological needs. Head Start was enthusiastically received by education child development specialists, community leaders, and parents across the nation. Recruiting began with age three to school-age children.

Head Start currently serves children and their families each year in urban and rural areas in all 50 states. The program is now well-established and innovative. It has had a strong impact on communities and early childhood. The program is locally administered by community-based non-profit organizations and by school systems.

In April 2002, building on his administrations emphasis on preschool programs, President Bush announced the “Good Start, Grow Smart” preschool education initiative with three goals:

- strengthening Head Start;
- partnering with states to improve early childhood education; and
- providing information on child development and early learning to teachers, care givers, parents, and grandparents closing the gap between research and practice in early childhood education.

Horn (2003) stated that the initiatives of the Head Start program should not become the equivalent of an entrance exam for kindergarten. The information gathered about a child should be used to make the transition to kindergarten more successful.

Crane and Barg (2003) conducted an extensive study about the programs developed in the sixties. Then, the primary objective was to raise the intellectual achievement of disadvantaged children. They conclude that there is a growing body of evidence that early intervention programs can generate permanent changes in social behavior. They researched five major studies that have shown that these programs reduced by large amounts, the incidences of social problems, when the children reach adolescence and adulthood.

Crane and Barg (2003) concluded that the most obvious approach would be to improve Head Start. They believed that Head Start was a watered-down version of the models that have proven to be successful. Improving Head Start would cost a substantial

amount of money and would involve some risk. They believed that the benefits could be potentially enormous and that the risk would be worth taking.

Crane and Barg (2003) found that the people who had spent one to two years in high quality preschool programs behaved a lot differently than the ones who hadn't. Participants in these programs committed fewer crimes, had less welfare dependence, had lower dropout rates, and had less drug use. They stated that if these programs had such effects among high-risk populations, if carried out on a national scale, they would have the potential to reduce the incidence of some of our nation's worst social problems.

Summary of the Literature

The literature review was divided into five areas of research. These were: the history and philosophy of kindergarten; social expectations of kindergarten children; antisocial behavior, the stages and triggers; responding to antisocial behavior; and possibly using preventative measures before a child enters kindergarten.

The history and philosophy of kindergarten provided the reader a basis on information regarding how kindergarten developed over time. The first kindergarten programs were quite different from the kindergarten programs of today. Early programs were based on the idea that children needed time to mold and grow. They needed time to experience themselves, express creativity, participate socially with others, and develop motor expression.

Kindergarten in America mainly was created to help poor children and immigrant children. The hope was that with proper training, these children could be socialized and taught proper middle-class ideals.

Kindergarten evolved into a more structured setting where children developed self-esteem, academic abilities and social skills. These programs ranged from half-day morning or afternoon sessions, all-day every other day, to all-day every day kindergarten. All-day kindergarten is a program whose length of time, standards and curriculum are continually evolving even to the point of being mandated by some states.

The research on social expectations in kindergarten provided the reader with an understanding about what children are expected to know and be like when they enter kindergarten. For most children, this is the first step in formal schooling. The expectations for behavior are high. Children are expected to follow rules, respect the property of others, listen to a story, finish a task, follow two or three oral directions, take turns and care for their belongings.

The research on antisocial behavior, stages, and triggers was extensive. Many experts reported many risk factors affecting our young children. Poverty, fighting parents, divorce, media glorification of violence, poor social responsibility, the lack of good care, and children with emotional and behavioral problems are all risk factors for school failure.

Antisocial behavior was clarified and identified in the section. Some of these children exhibit defiance of adults, cruelty toward peers, taunting, bullying, hitting, yelling, swearing, and other acts of violence toward self and others.

The researchers reports in the study provided many interventions to responding to antisocial behavior. Many of the behaviors displayed had no “cure.” They would take intensive assistance and long periods of time to make a difference. By the age of eight,

often times the interventions would not change the behavior of the child and the child would proceed to problems in adolescence and early adulthood.

Schools often respond ineffectively to behavior problems of this magnitude. Discipline strategies can be questionable if not harmful. Suspension and expulsion are most often failed attempts at change. They only tend to exclude the problem child for a period of time.

The researchers provided many suggestions to help the antisocial child. These included early intervention, prevention, and education into the social development of children. Other factors to consider included counseling, interventions with families, paying attention to the health and well being of the children, and attending to their immediate needs. Caring, supportive adults and community members can strengthen the social network of struggling families. It will take time to curb the epidemic of violence in our society. Children need to learn to care about others and to use words to solve problems. The need is there to educate our families and teachers about early intervention and prevention.

Quality preschool programs are becoming increasingly important in society today. One of the goals of these programs is to help the young child become prepared for entrance into kindergarten. Preschool programs need to maintain high standards of quality in the areas of social and academic adjustments. Preschool programs need to be organized in ways that allow children to form close, sustained relationships with teachers and peers. The environment needs to be safe and nurturing and supportive of the child's well-being. Policy makers need to take a look at preschool programs and they need to

become supportive of the benefit early education provides to the child and the family and to society as a whole.

A review of the initiative titled Head Start, provided information about an important federally funded program for disadvantaged children in our society. The program has experienced success for many years and now serves as the foundation for other programs funded by the United States government.

Children will become what we as a society expect them to become. They will be given the tools we decide they need. They cannot be brushed aside and left to chance to become strong, intelligent, caring, resourceful, self-reliant individuals. We must invest highly in their future and ultimately, in ours.

Chapter 3

Methodology

Assumptions of the Qualitative Research Design

In qualitative research methodology inductive logic prevails. Categories emerge from informants who provide rich “context bound” information. Using interviews, observations, and documentation, the research paints a rich picture using a narrative approach to present the findings. This leads to patterns or theories which help to explain a phenomenon (Creswell, 1994).

Merriam (1998) noted qualitative researchers are concerned with a process, rather than outcomes or products. Qualitative researchers are interested in meaning, how people make sense of their lives, experiences, and structures of the world. The qualitative researcher is the primary instrument for data collection and analysis. The researcher goes to the people, setting, site, or institution to observe or record behavior in a natural setting.

The purpose of this study was to investigate successful interventions reported by selected elementary principals regarding ways to reduce or eliminate antisocial behavior in kindergarten children. This section describes the research design, selection of participants, and methods of data collection for this study.

Design

For this study, I used a personal interview approach, with follow-up correspondence via telephone and e-mail. I conducted audio-taped interviews after explaining Internal Review Board procedures and receiving Informed Consent paperwork with each selected elementary principal. The questions asked were about successful

behavior interventions in kindergarten children, which lent itself to a narrative methodology. Data collection consisted of face-to-face interviews with the principals. The personal interviews were audio taped and transcribed. Notes were taken during the interviews and were filed along with the transcriptions and the tapes until the end of the study, at which time they were destroyed.

The bias of the researcher was present in framing the interview protocol, formulation of the research questions, and in the interview itself due to previous experiences dealing with antisocial behaviors in kindergarten children. It was difficult to refrain from a discussion of shared experiences. The researcher focused the interview around successful interventions with one or two children and not about sharing “war stories.”

The initial goal of the study was to select ten principals to interview in a midwestern school district. The ten principals were to be purposefully selected by their school district as having the experience desired for the study. Ultimately, only six principals participated in the study due to various reasons. Since participation was voluntary, three respondents declined to be interviewed and one did not wish to participate in the study due to her limited experience in dealing with children who displayed antisocial behavior in kindergarten. It became necessary to proceed without the desired number of ten respondents. The study was bounded by constraints on the researcher such as family issues, a move to another city, a new position as an administrator, and deadlines relative to graduation and degree completion.

The study was also bounded by summer vacation, as some of the principals did not want to or could not participate in an interview during their time off work. Thus five of the interviews were completed in May and June of 2005 and one was completed in September of 2005. If the study were to be replicated, additional principals meeting the selected criteria would be asked to participate.

Role of the Researcher

The role of the researcher was to assure that the parameters of the methodology were carefully followed. It was important to follow the design of the research, comply with the interview procedures, preserve the audiotapes and notes, report about the participants, analyze the data, and finally, to report the data in an accurate form. The researcher was an elementary principal and needed to maintain objectivity.

Respondents

I selected principals to interview as opposed to classroom teachers due to the amount of involvement principals have once antisocial behaviors have been identified. Principals need to work with a variety of individuals and groups to address behavior problems. These include, but are not limited to: the child, classroom teachers, parents, school counselors, outside counselors, school psychologists, physicians, student assistant teams, behavioral specialists, behavioral programs, and centers for short or long term placement.

Ten elementary principals in a midwestern school district were selected by their school district based upon the requirements of the study. The principals were identified with the help of a Research Review Committee in the district. The principals had at least

three years of experience in the building in which they were currently working.

According to their district, they had experience dealing with children who demonstrated antisocial behavior in kindergarten. Only six of the ten agreed to participate in the study.

The principals were also selected based on the Social Economic Status (SES) of the individual school. The literature suggested that schools with a low SES deal with higher incidents of antisocial behavior in kindergarten children versus schools with a high SES. Oden, Schweinhart, Weikart, Marcus, and Xie (2000) verified that research when they talked about the effects of Head Start programs. They believed that Head Start, a federally funded program for low-income families, provided early education services for poor or disadvantaged children age three to five. These children exhibited more incidents of antisocial behavior than children not participating in the Head Start program.

Respondents were required to complete the Informed Consent form prior to the initial personal interview. The interview questions were mailed to the respondents prior to the personal interview in order to provide an explanation of the study and to allow the respondent time to reflect and prepare for the interview. Respondents were asked to complete a short demographic profile that provided relevant personal and professional information, including their years of teaching experience, degree, professional certification, and professional development relevant to the survey.

Respondents were assigned pseudonyms to protect their identities and to provide for accurate reporting of the data without possible harm to the respondents or the students, families, and staff that they talked about.

Participants

The information regarding the participants of the study is discussed in random order to further protect their identity.

Pat

Pat was interviewed on June 22, 2005 at a local coffee shop at her request. This was a favorite morning stop for her and it was midway between both of our homes. Pat was an elementary principal with 30+ years of experience. She had seven years of experience as a principal and all seven of those years were in the building in which she was currently assigned. Pat's degree status was a Masters in Educational Administration. Pat's building housed a behavior disorder classroom.

Pat began the interview talking about her successes with children. She referred to the teacher, the parent, and herself as having positive interventions with a child. She claimed that working together was powerful. She said there was nothing magic about what she does with children, especially with kindergarten children. Pat went on to say that she had little "power" as an administrator with kindergarten children. She added that, "With older kids, sometimes I can walk into a room and the behavior will change with just my presence. With kindergarten . . . nothing. I don't hold any kind of authority with a kindergarten child."

Pat felt strongly about sharing success as a team, everyone working together. Pat also stressed that kindergarten was just the beginning with many years of work ahead.

Pat related that she had a behavior-disordered classroom in her building and she carefully followed procedures outlined to identify children for the program. She said she

tried to have only five children in the primary behavior disordered classroom because these kids needed serious interventions. They were not just naughty children, but they suffered from serious behavioral issues, for whatever reasons.

Pat felt confident that she had seen progress over time in her building. “Children do make progress throughout the years due to consistency and cooperation” she said.

Relationship building was a skill Pat valued. I heard this loud and clear as she talked about her staff, students, and parents. Building trust was important, as was not violating the privacy of the family. Her experience with families and her understanding of their needs, wants, fears, and wishes came across clearly due to her successful years of experience. She demonstrated a valuable understanding of the needs of the children and the families in her attendance area. This could be a significant result of the study for districts that randomly assign principals to different buildings.

