THE SELF-CONCEPT OF LEARNING DISABLED STUDENTS IN TWO DIFFERENT SERVICE DELIVERY MODELS

by

H. N. ELKSNIN

Approved:

W. T. Knipes
Chairman, Thesis Committee

James R. Deni
Associate Professor of Psychology

Joyce G. Grunch
Chairman, Department of Psychology

Ron Tutto
Associate Professor of Counselor Education
and Research, Acting Dean of the Graduate School

APPALACHIAN STATE UNIVERSITY

BOONE, NORTH CAROLINA

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A THESIS SUBMITTED IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE DEGREE OF MASTER OF ARTS

H. N. ELKSNIN

JULY, 1979

ABSTRACT

This study compared the self-concept of twenty-eight learning disabled students receiving resource room services with twenty-eight learning disabled students receiving itinerant services.

It was hypothesized that there would be no statistically significant difference between children receiving resource services vs. itinerant services in mean total scores and mean cluster scores on the Piers-Harris Children's Self-Concept Scale. As a group, learning disabled children receiving resource services had significantly higher total self-concept and significantly higher self-concept in the areas of Behavior and Happiness and Satisfaction than children receiving itinerant services. It was suggested that the level of services that a learning disabled child received had a significant relationship with the child's self-concept.

ACKNOWLEDGEMENTS

The writer would like to express his grateful appreciation to his committee chairman, Dr. Tom Snipes, for his assistance and encouragement; to Dr. Ron Tuttle, for his statistical knowledge; and to Dr. Jim Deni, for his interest and discussion. The writer also wishes to thank Dr. Michael Coleman, for his initial input; Mr. Jack R. Bowdre, for his invaluable advice; Mr. David N. Dunn, for his editing skills; and the personnel of the Halifax County and South Boston City School System, for their cooperation.

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CHAPTER I

INTRODUCTION

One of the areas of inquiry which educators have been examining more seriously is the relationship of how a student's feelings about himself influence his performance in school. Much of the discussion appears common-sensical as Purkey (1970) indicates: "For years, wise teachers have sensed the significant and positive relationship between a student's concept of himself and his performance in school" (p. 14). Purkey's (1970) review of the relevant literature suggests

> Although the data do not provide clear-cut evidence about which comes first--a positive self-concept or scholastic success, a negative self-concept or scholastic failure--it does stress a strong reciprocal relationship and gives us reason to assume that enhancing the self-concept is a vital influence in improving academic performance (p. 27)

"Hard data" as it relates to self-concept research is limited, generally as a result of the difficulty of the constructs involved. Wylie (1974) in a definitive review of methodology and instruments relevant to self-concept research suggests numerous problems. More recently Shavelson, Hubner & Stanton (1976) describe the problems as threefold. First, the definition of self-concept appears to vary from

study to study, resulting in much imprecision. It appears that there could be as many as seventeen different conceptual dimensions to define self-concept. Second, the wide variety of self-concept instruments do not facilitate comparisons of either populations or situations, thus limiting the ability to make generalizations. Third, interpretation of data is difficult in that there are limits to inferential data when dealing with personality variables.

Self-concept research as it relates to handicapped children has generally been diverse and inconclusive. Concerns such as labeling (Jones, 1972, 1974; MacMillian, Jones & Aloia, 1974), peer status (Bruiniks, 1978), ability grouping (Mann, 1960), reading (Wattenberg & Clifford, 1964), and mentally retarded students (Johnson, 1962; Meyerowitz, 1962; Carroll, 1967; Collins, Burger & Doherty, 1970; Rouse, 1973; Lawrence & Winschel, 1973; Kahn & Garrison, 1974; Haring & Krug, 1975), have been investigated.

Self-concept studies dealing specifically with the learning disabled have compared LD students with normal students (Black, 1974; Leviton & Kiracy, 1975; Gearhart et al., 1977; Tolor, Tolor & Blumin, 1977; Chapman & Boersma, 1979), regular programs with resource programs (Rust, Miller, & Wilson, 1978), LD students mainstreamed into regular programs (Ritter, 1978), students receiving resource services (Scheare, 1978), and students in self-contained classes (Rogers, Smith, & Coleman, 1978).

Even when considering the problems inherent in self-concept research, the question may be more of focus. As MacMillian, Jones and Aloia (1974) suggest,

> In the present context, however, the critical point is not whether the student was enrolled in a regular or special program, but what transpired in the program which might be construed as beneficial or harmful (p. 250).

