

Interdisciplinary Social Work Journal

Volume 1 Summer 2005

Issue 1 Number 1

Article 3

2005

Teachers' Strategies in The Identification, Change and Retention of Deviant Students

Abdul K. Bangura

Ngozi C. Kamalu

Follow this and additional works at: <http://digitalcommons.uncfsu.edu/iswkj>

Recommended Citation

Bangura, Abdul K. and Kamalu, Ngozi C. (2005) "Teachers' Strategies in The Identification, Change and Retention of Deviant Students," *Interdisciplinary Social Work Journal*: Vol. 1: Iss. 1, Article 3.
Available at: <http://digitalcommons.uncfsu.edu/iswkj/vol1/iss1/3>

This Article is brought to you for free and open access by the College of Arts and Sciences at DigitalCommons@Fayetteville State University. It has been accepted for inclusion in Interdisciplinary Social Work Journal by an authorized administrator of DigitalCommons@Fayetteville State University. For more information, please contact xpeng@uncfsu.edu.

Teachers' Strategies in The Identification, Change and Retention of Deviant Students

Abdul Karim Bangura and Ngozi Caleb Kamalu

This paper is about assisting teachers to identify and help to change and retain deviant students. The major focus is on the instruction and training of teachers on how alcohol and drugs affect a person's body and behavior, and the effective methods for helping to change that behavior. In order to accomplish this objective, the paper is divided into the following separate, but interrelated, sections: introduction: teachers can make a difference; a theoretical reverberation on alcohol, drugs and deviant behavior; the physiology of alcohol and drug abuse; politeness strategies for communicating with deviant students; the teacher as decision-maker; the teacher as leader; the teacher as conflict resolver; then conclusion.

Introduction: Teachers Can Make a Difference

In recent years, millions of Americans have become more health-conscious and have adopted lifestyles that acknowledge the value of exercise, stress-reduction, and sound diet in creating and maintaining rich and fulfilling lives. Trends in alcohol use mirror this development, as many people now choose to drink more moderately or not at all. Changing social attitudes are also reflected in the increasing popularity of alternative nonalcoholic beverages.

But these changes are not confined to the personal; they extend into the social realm as well. Public awareness of the social impact of alcohol and drug abuse problems is at an all-time peak. A good illustration of this is the rise of grassroots organizations devoted to combating the problem of drunk and drugged drivers. The vitality of such organizations represents an unprecedented level of public commitment to the reduction of needless alcohol and drug-related deaths and

injuries.

Unfortunately, this level of commitment does not exist in institutions of higher learning. For many teachers, the problem of deviant students is the sole domain of the counseling department. And these teachers are quite correct, because they are neither trained to detect the tell-tale signs of such behavior in order to refer students to trained counselors nor trained to deal with such students. For some teachers, by the time they link up deviant students with trained counselors, it is often too late to change these students' behavior and retain them.

Since students interact with teachers more frequently than they do with other personnel at their institutions, teachers are therefore in a better position than other personnel to identify and help change students' behavior before they drop out. The least teachers can do when they detect tell-tale signs of alcohol and/or drug abuse is to ensure that the students concerned see counselors as soon as possible.

R. Cressey. (1978). *Principles of Criminology* 10th ed. Philadelphia: Lippincott.

Abdul Karim Bangura. is from American University
Ngozi Caleb Kamalu, Ph.D. is Professor of Political Science, Department of Government and History, Fayetteville State University Correspondence may be addressed to Dr. Abdul Karim Bangura, American University

A Theoretical Reverberation on Alcohol, Drugs and Deviant Behavior

Beer makes him cease being a man. It causes your soul to wander, and you are like a crooked steering-oar in a boat that obeys on neither side. (Anastasi Papyrus IV, ca. 1500 BC).

As the preceding excerpt suggests, our ancestors in prehistory quickly noted that a person did many things less well drunk than sober. The quotation from the Egyptian teacher to his pupil clearly emphasizes the point that drunkenness is a deviant behavior.

Yet, it is impossible to expect everyone to abstain from alcohol and drugs or to conform totally to every social expectation at every point in their lives. Instead, a certain amount of deviance is inevitable in any social system. This is especially the case in a complex social system such as an educational institution where many different agents socialize with one another, and individuals play multiple and sometimes conflicting roles. Thus, each individual is always under some degree of role strain.

