ELEMENTARY SCHOOL PRINCIPALS' EXPECTATIONS FOR CHILDREN LABELED WITH EMOTIONAL DISTURBANCE

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CHAPTER I

INTRODUCTION

Laws relevant to special education are consistently updated to address problems that occur within school systems (Hardman, Drew & Egan, 2002). Over the years, adjustments have been made to taxonomize systems that categorize children with a variety characteristics, behaviors and disabilities. According to the law, a child has to be diagnosed with a disability in order to receive special education services (Reger, 1982). This categorization yields a label. Labels were originally intended to be a positive element in the special education process but have sometimes interfered with the success of children receiving special education services in the school setting (Field, Hoffman, St. Peter, & Sawilowsky, 1992; Foster & Ysseldyke, 1976; Rosenthal & Jacobson, 1968). One of the most evident effects of associating diagnostic codes with children is labeling bias. Labeling bias may occur when a person makes attributions about an individual who has a particular label (Fox & Stinnett, 1996). However, it seems evident that even children who are not associated with special education labels often experience imposed expectations based on information discussed among teachers in the school.

Labeling bias is a social, cognitive, and affective phenomenon that occurs even amid the most educated, experienced, and knowledgeable professionals.

There is strong evidence to support that observers make attributions about people based on what is heard or perceived (Tesser, 1995). Labels may lead to attributions which can effect various reactions to a labeled individual (Tesser; Thorne & Henley, 2001). When information indicates that a person has a psychiatric or special education diagnosis, that information alone can affect the educational success or failure of the individual. Special education diagnostic labels can be interpreted negatively by school personnel, who may assume a child is less able to be successful than “normal” students (Field, Hoffman, St. Peter, & Sawilowsky, 1992; Foster & Ysseldyke, 1976; Rosenthal & Jacobson, 1968). After a label has been placed on a child, the child may be perceived to have certain behaviors that are expected for the child (Allport, 1954).

Whether the label elicits positive or negative attributions, it can have an effect on the success of an individual (Rosenthal & Jacobson, 1968). Labeling a child may result in lowered self-concept, peer rejection, lowered levels of academic aspiration for the child, biased responding by teachers and parents, and less adept post-school adjustment (Palmer, 1983). One common characteristic of labeling bias is that teacher opinions and expectations for students are often based on information obtained prior to any direct observation of or interaction with students (Carroll & Reppucci, 1978; Fogel & Nelson, 1983; Smith, Flexer, & Sigelman, 1980). This information can be derived from other teachers, parents, or school administrators (Dusek & Joseph, 1983). Teachers and school personnel anticipate that the child will perform more poorly on various school and social tasks than non labeled children (Gillung & Rucker, 1977).

Rather than having similar expectations for all students, teachers tend to be influenced by a child's label.

Rosenthal and Jacobson (1968) examined the effects of teacher expectation on achievement. The researchers gave IQ tests to every child in an elementary school at the beginning of the school year. They then selected twenty percent of the students at random without regard to their performance on the IQ tests. The teachers were told that those students could be expected to have spurts or bloom in their academic achievement. At the end of the school year, all children were re-administered IQ tests. Those students who had been labeled as "bloomers" gained an average of 12 IQ points. Comparatively, those who were not labeled gained only 8 IQ points (Rosenthal & Jacobson). The effects of the label were most evident in the younger students. Labeled first graders gained an average of 27 IQ points, compared to those who were not labeled who gained only an average of 12 IQ points (Rosenthal & Jacobson). Labeled second graders gained an average of 16 IQ points compared to the 7 IQ points gained by those not labeled (Rosenthal & Jacobson). This study demonstrated that teachers can easily be influenced by information regarding student labels. It also depicted how this phenomenon can impact a child's achievement. The study opened the door to research concerning labeling bias and the effects on children's achievement.

A factor that has notably influenced whether or not a child will be placed in label groups by teachers is previous achievement. High achievement was positively correlated with information suggesting high ability in a study by

Rosenthal and Jacobson (1968). Algozzine and Stoller (1981) examined the effects of labels and competence on teacher attributions for a student. Students who have been labeled and who were perceived as having academic competence or high achievement have not received as many negative effects as students without those factors. Teachers embellish those students who have high achievement and push them succeed. However, those with low achievement are often referred for special education testing.