With this in mind, the present study was designed to compare the self-concept of learning disabled students receiving resource room services with learning disabled students receiving itinerant services. Previous investigations have generally been descriptive, in that they compare normal students and LD students, or the characteristics of students in resource or self-contained situations. The present study was designed to investigate the relationship between the level of services a LD child receives and his self-concept.

Hypotheses for the study, using the Piers-Harris Children's Self-Concept Scale (P-H) as the measuring instrument, were based partially on studies by Black (1974), Scheare (1978), and Rogers, Smith and Coleman (1978).

1. There would be no statistically significant difference between the mean total scores of children receiving resource room services and learning disabled children receiving itinerant services.

2. There would be no statistically significant difference between the mean cluster scores (Factors I-VI) of learning disabled children receiving resource room services and learning disabled children receiving itinerant services.

CHAPTER II

REVIEW OF THE LITERATURE

The studies in this review of the literature were either generally concerned with the investigation of the self-concept of mentally retarded students in different educational settings or with the self-concept of the learning disabled.

One of the earlier self-concept studies was by Mann (1960). In a very simple study of the effects of ability grouping on self-concept, he had 102 fifth graders answer a short questionnaire concerning how they felt about their present class groupings. The students had been grouped into four different ability groups upon entrance to the first grade, based upon group intelligence and reading readiness test scores. Comparing responses of the top vs. the bottom group, it was revealed that both groups identified themselves by their grouping. The top group made no negative responses relating to their group, whereas the entire bottom group responded negatively with respect to their grouping. It was concluded that the negative attitudes could be avoided by abandoning the practice of ability grouping.

Johnson (1962), based on his review of the research dealing with the mentally handicapped, concluded that the

mentally handicapped child was generally not accepted by his peers in the regular classroom, though he was overwhelmingly more accepted by his peers in special classes. Johnson indicated at this early date that what transpired in the educational program is of importance.

> The general objectives of personal, social, and economic development and adjustment are fairly universally accepted as realistic and practical for the mentally handicapped. That is, education can and should promote their personal adjustment so they will be capable of solving problems and frustrations with emotions they can understand and effectively control. They should be taught social skills and be able to handle situations involving interpersonal relationships in an acceptable manner (p. 63).

Meyerowitz (1962) randomly selected 120 beginning first grade students screened and identified as educable mentally retarded and assigned half of them to four special education classes. The remaining students were allowed to remain in their regular program classes. Sixty normal first graders were then randomly selected to act as a control group. At the end of the school year, all 180 students were administered the Illinois Index of Self-Derogation (experimental form) to measure their self-concept. Educable mentally retarded students, as a group, had a significantly lower self-concept, though the special class students exhibited a significantly lower self-concept than the students remaining in the regular program. No mention was made as to the type of services that the EMR students in regular classes received.

Collins, Burger and Doherty (1970) compared the self-concept of forty-two educable mentally retarded adolescents attending a special education school with forty-nine normal adolescents attending high school in the same middle class suburban St. Louis County, Missouri school system. Tennessee Self-Concept Scale (Fitts, 1965) results suggested that retarded and normal adolescents as a group had low self-esteem and a negative self-perception. Scores for the two groups were similar on four of nine subtests, while EMR adolescents were significantly lower on five of nine subtests. It was concluded that EMR students generally scored lower on self-concept. No conclusions were suggested as to the possible relationship of the type of educational program the students were receiving and their self-concept.

Lawrence and Winschel (1973), in an extensive review of self-concept and the mentally retarded, suggested that:

> The weight of their evidence suggests that likelihood of differences in self-concept between normal and educable retarded children. . .segregation does not appear to contribute to positiveness of self-concept among the retarded, and greater degrees of segregation may be relatively less positive in effect (p. 314-315).

In an attempt to study the effect of the particular educational program, Carroll (1967) studied the academic achievement and self-concept of thirty-nine elementary, educable mentally retarded students in a suburban Denver, Colorado school system. Twenty of the students were enrolled in self-

contained classes, while nineteen students were in segregated classes half-time and regular classes the other half (resourced). All students were administered the Illinois Index of Self-Derogation (Goldstein, 1964) and the Wide Range Achievement Test at the beginning and end of the school year. Low scores on the IISD were assumed to indicate a more positive self-concept. Pre/post test scores suggested significant increases in reading and self-concept of the resourced students as compared with the self-contained student. Resourced students had increases in achievement and self-concept, whereas the self-contained students had increases in achievement but a decrease in self-concept over the year. It was concluded that the type of educational program offered students could make a significant difference in their feelings about themselves and resulting self-concept.