Accepting the reality that some deviance is inevitable, however, leaves unanswered at least two important questions: (1) Why does Student X commit a relatively serious deviant act and not Student Z? (2) What determines whether Student X's relatively serious deviant act will be recognized and acknowledged as such by others? These questions lead us to the discussion that follows in the rest of this section. We shall examine earlier and contemporary theoretical propositions that sought to provide answers to these difficult questions.

The Early Religious Theory

The earliest and most long-lived theory was that the deviant was possessed by the *devil*. Depending on the particular religious policy of the times or society, a deviant might be dealt with by *exorcism* or in some cases by *public execution*. But by the nineteenth century, *supernatural* explanations began to give way to *scientific* ones. The first of these explanations were the biological ones.

Biological Theories

The first theoretical postulate using a biological explanation for deviance was that of Cesare Lombroso, a pioneer Italian criminologist. According to him, criminal deviance was the result of inherited biological abnormalities, which also manifested themselves in such *primitive* facial features as protruding jaw and large ears. The *born* criminal, he suggests, could be recognized by such abnormalities (Mannheim 1965). Despite the fact that biological theories of this nature were dismissed decades ago, they have managed to resurface in recent times.

Some observers propose that deviant behavior in males hinges on an extra male chromosome that makes the individual an *XYZ* type rather than the normal male *XY*. A United States Public Health survey of 1970, for example, suggests that the *XYZ* abnormality is four times more common in male criminals than in males in general. But the percentages in both cases are so negligible that a causal relationship cannot be inferred between chromosomes and crime.

Other observers have posited that alcoholism and other forms of drug addiction are *physiological* needs, in efforts to lend credence to the biological

postulate. However, these scholars fail to tell us just how these physiological needs develop in some human beings and not in others.

In recent years, researchers from the University School of Medicine in Trieste, Italy, and the Veterans Affairs Medical Center in the Bronx, New York, reported in *The New England Journal of Medicine* that women get drunk faster than men because women may react more quickly to liquor due to the fact that they are less able to break down and digest the alcohol before it circulates in their blood system and goes to the brain. The reason for this, according to these researchers, is that the stomach lining in women manufactures smaller amounts of *alcohol dehydrogenase enzyme* (which breaks down alcohol before it enters the blood stream) than does the stomach lining in men (Specter 1990). The problem with this research is that it involved only 43 subjects and, therefore, quite tentative.

More research is clearly needed to define more rigorously the suggested biological difference between women and men.

Psychological Theories

For psychologists, deviant behavior is said to originate in childhood disturbances. One of these theories is called *psychodynamic*. According to proponents of this theory, parental rejection in childhood may prevent the individual to develop an adequate *superego*: the psychological mechanism that discourages a person from violating norms of harming others and encourages her/him to abide to the law. Another theory is referred to as *behaviorally-oriented*. For supporters of this thinking, deviant behavior is the outcome of

inappropriate learning. For example, a child is socialized into a criminal contributes to the development of deviant environment, or s/he may be the victim of *consequence-less learning*: that is, arbitrary *discipline*. Consequently, the child never learns how to connect rewards and punishments to any specific patterns of either deviant or accepted behavior.

A number of other tentative theories emerged during the 1970s in the quest to explain the abuse of alcohol and other drugs. They are *personal type* (e.g., Braucht et al. 1973), *peer pressure* (Rohr and Densen-Gerber 1974), *parental influence* (Kendel 1973), *socio-economic status* and *periods of transition and confusion* in one's life (Salzman & Lieff, 1974).

Sociological Theories

While biological and psychological theories of deviant behavior concentrate on a person's inner attributes (i.e. the soul, psyche, or genes), it is nonetheless true that deviance is socially defined; it therefore cannot be conceptualized outside a social context. Thus, it is not unreasonable to assert that a person's social context itself, behavior. This is the premise within which a number of sociological theories of deviance have been advanced.

A search through the sociological literature on the subject of deviance yields at least four major schools of thought. These are: (1) *macro theory*, (2) *control theory*, (3) *labeling theory*, and (4) *differential association theory*. We shall look at each of these theories to illuminate their propositions.