In school systems, there are generally twelve areas created by the Individuals with Disabilities Education Act (IDEA) that are most often used to categorize students in order to provide special education services (P. L. 94-142, P. L. 101-476, Alper, Schloss, & Schloss, 1994). These areas are Learning Disabled, Mental Retardation, Autism, Emotional Disturbance, Other Health Impaired, Othopedically Impaired, Speech Impaired, Auditory Impaired, Vision Impaired, Multiple Disabilities, Traumatic Brain Injury, and Deaf-Blind. Several of these labels appear to create labeling bias for children. Of the twelve broad IDEA categories, emotional disturbance seems to create bias among teachers (see definition for Emotional Disturbance, Appendix F) (Foster, Algozzine, & Ysseldyke, 1980; Levin, Arluke, & Smith, 1982; Stein & Merrell, 1992; Ysseldyke & Foster, 1978). Review of the labeling bias literature indicated that emotional disturbance elicited more negative ratings when referring to bias in the schools.

One point not discussed in the research was the broadband empirical dimension of child psychopathology. The most common characteristics associated with child psychopathology can be described as children who

experience externalizing behaviors. Externalizing behaviors may include hyperactivity, aggression, and conduct problems. These are disruptive behaviors that easily distract teachers and school personnel. Externalizing problems have also been called under-controlled behavior (Achenbach & Edelbrock, 1978). These behaviors are more easily noticed than internalizing behaviors due to the disruptive nature of the activities. Externalizing factors are generally more stable and have a poorer prognosis than internal factors. Children who exhibit externalizing behaviors often act out their aggressions and conflicts in opposition to others. Adjectives commonly used to describe children with externalizing behaviors include rebellious, aggressive, impulsive, and negativistic (Lambros, Ward, Bocian, MacMillan, & Gresham, 1998; Woodward, Roberts, Santa-Barbara, & Johnson, 1974).

The other main dimension of child psychopathology is internalizing behavior. Internalizing problems include anxiety, depression, and somatization. Though they may not be disruptive, children with internalizing problems may exhibit behaviors such as withdrawal, fear, worry and anxiety (Lambros et al., 1998). Children who fall in this category often control their own behavior and tend to go unnoticed by school staff because they appear compliant and well behaved. These types of children are often withdrawn, appear shy and inhibited, while appearing fearful and lacking self-confidence (Woodward et al., 1974). Furthermore, children with internalizing problems may actually display externalizing features. Also, internalizing behaviors may also include somatic complaints, tics, and phobias. No research has been conducted to determine

whether or not school staff are more biased toward one behavior type versus the other.

Teachers have been the main participants in labeling bias research because they have daily contact with children. Differential expectations of school principals as a result of labeling have rarely been studied. Though they do not have daily contact with every child, principals set the climate of their school based on their administrative skills (Heck & Marcoulides, 1990). Their administrative skills can have indirect effects on children. Sack (1999) indicated that there is a shortage of teachers who are qualified to work with students who are identified as emotionally disturbed and this area has the highest turnover rate within the special education field. One indicator of teachers choosing to leave this field is school climate. Principals may not be providing a proper climate for teachers or students to feel successful (Heck & Marcoulides, 1990; Wallace, 1994). Other research supports the theory that teachers of children who are emotionally/behaviorally disturbed leave their jobs due to lack of support from school administration (Ax, Conderman, Todd and Stephens, 2001). There is lack of support because principals often times do not understand the stressors involved in teaching these children nor do they comprehend the role of the teacher in the classroom (Ax et al.). However, the principal does play a key role in the future education of these children. Not only are they authority figures to the students and teachers, they often serve as part of multidisciplinary teams that makes determinations in regards to services and placement (Hartman, Drew, Egan, 2002; Heck & Marcoulides; Stein & Merrell, 1992). The principals' input

and decision making process should be based on knowledge of and experience with children who have disabilities without discrimination or bias. Thus, it is important to determine whether or not principals demonstrate biases against certain children (Heck & Marcoulides).

Statement of the Problem

Various studies have shown that labels can create differential expectations for children (Brophy & Good, 1970; Cooper, Findley, & Good, 1982; Glock, 1972; Rosenthal & Jacobson, 1968). Children who are labeled may be adversely affected by labeling bias in the classroom. Children who have been given a special education label in the school system generally have a history of decreased academic achievement (Rosenthal and Jacobson). More recently, higher ranked school personnel have become more involved with the decision-making process involving special education children. Specifically, principals are playing a more important role in the future success of children receiving special education support services.