Pat talked about moving to all-day kindergarten, which was planned for her building. She was very much in favor of this, but expressed a little bit of hesitation about lunchtime with kindergarten children and related lunchroom procedures to “herding cats.”

Pat seemed to have strong feelings about continual learning. In order to strengthen her skills when working with children, Pat attended workshops and training sessions. She valued exposure to research and conversations about education for herself and for her staff. Some of these included workshops about brain research, restraint training, behavior disordered workshops, and de-escalation techniques.

Pat said, “It is good for the principal to talk to people who are knowledgeable about the [issues]. It is good for the principals to pull from their bag of tricks. Never stop looking for opportunities.”

Lee

The interview with Lee took place at her building in her office. The office was a busy place as school was in session. The interview took place on May 8, 2005.

Lee greeted me and welcomed me to her building. We chatted briefly about my study, and Lee was fully prepared to discuss the study. The informed consent form was signed first and then Lee answered demographic questions. Lee had 27 years of experience in education. She had four years of experience as an assistant principal and three years as a building principal. Each of the three years had been served in the building in which she was currently assigned. Lee had a Masters Degree in Educational Administration. She had training in de-escalation techniques, restraint training, special education, exceptional psychology, and discipline practices.

Lee talked freely about the SAT (student assistance team) and interventions which were tried with one little boy. The team included the teacher, fellow teachers, the school psychologist, and the administrator. The team also met with the parents.

Lee felt consistency and a routine procedure worked best for children. She also believed in working with the child’s peers in the area of acceptance. She believed in peers working together to resolve differences and she used the school counselor to work with the whole group of kindergarten children. The counselor helped the children understand differences and become more tolerant. This was a bit of a different approach than some of

the other techniques. Often, peer acceptance is ignored at this young age as adults tend to think young children are unable to grasp this concept. It took four to five months to see a difference in this young child and the child still had fits of anger, but Lee saw progress over time.

When asked about how children were identified, Lee stated clearly, “You just know! You know!” Lee talked about retention as an intervention. She was fortunate enough to have all day kindergarten in her building. She talked about how the length of the school day benefited the social development of a child and repeating kindergarten with intensive speech and language interventions helped a child. This particular child was still not at grade level but was making progress.

Lee expressed a sincere desire to help children. She expressed how important experience was for a principal. Lee said, “Principals need to be patient and know that there is no quick fix for a child. It may take years and the child may always have delays. It takes lots of interventions and lots of time.”

Lee liked the idea of mentoring new principals and she valued the time allowed to discuss the issues principals face on a day-to-day basis.

Robyn

Robyn was interviewed on June 7, 2005 at his building in his office. Robyn was the only male participant in the study, and he presented another point of view from the perspective of his gender. Robyn was very agreeable in the interview and was eager to talk about his experiences. He had 26 years of experience in education. He had five years of experience as an assistant principal and then six years as principal in his current

building. Robyn had a Bachelor of Science degree in Elementary Education and Special Education. He also had a Masters Degree in Educational Administration. Robyn previously taught in a self-contained behavior classroom, so his experiences were very relevant to the study.

Robyn talked freely about the resources available to help children with antisocial behavior problems. His school did not house a behavior disordered classroom and students with severe needs were sent to an alternate site in the district. When this became necessary, Robyn used the district's Behavior Intervention Team and the school psychologist to help make the decision for an alternate placement. Robyn followed the district and federal guidelines for placing a child on an Individual Education Plan and for recommending alternative placement.

Robyn expressed concern about seeing more and more children come to school with a lack of socialization. He even referred to some of these children as "feral" children with no social skills at all. He had many dealings with aggressive children and he talked about the incidences of biting, spitting, and swearing he had experienced.

Robyn stated some of his success came from being a male figure and in using a firm, commanding tone of voice. He frequently and sternly used the word, "NO!" to startle a young child. This worked for him instead of trying to explain what the child needed to do. He even tried to teach the teacher to use a stern, commanding voice. Kindergarten teachers tend to be loving, nurturing, caring individuals who would never raise their voice at children. Robyn also had to work with the teachers so that they did not take a child's negative behavior personally. He believed that teachers wanted to be able

to solve a child's problems. They blamed themselves when this became difficult or impossible. Robyn tried to work with the teachers in accepting the things they could not change such as a child's home environment, medical needs, emotional needs, or physical needs.

At times, Robyn had to physically remove an antisocial child from the classroom setting. He had to establish that he was in charge by picking up a raging child and carrying him out of the room. They would make their way to his office where the child could rage until he wore himself out. Once calm, the child and the principal could begin to talk about what had happened and begin to build a trusting, caring relationship. Eventually, Robyn was able to just walk up to a raging child and ask if the child could walk out of the room on his own or did he need to be carried. The child might be screaming and swearing the whole way down the hall but at least he would walk to the office to de-escalate. Robyn was very careful with young children and never tried to hurt them. His actions were necessary to protect the child and the other children. Robyn always contacted the parents or guardians whenever an incident happened and a conference would take place to garner the support of the adults in the family. Robyn was also good about offering advice to the adults and sincerely tried to help the child and the family. As a final resort, Robyn would contact a police officer if he had to. Most of the time the adults in the family did not want the police involved and became more accepting of the school's help.

Robyn and Lee agreed about working with children in the classroom setting. The peers in the room needed to learn to ignore some inappropriate behavior such as yelling

and crying. The important thing to teach them was how to respond appropriately yet not see that inappropriate behavior as acceptable.

One of Robyn's frustrations was having only half-day kindergarten in his building. That allowed the staff only three hours a day to work with a child and then the child had to be sent back to the negative environment from which he came. The next day had to become a new start.

Robyn spoke at length about working with his staff. He thought that was one of the hardest things to do. He needed the teachers to know that the child with a behavior problem needed the teacher's care and concern as much as any of the children in the classroom. The teacher had the first chance to positively impact that little life. The kindergarten teacher was responsible for setting the tone for a child's school career. Getting the child to like learning and going to school was important.

Robyn also understood the teacher's desire to be in charge. Some teachers expected children to know how to behave in the classroom from the first day of school. He felt he needed to help teachers understand a child's limitations and to learn to tolerate certain behaviors until other issues could be addressed. The best teaching tool was experience.

Robyn liked to give his teachers some responsibilities and challenges to help them grow as educators. He also liked to send teachers to workshops to enhance their skills. Robyn felt he had a duty to his profession to look for administrative qualities in his teaching staff. He expressed concern about a dwindling pool of experienced principals to replace those who would be retiring in a few years. He took many opportunities to give

teachers a taste of administration and to let them see what his job entailed. He looked for future leaders and took pride in mentoring these people.

Robyn liked to work with assistant principals during on-the-job training. He believed the assistant should become familiar with all aspects of the principalship. He believed in having them work with staff, students, and parents. He worked with them on the budget and scheduling. Robyn especially liked the college approach to the cadre programs for emerging leaders.

Chris

When I contacted Chris to ask her about participating in the study, she responded eagerly. We selected a mutually agreed upon date and time at her building. Chris was interviewed on May 31, 2005 in her office.

I arrived at Chris' school and waited a few minutes while she finished conferring with a student. The school was a comfortable, welcoming building, which had undergone recent renovations.

Chris met me and showed me to her office. I explained the goal of my study and thanked her in advance for her participation. We began the interview after she signed the Informed Consent Form.

Chris had 28 years of experience in education. She spent 18 of those years as an elementary principal and 9 of those years were in the building in which she was currently assigned. Chris had a minor in Special Education and a Masters Degree in Educational Administration. She had also been trained in de-escalation techniques and physical restraint.

Principals in Chris' district were given choices about how to utilize their funding for special programs. Chris chose to hire a full-time security officer for her building because she had a behavior disordered classroom in the building. She felt the security officer helped with aggressive children and provided additional security.

One of the highlights of the interview with Chris was when she talked about playing the role of "good cop-bad cop." She coordinated her approach to an antisocial incident with the classroom teacher. Chris could be loving and kind or she could be the "big mean." She talked about a little boy who threatened to have his dad and his sister come and confront the principal and they were really mean! Her approach was to welcome the visit and she let the child know she was the "BIG MEAN!" This approach worked with the child as he did not want to come to the office to see Chris anymore. She assured me this was not her favorite approach but she had to be firm with some children. They needed to learn about consequences and follow through from the adults in charge.

Chris, like other principals, felt strongly about building relationships with children and parents. She made sure the teacher had made contact with the parent to get them "on board" when working with a youngster. She also wanted to make sure that children knew she liked them because sometimes children respond to you positively simply because they like you. In another instance, a young child was going absolutely "nuts." Chris walked into the classroom and asked the child what was wrong. The child immediately started crying and hugged Chris. Then everything was ok. She definitely believed building relations with the young children was important.

Chris also stressed structure at school and at home as being important as was understanding the chain of command. She wanted the children to know the teacher was the boss of the classroom. The principal was the boss of the school. Some children coming in to kindergarten may not understand the chain of command because there is no chain of command at home. They think they are on an equal basis with the adults at home therefore when they come to school they are not used to being told what to do.

Some strong willed kids believe they have the power to do whatever they want to do. They may have had this power at home but school is a more controlled environment.

Chris was skilled at separating herself from the child's behavior and personal attacks against her. She stressed how threats, name-calling, swearing, and anger had little impact on her ability to work with a child. She occasionally had to raise her voice or show authority toward a child but these actions were carefully planned for impact.

Chris is a very positive person with a good sense of humor. She talked about this as a plus when dealing with children. She was able to stay calm and handle any situation in a matter of fact manner. This was partly due to her personality and partly due to experience. Chris was also in favor of ongoing learning and collaborating with her peers.

I sincerely appreciated Chris' spontaneity and candor in telling some of her stories. It was obvious she enjoyed working with children, staff, and parents.

Lynn

Lynn and I met on June 16th at her building. All of the preliminary paperwork was completed and we began the taped interview. Lynn had completed 24 years in

education at the time of the interview. She had served as an assistant principal for 4 years and had served for 7 years as principal at the school in which she was currently assigned.

Lynn had been a special education teacher and a kindergarten teacher before becoming an administrator. She held a Masters Degree in Educational Administration. Lynn had attended various conferences and had training in dealing with the “explosive” child. She had also received training in de-escalation techniques, behavior modification, and physical restraint.

Lynn used some of the district’s funds to hire a half-time security guard in her building. She believed this added to the security in her building. The officer was available to help with behaviorally disordered children if they became aggressive.

Lynn highlighted some of her views on dealing with young children with behavior problems. She felt strongly about creating individual plans for each child. She stressed the fact that different things work for different children. Some children need lots of structure and other children need to be given choices as they may have no choices in their home lives. Some children attended school for half of the day and others attended school for the entire day.

Many of the children with special needs had come from the preschool handicapped program in the district. Due to this, the staff would know about the difficulties the child may have with learning and behavior. Her behavioral disordered classrooms were self-contained and were rare in the district thus she would receive children from other parts of the city. One of her concerns was that teachers were hard to come by and retain in this classroom as this was a challenging position.

A raging youngster had physically attacked some of the adults in Lynn's school. Four staff members had to get tetanus shots for bites and one para was hit so hard in the face that her glasses flew off. She was afraid something had happened to her cheekbone. At that point, Lynn used suspension as a tool to give the staff time to create a new plan of action.

Lynn jokingly referred to the vocabulary used by some of the children. Sometimes they would yell, scream, and swear. Some children "spewed" bad language. The words came out freely when they were angry. After a period of time to calm down, the children would apologize and even want a hug. In her words, "It just breaks your heart."

Lynn stated that she liked to hire and retain quality kindergarten teachers in her building. She also believed in a structured, academic setting for children just starting school.