First, *macro theorists* suggest that various groups, categories, values and institutions in a given society are

interrelated components of a single social system. Consequently, whatever happens to one part of the system inevitably affects other parts of the system. The major objective of *macro* theorists is therefore to be able to link deviance with certain specific interrelationships among large-scale structural elements of a society (see especially great works such as Durkheim's *Anomie* 1951, Merton's treatise on *means and ends* 1967, and Gordon's Marxist views on *crime and social class* 1971). Thus, some observers are quick to point out the fact that alcohol and drug abuse tends to be much higher in parts of the United States where unemployment is very high, for example.

Second, *control* theorists posit that weakened internal and external control mechanisms perpetuate deviant behavior (Reckless et al. 1956 & 1967). In a large study of adolescents in California, Hirshei (1969) examined controls that are maintained through specific bonds. This scholar found that adolescents who were more strongly attached to their parents, conventional adults and peers were more likely committed to conventional beliefs and involved in school work and conventional activities. Adolescents who were more weakly attached to these whether s/he is learning deviant or conforming acts. As such, everyone learns the definitions, attitudes and techniques that make her/him willing or unwilling to violate social norms through symbolic interaction with her/his primary group (Sutherland 1939, Sutherland and Cressey 1978, Burgess and Akers 1966).

The Physiology of Alcohol and Drug Abuse

It is by now common knowledge that alcohol and drugs can be abused. It is therefore imperative that a teacher understands the physiological signs inherent in the abuse of alcohol and drugs. But before we get into a substantive discussion of these tell-tale signs, we will first examine the limits to a person's alcohol intake as presented in Table 1.

Where one drink equals 1 oz. of 80 proof liquor or 12 oz. of beer or 5 oz. of table wine. Subtract .01% for each 40 minutes of drinking.

Adapted from the American Council on Alcoholism, Inc. pamphlet entitled *An Outrage of Unspeakable Proportions* is quite obvious from Table 1 that there is a significant association between a person's weight and the potential for becoming drunk. It is therefore important for a teacher to know these limits in order to help a student minimize her/his chances of becoming a problem drinker.

Alcohol

Hiang and Hawks have presented a good summary to help us become better informed about how alcohol is handled by the body. The following three paragraphs are taken verbatim from their work (1986:103):

(a) Alcohol is used orally, and its concentration in the blood at any given time is influenced by such factors as a person's weight, the rate at which the individual drinks, whether food is taken with the dose, and tolerance. Blood alcohol concentrations (BACs) are

Approximate blood Alcohol Percentage Body Weight in Pounds

Drink(s)	100	120	140	160	180	200	220	240
Influenced Rarely								
1	.04	.03	.03	.02	.02	.02	.02	
2	.08	.06	.05	.05	.04	.04	.03	.03
3	.11	.09	.08	.07	.06	.05	.05	.05
4	.15	.12	.11	.09	.08	.08	.07	.06
5	.19	.16	.13	.12	.11	.09	.09	.08
Possibly								
6	.23	.19	.16	.14	.13	.11	.10	.09
7	.26	.22	.19	.16	.15	.13	.12	.11
8	.30	.25	.21	.19	.17	.15	.14	.13
Definitely								
9	.34	.28	.24	.21	.19	.17	.15	.14
10	.38	.31	.27	.23	.21	.19	.17	.16

usually expressed as *percent* (g/deciliter or dl) or as *mgpercent* (mg/dl). Drinking 1.5 oz. of 80 proof alcohol in a short period of time will result in a BAC of approximately .03 percent (or 30 mg percent) in a 160-pound individual. (b) The liver metabolizes 95 percent of the ingested alcohol at a relatively constant rate. A normal liver will metabolize alcohol at approximately .015 g/dl per hour. This means it takes the body about 2 hours to metabolize 3/4 oz. of pure alcohol. This is equivalent to 5 oz. glass of wine, a 12 oz. can of beer, or 1.5 oz. glass of 86 proof liquor. If a person drinks at a rate faster than 1.5 oz. per hour, the blood concentration (and the effects) will accumulate.

(c) If a 160-pound individual took four drinks each containing 1.5 oz. of 100 proof liquor within 4 hours, a BAC of about 0.08 percent (80 mg percent) would be reached. The same number of drinks or a six-pack of beer imbibed over a 1-hour lunch period might render

the individual above the legal limit for the rest of the workday.