Purpose of the Study

This study will examine elementary school principals' expectations for children identified with emotional disturbance. In addition, it will investigate the effects of externalizing versus internalizing behavior patterns, and high versus low achievement.

Research Questions

1. Do elementary school principals demonstrate differential expectations for children identified with emotional disturbance?

2. Do elementary school principals demonstrate differential expectations toward children exhibiting externalizing behaviors versus internalizing behaviors?
3. Do elementary school principals demonstrate differential expectations for children described as high achievers in comparison to those that are described as low achievers?

Hypotheses

1. Children who are labeled as emotionally disturbed will be rated more negatively than those children not labeled.
2. Children described as low achievers will be rated more negatively than children described as high achievers.
3. Children described as having externalizing behaviors will be rated more negatively than children described with internalizing behaviors.

CHAPTER II

REVIEW OF LITERATURE

A Brief History of Special Education

Customarily, every child follows the same pattern of development through the formal school years. Parents, teachers, and peers assume that every child will adhere to an established set of behavioral patterns, require the same level of service from the school system, and progress through similar academic milestones as other children. Some students will not follow this progression and may be labeled in accordance with their deviance from the norm (Hardman et al., 2002). Once labeled and qualified for special education, the child may be provided with services that other children do not receive. Though this process appears simple, it has taken many years for special education to be properly implemented within the school systems (Winzer, 1993).

Education of children with disabilities in the United States did not begin until the early 1900's (Hardman et al., 2002). A group of dedicated professionals spent many long hours attempting to create appropriate programs for children who could not function in a regular education setting (Winzer, 1993). The first programs established were separate from the public schools. The majority children included in these programs were those who were slow learners or those

that had hearing or vision deficits (Hardman et al.). Students who had these types of disabilities were placed in separate classrooms from their peers or were moved to a completely different building. In the early 1900's, special education usually involved segregation; either from public education and/or their peers (Winzer). Their only peers were other students with disabilities.

Shortly after the turn of the century, Alfred Binet and Theodore Simon created the prototype of modern tests of intelligence (Thorne & Henley, 2001). The test was first used in France to predict academic achievement in school age children. In 1908, the Binet-Simon scale was translated into English and later revised by Lewis Terman while at Stanford University. By 1916, the test was published as the Stanford-Binet Intelligence Scale and became the first method of assessing how much a child deviated from the norm in terms of intellectual capability (Thorne & Henley).

After the Stanford-Binet Intelligence Scale was created, programs for those who required special services were infrequently found in the public school systems (Hardman et al., 2002). Schools did allow for programs to be present, but most school systems did not require that services be provided to children who struggled with regular education classes. Services for those with mild emotional disorders or behavioral problems were created in the 1930's, but hospitals and institutions were the only options for this special needs group of children (Winzer, 1993). Programs for those with physical disabilities were also

initiated in certain schools in the 1930's. Separate schools with elevators, ramps, modified doors, toilets, and desks were created for this group of special needs children (Hardman et al.). It was not until the 1940's that educators realized exceptional children may need to be placed in more normalized educational settings (Winzer). Thus, the efficacy of special schools versus traditional educational settings became and controversial topic.

During the next decade, countries around the world began to create more educational opportunities for students with disabilities funded through public education (Hardman et al., 2002). Therefore, the number of public education classes for those with mental retardation and emotional problems increased steadily. However, children were still isolated from their peers in secluded classrooms without access to activities that other children received (Hardman et al.; Winzer, 1993). Researchers began questioning whether or not isolated classrooms provided the best environment for these children (Johnson, 1962). Research suggested that the achievement of students with mental retardation was consistent across environments. Further, it has been indicated that social adjustment was not impaired while placed in isolated classrooms (Hardman et al.; Winzer). The research was criticized. The criticisms resulted in a movement toward integrated classrooms which provided disabled students with the opportunity to experience an environment that included peers without disabilities (Hardman et al.).