Getting the parents involved was another aspect Lynn felt strongly about. She stated, "I believe in getting the parents involved. That's a big part. I don't think we're going to fix too many things without the parents."

She continued to stress the importance of parental cooperation when medication and/or counseling was recommended. It helped to realize there was support from home. Lynn did not have a counselor in her building so counseling was provided through a community grant in what she called a "wrap-around" program. A counselor would come into the building and offer services to parents and children one day a week. Other services were offered off site.

Marty

Marty was very friendly, positive, and eager to participate in the study. She was the fifth woman interviewed and the interview took place in September of 2005. Marty had experience as a classroom teacher. She had a Masters Degree in Educational Administration and she had been in education for 16 years. She had 7 years of experience as a principal and all 7 years were served in her current building.

Marty's building was home to two behavior disordered classrooms. Like some of the other principals, Marty used a portion of the district's funding to hire a full-time security officer. Marty had been trained in restraint procedures and she also had experience with dealing with autistic children.

Marty believed in building relationships with young children. She noted that antisocial children often trust no one and it takes time to build trust in these little ones. She felt it was important to maintain quality teachers and administrators over time so that the child could build lasting relationships. Marty had a strong sense of caring for children. During the interview, her caring nature became evident. She talked about being positive with children and she didn't like to be considered as the "disciplinarian."

Marty wanted to know what kind of background children were coming from. She liked to know if a child had been in a preschool setting, at home, or in a day care setting before coming to kindergarten. The information gathered helped her understand a little bit about the family dynamics and the exposure a child might have had to positive or negative experiences.

Marty believed in the importance of educating families about quality prekindergarten experiences. She recommended quality day care, home visits, and a community wrap around program for low-income families. Marty talked about research related to Head Start programs, that helped prepare children in the area of kindergarten readiness. She felt early intervention was very important.

Marty used many of the same programs discussed by the other principals. She used a PAC (Positive Action Center) room, SAT (Student Assistant Teams), counselor interventions, and referrals to Special Education programs. She used all of these programs in her school when dealing with troubled children.

Marty expressed the value of all-day kindergarten programs. Her school did not offer all-day kindergarten but she hoped to have the program in three to five years. Her kindergarten was divided into morning and afternoon. The morning program had 24 students and the afternoon session had 22 students. She did not have room in her building to expand kindergarten opportunities.

I agreed with Marty in her discussion about the value of all-day kindergarten programs. She felt consistency and more time in a school setting with a structured routine benefited young children.

Data Collection

In order to facilitate a favorable response rate to the survey, a three-step process was used. The first step was to mail information letters in spring of 2005. The mailing included a cover letter and the interview questions. A personal contact was made to set up a mutually agreed upon interview date, time, and location.

The second step was to conduct the face-to-face interview with each respondent. Respondents were personally thanked after the interview. Additional research needed to be done after the interview process.

The third step was to conduct telephone and e-mail interviews to determine if the respondent wished to add more information to the survey. Respondents were offered a chance to review the results of the study.

Data Analysis

Data analysis was done after the data collection. Data interpretation and narrative reporting followed data collection. Information was collected, sorted into categories, and formatted into a story or picture using a qualitative format.

As I analyzed the data, I looked for unusual or useful quotes that would be incorporated into the narrative. The amount of data collected required careful interpretation and sorting. I attempted to find perspectives held by subjects including relationships, social structure, setting, context, and activities during the transcription of the data.

I used the eight-step process listed in Creswell's (1994) book.

1. Get a sense of the whole. Read through all of the transcriptions carefully.

Perhaps jot down some ideas as they come to mind.

2. Pick one document. Go through it, asking, "What is this about?" Think about the underlying meaning and write thoughts in the margin.

3. Repeat this task for several informants, making a list of all topics. Cluster together similar topics. Form these topics into columns that might be arrayed as major topics, unique topics, and leftovers.
4. Abbreviate the topics as codes and return to the data. Write the codes next to the appropriate segments of the text. New categories and codes may emerge.
5. Find the most descriptive wording for the topics and turn them into categories. Attempt to reduce the total list of categories by grouping topics that relate to each other. Attempt to identify interrelationships.
6. Make a final decision on the abbreviation for each category and alphabetize these codes.
7. Assemble the data material belonging to each category in one place and perform a preliminary analysis.
8. Recode existing data, if necessary.

The results of the findings were reported in a descriptive, narrative form rather than as a scientific report. The use of thick description communicated a holistic picture of the experiences of elementary principals. This allowed the readers to attempt to understand the challenges encountered by elementary principals as they strive to reduce or eliminate antisocial behavior in children as they enter kindergarten for the first time.

Audit

Dr. Barb Brock was recommended by Dr. Uerling and was selected to audit the data collected from the respondents. She reviewed samples of the interview transcripts

and compared them against the results reported in the dissertation. Dr. Brock's report is included as Appendix F.

Chapter 4

Results

The information in this study provided a firsthand view of experiences, perceptions, and strategies learned and used by elementary principals who have dealt with antisocial behavior in kindergarten children.

Participants shared honestly and openly about their concern for children, their support and appreciation for strong staff members, their dedication to education, and their commitment to make a difference.

Several terms were introduced in the study. One of the respondents identified an antisocial child as being a "feral child" with no socialization at all. The term, "feral child" creates emotion on the part of the researcher. One can create a mental picture of a child who is in so much distress.

This chapter was intended to provide an understanding into what principals actually do on a frequent basis to help the antisocial child. The principals were able to identify their success after first helping the listener understand the severity of a child's behavior. This helped to clarify how the principals identify antisocial behavior. Their words helped answer the question, "What does antisocial behavior look like?"

Sub-question 1: *How is antisocial behavior identified in young children?*

Most of the principals agreed that schools are seeing more and more antisocial behavior in kindergarten children for a variety of reasons. Lynn identified several children in her experiences. She talked about a little guy "who was totally autistic and uncommunicative." She talked about two kindergarten children by saying,

One little guy we had was totally autistic and was uncommunicative. He is very bright in certain ways. He can spell any word. He uses a dry erase board but as far as to tell you anything you have to say, "Are you happy?" He will repeat "happy!" He has what we call meltdowns [but] the mother is very insistent upon us doing mainstreaming for him. We do "social stories" for him so that he knows what kind of experiences he is walking into. He has done a lot of biting. We've got one more with the OCD (Obsessive Compulsive Disorder) [who] is just so severe. He was spitting, biting, hitting. The spitting was to the point it was just disgusting. We actually told mom he can't be here.

Robyn referred to one child as a "feral" child with no socialization at all even within the context of the family. In Robyn's words,

We had a young man come in as a kindergartner. Even speech-wise he was unintelligible. The background on him was that his mother, at 15-16, died. Grandmother was raising him and she had health issues. He just got lost in the shuffle. He was five years old and was physically aggressive to children and adults, inappropriate name calling, biting, spitting, resorting to basic behavior, running, and tripping over furniture. Another young man had everything. I never understood it. He ended up going to our behavior program because he needed a program beyond what we were capable of.

Pat expressed having many similar experiences with children. She said, You know, behaviors in kindergarten and first grade kids are very serious. We're talking [about] some emotional, hugely disruptive behaviors. Behavior issues are

extremely difficult. These kids are not just naughty kids, they are severely disabled because of their behaviors for whatever reason.

Lee talked about a little boy who had fits of anger, crying, and who did not get along well with the other students. Parting from parents was an issue. Being told "no" was very difficult for the child. When the child felt like he was not accepted by the students, that was really hurtful for the child to take. Attending to task for a long time was very difficult.

According to Marty, "A lot of times, if they are antisocial, they haven't been in a social situation and they don't trust anyone."

Marty added,

[The kindergarten teacher] will come to me with concerns she may have. We'll do some observations, pull in other people, review the facts. A lot of it you can identify by just doing some background with the families. I see antisocial [behavior] especially if they're not around other peers. That's probably one of the biggest things.

Several of the principals noted that children self-identify themselves as antisocial by their behaviors. Lee strongly stated,

You just know! You just know! I mean some of the children probably come in from preschool handicapped classrooms and then we would have their records. That would indicate that they need assistance. Sometimes parents would say to us that they have a child who is not talking or not talking much. They are seeing a deficiency where we try to determine a need or maybe a system.

Chris noted that children were often identified first by the teacher. She said, "Actually it's probably more identified by the teacher in the classroom. The youngster is constantly out of his seat, easily distracted, and has difficulty in learning. They seem to struggle more with the learning process."

She added another perspective when she talked about children who failed to recognize authority figures. She could identify an antisocial child as "one that does not understand the chain of command" especially where kindergarten children come in."

Chris added,

"They don't understand that the teacher is the boss. They don't understand that the principal is the boss of the teachers. The principal is the boss of the school. They don't understand that chain of command. The majority of them coming in, do understand that because there is a chain of command at home. But the ones that really seem to struggle are the ones that don't have any kind of chain of command. They think they are on an equal basis with their parents at home. Therefore when they come into the school setting, they've got an authority figure that's telling them different things they are going to do. They're not used to this."

Chris continued by saying,

"They lack a structure or defy structure. So if there is no structure and they can do whatever they want to, then come in to a setting where it's more controlled, that's where we run into a lot of problems. We have strong-willed kids that think, 'I had the power before. How come I don't have it now?'"

Robyn said it best when he said, "They rise to the top".

Sub-question 2: *Tell me about one or two of your successful experiences dealing with antisocial behavior in a kindergarten child.* I was mainly interested in the success stories of the elementary principals. I asked them to share interventions they used that reduced or eliminated antisocial behavior in kindergarten children.

The participants acknowledged that they had tried many strategies and had tried many different interventions. Lee felt there was not one intervention that worked every time. She said,

It just takes a lot of interventions, a lot of time, good communication with parents. We always try to bring it around softly. What I think is important as you know, is that parents bring us the best they have and so we take them from where they are, where they come in, and just work very gingerly. Make sure the child feels secure and that they feel they're being rewarded for the good things they do.

Pat added,

Kindergartners are, they're free spirits, so try to teach them behaviors is challenging. I wish I could tell you what I really do. I do a whole bunch of stuff. I wish I had a magic formula to say this is how it works. But there isn't. It really depends on the child, the teacher, the parents, and the circumstances.

As the transcripts were reviewed, several themes emerged: parent involvement, relationships with children, regular education interventions, more restrictive environments, experience and training, early intervention, and all-day kindergarten.

Parent Involvement

All six of the principals noted that parental involvement was one key to successfully manage behavior.

Chris shared,

A youngster might be identified by the teacher in the classroom. The first words out of my mouth are, "Have you contacted the parents?" Make sure the parents are on board. Make sure they are aware of what is going on. It can be pretty disheartening to a parent to know their child is different.

Chris continued by saying,

If anything, [interventions] helped parents at home. The structure we had here and the different things we did at school [helped us] encourage parents to try those things at home. Home and school worked together. If you (the child) received positive consequences here at school, you're also going to take a note home so positive consequences could happen at home too. We're kind of training them too.

With a child in Lee's building each of the "hot spots" or difficulties was addressed. They talked to the parent about how to part, how to separate themselves from the child.

Lynn believed in getting the parents involved as well. "That's a big part."

She shared,

The kindergarten teacher is very highly structured and academic. At any point where there is a problem she will call the parent and say, "Can you come in? I'd

like to show you some things that may help support me at school." She will come up with materials and processes for them to do at home whether it be academic or behavioral. If worse comes to worst, I get them. We pick up the phone and make a phone call to have mom or dad talk to them (the child). It's a lot of talking. I believe in getting the parent involved. I don't think we're going to fix too many things without the parents.