Kahn and Garrison (1974) investigated the self-concept of thirty-one self-contained educable mentally retarded adolescents receiving resource services. The students were matched for age, sex, and IQ and were enrolled in inner-city Philadelphia schools. The Illinois Index of Self-Derogation (Goldstein, 1964) and the General Self-Concept of Ability Scale (Brookover, Patterson & Thomas, 1962) were administered to the students in small groups. A small, but significant correlation (+.50) between the two instruments suggested that they were measuring similar though not equivalent constructs. The resource group exhibited significantly higher

self-concept scores on the GSCA, and a similar trend was noted on the IISD. It was concluded that for this sample of students self-contained EMR classes appeared to have a detrimental effect on the student's self-concept.

The following study was included to illustrate usage of the Piers-Harris Children's Self-Concept Scale as a self-concept instrument with mentally retarded individuals.

Rouse (1973) compared sixty-six mentally handicapped students from small, rural school systems; receiving special education services in three types of classrooms. The students were distributed equally between regular, self-contained, and non-categorical classes. Evaluation instruments utilized were the Wechsler Intelligence Scale for Children, the Wide Range Achievement Test, and the Piers-Harris Children's Self-Concept Scale. With respect to the dimension of the self-concept, regular classroom mentally handicapped children scored higher than either the self-contained or non-categorical students.

Thus it would appear, based upon the literature cited, that mentally retarded children have a significantly lower self-concept than normal children; that self-contained students have a lower self-concept than resource room students; and that a variety of self-report measures of self-concept have been used with this special population.

The following studies deal specifically with the self-concept of learning disabled children.

Black (1974) selected twenty-five normal and twenty-five learning disabled students from a pool of elementary school age children who evidenced: (1) academic problems, (2) failure of at least one subject, and (3) referral for evaluation. Students were evaluated with the WISC, WRAT, and Piers-Harris Children's Self-Concept Test and then matched for age, sex, school grade and WISC Full Scale IQ. Normal readers were described as being at or above grade level on WRAT spelling and reading subtests, while learning disabled students were at least .5 years below grade level on WRAT spelling and reading. Normal students' mean WRAT scores relative to grade placement were +.42 years in reading, +.15 years in spelling, and -.10 years in arithmetic. Learning disabled mean WRAT scores relative to grade placement were -1.06 years in reading, -1.26 years in spelling, and -1.09 years in arithmetic. Black indicated that the mean self-concept percentile scores were significantly lower for learning disabled students when compared with the Piers-Harris scores for the normal group. Black concluded that learning disabled students had a more negative view of themselves and that remedial programs should take this into serious consideration.

Leviton and Kiracy (1975) selected a total of sixty-four students previously identified as learning disabled from the first, second, and third grades of a suburban Minneapolis, Minnesota school system. The students were then administered the reading vocabulary, reading comprehension, and arithmetic

problem solving sections of the 1970 Metropolitan Achievement Test along with the Instructional Objective Exchange's Self-Concept Self-Appraisal Inventory, primary level (1970). Pearson Product-Moment correlations suggested that there was no relationship between self-concept and achievement in grades one and two, though there was an inverse relationship in third grade reading vocabulary and self-concept. The authors concluded that self-concept/achievement relationship may be different for learning disabled students, as opposed to normal learners.

Tolor, Tolor and Blumin (1977) investigated the relationship between the self-concept and locus of control of twenty-eight children in grades K through three diagnosed as having significant "learning problems" as compared with twenty-eight normal children. The control group of normal children was matched by grade, sex, age, teacher and intelligence. Both groups were then administered the Primary Level Revised Self-Appraisal Inventory (Instructional Objectives Exchange, 1972) and the Preschool and Primary Internal Control Scale (Nowicki & Duke, 1974). The "problem children" scored significantly lower on self-concept than the normal children though there were no significant differences between the two groups with respect to locus of control. It was noted that there was a trend for the normal children to be more internally controlled and a more positive self-image, while the problem children were more negative in self-concept and were externally controlled.