When one reads, her/his brain constantly receives information through the senses that help her/him retain the material. Alcohol short-circuits the brain. It slows a person's reflexes, impairs coordination, reduces visual acuity and dulls normal caution. The first of a person's learning abilities affected by alcohol is her/his judgment. The individual's concentration becomes difficult. S/he cannot think as clearly, as quickly, or as rationally as s/he usually does and cannot act as fast. But worse yet, the drinker is not aware of all this. When alcohol short-circuits the brain signals, that drinker fails to realize that s/he is impaired. The person even develops a false sense of well-being and confidence. The drinker will consequently become a menace to her/himself and to others. The person may:

- a. loose alertness and adaptability during lectures and laboratory exercises

- b. disregard directions in quizzes and assignments
- c. be too slow to comprehend material
- d. take too long to complete quizzes
- e. forget to do assignments
- f. arrive to class late frequently
- g. fail to attend many classes

The ultimate question is this: What are some of the immediate consequences if someone becomes intoxicated? One immediate possibility is that the drunk could suffer a heart attack, if appropriate measures are not taken. As Gilson (1988:14) reveals: First, there is a significant relationship between coronary artery disease (CAD) and alcohol consumption. Second, alcohol appears to be an independent risk factor, promoting CAD at high levels. Third, moderate alcohol consumption does beneficially alter apolipop proteins (the protein components of lipoproteins which protect a person against atherosclerosis and coronary artery disease).

In addition, alcohol has other benefits if consumed in moderation. As Gilson further points out (1988: 14-15):
 (a) Moderate alcohol consumption is associated with lower blood pressure compared to abstaining and heavy drinking; and a lower blood pressure could, in part, result in decreased coronary artery disease.
 (b) Alcohol inhibits the aggregation of substances that cause blood to coagulate and also may help to dissolve fibers that bind these substances.
 (c) Moderate alcohol consumption can have a beneficial effect on the arteries through reducing psychosocial stress. (d) Alcohol may directly affect coronary artery diameter and coronary blood flow. Thus, the concerned teacher must be

able to "call a spade a spade," as the first step for helping change the behavior of students who s/he is certain abuse alcohol or drugs. Unfortunately, many people in society, including teachers, find it difficult to bluntly call the problem what it is. As stated in an enlightening article in the August 1988 *Aide Magazine*: In America we have neat ways of talking about drunken behavior without ever having to use the word 'drunk.' We can be smashed, bombed, blitzed or plowed; we can have had one too many, or a snooful; we can tie one on, or get polluted; we can be well-oiled, or snockered. We can be any of these conditions, and when we are, only two things are certain: we're drunk, and we're a rolling time bomb on the highways (p. 6).

As teachers, we are the first line of defense against our students' drunken behavior. And one thing we should be cognizant about is that alcohol and other drugs just **do not mix at all!** Going back to Chiang and Hawks' (1986:84-111) observations about some of the other drugs, we can see why this is the case. The following discussion is taken verbatim from these authors' account.

Manjuana/Cannabinoids. Delta-9-tetrahydrocannabinol (THC) is the primary psychoactive ingredient present in the leaves and flowering tops of cannabis plants, sold on the streets as marijuana. Confiscated marihuana analyzed over the past ten years (about 20 years now) shows a steadily increasing potency, as defined as the percentage THC by weight found in the plant material. In the mid-seventies, this potency averaged about 1 percent. Now it averages 4 percent; a special preparation called sinsemilla averages almost 7 percent.

Lysergic Acid Diethylamide (LSD) is an extremely potent drug capable of producing altered mental states at doses as low as 25 micrograms (approximately one-millionth of an ounce). The drug is relatively easily prepared from natural products. Although LSD was most widely used during the 1960s, it continues to be available through illicit channels, and there is evidence that its use is again increasing. The drug is not physically addictive, and there are no known examples of deaths directly attributable to the pharmacological effects of LSD. While under the influence of the drug, however, a person's ability to perform complex mental and physical tasks is severely affected. Furthermore, use of the drug is known to sometimes cause bizarre behavior, which can lead to fatal accidents and suicides.