Lynn continued by saying,

If the parents can buy into the fact that there is a problem and they take [the child] to counseling or whatever is required, that's half the battle. Then you can understand and realize you're getting support from home. I wish there was more we could do. We're limited. We have a lot of flyers. We have a community counseling program, a wrap around program. This is the first year we've had a counselor in our building.

Robyn believed in parent support as well. He added,

Being a male helped me because grandpa was the authority figure in the child's home. If grandpa said "no" it meant "NO." [That was not so] for grandma. We worked with the grandparents so they understood at times we had to carry [the child] out. We had [the grandparents] cooperation. We made sure grandparents were involved.

Robyn said to the grandparents, "I may have to physically remove him, are you ok with that?" They were.

Robyn also talked about dealing with the parents of the rest of the class when he said,

We did a lot of work, as much as we could, communicating with the other parents.

Yes, your child is going to come home with stories of what's going on.

Obviously we can't share a lot of information with [other] parents but we let them know there is a plan and your child's safety is of utmost concern. This is the reality we have to deal with, so does your child.

Pat added,

When I look at successes I have, it's not my successes, it's our successes. It's working together with a team of people. I'd say probably as we go through the year, we see lots of successes but it's everybody working together. I think the most significant intervention is building a relationship with the family and the child and maintaining that relationship, strengthening it, and building trust. We don't do a lot of home visits. Sometimes the parents are defensive. They have no reason to [trust us]. Until we build that relationship with them they have no reason to trust that we're going to do anything good with their child. Some parents [are] in denial and want to place blame for their child's behavior. We are an easy target. It may take several years to build a relationship.

Pat continued,

Fortunately with these kindergartners we know we've got more years and more time to improve that behavior or work with that parent or get that parent on our side. We're just beginning at kindergarten. I know that I'm not going to fix that

behavior in the first few weeks of school. We need six to seven years to change that behavior.

Relationships With Children

Chris expressed strong feelings about building a relationship with children.

She said,

Sometimes kids will do things for you simply because they like you and it has nothing to do with you, who you are, your name, or status. It has more to do with the fact that they know you and they know that you're fair. I think it is important that relationships are established because many times kids will do things [for you]. We had a kid this year who was absolutely just going nuts. I walked in the door. I whispered to him, "What happened?" He stopped at that time and started crying. Then I could go up and put my arms around him and then we were ok. That was because of the type of relationship we had established.

Chris added,

I think you have to build relationships and I don't think you can get upset. You have to realize where kids are coming from. It's not anything personal against you. Even though they might say, "I hate you!" Well, yeah, they probably do at that point in time. You have to keep a sense of humor, too.

Robyn felt that his goal was to build a relationship and a rapport.

Once we got this man under control enough, we could develop that. And that's where success comes in. He knows he can trust you. You work a lot on trust and

consistency. He works for the "good job" and right away [we] began rewarding or acknowledging the positive behavior.

Marty added,

A lot of [successful interventions] are once you get to know the kid and find out something that is their interest. It's amazing what can come from that. A lot of it is tied in with the relationship building. It's for them to feel comfort too. A lot of times they are antisocial if they haven't been in a social setting. They don't trust anyone, so it's building that trust.

Getting to know the kids and families, I target on that. It's building relationships. I think kids need to see the principal or anyone as that leadership position but also as someone who really cares about kids. With some of our most difficult kids, if those kids feel that you truly care about them and you're there, you're the best thing that's happened to them. They will succeed.

You only have them a short time. I would say being there not only with your parents, getting involved with your kids, but your staff too. Everybody has to work together. That's the key, working together toward the same goal.

Lee felt routines and procedures were important.

We just continued to let the child know that there was a procedure and a specific procedure that the child was going to follow through on. It was just a routine and the child would be acknowledged with a complement.

Pat added her opinion about building and strengthening relationships when she said, "Building trust is key and it depends on the child."

She shared,

In our regular classroom, we move from kindergarten to first, first to second every year. So we kind of have to start all over every year. I think the thing that is significant is that relationship for the kids is that I'm the constant. I'm the constant with the kids. I'm the constant with the families. I'm the constant with the agencies that are working with the families. My visibility, my presence, my relationship with the family is critical. Those kids are moving year to year. They have a different teacher. They start at zero every year. At least I'm the constant factor.

When working with teachers, Robyn stated,

Getting them to understand that this is a child who needs you more than any other child in that room. If you can get the teacher to kind of buy into that, you're going to make the most positive impact on this child. It is going to be huge. You're setting the tone for their whole elementary and secondary career. We've got to get this kid liking school.

Regular Education Interventions

The question asked in this section was, "Which interventions were successful and did they make a difference in the life of a child?"

Each of the six respondents were from the same district thus there were many similarities in their responses. The principals mentioned using a Student Assistance Team (SAT), a Positive Action Center (PAC), school psychologists, counselors, and behavior

intervention teams. The interventions are fairly routine in many midwestern schools.

They may be called by different names, but their function is very much the same.

Student Assistance Teams are teams of educators who meet periodically. They strive to provide a classroom teacher with strategies to monitor and change inappropriate behavior. They might also work with the academic needs of a child. This process involves teachers helping teachers to benefit students and to help them experience success in school. Usually, but not always, the parents are notified and are even brought in to the school to meet with the team.

The teacher will then try some of the strategies and document progress. The team will meet again to revise interventions if necessary.

Positive Action Centers are staffed with personnel who help children make positive decisions. They work with individuals, small groups, a classroom teacher, or even whole groups of students.

A guidance counselor may be used as a resource for the teacher in a whole group setting, with small groups of children, or with a single child.

The role of the school psychologist is to observe the child, make recommendations to the teacher, and assess the needs of the child. This process may or may not result in a referral for Special Education testing.

Student Assistance Teams are usually one of the first interventions used if a child's behavior is not too extreme.

Chris has used "counseling interventions" and school psychologists.

She said,

We have school psychologists that are behavior interventionists that will come out. People come out and work with kids, analyzing, taking a look at them, coming up with ideas that can help. [They] then check back in with the youngster and the teacher to see what is working and what isn't working.

Robyn said he used SAT teams to pull people in, share ideas, and come up with alternate plans. He added, "Sometimes it works for a week and then it doesn't work by Friday."

Lynn mentioned documentation as being important.

Teachers will have kids in their rooms they feel are a problem and they send them out and I always say "documentation". You sit down to have a SAT meeting and you have dates and times. You also have to document the behaviors. I get a referral and it says something and I will send it back and say, "I understand what happened but this is not going to fly if we ever have an MDT (Multi-discipline Team meeting) or we ever get to that process." They have to document. I know it is time consuming. You've got to go through all of the procedures to process the information and the data and go from there.

Lee referred a little boy to the SAT team or would use school psychologists and counselors. She continued by saying, "We had this child who would not separate from his parents. [The counselor] helped form that bridge and communicated with parents. The counselor is very involved."

Pat said she followed all of the usual channels as well and added,

Last year we did move a child from a kindergarten room to our BD (Behavior Disorder) classroom but we go through the same process that any school would, the SAT process, the IEP (Individual Education Plan) and least restrictive environment first.

Several of the principals talked about the use of a PAC room facilitator. Lee talked about the PAC room in her building by saying, "The PAC is a positive action center and we have a person who works with the students on rethinking their decisions. A lot of times these are social issues or behavioral. She can also help with academics."

Lee continued by saying,

Every school has a PAC room. They usually work, depending on the size of the building, four to five hours a day. They're a para who has special abilities to communicate with the students and they're given training. It is meant to help the student but also to preserve the academic environment in the classroom. [They might see] 10-15 kids a day. A lot of kids are on observation.

Lynn added to these comments by saying,

We have a PAC room. It's the Positive Action Center. Our PAC person was actually a social worker. Her interventions are positive. She will check in with the child first thing in the morning before they've eaten breakfast, the bell rings [or] they're in class. She'll walk in and she'll say, "What kind of day are you going to have? You know you're going to have this today and that today. Let's have a really good day". Things like that, presetting the stage for the day.

Additionally, Lynn said,

Our PAC room is not used as a time out room. It's basically to do things positively. If a student has a problem with another student or whatever the case may be, the teacher will write a (pause)we don't call it a referral. It's an assignment, a PAC assignment. The PAC person will look at the situation and reteach the social skills that are needed.

Marty's PAC room was similar to Lynn's PAC room. She said,

They have a form they fill out and the teacher or the PAC room facilitator would go through the steps of appropriate listening. Ours is more of a, definitely more of a positive area and it's not meant to go to if they're in trouble. [Children] see them as a non-threatening person that they're going to. We usually try to involve more than one child so that it is in not seen as a pullout. The person who runs ours right now is kind of a grandmother type. She loves literature books and lots of times she [works] through reading literature. I think kids pick up on a lot from quality literature.

More Restrictive Environments

Many of the principals interviewed discussed environments that were more restrictive than the regular classroom. These classrooms were under the umbrella of Special Education. Placement in these environments required that schools follow a structured set of procedures mandated by state and federal governments. These were called Behavior Disorder (BD) classrooms.

Lee shared,

There is a self-contained BD room for primary and for intermediate. Our primary teacher could take a behavior-disordered student. Our resource teacher also could take behavior disordered students and then breach between the classroom. The BD rooms have more intensive interventions. We also have a behavior management team that can come out from the district. Those are for our more severe cases. They would set up a behavior program for the student and the teachers. They chart and graph the number of time outs that a child has. We truly try to avoid having to take that extra step.

Robyn also referred to BD classrooms in his building. He talked about a little boy who spent three years in the BD room. Robyn said, "He is a success story in that he has gone and is now coming back to us as a 4th grader mainstreamed into a classroom all day".

Lynn based some of her school's success on having an outstanding BD teacher. Her BD teacher has had lots of training and she applies that to the kids.

She has done a lot of interventions with behavior modification. She uses a journal, writing back and forth every day to parents. By the end of the year she had six kids. That took a little bit of time every day, but she has a full time para. The para is wonderful. She's kind of a grandmother figure to these kids.

Sometimes she just takes a little one out of the room for a walk.

The teacher has things so individualized for each of those kids. [One child] doesn't interact with the other kids so he's got a little study carrel and he is off to

the side. Some kids thrive on music and others with PE. What appeals to each individual child [is different].

Pat referred to the importance of having consistent staff members in her BD room and in her school. She said,

We have the luxury of rolling kids over in our BD program so that teachers stay with the kids. In our regular classroom we move from kindergarten to first grade and first grade to second grade, every year. We kind of have to start all over every year.

Pat continued by talking about a girl in her BD room.

The one that I'm talking about right now, there's a lot of disorders hooked on to that and some disabilities too, but boy do I see some progress made. It's gone from yelling, screaming, spitting, and having temper tantrums on the floor to really using the tools we've given her. The background she came from was, she's in a foster situation right now. That has been tremendous. She's been in the same situation, same foster home. That has played a significant role in shaping her. She's had, unlike other classrooms where they go from first to second and third to fourth with a different teacher, she had the same teachers all the way through. There's a primary teacher and an intermediate teacher. They work together and there's so much cooperation with each other. She's basically had the same two teachers all the way through, same educational paras, same principal, same foster situation. That's important in the big picture of things.

Marty agreed with Pat by saying, "A lot of the reason why they are in a behavioral classroom is for antisocial reasons. They socially do not know how to interact with other kids."

Marty, Lynn, and Chris all talked about having a security officer in their buildings. Marty referred to using the officer when a little child refused to come in the building. He said, "We had the security guard go out and meet him at the car, bring him in, and he was fine."