Gearhart et al. (1977) suggested that a specialized academic program can significantly enhance a child's self-concept.

Forty first grade students identified as experiencing learning difficulties were enrolled in a Developmental Learning Program developed by Syosset, New York Public Schools. Individualized remedial prescriptions as developed by a multi-disciplinary team were implemented in the child's developmental learning center at each school. The Behavior Rating Form (Coopersmith, 1967), U Scale (Ozehosky & Clark, 1970), Pictorial Self-Concept Scale (Bolea, Felker, & Barnes, 1971), and the Syosset Self-Concept Inventory (Simon, 1974) were administered at the beginning and end of the school year to the learning difficulty group along with forty first grade students not identified as having learning problems. A comparison of beginning school year results indicated that the learning difficulty children were significantly lower on all measures of self-concept. At the end of the year there were no significant differences between groups on three or four self-concept measures, though there was a general rise in self-concept in both groups.

Rogers, Smith and Coleman (1978) compared Piers-Harris Children's Self-Concept Scores of 159 elementary underachievers enrolled in a large metropolitan school system with their relative within and between class academic achievement. The students were already receiving special education services in seventeen self-contained classes. The criteria used to place children into the special classes were similar to criteria for learning disabilities. High, medium, and low groups were determined by ranking Metropolitan Achievement Test grade

equivalent scores on Total Math and Total Reading within each class and then across classes. The ANOVA results suggested that in across class comparisons, math achievement was significantly related to self-concept. That is, within each classroom, the higher the math and reading achievement as compared to others in the class, the higher the self-concept. Cluster analysis suggested that Factor I (Behavior), Factor II (Intellectual and School Status), Factor IV (Anxiety), and Factor VI (Happiness and Satisfaction) were viable discriminants in terms of relative achievement and self-concept. It was concluded that a student's self-concept was significantly related to how he ranked academically within his respective classroom, as predicted by social comparison theory.

Scheare (1978) studied the effect of a resource model for delivery of services to learning disabled children on their self-concept and acceptance by their peers. Piers-Harris Children's Self-Concept Scores and Peer Acceptance Rating Scale (Scheare, 1975) scores of forty-one randomly selected learning disabled children in grades three through five were compared with the scores of forty-one non-learning disabled children randomly selected from the same classes. Both instruments were administered at the beginning and at the end of the school year. The results suggested that the LD group was significantly lower in self-concept and peer acceptance at the beginning and end of the school year and that the resource program did not contribute to growth in these areas.

More recently, Chapman and Boersma (1979) attempted to compare the academic self-concept of learning disabled children in grades three through six in a middle class, suburban, Canadian school system with normal children. As learning disabled children by definition are experiencing academic problems, it was felt that examining academic self-concept would be more revealing than more global self-concept measures. The learning disabled children were described as (1) being of average intelligence, (2) having a 1½ to 2½ year deficit in one or more school subjects, and (3) currently receiving resource room services one-half to one hour per day. The Student's Perception of Ability Scale (Boersma, Chapman & Maguire, 1978) results indicated that the learning disabled student's self-concept scores were significantly lower than the normal students across the dimensions of grade level, sex, and grouping.

The studies covered in the next two paragraphs were included to suggest that there are different achievement correlates related to different service delivery models.

Ritter (1978) investigated the academic achievement of twenty learning disabled students who were mainstreamed into a regular classroom following a year in a learning disabilities program. The fifteen male and five female students ranged in age from eight years, four months to twelve years, eight months and met the criteria of average to above average intelligence and at least a 1½ year deficit in either reading, spelling, or arithmetic. Academic achievement progress was assessed at the

beginning and end of each school year by the Wide Range Achievement Test. The regular classroom curriculum for the mainstreamed students was supplemented with extra help in arithmetic and reading three times a week. Ritter's comparison of pre/post test achievement between each program indicated that the learning disabled students maintained their academic progress in the regular program in arithmetic and reading, but they fell behind in spelling. It was concluded that the lack of supplemental help in spelling while in the regular program was responsible for the significantly lower rate of academic progress.