Barbiturates. Barbiturates are central nervous system depressants and used as hypnotics/sedatives. They are classified as ultra-short-, short-, intermediate-, and long-acting. The duration of action of barbiturates is quite variable, ranging from 15 minutes for ultra-short-acting drugs to a day or more for long-acting drugs. The most commonly abused barbiturates are short- and intermediate-acting agents such as pentobarbital (Nembutal), secobarbital (Seconal), and amobarbital (Amytal). Long-acting agents such as phenobarbital are rarely subject to abuse.

Benzodiazepines. The benzodiazepines are considered by many as the most prescribed drugs in the United States. They are primarily used as antianxiety and sedative-hypnotic drugs and also have broad therapeutic

use as anticonvulsants and muscle relaxants. The benzodiazepines have a low order of acute and chronic toxicity when used in a medically supervised manner. Chronic use does result in some moderate dependence and tolerance to the drug. More than a dozen benzodiazepines are in clinical use today. The best known benzodiazepines drugs are Valium (diazepam) and Librium (chlordiazepoxide).

It is quite obvious that the preceding list of drugs is incomplete, given the fact that new drugs seem to appear in our society almost every other year. But it helps us to grasp the reality that these drugs can be very fatal if used with alcohol. Thus, while it is probably true that in most cases a teacher will not know whether a student is under the influence of any of these drugs when that student comes to her/his class, it is still imperative that s/he pays attention to each student for clues. That is what an effective teacher is all about.

Politeness Strategies for Communicating with Deviant Students

When communicating with our students, we must always do so with the following truism into these students who keep us in mind: that is, "One must not bite the hand that feeds her/him." While we should do whatever that is in our power to help our students not to become alcohol and drug abusers, we also should be very skillful in talking business. This means that we should master two important acts in using language: (1) *Rhetic Act*—the use of language to convey factual or propositional information; (2) *Phatic Act*—the use of language to establish and maintain relationships. In order to do so,

Bangura and Kamalu: Teachers' Strategies for Deviant Students
we should attempt to master various politeness strategies that will help us communicate effectively with our students.

Drawing from the work of one of America's leading linguists, Robin Lakoff (1973), there are at least three major principles or rules speakers can regularly and intentionally use to say what they mean in order to achieve the higher goal of *politeness*--that is, the fulfillment of the social function of language.

Do not Impose or Distance. This term refers to the separation that exists between interactants or between speakers and their hearers. It typically applies in formal settings. It is the way in which one can choose an indirect expression of preferences not to impose one's will on other people. For example, when a teacher asks her/his student "Would you like some assistance with your research project?" The student who replies "Thank you, that would be nice" will be using this strategy. Those who expect devices associated with it, however, can at times see this approach, as quite friendly in interaction.

Give Options or Deference. Deference defines a style that seems hesitant. It involves, for example, the use of euphemisms, which allow the hearer to choose not to understand what they mean. When a teacher asks a student "Which math problems do you need help with," the student who replies "Which ever you can assist me with" is using the deference principle. The student is indecisive by simply giving the option of decision to the teacher.

Be Friendly or Camaraderie. This principle conventionalizes equality as an

interactive norm in establishing and maintaining friendly relationships. This is the approach used by the teacher who calls her/his students by their first names and vice versa. The student who walks into your classroom and says "Hey Karim, I need some assistance with my research project. Do you have some time?" is using camaraderie. Your student may be assuming you will be pleased by her/his testament to the closeness of your relationship. If you share her/his strategies, you will agree. If not, you may find the student quite pushy.

It is quite true that the politeness strategy one chooses to use will depend on a number of variables such as the *individual, place, time, mood, setting, event*, etc. In choosing the form of an utterance, a teacher observes one or another of these principles. In addition, each of these principles, when employed in interaction, creates a kind of stylistic effect. The preference for obeying one or another of these rules of politeness results in a communicative strategy that makes up an individual's style. And conversational style in turn is an outcome of habitual use of linguistic devices encouraged by these overall strategies.

The Teacher as Decision-Maker

It is quite clear from the discussion up to this point that in order for a teacher to be able to assist a deviant student, that teacher must adopt effective decision-making skills. An examination of the literature on *decision-making* theories reveals at least two major, practical decision-making strategies from which to choose: (1) *Rational* decision-making and (2) *Incremental* decision-making. More on these strategies follows.