Lynn relied on the officer when she was out of the building. Chris used the security officer in the BD room.

Several of the principals had to resort to suspension, shortened days and retention as a means of intervention. Robyn didn't like to suspend a student, but he would if the child was dangerous. He stated,

He, [the child] did not want to be at home but at school. Usually the threat of sending him home worked. He wanted to be here. I want him here. I may make him sit in my office all day. It's you and me kid. That kind of a thing. The only times I ever did suspend him, they were very physically aggressive behaviors.

Lynn said,

There's four of us that have had to get Tetanus shots in the last year and a half for bites. I've had one para hit so bad in the face that her glasses...we sent her in to be looked at. We didn't know if something happened to her cheek bone or not. Suspension was not going to change the behavior. But you have to do what you have to do.

Chris referred to suspension when she said,

We try to do everything. I even suspended him to see if that would have an effect. We found that the more he was at home the more we had difficulty when he came back. He was worse when he came back and it wasn't an advantage for him. He was staffed for BD. He'll be in a behavior classroom next year.

Robyn resorted to using retention as an intervention. He said he did experience success with one child.

We did do a retention on him because the first part of the year was pretty well shot as far as academics. And so, the second time through kindergarten, we were able to focus more on the academics. There were still behavior issues and things like that. We really debated on [kindergarten] because of the half day program. Do we let him go in to first where we have him all day? He would have gone into first grade still barely recognizing the letters in his name. So the balance goes there. The retention was a positive thing. He was more socially ready for kindergarten and plus meds. We got medication! He didn't have to reestablish relationships. He worked with the same teacher. He knew the routine already. For him, to come back to the same teacher, the same room provided a sense of security.

At times, children are referred to special schools that deal only with children with behavioral needs. Lynn said,

[Some of these] kids should be hospitalized. The number of severe kids, so many drug babies, fetal alcohol, abused, all those things play into it. There are some

very, very sick kids and they are five. They are five. If our interventions aren't successful, it's up to a doctor. We have had a few who were contracted out [of the district]. They don't send too many kids there.

Experience and Training

Many principals talked about experience as an important factor in reducing antisocial behavior. Robyn felt strongly about finding experienced teachers to teach in kindergarten. He stated,

When you have an [antisocial] child like that, you obviously try to match them with the most successful teacher, the teacher that has that experience or has that adaptability or that flexibility so that they don't take the child's behavior personally. I think as an instructional leader, or building administrator, [the job] is to teach the teacher or the adults. That is probably the toughest. We educate all children, the good and the bad, the well behaved, polite and the naughty, the gifted, and the special education student.

Robyn liked to send staff to early childhood workshops. He said,

Especially if there is anything that comes along with early childhood I tend to go to those and encourage my staff to go to those. That's in my budget. I can send them to conferences like that. If they come back with one good idea, I think it's worth the time and money. I think it helps them see it is not just their problem.

This is a problem and not just here and that's where it helps to get them out of the attitude it's personal.

Lee agreed about using experienced teachers and principals by saying,

They (the children) both had some very dear teachers who know that the relationships they form with a child was first and foremost more important than academics. Take the child from where they are. You know, I would only hope that they (principals) would have experience in knowing that they need to be patient. There's not something that's going to "fix" the child overnight. It may take several years.

Chris believed that maintaining a good relationship with fellow principals was important. She believed principals could help each other with antisocial behavior problems. Chris also mentioned experience as being a great teacher and she felt conferences were good. She encouraged educators to learn from each other when she said,

I think we can learn a lot from watching effective teachers. That's ok if you follow some of the same strategies teachers use when you observe in the classroom. If she's got something that's working, I'm gonna use it too. What a compliment to that person if they're copied. Definitely [do] not be afraid to call fellow principals that you know. Pick up the phone and say, "This is the situation I am having. I'm thinking about doing this. What would you suggest? How would you handle it?" That's been a real plus.

Marty talked about sending her kindergarten teacher to a training session that carried over to all children. This last training she went to was about support. The teacher would tell the parents,

I'm going to offer you support. Let me try to support you she will tell the parents. It's a more positive approach I think. During the SAT, she'll say, well, I offered support and in this situation it seemed to help or I offered support and it wasn't welcomed. Parents buy into that. It's a real positive way to do it. Maybe you could use support at home when this situation arises.

Some of the principals discussed special training sessions to de-escalate a potentially violent situation and to learn how to restrain an aggressive child. Chris said, Those are definitely a bonus as they teach you actual verbiage to be used with a youngster who is out of control. If there are three adults, who is the person who does the talking? The vocabulary that you use and just getting the youngster talk about what is going on and knowing when to say something and when not to [is important]. There are times when even if you try to get a youngster to talk when they are out of control, it's going to escalate them even further. Knowing when not to say anything and just let them sit or let them lay there or whatever. You don't always have to be talking.

Chris added, "We have to restrain when it looks like that youngster is going to hurt himself or others. We restrain when it becomes a safety issue. They are very strong when raging."

Pat explained the importance of having conversations with peers and finding out about what research was telling her about behaviors. She said,

If you focus on some good research and focus on good interventions and good strategies, and talk to people who are knowledgeable, all that's important. It is

good for the principals to pull it from their bag of tricks, but if you can work with people who are authorities in research, that has a lot to do with behaviors. Never stop looking for opportunities too. I mean it's just like school improvement, you keep going to things.

Early Intervention

Early intervention was considered important by the principals.

Pat said,

Most of the times when we see kids that are in the early childhood program, they're in there for language delays, not for behaviors. Once in a while these kids are coming to us with an IEP. We have a little bit more background on behavior too because that's included. But, yeah, sometimes it is a total surprise. They walk in off the street and here they are!

Marty added,

I think we also support early childhood too. We've done more things to say early intervention is key. I would say in the last three years we've done more knowing what kids are coming with, what skills, and what's expected. Years ago what was expected (I was a first grade teacher), is expected in kindergarten. We've done a lot of research in the last three years with our kindergarten roundup. Finding out what type of preschool experience did the child have. What things have they been involved in? Have they been in an in-home day care? Have they been in a day care center? Have they just been at home with mom? Those are all things that tie

into [it]. I think the kids who have been in pre kindergarten [benefit] if it is in a school setting or Head Start.

We have a lot of kids who have been at the [early childhood] center. It started about three years ago. It starts early and it's based on lower income families. It's about that foundation. There is another one now. They start as early as one and two. It's very early. So, if they're in there from three to five years, you can start to really see kids who have been exposed to school versus kids who have never been in school before.

Marty continued by saying,

The program involved the parents. Qualification is based on family income. Parents have to apply to get into the program. In fact, right now, I just talked to a family who was trying to get their child into [the program]. At first they were trying to recruit families but now it's becoming [a waiting list]. The parent piece is huge. They have to go home and do things. They have to play a role in that too. I think that's the biggest thing we are doing-educating families about our kids. We tried to do kindergarten workshop and that helps families [learn] how to work with their kindergartner.

I think a lot of time the parents don't have the skills or understand what they're supposed to do with kids. Maybe nobody talks to them (the children) at home or says how was your day or just to see what did you do in school? I'm amazed to see how many backpacks I open that have everything still in it. Many times parents don't have the skills to deal with the negative behavior so they just let it

go. It's just like in a store, how many times have you been in a store watching a kid screaming and hollering? Instead of the parent walking out with the child, they give in.

All-day Kindergarten

Moving to all-day kindergarten was mentioned by only two of the principals. They had all-day kindergarten or were looking forward to having the students for the entire day. Marty said,

We're not fortunate to have all day kindergarten but schools that have all day programs, at least they're there (the children) all day. We're here a very short time. I mean if they've got specials, they've got art, PE and music, that [classroom] teacher is with them maybe an hour and a half. It's hard to be able to fit everything in and to build that routine. In the next 3-5 years [we will have all-day kindergarten]. We, right now, have only one kindergarten room. She (the teacher) has morning with 24. Afternoons, she has like 22. So we would have to take our art room for that.

Robyn agreed with Marty about the length of the school day. Robyn said, We're only half-day kindergarten so that is another situation that really affects it. You only have them for not even three hours and then they go back to the environment that generated the negative behavior. Then we kind of start over the next day at day one. I think if we had all-day kindergarten would take less time to get to the level.

Chapter 5

Summary and Conclusions

The purpose of this study was to examine selected elementary principals' experiences with one or two kindergarten children who demonstrated serious antisocial behavior and subsequent interventions that were successful. The main question to each principal was, "In your own personal experience, which interventions actually made a difference in reducing or eliminating antisocial behavior in children entering kindergarten?"

Ten elementary principals in a midwestern school district were identified by their district's Research Review Committee. The principals were required to have at least three years of experience in the building in which they were currently working. According to their district, they had experience dealing with children who demonstrated antisocial behavior in kindergarten. Six principals agreed to participate in the study. Three principals declined to participate even after several requests by the researcher and by the district research review committee. One principal believed she did not have enough experience with antisocial behavior to be of benefit to the study.

Political tensions existed between the district where I am employed and the district where they work. Principals may not have wanted to participate in this study because of the politically charged atmosphere.

The principals were selected based on the Social Economic Status (SES) of the individual school. The literature suggested that schools with a low SES deal with higher incidents of antisocial behavior in kindergarten children versus schools with a high SES.

Oden, Schweinhart, Weikart, Marcus, and Xie (2000) verified that research when they talked about the effects of Head Start programs. They believed that Head Start, a federally-funded program for low-income families, provided early education services for poor or disadvantaged children age three to five. These children exhibited more incidents of antisocial behavior than children not participating in the Head Start program.

The interview questions were mailed to the respondents prior to the personal interview in order to provide an explanation of the study and to allow the respondents time to reflect and prepare for the interview. Each principal was interviewed at an agreed upon day, time, and location. The principals completed the Informed Consent form prior to the initial personal interview. Respondents were asked to complete a short demographic profile that provided relevant personal and professional information, including their years of teaching experience, degree, professional certification, and professional development relevant to the study.

Respondents were assigned pseudonyms to protect their identities and to provide for accurate reporting of the data without possible harm to the respondents or the students, families, and staff about whom they talked.

The principals I interviewed were knowledgeable about many possible interventions however these same interventions were strategies I would hope we would use with all children. The principals did not communicate any clear plan or procedures used with children who behaved in an antisocial manner. Either there was no formal plan for dealing with these children or I did not ask the right questions to determine if there was a formal plan.

The principals discussed their perceived success stories along with expressing frustrations. While respecting their perceptions, I could not determine what qualified as a success story. Their successes were not measurable. This may have been due to a lack of the use of researched based practices and procedures.

Perhaps rewriting the questions in the study would provide more information. I would suggest questions along procedural lines such as: How often are children observed in the classroom? How is the data gathered in order to make recommendations for interventions? How is the child's behavior evaluated over time? How effective are the student assistance teams?

I conducted this study to find out what elementary principals do to successfully intervene with antisocial behavior in kindergarten children. As the data was categorized and coded, seven themes emerged from the study: Parent Involvement, Relationships with Children, Regular Education Functions, More Restrictive Environments, Experience and Training, Early Intervention, and All-day Kindergarten.

Parent Involvement

Each of the principals believed that parent involvement was an important key to successfully manage student behavior. The principals talked about early and frequent contact with the parents. Chris mentioned how the structure at school helped encourage parents to try things at home. Lynn felt strongly about the fact that we couldn't fix too many things without the parents. She said, "If parents buy into the fact that there is a problem, that's half of the battle."

Robyn mentioned that he had to deal with parents of the other children in the classroom as well. Communication was vital. He made sure all parents knew there was a plan to deal with antisocial behavior and that each child's safety was of the utmost concern.