Rust, Miller and Wilson (1978) compared the academic achievement of one-hundred sixty-two children in grades two through six, who were identified as having learning problems, by randomly assigning half to either a resource room program or to one of thirteen regular classrooms. Students were administered the Metropolitan Achievement Test, Form A, appropriate to their respective grade placement at the beginning and end of the school year. Analysis of variance and a Scheffe test of multiple comparisons across pre/post MAT subtest results, grade level, sex, and program revealed no significant difference in achievement gains. It was concluded that each group made adequate academic gains, though resource room gains were only similar to, but not significantly greater than the regular classroom.

Hypotheses for the study were based on the following conclusions. Black (1974) suggested that when compared with normal students, learning disabled students had a significantly lower self-concept. In addition, Scheare (1978) found that learning

disabled children receiving resource room services had a significantly lower self-concept than normal students. Rogers, Smith and Coleman (1978) found that Factor I (Behavior), Factor II (Intellectual and School Status), Factor IV (Anxiety), and Factor VI (Happiness and Satisfaction) can be viable discriminants in terms of relative achievement and self-concept. All three studies utilized the Piers-Harris Children's Self-Concept Scale as their self-concept instrument.

Based on the results presented above, it was hypothesized that:

1. There would be no statistical difference between the mean total scores on the Piers-Harris Children's Self-Concept Scale of learning disabled children receiving resource room services and learning disabled children receiving itinerant services,

2. There would be no statistical difference between the mean cluster scores (Factors I-VI) on the Piers-Harris of learning disabled children receiving resource room services and learning disabled children receiving itinerant services.

CHAPTER III

METHOD

SUBJECTS: Subjects in the present study were elementary students (grades 1-7) presently enrolled in resource room and itinerant learning disabilities programs. There were twenty-eight students enrolled in each program. Students enrolled in the learning disabilities program meet the eligibility criteria requirements as set forth in the Regulations and Administrative Requirements for the Operation of Special Education Programs in Virginia, 1978 (See reference note 1).

The programs were administered by the Special Education Department of the Halifax County and South Boston City Public Schools. Halifax County is located in Southwest Virginia, and it is the third largest county in the state. The population, according to the 1970 census, was 36,965 (including the city of South Boston).

The itinerant and resource program service models were similar to the delivery models described in Lerner (1971) and Kirk (1972). Students in the resource room program received specialized instruction for fifty minutes a day, four days a week. Students in the itinerant service model received specialized instruction for thirty minutes a day, one day a week.

MATERIALS: The Piers-Harris Children's Self-Concept Scale (Piers, 1969) consists of 80 statements of a declarative nature (e.g., "My friends think that I have good ideas") to each of which the respondent marks yes or no. One-half of the statements are positively worded, and the remainder are negatively worded to attenuate potential acquiescent response sets. Items were orally administered, a procedure that has been suggested for administration of the Piers-Harris to the children functioning at or below the third grade level (Piers, 1969). The Piers-Harris yields a global self-concept score that may range from 0 to 80. In addition, the scale may be scored for six cluster scores, each purporting to measure one of these subdimensions of self-concept: (1) Behavior, (2) Intellectual and School Status, (3) Physical Appearance and Attributes, (4) Anxiety, (5) Popularity, and (6) Happiness and Satisfaction.

PROCEDURE: All students were administered the Piers-Harris Children's Self-Concept Scale in a two week period (last week in May, first week in June). Students included were individuals receiving learning disabilities services for a period of no less than four months.

Students were pulled from classes, either individually or in small groups, depending upon the number of children at the particular school. Before beginning the session, instructions one through five were followed as prescribed in the Piers-Harris Test Manual, (1969) (See reference note 2).

CHAPTER IV

RESULTS

It was hypothesized that there would be no statistically significant difference between the mean total scores on the Piers-Harris Children's Self-Concept Scale of learning disabled children receiving resource room services and learning disabled children receiving itinerant services. A two-tailed t-test was calculated to determine the significant difference, if any, between the total score means of each group. The difference was significant beyond the .02 level and the hypothesis was not supported. Learning disabled children receiving resource room services had a mean total score of 56.10 on the Piers-Harris, while learning disabled children receiving itinerant services had a mean total score of 48.89.

The second hypothesis was that there would be no statistically significant difference between the mean cluster scores (Factors I-VI) on the Piers-Harris of learning disabled children receiving itinerant services. A two-tailed t-test was calculated to determine the significant difference, if any, between the mean scores of each cluster. Significant score differences were found for Factor I (Behavior) at the .01 level and for Factor VI (Happiness and Satisfaction) at the .05 level. Factor II (Intellectual and School Status), while not at an acceptable level of significance, had a mean score

difference at the .10 level. Factor IV (Anxiety) also, while not at an acceptable level of significance, had a mean score difference at the .14 level. Factor III (Physical Appearance and Attributes) and Factor V (Popularity) comparisons of mean scores did not result in significant differences. The t-test comparisons are presented in Table 1.