The 1960's were a time of change for classroom teachers. Through the support of President Kennedy, federal funding was provided to prepare teachers

to work with children who had special needs (Hardman et al., 2002; Winzer, 1993). Support and information centers were also established. The Bureau of Education for the Handicapped was one of the key informational sources federal government created for people with handicaps and disabilities in the schools (Hardman et al.).

The 1970's was a decade of progress for special education. Civil rights lawsuits effected more changes in the education of students with disabilities. The public began realizing that children with disabilities were being discriminated against in school systems. It was during this decade that many policy changing court cases occurred and changed the course of special education. However, one major case preceded the of cases in the 1970's; Brown vs. Topeka Kansas, Board of Education (1954). The case was a precursor of future lawsuits and shocked educators across America. The court ruled that everyone would have equal opportunity to receive public education (Hardman et al., 2002; Jacob-Timm & Hartshorne, 1998).

Nearly twenty years later, a suit was filed by the Pennsylvania Association for Retarded Citizens because children with mental retardation were being excluded from public education due to mental deficiencies (Hardman et al., 2002). The group argued that the children could learn if the educational program was altered to meet their needs. The question was whether or not the public education system should be required to make accommodations for students who were mentally deficient. The court ordered that Pennsylvania Public Schools provide free, appropriate education to students between the ages of 6 and 21

years (Hardman et al., 2002). Other lawsuits in Pennsylvania followed and served as stepping stones for the federal government in creating legislation that provided for those with disabilities.

After the Pennsylvania decision, other lawsuits followed around the country. Mills versus the Board of Education of the District of Columbia (1972) paved the way for children who have behavioral, emotional, and learning impairments to receive appropriate education in the public schools. Previous lawsuits had focused on children with learning problems or children who were mentally deficient. Mills versus the Board of Education was focused on children with behavioral and emotional difficulties. The court decision required the schools to provide each child with a free, appropriate education regardless of the degree of child's mental, physical, emotional, or behavioral deficits (Jacob-Timm & Hartshorne, 1998). This court case had an astronomical effect on services for children with emotional disturbances.

In 1975, federal legislation was enacted to provide free and appropriate education to all individuals. Public Law 94-142 the Education for All Handicapped Children Act (1975) mandated that a free and appropriate education be provided to all individuals with disabilities. This required all school districts to create special education programs for those who required it (P. L. 94-142). This law was later renamed the Individuals with Disabilities Education Act (IDEA). One intent of IDEA is that schools are required to provide special education services for children who need it regardless of the extent of their disability. Special education involves modifying classrooms, instruction, facilities,

and any other appropriate requirement the child may need at no cost to the parents. The law ensures that children are to receive any services that are necessary for the child to benefit from his or her education. The services may range from transportation to occupational therapy to psychological services depending on the needs of the child.

Special Education Eligibility

There are certain qualifications that must be met under IDEA in order for a child to be eligible for special education services. The first requirement is the child must have been identified as having one of the twelve disability conditions as designated by federal law. The twelve conditions are as follows: mental retardation, specific learning disabilities, serious emotional disturbances, speech or language impairments, vision loss, hearing loss, orthopedic impairments, other health impairments, deafness or blindness, multiple disabilities, autism, and traumatic brain injury (P. L. 101-476). The student must also demonstrate educational need for special placement. Both of these requirements must be met as determined by the multidisciplinary team.

When a child is identified with an exceptionality, IDEA requires that the child be placed in the Least Restrictive Environment (LRE). LRE means that students must be placed in surroundings that best meet their academic, social and physical needs. This may require the educational plan to be delivered in the regular classroom, special education classroom, or through the provision of homebound services. Students should be placed in the most appropriate environment in which the Individual Education Plan can be implemented. In

order for the child to receive special services, he or she must be diagnosed and as a result will receive a label.

According to Hardman et al. (2002) labels have been the basis for developing and providing services to people with disabilities. Labels generally serve three purposes. The first purpose for a special education diagnosis is the requirement of classification under the law to receive services. The second purpose involves federal funding. Special services require additional services to the school. In order to receive additional money from the federal government to compensate for special education costs the child must have a disability label. A third purpose of special education labels is continuous learning. Students who are identified under the same classification may exhibit similar behaviors or difficulties. Grouping students who have similar behaviors patterns or similar learning styles is thought to increase learning (Reger, 1982).