Pat reported that everyone on the team needed to work together. Building rapport was important but unfortunately it took time. She expressed frustration that building relationships could take months and years.

The principal's beliefs were confirmed in the research. Marshall (2000) reported successful prevention programs included home visits, quality child care, and parent support groups. Marshall continued by stating that programs need to be offered in communities. Families and communities need to be a part of the decision making structure. Head Start research supported the involvement of the family in the lives of the children.

Relationships with Children

Building relationships with children was another intervention principals mentioned as being successful. Chris said, "Children will do things for you simply because they like you." She believed that children needed to get to know the principal. They needed to believe that the principal was going to be fair.

Robyn worked on building trust and consistency with children. He looked for the positive things a child did and acknowledged that behavior.

Marty liked to find a child's interest and then build on that interest. She wanted children to feel comfortable in school. I liked what Marty had to say about children. She

believed that a child could be successful if he knew that someone cared for him and would be there when he needed help. She believed that was the best thing a person could do for a child.

Hawkins, Doueck, & Lishner (1998) stressed the importance of building relationships with children. When teachers, administrators, support staff, pupil service staff, and parents build close, caring, and supportive relationships with children, they increase the likelihood that a child who is in trouble will reach out for help.

Regular Education Functions

Another theme common among the principals was to try a variety of strategies and never give up. All of the principals mentioned using their student assistance teams, positive action centers, counselors, and behavior intervention specialists.

The student assistance teams brought people together to share ideas and come up with alternate plans to help a teacher work more effectively with a child.

Positive action centers were staffed with adults who cared about children. The adults were there to listen to the children. It was a positive place to go when a child needed help. Lee said, "These centers are staffed with people who help with social skills as well as academics."

Lynn believed in having adults check in with children on a regular basis just to see how their day was going and to offer positive support. She also mentioned counseling, medication and consistency. She said, "I've seen kids just...get them into counseling, the proper regime of medication or whatever. Meds aren't the answer to everything. It takes a lot of consistency."

At times, the principals resorted to placing the child on a behavior plan, shortening the day for the child, and/or suspension from school. This was not considered the best solution but was used when necessary.

Skiba & Peterson (1999) stated that suspension, expulsion, and other punitive temporary removals from education were failed responses to signs of aggression.

The principals were consistent when stating their frustrations. If none of the regular education functions work, the child would be referred to a more restrictive environment. This could be a shortened day, a referral to a behavior disordered classroom, or even placement outside the district.

More Restrictive Environment

In the event that the regular education functions failed to help a child with behavior issues, the team would look toward a referral to a more restrictive environment. Careful procedures had to be followed when this happened. Documentation had to be reviewed. Psychological and academic testing would take place. Parent involvement was needed and the appropriate placement would be made by a multidisciplinary team. This team included the parents, teacher, administrator, psychologist, and possibly the counselor.

Placement could be in a special education classroom, a behavior disordered classroom, or a facility outside the district. Pat had a behavior disordered classroom in her building. She allowed only five children in the primary classroom due to the severity of the problems. These five children were not just naughty children, but they suffered from serious behavior issues.

Lynn highlighted some of her views on dealing with young children with behavior problems. Some of the children in her school only attended for half of the day. Other children in her behavior disordered classrooms had come from preschool handicapped programs within the district. Those children would have an individual plan in place.

Jolivette, Stichter, Nelson, Scott, & Liaupsin (2000) stated that students with emotional and behavior disorders often display characteristics that do not support success in or out of school. Coleman & Vaughn (2000) added that these individuals characteristically experience academic difficulties during their school careers and that learning disabilities frequently co-exist with emotional and behavioral problems and result in problems with understanding academic content. According to the Chesapeake Institute (1994), many students with emotional and behavioral disabilities do not finish high school.

Experience and Training

Retaining experienced teachers and principals was mentioned by most of the principals as being important. Marty believed that kindergartners needed to see her in a positive role, not to be the disciplinarian. She believed that keeping the same principal in the building allowed the principal an opportunity to work with a child over time. Marty said, "I have a sixth grader who I still deal with right now. I dealt with him as a kindergartner but it is good. It's a good and he's going to be successful."

Robyn tried to hire and maintain experienced teachers in kindergarten. He placed antisocial children with the most experienced teacher. Lee agreed with Robyn about

retaining experienced teachers. She believed certain teachers knew that building relationships with children was more important than teaching the academics.

Chris encouraged educators to learn from each other. She believed teachers could learn a great deal by observing other teachers. Pat valued having conversations with her peers. Many times her peers knew of good research, interventions, and strategies to help children. She believed educators needed to continue learning.

Most of the principals had received special training in restraint techniques and de-escalation strategies. The principals believed these were valuable tools to use when necessary.

Bodine, Crawford, & Schrupf (1993) said prevention efforts such as conflict resolution and school-wide behavior management helped establish a climate free of violence. Training in these two areas could be beneficial for the staff and students.

Early Intervention

Early intervention was very important in the literature but the principals expressed limited experience with pre-kindergarten programs. Marty believed in supporting early childhood programs and said early intervention was the key to reducing antisocial behavior in kindergarten children. She liked to find out what type of preschool the child had attended or if the child had been in day care or at home with a parent. Marty believed this information helped her understand the child a little better.

Marty talked about one early intervention program in her community. The program was based on family income. The family received services for a child beginning at the age of one or two. The parents needed to apply to get into the program and had to

commit to learning about child care and education. Marty spoke very highly about this program and said there was a waiting list of families wishing to participate.

Many of the researchers agreed about the importance of early interventions and early childhood programs. Crane and Barg (2003) compared different approaches to social development and academic learning and tracked children over time. They stated that, "If we as a society made a major investment in early intervention programs, there would be a high probability that it would pay off many fold by reducing crime and other social problems in the future." (p. 15).

Buff (2001) and Moseley (1999) agreed with the fact that children needed to be identified early and interventions needed to take place. Society pays a far greater price when dealing with delinquency and criminal behavior. Reinvesting our resources into social programs could strengthen families, reduce substance abuse, decrease poverty, and increase a spirit of community belonging. With an effective foundation in place, most schools could look toward a significant reduction in student behavioral problems.

All-day Kindergarten

All-day kindergarten was a growing concept among this district's schools. Robyn believed all-day kindergarten would benefit young children. He said half-day programs were a challenge because the children were in school for only three hours a day. They returned to the environment that may have generated the negative behavior. Each day had to be a new start.

Marty said the district did not have all-day kindergarten in each building but the schools that did have that program were fortunate. The children were in session all day

and the staff could have a greater impact on the child. He said it was hard to fit everything in to a half day. Children participated in physical education, music and art and so they were in the classroom a short amount of time.

Marty looked forward to having all-day kindergarten in the next three to five years. For his building, space to have the children in class all day was the issue. Marty would have to take over other existing space in the building and that was not possible at this time.

All-day kindergarten programs used to be universal (Reeves, 2001). The researcher said that during World War II, kindergarten programs were shortened to a half day because of a shortage of teachers and building space, and a growing birth rate.

Reeves added that by the 1960s and 1970s demand for all-day kindergarten was back largely due to programs like Head Start. Educators and lawmakers saw how children in Head Start benefited and they began to demand the same programs for all children.

Implications

A number of implications were drawn from the study. These implications were essential to successful interventions with kindergarten children. First, early intervention and positive preschool experiences are a priority. Second, money spent on quality preschool and all-day kindergarten for all children could reduce antisocial behavior in kindergarten children. Children were found to be more successful if these interventions were in place. Third, establishing quality relationships with children and families reduces occurrences of antisocial behavior. Finally, hiring and maintaining quality teachers and

administrators is a key to successful interventions over time. These have implications for children, teachers, principals, families, and society as a whole.

While these findings are important, it is also important to report what the study found to be lacking when principals work with antisocial children. The participants chosen in the study were determined to be experts in their field by their district yet there was no formal plan for dealing with a troubled child until the child was referred for services in Special Education. The principals were able to discuss a variety of interventions but did not communicate how they defined antisocial behavior nor how antisocial behavior was identified in young children. One of the principals stated that she identified the antisocial child when she saw their behavior. The principals did not appear to be “experts” in this area. This could be due to a lack of expertise or the research questions did not address the issues.

None of the principals had received any training in dealing with an antisocial child until after they were assigned to a school. The classes at their colleges and universities did not prepare the principals to work with antisocial children. The principals gained their knowledge and skills while on the job, over time, and by attending workshops. The workshops they attended were not required by the school district and may or may not have addressed how antisocial behavior is defined and identified.

The principals in the study and principals in general may be lacking skills when dealing with antisocial behavior. Principals need to review best practices regarding research based methods. Interventions are being done with antisocial children but how is success determined? Are the interventions appropriate?

Considerations for Future Research

Several recommendations merit consideration for future research. A study which could yield interesting, current and relevant information would possibly to address the following questions: What can colleges and universities do to improve preparation for new principals? How do principals in other schools within the district deal with antisocial behavior? Is there a method to define and identify antisocial behavior in other districts? What implications does the research have for mandatory all-day kindergarten? How can educators facilitate a movement toward early intervention programs to address behavior issues before a child starts kindergarten?

References

- AACAP Official Action. (1997). Practice parameters for the assessment and treatment of children and adolescents with conduct disorder. *Journal of the American Academy of Child & Adolescent Psychiatry*, 36 (supplement),122-139.
- American Psychological Association's Commission on: Violence and Youth (APA). (1993). *Psychology's response* (Vol. 1) [Summary Report]. Washington, DC.
- Barnett, S. W. (2005, September/October). Preschool education: A concept whose time has come. *Principal Magazine*, 85(1), 14-18.
- Bear, G. G. (1998). School discipline in the United States: Prevention, correction and long-term social development. *School Psychology Review*, 27(1), 724-742.
- Bear, G. G., Telzrow, C. F., & deOliveira, E. A. (1997). Socially responsible behavior. In G. G. Bear, K. M. Minke, & A. Thomas (Eds.), *Children's needs II: Development, problems, and alternatives* (pp. 51-63). Bethesda, MD: National Association of School Psychologists.
- Bodine, R. J., Crawford, D. K., & Schruppf, F. (1994). *Creating the peaceable school: A comprehensive program for teaching conflict resolution*. Champaign, IL: Research Press.
- Bodrova, E., & Leong, D. J. (2003). Playing and learning in early childhood classroom: Yes, you can have it both ways! *Instructional Leader*, 16, 6.
- Bowman, B. T., & Zvetina, D. (1992). *Social emotional readiness*. Paper presented for the National Education Goals Panel: Goal 1, Washington, DC.

- Boyd, J., Barnett, W. S., Bodrova, E., Leong, D. J., Gomby, D., Robin, K. B., & Hustedt, J. T. (2004, March). *Promoting children's social and emotional development through preschool*. New Brunswick, NJ: A Policy Report from the National Institute for Early Education Research.
- Bradley, G. (1984). Ways to help your child succeed in kindergarten. *PTA Today*, 9(6), 11-12
- Bronson, M. B. (2000). *Self-regulation in early childhood*. New York: NY: Guilford.
- Buff, L. (2001, November). Is your school a boot camp for criminals? *Principal Magazine*, 81(2), 34.
- Bully-Cummings, E. M., Gorcyca, D. G., Wriggelsworth, G. L., Schweinhart, L. J., & Pelleran, K. G. (2001). *High-quality preschool: The key to crime prevention and school success in Michigan*. A report from Fight Crime: Invest in Kids, Detroit, MI.
- Cadman, D., Boyle, M., Offor, D., Szatmari, P., Rae-Grant, N., Crawford, J., & Byles, J. (1986). Chronic illness and functional limitation in Ontario children: Findings of the Ontario Child Health Study. *Canadian Medical Association Journal*, 135, 761-767.
- Center for Early Education and Development. (2004). *Questions about kids: Is my child ready for kindergarten?* Minneapolis, MN: College of Education and Human Development, University of Minnesota.