In summary, learning disabled children receiving resource room services and learning disabled children receiving itinerant services scored significantly different on total self-concept and on Factors I and VI.

TABLE 1

t VALUE COMPARISONS BETWEEN STUDENTS RECEIVING RESOURCE ROOM SERVICES AND ITINERANT SERVICES ON THE PIERS-HARRIS CHILDREN'S SELF-CONCEPT SCALE

PIERS-HARRIS SCORES	RESOURCE MEAN	STANDARD DEVIATION (N = 28)	ITINERANT MEAN	STANDARD DEVIATION (N = 28)	t
Total Score	56.10	11.74	48.89	10.48	2.43**
Behavior	13.86	3.73	11.32	3.73	2.82***
Intellectual and School Status	11.61	3.71	9.89	3.72	1.74
Physical Appearance and Attributes	8.21	2.48	7.86	2.17	.56
Anxiety	8.50	2.44	7.57	2.25	1.50
Popularity	7.39	2.64	6.96	2.13	.67
Happiness and Satisfaction	7.18	1.52	6.14	1.88	2.26*

$p < .05$*

$p < .02$**

$p < .01$***

CHAPTER V

DISCUSSION AND CONCLUSIONS

The results did not support the hypothesis that there would be no difference in self-concept as measured by the Piers-Harris Children's Self-Concept Scale between learning disabled children receiving resource room services and learning disabled children receiving itinerant services. The following conclusions which may be drawn from the results of this study may be limited to the methods, population, and characteristics of the measuring instrument.

1. As a group, learning disabled children receiving resource room services had a significantly higher self-concept than children receiving itinerant services.
2. As a group, learning disabled children receiving resource room services had a significantly higher self-concept in the areas of Behavior and Happiness and Satisfaction.
3. As a group, learning disabled children receiving resource room services had a somewhat higher self-concept in the areas of Intellectual and School Status and Anxiety than children receiving itinerant services.
4. As a group, learning disabled children receiving resource room services did not score significantly different in the areas of Popularity and Physical Appearance and Attributes.

Thus it would appear that the level of services that a learning disabled child received had a significant relationship with the child's self-concept or how that child felt about himself. The basic difference between the amount of service and support rendered to the learning disabled child was the frequency and

duration of instruction from an individual who was qualified and endorsed to teach the learning disabled. Students in the resource room program received support on the average of fifty minutes per day, four times per week, while students in the itinerant program received instruction from the itinerant learning disabilities teacher thirty minutes a day, one time a week. The children in the resource room received approximately six times as many instructional hours as did the children in the itinerant program. It appears that additional support received on the part of the students in the resource room program would result in more success or less failure within the regular class, which would ultimately be demonstrated in their self-concept.

Children who qualify as being eligible for learning disabilities programs exhibit achievement levels significantly below their peers in the regular class who are not considered handicapped. Since their level of general intelligence is such that they are aware that their achievement is significantly below their classmates, this awareness could affect their self-concept. Scheare's 1978 study and general knowledge would support this notion.

The magnitude of the difference in self-concept scores of the students in the resource room program when compared with students in the itinerant program was significantly higher on the clusters: Behavior, Happiness and Satisfaction. Even though the scores were not significant at the .05 level, as a group the students in the resource room program scored higher on the clusters Intellectual and School Status and Anxiety than did the students

in the itinerant program. The child's self-concept might be influenced as a result of frequent one-to-one instruction from a caring, competent teacher who provides an environment and conditions which approximate a theraputic counseling relationship. Though the Rogers, Smith, and Coleman (1978) study did not focus on the teacher/student relationship, they did conclude that the Behavior, Intellectual and School Status, Anxiety, Happiness and Satisfaction cluster scores could discriminate between high, medium, and low self-concept children.

The other clusters where the magnitude of the difference was not significant: Popularity, Physical Appearance and Attributes, may not be influenced by programs which are primarily academic in nature. This would suggest that an affective component should be considered when creating programs for learning disabled children.