Labels and federal legislation have facilitated much action for civil rights of children (Reger, 1982). The law and labels have been thought to give children with disabilities the status of equality with their nondisabled peers. The law is also beneficial in protecting children from past abuses, such as being institutionalized or being placed in an inappropriate setting without access to opportunities provided by public schools (Reger). Though these labels may be intended to help the child increase his or her chances at academic success, the possibility of negative effects is possible when children are labeled.

Labeling Bias

Labeling bias occurs when people make attributions about an individual who has a particular label (Fox & Stinnett, 1996). Labeling bias is a social cognitive and affective phenomenon that occurs even with the most educated and experienced people. There is strong evidence to support that it is human nature to make attributions about people based on what is heard or perceived (Tesser, 1995). Labels may lead to attributions, which can effect various reactions to the labeled individual. When information indicates that a person has a psychiatric or special education diagnosis, that information alone can affect the education of the individual. The label information can be interpreted negatively by school personnel and they assume the child is unable to be successful. Once a label is in place, it is possible for it to become permanently attached to the individual and the attributions may become institutionalized. Whether the label elicits positive or negative attributions, they can have an effect on the success of an individual. Labeling a child may result in lowered self-concept, peer rejection, lowered level of academic aspiration for the child, biased responding by teachers and parents, and poorer post school adjustment (Palmer, 1983). It is common practice for a child to be evaluated, given a label, and then treated differently based on the label. One common characteristic of labeling bias is that teacher opinions and expectations for students are based on information obtained prior to any direct observation of or interaction with students (Carroll & Reppucci, 1978; Fogel & Nelson, 1983; Smith, Flexer, & Sigelman, 1980). This information can be derived from other teachers, parents, or school administrators (Dusek & Joseph,

1983). For example, a child may be evaluated and given the label of Specific Learning Disability. The child is expected by teachers and other school personnel to do more poorly on various school and social tasks than other children. Rather than having the same expectations for all students, teachers tend to be influenced by a child's label.

Teachers, principals, and administrators may very well have differential expectations for labeled children. Teachers and principals have a powerful influence on determining whether or not a child succeeds academically and socially. Often, if a student has a label, the teacher will lower their expectations for the child. Previous research relating to labeling bias and one that helps to explain the phenomenon is the Expectancy Model (Vroom, 1964). The model elucidates the effects that teachers have on the success of individual children. The Expectancy Model is defined as

> the strength of a tendency to act in a specific way depends on the strength of an expectation that the act will be followed by a given outcome and on the attractiveness of that outcome to the individual (Vroom, 1964, p. 3).

Expectancy theory states that a child can be motivated to perform better when there is a belief that better performance will lead to good performance appraisal and that this shall result into realization of personal goal in the form of some reward (Vroom, 1964). Teachers can influence children with extrinsic motivation which can produce positive results from children on academic tasks. A teacher's expectation can effect the way a child performs. Several different

researchers have suggested that teacher expectations are positively correlated to student performance (Brophy & Good, 1970; Cooper, Findley, & Good, 1982; Glock, 1972; Gottfriedson, Marciniak, Birdseye, & Gottfriedson, 1995; Kohn, 1973; Rist, 1970; Rogers, 1998; Rosenthal & Jacobson, 1968). Children have sharp perceptions and are able to pick up nonverbal cues from teachers, principals, parents, or perceived role models. Children are able to acknowledge whether or not a teacher has confidence in them as a student. Teachers knowingly and unknowingly adjust or modify their behavior in accordance with the label the child possesses.

Behaviors directed toward children perceived as low achievers are remarkably noticeable. These behaviors may include giving insincere praise, giving less frequent and informative feedback, frequently interrupting student speech, providing less attention to the student, giving fewer opportunities to respond, giving more criticism, reducing the amount of wait time, providing less eye contact, exhibiting fewer smiles, and using student ideas less often (Gottfriedson et al., 1995). Perceived high achievers are recipients of more positive behaviors and have much more freedom in the classroom. Teachers highly praise these students, ask favors of them, and encourage their success in the classroom. In turn, students at both ends of the spectrum modify their behavior to meet the expectations of the teachers whether it is positive or negative. Children perform well when teachers have high expectations, and children who have lower expectations from teachers perform lower on academic tasks. This is the basis of the Expectancy Model (Brophy & Good, 1970).