- Center for Effective Collaboration and Practice. (2001, September). *Early warning, timely response: A guide to safe schools*. Selected Resources Reviewed. Retrieved on March 15, 2005, from <http://www.cecp.air.org/guide/annotated.asp>
- Centers for Disease Control and Prevention. (2001). School health guidelines to prevent unintentional injuries and violence. *Morbidity and Mortality Weekly Reports, 1*, 50 (No. RR-22). U.S. Department of Health and Human Services, Atlanta, GA.
- Chandler, M. (1973). Egocentrism and antisocial behavior: The assessment and training of social perspective-taking skills. *Developmental Psychology, 9*, 326-332.
- Chesapeake Institute. (1994, September). *National agenda for achieving better results for children and youth with serious emotional disturbance*. Washington DC: Department of Education, Office of Special Education and Rehabilitative Services, Office of Special Education Programs.
- Child Trends. (2003). *Kindergarteners' social interaction skills*. Retrieved on March 15, 2005, from http://www.childtrendsdatbank.org/pdf/47_PDF.pdf.
- Coie, J. K., & Dodge, K. A. (1998). Aggression and antisocial behavior. In V. Damon & N. Eisenberg (Eds.), *Handbook of child psychology: Social, emotional, and personality development* (5th ed., Vol. 3). New York: John Wiley & Sons.
- Coleman, M., & Vaughn, S. (2000). Reading interventions for students with emotional/behavioral disorders. *Behavioral Disorders, 25*, 93-105.
- Council for Exceptional Children's 2001 Convention. (2001, April). *How teachers and paraeducators can work together to create positive learning environments:*

Teachers' and paraeducators' roles in maintaining safe and orderly schools.

Retrieved on March 29, 2006, from <http://cecp.air.org/training.pdf>

Crane, J., & Barg, M. (2003, April). Do early childhood intervention programs really work? *Coalition for Evidence-Based Policy*. Retrieved on March 27, 2006, from http://excelgov.org/admin/FormManager/filesuploading/Do_Early_Programs_Really_Work7.pdf

Cremin, L. A. (1961). *Transformation of school*. New York. Vintage Books.

Creswell, J. W. (1994). *Research design qualitative and quantitative research approaches*. Thousand Oaks, CA: Sage.

Denham, S. A., & Burton, R. (1996). A social-emotional intervention for at-risk 4-year-olds. *Journal of School Psychology, 34*(3), 225-245.

Dishion, T. A., French, D. C., & Patterson, G. R. (1995). The development and ecology of antisocial behavior. In D. Cicchetti & D. J. Cohe (Eds.), *Developmental psychopathology: Risk, disorder, and adaptation* (Vol. 2, pp. 421-471). New York: John Wiley.

Dodge, K. A. (1980). Social cognition and children's aggressive behavior. *Child Development, 51*(1), 162-170.

Dodge, K. A. (1985). Attributional bias in aggressive children. *Advances in Cognitive-Behavioral Research and Therapy, 4*, 73-110.

Dwyer, K., Osher, D., & Warger, C. (1998). *Early warning, timely response: A guide to safe schools*. Washington, DC: U.S. Department of Education.

- Dwyer, K. (1999). Children killing children: Strategies to prevent youth violence. *Communique: National Association of School Psychology, Special Edition*, 1-5.
- Egertson, H. A. (1987). *The shifting kindergarten curriculum*. ERIC Digest: ERIC Clearinghouse on Elementary and Early Childhood Education, Service. Eric Document Reproduction Service No. ED 293 630.
- Eisenberg, N., & Mussen, P. H. (1989). *The roots of pro social behavior in children*. New York: Cambridge University Press.
- Elam, S. M., Rose, L. C., & Gallup, A. M. (1996, September). The 28th annual Phi Delta Kappa/Gallup poll of the public's attitudes toward the public schools. *Phi Delta Kappan*, 41-58. Retrieved on March 27, 2006, from www.pdkintl.org/kappan/kpoll281.htm
- Elkind, D. (1986, May). Formal education and early childhood education: An essential difference. *Phi Delta Kappan*, 67(9), 631:636.
- Farrington, D. P. (1987). Early precursors of frequent offending. In J. Q. Wilson & G. C. Loury (Eds.), *Families, schools, and delinquency prevention* (pp. 27-50). New York: Springer-Verlag.
- Froebel, F. (1885). *The education of man* (translated by J. Jarvis). New York: Lovel.
- Froebel Web. (1826). *The education of man: Extracts and quotes*. Retrieved on June 6, 2004, from [Http://www.geocities.com/Athens/Forum/7905/web7000.html](http://www.geocities.com/Athens/Forum/7905/web7000.html)
- Goleman, D. (1995). *Emotional intelligence*. New York, Bantam.

- Grosenick, J. K., & Huntze, S. L. (Eds.). (1984). *National needs analysis in behavior disorders: Positive alternatives to disciplinary exclusion*. Columbia, MO: University of Missouri, Department of Special Education.
- Hartup, W. W. (1991). *Having friends, making friends, and keeping friends: Relationships as educational contexts*. Center for Early Education and Development.
- Hawkins, J. D., Doueck, H. J., & Lishner, D. M. (1988). Changing teaching practices in mainstream classrooms to improve bonding and behavior of low achievers. *American Educational Research Journal*, 25(1), 31-50.
- Hergert, L. F. (1991). School resources for at-risk youth. *Equity & Excellence*, 25, 10-15.
- Horn, W. F. (2003). Improving head start: A common cause. *Head Start Bulletin*, 76, 2-4.
- Institute of Medicine. (1987). *Research on children and adolescents with mental, behavioral and developmental disorders*. Washington, DC: National Academy Press.
- Jolivet, K., Stichter, J., Nelson, C., Scott, T., & Liaupsin, C. (2000). *Improving post-school outcomes for students with emotional and behavioral disorders* [On-line]. ERIC Digests. Retrieved on January 20, 2006, from <http://www.ed.gov/databases/ERIC-Digests/ed447616>. Html.
- Kagan, A. L., Moore, E., & Bredekamp, S. (Eds.). (1995). *Restructuring children's early learning and development: Toward shared beliefs and vocabulary*. Washington, DC: National Education Goals Panel.

- Kazdin, A. E. (1987, September). Treatment of antisocial behavior in children: Current status, future directions. *Psychology Bulletin*, *102*(2), 187-203.
- Kazdin, A. E. (1993). Treatment of conduct disorder: Progress and directions in psychotherapy research. *Development and Psychotherapy*, *5*, 277-310.
- Kazdin, A. E. (1995). *Conduct disorders in childhood and adolescence*. Thousand Oaks, CA: Sage.
- Ladd, G., Birch, S., & Buhs, E. (1999). Children's social and scholastic lives in kindergarten: Related spheres of influence? *Child Development*, *70*(6), 1373-1400.
- LaForge, A. E. (1999). *What really happens in school: A guide to your child's emotional, social, and intellectual development, Grades K-6*. The Scholastic Store. Retrieved on March 28, 2006, from www.scholastic.com/familymatters/raisingkids/gifted.htm
- LeCompte, M. D. (1980). The civilizing of children: How young children learn to become students. *Journal of Thought*, *15*(3), 105-127.
- Lipsey, M. W., & Derzon, J. H. (1998). Predictors of violent or serious delinquency in adolescence and early adulthood: A synthesis of longitudinal research. In R. Loeber & D.I.P. Farrington (Eds.), *Serious & violent juvenile offenders: Risk factors and successful interventions* (pp. 86-105). Thousand Oaks, CA: Sage.
- Maccoby, E. E. (1992). The role of parents in the socialization of children: An historical overview. *Developmental Psychology*, *28*(6), 1006-1017.

- Marshall, J. (2000). *Investing in early life to prevent crime: The opportunities and the challenges*. Retrieved on March 28, 2006, from www.aic.gov.au/conferences/criminality/marshalj.pdf
- McCord, J. (1993). Conduct disorder and antisocial behavior: Some thoughts about processes. Special Issue: Toward a developmental perspective on conduct disorder. *Development & Psychopathology*, 5(1-2), 321-329.
- McCord, J., & Tremblay R. (1992). *Preventing antisocial behavior: Interventions from birth through adolescence*. New York, NY: Guilford.
- Mendel, R. A. (2000). *Less hype, more help: Reducing juvenile crime, what works and what doesn't*. Washington, DC: American Youth Policy Forum.
- Merriam, S. B. (1998). *Case study research in education: A qualitative approach*. San Francisco: Jossey-Bass.
- Miranda, J., Hohmann, A. A., & Atkisson, C. C. (1994). *Epidemiology of mental disorders in primary care* (pp. 3-15). San Francisco, CA: Jossey Bass.
- Moffit, T. (1994). Adolescence-limited and life course-persistent antisocial behavior: A developmental taxonomy. *Psychology Review*, 100, 674-701.
- Moseley, S. (1999). *Antisocial behavior in youth: Causes, consequences and interventions. An Extended Essay*. Eugene, OR: [on-line] ERIC Digests. Retrieved on July 1, 2005, from http://www.eric.uoregon.edu/trends_issues/safety/Moseley.html.

- Mrazek, P., & Haggerty R. (Eds). (1994). *Reducing risks for mental disorders: Frontiers for preventative intervention research*. Washington, DC: National Academy Press.
- National Education Goals Panel. (1994). *Data volume for the national education goals report: National data* (Vol. 1). Washington, DC: Author.
- Nelson, C. (2000). Educating students with emotional and behavioral disabilities in the 21st century: Looking through windows, opening doors. *Education and Treatment of Children, 23*, 204-222.
- Oden, S., Schweinhart, L. J., Weikart, D. P., Marcus, S. M., & Xie, Y. (2000). *Into adulthood: A study of the effects of Head Start*. Ypsilanti, MI: High/Scope Educational Research Foundation.
- Offord, D. (1987). Prevention of behavioral and emotional disorders in children. *Journal of Child Psychology, Psychiatry, 28*(1), 9-19.
- Olsen, D., & Zigler, E. (1989). An assessment of the all day kindergarten movement. *Early Research Quarterly, 4*(2), 167-186.
- Patterson, G. R., DeBaryshe, B. D., & Ramsey E. (1989). A developmental perspective on antisocial behavior. *American Psychology, February; 44*(2), 329-35.
- Patterson, G. R., & Fleishman, M. J. (1979). Maintenance of treatment effects: Some considerations concerning family systems and follow-up data. *Behavioral Therapy, 10*, 168-185.
- Patterson, G. R., Reid, J. B., & Dishion, T. J. (1992). *Antisocial boys*. Eugene, OR: Castalia.