Rational Decision-making! In this paper, Social Work Journal Vol. 1, Iss. 1, 2011, p. 10

A rational decision is one that is correctly formulated to maximize *efficiency*: that is, the ratio between the values a decision achieves and the values it foregoes is positive and higher than any other alternative. This notion of efficiency presupposes the calculation of all social, political and economic values sacrificed or achieved by the chosen decision.

1. In order to select a rational decision, a teacher must:
2. know all the intervention value preferences and their relative weights,
3. know all the decision alternatives available,
4. know all the consequences for each decision alternative,
5. calculate the costs and benefits for each decision alternative, and
6. choose the most efficient decision alternative.

The *rational* decision-making approach clearly presupposes that a teacher must know all the *societal values* for alcohol consumption and drug usage, and that s/he is able to weight them. S/he must have a complete understanding of society's values on alcohol and drug abuse. *Rational* decision-making also requires the teacher to possess *information* about the alternative decisions, the ability to *predict* with accuracy the consequences of alternative decisions, and the *intelligence* to calculate with precision the costs and benefits of each decision alternative. There are obviously a number of *barriers* to *rational* decision-making about alcohol consumption and drug usage. Some of these include: (a) societal values about alcohol consumption and drug usage are usually not agreed upon everyone; (b) many

conflicting values about alcohol consumption and drug usage cannot be compared or weighted; (c) the environment under which a teacher works could make it difficult for her/him to see or accurately weight many societal values about alcohol consumption and drug usage; (d) a teacher may not be motivated to make decisions about alcohol consumption and drug usage based on societal goals, but instead attempt to maximize her/his own interests--friendship, face, money, etc.; (e) many barriers may prevent a teacher from collecting all the information required to comprehend the possible decision alternatives and the consequences for each; (f) a teacher may not possess sufficient intelligence to calculate with precision the costs and benefits when many diverse societal values on alcohol consumption and drug usage are to be reconciled; (g) a teacher may have personal needs, limitations and obstacles which could prevent her/him from performing in a highly *rational* way; (h) uncertainty about the consequences of each decision alternative could force a teacher to stick as closely as possible to previous decisions not to stir up trouble.

No doubt, there are many more problems of achieving *rational* decision-making. Nonetheless, *rational* decision-making remains important because it raises an equally important question:

Why is decision-making in academic institutions not a more *rational* process?

Incremental Decision-making.

Sometimes referred to as "muddling through," an *incremental* decision is one that is a continuation of past activities with only slight modifications. In this approach a teacher does not review the whole range of existing and proposed decisions, identify societal goals as they

relate to alcohol consumption and drug usage, rank order preferences for each decision alternative in relation to benefits and costs, and choose the most appropriate decision. Constraints of time, cost and intelligence make it impossible for a teacher to identify the full range of decision alternatives and their consequences.

The *incremental* decision-making approach is quite conservative in the sense that existing problems, decisions and costs are taken for granted, and attention is focused on new problems and decisions. A teacher who employs this approach generally accepts the legitimacy of established practices and tacitly agrees to continue previous decisions. In short, *incrementalism* is seen as a means to reduce conflicts, maintain stability, and preserve the existing relationship between teacher and students. Conflict resolution techniques therefore become important for a teacher in her/his efforts toward assisting deviant students.

In essence, no matter which decision-making approach we choose to use, our imperfections as human beings will lead some students and teachers to engage in some form of conflict. Indeed, decision-making, which calls for promptness and fairness, is by its very nature conflictual.

The Teacher as a Leader

Since someone has to frequently relate to students in order to put into effect successful attrition intervention strategies, a teacher becomes the logical *leader* to accomplish this task at an educational institution. A teacher's effectiveness in attrition intervention is, in large measure, based upon her/his ability to direct students and other

personnel in those activities designed to most effectively attain attrition intervention strategies.

Leadership, for the teacher, then, is the ability to work with and through students and other personnel to attain the goals of attrition intervention strategies. To be effective, a teacher must have more than just power (the authority to get tasks accomplished). This is because many other factors determine effective leadership abilities. The process of leadership, therefore, calls for the establishment of goals and the attempt to influence others to attain these goals. A teacher, thus, must understand something about various leadership styles that suggest their potential utility. Furthermore, a teacher must know when and how to use this knowledge of leadership styles to become an effective practitioner of attrition intervention strategies. Let us examine the basic tenets of these leadership styles.