Others examined similar effects within the context of the expectancy model. Gillung and Rucker (1977) believed regular education classroom teachers were becoming more and more responsible for the education of exceptional children and the way the children were described to the teacher was an important factor related to expectations for the child. They posited that labels should be avoided in all situations. They presented information about exceptional children in two different conditions (Gillung & Rucker). Participants were presented with aspecial education classification and descriptive behaviors. Participants in the second condition were presented with a scenario that described an unlabeled child, but behavioral descriptives were the same as the first condition. The researchers specifically wanted to determine if teacher expectations were different for students who were labeled versus students who were not. The results indicated that teachers had lower expectations for children who were labeled as opposed to children without labels. Regular education and special education teachers had lower expectations for children associated with a label.

The expectancy model not only supports that negative expectations result in lower performance, it also asserts that higher perceptions of student abilities results in better performance and higher achievement. Some researchers hypothesized that teacher expectancy had a positive relationship to success. Cooper, Findley, and Good examined the relationship between achievement and teacher expectations. Three different teacher expectation measures were used as dependent variables in the study: perceived ability, expected improvement,

perceived-tested ability discrepancy. The teachers who perceived that students had high ability tended to overestimate the child's actual ability (Cooper, Findley, & Good). Other findings also indicated that teachers' perceptions of student ability were correlated to overall student achievement. The more overestimated the ability score was the greater the students' achievement gain during the school year. Although the expectancy model was supported, the study had several limitations. Only two of the three dependent measures supported the expectancy model. Expected improvement did not correlate to achievement. This variable forced the teachers to make judgments about the future of students rather than just the present. The researchers felt that the assessment tool for estimating expected improvement was too difficult for such a task.

Initial reaction to hearsay or rumor tends to lead people to incorrect assumptions or may cause them to have negative affect towards others (Dusek & Joseph, 1983). Researchers have observed this phenomena occurring in educational settings. "Teachers' expectations about students are often based on information obtained prior to any direct observation of or interaction with students (Dusek & Joseph, 1983, p. 327)." In the past, consensus has been that teacher expectations are lower for labeled children than for nonlabeled children. It was speculated that certain labels produce even lower teacher expectations than others (Dusek & Joseph). However, information that accompanies the label, such as whether the student was previously in a regular education classroom, special education classroom, self-contained classroom, or resource room may have an effect on how the teacher perceives the child as well as teacher

expectations, may be a factor in the overall teacher expectations. Information pertaining to behavior or disciplinary measures previously used may also be indicators of teacher sets.

Rolison and Medway (1985) examined the effects of a label combined with past performance and placement on teacher expectations. The researchers provided information packets to participants describing a child who was either not labeled, labeled Learning Disabled, or Educable Mentally Retarded (EMR). Information regarding whether he was in the regular classroom or had a previous placement, and whether his most recent testing was ascending or descending was also provided (Rolison & Medway). The results of this study indicated that teachers do tend to set their expectation levels according to previous special education labels and past performance. The study provided information that the EMR label does elicit negative connotations and effects the teachers' expectations in a negative way (Rolison & Medway).

Another important aspect of this study was that it illustrated the effects of internal and external factors. With a nonlabeled child, the family was viewed as a facilitator of how well the child achieved. With the child labeled EMR, teachers viewed ability level as a factor indicating how well the child would achieve. In other words, teachers working with EMR students may alter the difficulty of the workload rather than using external cues such as raising motivation to increase academic achievement (Rolison & Medway). This study supported the labeling bias phenomenon in that teachers viewed children with and EMR label negatively and set lower standards for students who had this label. However, the study was

not able to distinguish between children who were labeled and those who were not labeled. One explanation might be that the information was presented in a hypothetical manner rather than providing an actual interaction with the child in the teacher's presence. Teachers may perceive themselves to react one way, but may act differently in a realistic situation.

Darley and Gross (1983) conducted a study that supports a similar phenomenon. The researchers obtained a sample of undergraduate students and gave some information about a child from a low socioeconomic status (SES) background, while the other half of the participants believed that the child was from a high SES background. The group that believed the child was from a high SES background rated the child's abilities as well above grade level while the group who believed the girl was from a low SES background rated her below grade level. The results suggested that stereotyped information can create hypotheses about the stereotyped individual (Darley & Gross). People may judge individuals who originate from a family with a lower SES background as less capable of achieving than those who come from higher SES background, in the absence of information about current academic achievement. In other words, the participants formed biases based on SES while never obtaining relevant information pertaining to the academic achievement of the child. These findings are similar to situations that occurred in the early stages of the history of emotional disturbance.