- Pellegrini, A. D., & Glickman C. D. (1990, May). Measuring kindergartners' social competence. *Young Children*. ERIC Document Reproduction Service No. ED 327 314.
- Pryer, W. (1999, November). Naughty children become troubled teens: A study. *Today's News*. Retrieved on March 28, 2006, from www.theage.com/au/news/19991119/A51023-1999Nov.18htm
- Rimm-Kaufman, S., Pianta, R. C., & Cox, M. (2000). Teachers' judgments of problems in the transition to school. *Early Childhood Research Quarterly*, 15(2), 147-166.
- Reeves, T. A. (2001). All-day kindergarten crucial, says child development expert. *The Detroit News*. Retrieved on March 3, 2001, from <http://detnews.com/2001/schools/0103/03/schools-194865.htm>
- Reid, J. B. (1993). Prevention of conduct disorder before and after school entry: Relating interventions to developmental findings. *Development & Psychopathology*, 5, 243-262.
- Richie-Sharp, S. A. (1999-2000). *The history of kindergarten*. Froebel Web. An Online Resource. Retrieved on June 1, 2004, from [HTTP://www.geocities.com/froebelweb/web2003.html](http://www.geocities.com/froebelweb/web2003.html).
- Rosell, J. (1986, November). *An analysis of school district policies for disciplinary action with handicapped students*. Unpublished manuscript, Behavior Disorders Conference.

- Skiba, R., & Peterson, R. (1999). The dark side of zero tolerance: Can punishment lead to safe schools? Online Article, *Phi Delta Kappan International*. Retrieved on September 3, 2005, from www.pdkintl.org/kappan/kski9901.htm
- Simcha-Fagan, O., Langner, T., Gersten, J., & Eisenberg, J. (1975). *Violent and antisocial behavior: A longitudinal study of urban youth (OCD-CB-480)*. Unpublished report, Office of Child Development. Retrieved on March 27, 2006, from www.ijbct.com/IJBCT-2-1-PDF
- Strain, P. S., Lambert, D., Kerr, M. M., Stragg, V., & Lenker, D. (1983). Naturalistic assessment of children's compliance to teacher's requests and consequences for compliance. *Journal of Applied Behavior Analysis*, *16*, 234-249.
- Strain, P. S., & Timm, M. A. (2001). Remediation and prevention of aggression: An evaluation of the RIP Program over a quarter century. *Behavioral Disorders*, *26*(4), 297-313.
- Termine, L. J. (1997). *Integrating prosocial skills in preschool and kindergarten education* (Termine.com). Retrieved on February 15, 2006, from www.termine.com/getfa.cfm?fa+26
- Tremblay, R. E. (2000). The development of aggressive behavior during childhood: What have we learned in the past century? *International Journal of Behavioral Development*, *24*(2), 129-141.
- U.S. Department of Health & Human Services. (2005). *Improving head start*. Retrieved on January 8, 2006, from <http://www.acf.hhs.gov/programs/hsb/budget/index.htm>.
- Walker, H. M. (1995). *The acting out child*. Longmont, CO: Sopris West.

- Walker, H. M., Colvin, G., & Ramsey, E. (1995). *Antisocial behavior in school: Strategies and best practices*. Pacific Grove, CA: Brooks/Cole.
- Walker, H. M., Kavanaugh, K., Stiller, B., Golly, A., Severson, H. H., & Feil, E. (1998). First steps to success: An early intervention approach for preventing school antisocial behavior. *Journal of Emotional and Behavioral Disorders*, 6(2), 66-80.
- Watson, B. (1997a). *Froebel gifts and blocks*. Retrieved on May 4, 2004, from www.geocities.com/athens/forum//7905/fblgaben.html.
- Watson, B. (1997b). *Kindergarten* (bruce.watson@mailcity.com). Retrieved on May 4, 2004, from www.geocities.com/athens/forum7905/fblkind.html.
- Webster-Stratton, C. (1990). Long-term follow-up of families with young conduct-problem children: From preschool to grade school. *Journal of Clinical Child Psychology*, 19(2), 144-149.
- Wentzel, K. R. (1991). Social competence at school: Relationships between social responsibility and academic achievement. *Review of Educational Research*, 61(1), 1-24.
- West, J., Denton, K., & Reaney, L. M. (2001). *The kindergarten year: Findings from the early childhood longitudinal study kindergarten class of 1999-1999*. Washington, DC: US Department of Education, National Center for Education Statistics.
- Zahn-Waxler, C., Radke-Yarrow, M., & King, R. A. (1979). Child rearing and children's prosocial initiation toward victims of distress. *Child Development*, 50(2), 319-330.

Zill, N., Collins, M., West, J., & Germino-Hausken, E. (1995). *Approaching kindergarten: A look at preschoolers in the United States* (NCES 95-280). Washington, DC: U.S. Department of Education, U.S. Government Printing Office.

APPENDIX A
Research Questions

Research Questions

The following research questions were drawn from the literature and were used to guide the study:

1. What are the social and emotional expectations of children entering kindergarten?
2. How is antisocial behavior defined?
3. How is antisocial behavior identified in young children?
4. Are there programs available which have proven to positively impact social development thus reducing or eliminating antisocial behavior?
5. What information/skills are needed by elementary principals in order to reduce or eliminate antisocial behavior?

APPENDIX B

Interview Guide

Demographic Questions

Interview Guide

1. Tell me about one or two of your successful experiences dealing with antisocial behavior in a kindergarten child.
2. How do you identify children who demonstrate antisocial behavior?
3. What interventions have you tried?
4. Which interventions were successful?
5. Do you think the interventions provided made a difference in a child's behavior as the child progressed in school?
6. Describe any special training or education you have had which helped you deal with children who demonstrate antisocial behavior in kindergarten.
7. What do you think principals need to know or do in order to impact children in a positive manner?
8. How could a principal enhance their skills in dealing with these children?
9. Are their resources available to help principals?
10. Is there anything more you would like to share?

Demographic Questions

1. How many years of experience have you had in education?
2. How many years of experience have you had as a principal?
3. How many years have you served as a principal in this building?
4. What is your degree status?
5. Have you had any specific training that enables you to work more effectively with children demonstrating antisocial behavior?

APPENDIX C

Initial Introductory Letter

1604 N. 212th St.
Elkhorn, NE 68022
April 5, 2005

To Whom It May Concern:

I would like to take this opportunity to introduce myself. I am an elementary principal with the Elkhorn Public Schools. I am also a doctoral student in the process of finishing my program at UNL. I have chosen to research antisocial behavior in kindergarten children, specifically successful interventions as reported by other elementary principals.

As you know, you have been selected by your school district and have been asked to participate in my research. This will require approximately 1 hour of your time participating in an audio taped interview about successful interventions you have had with one or two of your students. The interview will take place at your convenience and at your school. Your identity will remain confidential and the tapes will be erased after transcription.

Your information may add to the existing research on dealing with antisocial behavior in young children as they enter school for the first time. This information could potentially impact children, parents, teachers, and other administrators.

Please review the enclosed information regarding the interview questions, demographic questions and the Informed Consent form. I will be contacting you soon to confirm your participation in the research and to set up a time for the interview.

Feel free to contact me at 402-289-2602 with any questions.

Thank you in advance and I look forward to meeting you.

Sincerely,



Audre Zaroban

APPENDIX D

Informed Consent Form



IRB#2005-03-267 EX Date Approved: 4/22/05 Valid Until: 4/21/06
--

COLLEGE OF EDUCATION AND HUMAN SCIENCES
 Department of Educational Administration

INFORMED CONSENT FORM

Addressing Antisocial Behavior in Kindergarten Children: Successful Interventions Reported by Elementary Principals in a Midwestern School District.

This is a request for your assistance with my dissertation research. The purpose of this research is to examine selected elementary principals' experiences with one or two kindergarten children who demonstrated serious antisocial behavior and subsequent interventions that were successful. You are invited to participate in this study because you are an elementary principal who has been referred by administrators at the Central Office based on your experiences with antisocial behavior and kindergarten children.

Participation in this study will require a face-to-face interview taking approximately 1 hour. The interview will be at your building and will be audiotape with your permission. I will also take notes during the interview. Your identity will remain confidential and the tapes will be erased after transcription. There are no known risks or discomforts associated with participation in the research.

A follow-up phone call will take place shortly after the interview to answer any questions you may have and to ask if you have further information for the good of the study.

You may find the interview insightful as you reflect on your skills, experiences and successes. Your information may add to the existing research, which could positively impact children, parents, teachers, and other administrators.

Written information obtained during this study, which could identify you, will be kept strictly confidential. Some demographic questions will be asked such as: years of experience in education, years of experience as a principal, degree status, specialized training, etc. The data will be stored in a locked cabinet in my office and will only be used by me during the study. Written information will be destroyed after a 3-year period.

The information obtained in this study may be published in scientific journals or presented at scientific meetings but the data will be reported using confidential coding.

If you have any questions please contact me at work (402) 289-2602 or at home (402) 763-9430. You can also contact the secondary investigator at (402) 472-0970. If you have any questions about your rights as a research participant that have not been answered by the investigator, or to report any concerns about the study, you may contact the University of Nebraska-Lincoln Institutional Review Board at (402) 472-6965.

Your participation is voluntary and you may choose to withdraw at any time without adversely affecting your relationship with your school, your school district, the University of Nebraska-Lincoln or me. Your decision will not result in any loss of benefit to which you are otherwise entitled.

Thank you in advance for considering participation in this study.

Consent, Right to Receive a Copy:

You are voluntarily making a decision to participate in this research study. Your signature certifies that you have decided to participate having read and understood the information presented. You will be given a copy of this consent form to keep.

_____ Check here if you agree to be audiotaped during the interview.

 Signature of Research Participant

 Date

Audre Zaroban, Principal Investigator
 Dr. Donald Uerling, Secondary Investigator

APPENDIX E
IRB Authorization Letter



RESEARCH COMPLIANCE SERVICES
Institutional Review Board

April 22, 2005

Audre Zaroban
Dr. Donald Uerling
1604 N. 212th Street
Elkhorn, NE 68022

IRB# 2005-03-267 EX

TITLE OF PROJECT: **Addressing Antisocial Behavior in Kindergarten Children: Successful Interventions Reported by Elementary Principals in a Midwestern School District**

Dear Audre:

This letter is to officially notify you of the approval of your project by the Institutional Review Board (IRB) for the Protection of Human Subjects. This project has been approved by the Unit Review Committee from your college and sent to the IRB. It is the Board's opinion that you have provided adequate safeguards for the rights and welfare of the participants in this study. Your proposal seems to be in compliance with this institution's Federal Wide Assurance 00002258 and the DHHS Regulations for the Protection of Human Subjects (45 CFR 46) and has been classified as exempt.

Date of EX Review: 03/16/05

You are authorized to implement this study as of the Date of Final Approval: 04/22/05. This approval is Valid Until: 04/21/06.

1. Enclosed is the IRB approved Informed Consent form for this project. Please use this form when making copies to distribute to your participants. If it is necessary to create a new informed consent form, please send us your original so that we may approve and stamp it before it is distributed to participants.

This project should be conducted in full accordance with all applicable sections of the IRB Guidelines and you should notify the IRB immediately of any proposed changes that may affect the exempt status of your research project. You should report any unanticipated problems involving risks to the participants or others to the Board. For projects which continue beyond one year from the starting date, the IRB will request continuing review and update of the research project. Your study will be due for continuing review as indicated above. The investigator must also advise the Board when this study is finished or discontinued by completing the enclosed Protocol Final Report form and returning it to the Institutional Review Board.

If you have any questions, please contact Shirley Horstman, IRB Administrator, at 472-9417 or email at shorstman1@unl.edu.

Sincerely,

Dan R. Hoyt, Chair
for the IRB

Shirley Horstman
IRB Administrator

cc: Faculty Advisor

APPENDIX F

External Audit Attestation

March 4, 2006

I audited the dissertation of Audre Zaroban by reading her manuscript and comparing her results with transcripts of the six interviews that she conducted. My findings indicate that the results reported in Audre Zaroban's dissertation reflect the substance of her interviews.

Barbara L. Brock, Ed.D.
Associate Professor
Education Department
Creighton University
Omaha, Nebraska