Autocratic/Authoritarian/Dictatorial Leadership. A teacher who uses this approach retains as much power and decision-making authority as possible. S/he gives orders and expects them to be obeyed with no discussion. This style may be appropriate when dealing with deviant students who do not respond to other styles or those deviant students who are uncooperative.

Bureaucratic Leadership. A teacher who uses this style leads *by the book*. S/he deals with deviant students according to specified rules, policies, regulations and standard operating procedures. This style may be appropriate when dealing with deviant students who must follow set procedures and those who do dangerous tasks or under special conditions.

Democratic/Participatory Leadership. A teacher who employs this

style involves deviant students as much as possible in aspects of attrition intervention strategies that affect them. These students' inputs are solicited, and they are often asked to participate in decision-making processes. This style may be appropriate when dealing with deviant students who possess high levels of skills and those who want to voice complaints or share common problems.

Diplomatic Leadership. A teacher who utilizes this style operates like a salesman who lives by the art of personal persuasion. This style may be appropriate when dealing with deviant students who prefer persuasive arguments and reasoned negotiations.

Laissez-faire/Free-reign Leadership.

A teacher who uses this style maintains a hands-off approach. S/he delegates much discretion and decision-making authority to other individuals. S/he also gives little direction and allows deviant students a greater degree of freedom. This style may be appropriate when dealing with highly motivated individuals.

The preceding discussion looks at basic information about different approaches to teacher leadership in attrition intervention. A number of factors influence a teacher's choice and effectiveness of a specific leadership style: (a) *personal background of the teacher* knowledge, values, experiences, etc.; (b) *students' characteristics*--dependence, responsibility, identity, knowledge, experience, belief system, trust, etc.; (c) *situational factors*--institution's climate, type of students, related concerns, etc.

The Teacher as Conflict Resolver

A conflict emerges when implementing attrition intervention

strategies in cases where a teacher takes a stand and tries to convince a deviant student that s/he (the teacher) is right. The deviant student, in turn, sees things differently. The teacher tries to convince the deviant student to agree with her/him and the deviant student, in turn, tries to convince the teacher to agree with her/him. Since no one is able to persuade the other, they try to bully each other. As one person tries to bully the other person, s/he stops talking to the other person and the other person responds in kind. This then becomes counter-productive to the goals of attrition intervention. It is therefore important to understand those factors that precipitate conflicts and how they can be solved.

At least five factors can generate conflict between a teacher and a deviant student. They must be reconciled in our efforts to implement attrition intervention strategies.

Differences Between the Objectives of a Teacher and Those of a Deviant Student.

This refers to an academic institution as a *total entity*. This does not mean that each deviant student and teacher will subscribe to the institution's retention objectives. Differences between a teacher's goal to prevent deviant behavior and the student's desire to use drugs or consume alcohol as much as s/he wishes could lead to conflict. Perceptions of what is desirable may differ between a teacher and a deviant student, and these may be reinforced by notions of politeness strategies and realities of the academic institution's setting.

Structural Characteristics of the Institution.

This has to do with an academic institution's purpose to control a student's behavior which may be suggestive as a unitary view at least

among those who would like to use drugs or consume alcohol as much as they desire.

Misfit Between Formal and Informal Rules. This refers to the academic institution attempting to enforce alcohol and drug-related policies that are not necessarily compatible with the informal negotiated order. Beliefs about alcohol consumption and drug use or about attrition intervention techniques to be implemented may not necessarily coincide with the Philadelphia Lippincott official views of the institution. Furthermore, coalitions among some teachers and students may form to pursue goals at odds with the formal rules of the institution. Some institutions may view these informal objectives and beliefs as undesirable and either ignore or actively try to suppress them. Consequently, conflict emerges because of the tensions between the formal and the informal order.

Scarcity of Teachers and Job Design. This can lead to conflict as a teacher comes under pressure to observe too many students at once. The result may be that the teacher will have little opportunity for creativity and sense in minimizing a student's chances of becoming deviant, leading to boredom, frustration and alienation. In addition, stress may occur within the institution and produce dysfunctional effects which could cause problems both for the institution and the teacher. In this situation the teacher may perform her/his job inadequately; s/he may undergo physical or psychological withdrawal, and others may have to bear the burdens created by the situation.

Individual Characteristics.