Various labeling conditions facilitate stereotypical expectancies from teachers. The expectancies may influence the teachers' future relationships with

children (Foster, Ysseldyke & Reese, 1975; Rosenthal & Jacobson, 1966; Salvia, Clark & Yssseldyke, 1973). Foster, Algozzine, and Ysseldyke conducted a study in which they solicited 36 teachers and 36 teacher trainees. The participants completed two phases of the experiment. During the first phase, participants were asked to complete a behavior checklist for either a normal fourth grade boy or for an emotionally disturbed fourth grade boy. During the second phase, the groups were shown a video in which they were told the boy had been evaluated base on the behaviors they were viewing and had been diagnosed as either normal or emotionally disturbed (Foster, Algozzine, & Ysseldyke). The groups viewed identical tapes after which the participants were asked to complete a second form based on the behaviors they had observed. Results indicated that teachers and trainees rated emotionally disturbed children far more negatively than those with no label. Similar results were found in reviewing the data from the forms completed after viewing the video. The ratings for the labeled child were far more negative than that of the normal child despite the fact that both groups had viewed the same video. Children, who are labeled, particularly emotionally disturbed children, tend to receive negative reactions from educators.

Palmer (1980) examined labeling effects in relation to the EMR label. Palmer distributed information to teachers in three categories; psychometric data reflected an individual with EMR, the EMR label alone, or psychometric data paired with the EMR label. Results indicated that the psychometric data and the label had similar effects on teacher attributions. The information indicated that not only does a previous label affect attributional perspectives, but information

from an individual's past, including psychometric data relating to the nature of their performance, may have just as large a negative effect. This information can also be an indicator that teachers have become more fluent in interpreting psychometric data. Teachers may feel they are able to interpret the data and classify the child using their own interpretation of scores.

Taylor, Smiley, and Ziegler (1983) had similar results with the label Mental Retardation. Their results indicated that the label significantly affected the subjects' perceptions of student academic behavior and social behavior and there were no differences in attitudes between regular education teachers and special education teachers. This would indicate that experience and knowledge in special education did not improve perceptions of special education teachers. In sum, review of the literature indicates that teachers do have bias as a result of certain special education labels despite the fact that they may be special education teachers or general education teachers.

Social Psychological Influence

Muzafer Sherif's influence in social psychology has contributed to the understanding of the creation of attitudes (Thorne & Henley, 2001). In one of Sherif's most well known studies, he was able to assimilate certain attitudes among groups of boys at summer camp and then alleviate the attitudes (Sherif & Hovlan, 1961). His study showed how easily group biases could be created. The study also presented how easily group hostility could be removed by introducing situations that forced the groups to complete a goal as a team. A colleague of Sherif's who helped to further research pertaining to society's

willingness to conform our perceptions to match group expectations was Solomon Asch (1956). Asch designed a study in which a group of confederates were instructed to consistently pick a wrong answer within a group setting. The results indicated that although the answer was tremendously obvious, the subjects submitted to group pressure (Asch). The subjects were easily swayed within group setting. Both studies introduced ideas about group conformity and group-think. These two studies were foundations for future social psychologists in studying attribution and behavior.

Attribution theories attempt to illustrate the psychological processes that lead to the fundamental ideas that people use to embrace situational or dispositional interpretations of other people's behavior (Tesser, 1995). The theories describe how people think about each other. Kurt Lewin created an equation using defined terms that aimed to explain how people perceive others. Lewin's equation, B=S+D represents the following terms: B: Behavior, S: Situation, and D: Predispositions (Tesser, 1995). The equation suggests the idea that each person's behavior is a combination of a situation paired with a person's predisposition. An additional component of this theory is that people tend to attribute behavior to dispositions even when there is every reason not to do so (Ross, 1977).

Dispositions serve some of the same purposes that scientific theories do. Dispositions serve as a simple way of thinking about a number of past observations and allow individuals to predict what will be observed in the future (Tesser, 1995). When people are asked to predict the behaviors of others about

whom they have made dispositional attributions, they can do so without ever consulting specific memories of the person's past behaviors (Carlston & Skowronski, 1986).