CHAPTER VI

APPENDIX

ITEMS IN EACH CLUSTER

Factor I
Behavior

No.	Item
22	I do many bad things.
35	I am obedient at home
25	I behave badly at home
34	I often get into trouble
14	I cause trouble to my family
78	I think bad thoughts
76	I can be trusted
80	I am a good person
12	I am well behaved in school
48	I am often mean to other people
31	In school I am a dreamer
56	I get into a lot of fights
64	I am clumsy
67	I am easy to get along with
13	It is usually my fault when something goes wrong
59	My family is disappointed in me
32	I pick on my brother(s) and sister(s)
4	I am often sad

Factor II
Intellectual and School Status

21	I am good in my schoolwork
5	I am smart
53	I am dumb about most things
70	I am a good reader
66	I forget what I learn
26	I am slow in finishing my schoolwork
30	I can give a good report in front of the class
42	I often volunteer in school
11	I am unpopular
49	My classmates in school think I have good ideas
16	I have good ideas
7	I get nervous when the teacher calls on me
27	I am an important member of my class
33	My friends like my ideas
17	I am an important member of my family
9	When I grow up I will be an important person
12	I am well behaved in school
57	I am popular with boys

Factor III

Physical Appearance and Attributes
(related also to status and popularity)

No.	Item
54	I am good looking
60	I have a pleasant face
41	I have nice hair
73	I have a good figure
29	I have pretty eyes
15	I am strong
63	I am a leader in games and sports
8	My looks bother me
27	I am an important member of my class
49	My classmates in school think I have good ideas
55	I have lots of pep
57	I am popular with boys

Factor IV

Anxiety

79	I cry easily
37	I worry a lot
74	I am often afraid
7	I get nervous when the teacher calls on me
A	Male sex
28	I am nervous
10	I get worried when we have tests in school
40	I feel left out of things
6	I am shy
8	My looks bother me
20	I give up easily
44	I sleep well at night
55	I have lots of pep

Factor V

Popularity

No.	Item
58	People pick on me
46	I am among the last to be chosen for games
3	It is hard for me to make friends
51	I have many friends
40	I feel left out of things
11	I am unpopular
1	My classmates make fun of me
49	My classmates in school think I have good ideas
33	My friends like my ideas
77	I am different from other people
57	I am popular with boys
69	I am popular with girls

Factor VI

Happiness and Satisfaction

2	I am a happy person
50	I am unhappy
39	I like being the way I am
43	I wish I were different
52	I am cheerful
59	My family is disappointed in me
8	My looks bother me
38	My parents expect too much of me
36	I am lucky

CHAPTER VII

REFERENCE NOTES

1. "Specific learning disability" means a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which may manifest itself in an imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations. The term includes such conditions as perceptual handicaps, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. The term does not include children who have learning problems which are primarly the result of visual, hearing, or motor handicaps, of mental retardation, or emotional disturbance, or of environmental, cultural, or economic disadvantage.

2. Before distributing the scale, the examiner should talk to the students about the value of finding out how boys and girls really feel about themselves, in order to help them, and the necessity, therefore, for a completely honest response rather than a socially desirable one. This could be phrased as "answer the items as you really feel you are, not as you think you ought to be." It should be stressed that this is not a test, that there are no right or wrong answers, that results will not affect their school grades and that they will be kept confidential (if this is at all possible).

   When the scale is distributed, the examiner should check to make sure every child has a pencil and then show the class where and how to fill out the identifying data. He should then have them turn to the instructions and read these aloud.

   It should be stressed that the students should circle either yes or no for all items. There should be no omissions and no double circles, even if some items are hard to decide. It has been found helpful to have a proctor go up and down the aisles to make sure all children are marking the items correctly and keeping up with the examiner.

   (For Grade 6 and below) The examiner should read each item clearly twice without haste, but not so slowly that second thoughts or distractions will occur. After a few items, the examiner can usually determine the optimal pace for that group. A few moments can be given at the end for slower members to finish.

One or two words in the scale may be difficult for younger groups (i.e., unpopular) but have been retained in that form to eliminate a double negative. These may be defined. It is also permissible to answer one or two questions at the beginning, particularly with reference to the all-or-none quality of the items. It should be explained that it is recognized that everyone feels differently at different times in different situations, but that they should mark the item the way they generally feel.

Additional questions are usually unnecessary and should be discouraged.

CHAPTER VIII

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