Misadjustment among teachers and students may affect satisfactory relationships. This may be caused by

satisfaction with real or imagined status differences or personality to some degree. This type of conflict may only irritate. But when allowed to develop to a point where it becomes destructive, it may damage an academic institution's efficiency and effectiveness. Conflicts may also emerge between teachers and students when they hold different value systems about alcohol consumption and drug usage. The ultimate question, then, is this: How can we reduce the chances for conflict as teachers? Given the preceding causes of conflict, two important suggestions can help us in defusing them. They are as follows:

(a) *Creation of slack resources.*

Institution's operation may require the existence of slack (or excess) resources. Although they require capital and other costs, slack resources can simplify problems of coordinating attrition intervention strategies. Slack resources decrease intervention frustration by reducing scarcity.

(b) *Developing teacher-student homogeneity.*

The chances for conflicts can be reduced by decreasing the amount of divergence regarding the objectives of attrition intervention. The teacher-student homogeneity approach calls for the careful selection of teachers in terms of background, enthusiasm, etc. and an emphasis on training and socialization about alcohol and drug awareness in the institution.

In sum, creating slack resources and developing teacher-student homogeneity are approaches that can be used to attack the problem of conflict in attrition intervention. These approaches are relatively quite stable.

Conclusion

The preceding observations are not

directed at the discovery of any method or pedagogical panacea for eradicating deviant behavior among students. I present them in complete modesty in the belief that what matters most is not the method but the teacher. May my observations serve then, at best, as a starting point for that self-examination. Since helping to retain our students until they graduate is one phenomenon to which many of us are deeply committed, I venture to address my colleagues in the profession with the hope that they will not only give serious consideration to my suggestions and perplexities, but also strive to suggest better solutions than those I have here proposed. It is obvious, of course, that nothing I have suggested will appeal to those who do not view their teaching effort as a creative task.

References

- Aide Magazine. (August 1988). Drunk driving takes its toll. pp.6-7.
- Becker, H. S. (1963). *The outsiders* (2nd ed New York: Free Press.
- Braucht, G. N. et al. (1973). Deviant drug use in adolescence: A review of psychological correlates. *Psychology Bulletin* 79, 2:92-106.
- Burgess, R. L., & R. L. Akers. (1966). A differential association-reinforcement, the theory of criminal behavior. *Social Problems* 14:128-147.
- Chiang, C. N. and R. L. Hawks. (1986). Implications of drug levels in body fluids: basic concepts: Examples of specific drug assays. *Research Monograph Series*. Rockville, Maryland: National Institute on Drug Abuse. pp. 63-83; 84-100.
- Durkheim, E. (1951). *Suicide: A Study in Sociology*. Glencoe, Illinois:
- Free Press.
- Gilson, C. C. Spring (1988). Alcohol and coronary heart disease: An update. *The ACA Journal*. pp. 14-16.
- Gordon, D. M. (Summer 1971). Class and the economies of crime. *Review in Radical Political Economics*. pp.51-75.
- Hirschi, T. (1969). *Causes of delinquency*. Berkeley: University of California Press.
- Kandel, D. B. (1973). Race, maternal authority, and adolescent operations. *American Journal of Sociometry* 76:999-1009.
- Lakoff, R. T. (1973). The logic of politeness, or minding your P's and Q's. *Papers from the 9th Regional Meeting of the Chicago Linguistics Society*. pp.292-305.
- Mannheim, H. (1965). *Comparative Criminology*. Boston: Houghton Mifflin.
- Merton, R. K. (1967). *Social Theory and Social Structure*. New York: Free Press.
- Reckless, W. C. et al. (1956). Self concept as an insulator against delinquency. *American Sociological Review* 21:744-746.
- Rohr, C. C., & J. Densen-Gerber. (1971). Adolescent drug abuse (paper presented at the American Psychiatric Association Annual Meeting, Washington, DC).
- Salzman, C., & J. Lieff. (1974). Interviews with hallucinogenic drug discontinuers. *Journal of Psychedelic Drugs* 6, 3:329-332. Specter, M. January 16, 1990. Why women get drunk faster than men. *The Washington Post Health Section*, phs.
- Sutherland, E. H. (1939). *Principles of Criminology*. Philadelphia: Lippincott. Sutherland, E. H. and D.