Rosenhan (1973) suggested that the power of expectations influence society's identifications of another's behavior. He recruited eight "normal" people to go to local San Francisco mental hospitals and check themselves into the institution. The confederates were supposed to act normal and answer all questions honestly. The only stipulation and requirement was in the interview, they were supposed to admit to hearing a voice say the words hollow, empty, and thud (Rosenhan). After a complete evaluation, all of the confederates were admitted to the hospital for an average of 19 days. Seven of the eight were diagnosed as schizophrenic. Naturally, our perceptions accommodate behaviors into our own expectations than they are truly portrayed (Tesser, 1995). People perceive others' actions according to their perceptions rather than actual behaviors.

When society observes certain behaviors, there is a tendency to categorize people according to certain behaviors. Over time and with experience, society tends to develop norms. Norms create expectations about how group members should behave (Tesser, 1995). Allport (1954) suggested that the categorization of people into groups was necessary for adaptive functioning. This process reduces the complexity of the physical world and the social worlds. If the public were to respond to every person as an individual, people would quickly overload social perceivers, cognitive processing, and

storage capacity (Hamilton, 1981). When people categorize others into groups by common attributes it reduces the amount of information that one must take in. In reducing the amount of information taken in, it reduces the complexity of the social world (Tesser). This process may be beneficial in simplifying a complex system; however, there may also be consequences. When people begin to categorize others, they may create and maintain perceived differences among group members that do not truly exist (Tesser, 1995).

Social psychology parameters are important when discussing labeling bias in the classroom. Teachers and school administrators tend to group children who have been given certain labels. After a while, school personnel no longer see a child as an individual, but instead as a label. When the child is not seen as an individual, he or she may be perceived as having certain characteristics that have been observed previously in a child with the same label. This phenomenon may be explained more clearly in terms of judgmental heuristics.

Social psychologists have also created other forms of decision-making models that include the use of heuristics. A heuristic is a simple, estimated rule or strategy for solving a problem that people incorporate into everyday decision making (Aronson, 1996). Heuristics aide in solving problems when there is limited time to thoroughly think through the information, or are so overloaded with information that it cannot be processed completely, and the information has little or no importance (Aronson). Heuristics may also be used when there is little information about the problem and a decision must be made quickly.

When making decisions based on heuristics, individuals use two different methods to solve problems. Representative heuristics refer to using the similarity of one object to another to infer information about a second object (Aronson, 1996). For example, when a person is attempting to buy a lawn mower and is comparing two different models in a store, it might be assumed that the more expensive model is of higher quality. Instead of using more detailed information to determine which lawn mower is better quality, the decision is made using the simple idea of price.

Attitude heuristic is a model of decision making that evaluates the properties of an object; thus an attitude is a stored evaluation of an object (Aronson, 1996). In other terms, attitudes about a person, place, or thing can influence judgment on category placement (i.e. good versus bad). For example, John and his English teacher do not have a good relationship. John determines based on attitude heuristics that the class is not beneficial to him or anyone else.

Diagnostic labels and decision making by school faculty can be put into perspective through heuristics. Teachers and principals have extremely busy days while attempting to maintain and teach numerous children. Dealing with diagnostic labels can make their jobs easier, especially when they are not well versed in special education. If presented with a child who has a special education label and the school official has no experience with the label, the person may use attitude heuristics to incorporate the child into his own schema. In other words, the person may take the diagnosis that he or she has limited information and make faulty attributions about the child. For example, a teacher

may have student in class who has been diagnosed as learning disabled. Without any previous information, the teacher may assume that because the child has this label, then the child is unable to learn.

Emotional disturbance is a diagnostic label that is often perceived with negative characteristics because the behaviors are disturbing to classroom functioning. Within the literature examining labeling bias, this label is particularly notable (Lambros, Ward, Bocian, MacMillan, & Gresham, 1998; Woodward, Roberts, Santa-Barbara, & Johnson, 1974).

Emotional Disturbance: A History

Public Law 94-142 was an official attempt to make changes in public school systems. The law was intended to ensure that all children were provided a free and appropriate education to all children. Within the first decade of implementation of the law, many children were provided with special education services and benefited tremendously. In the 1980-81 school year, about 3.9 million children were placed in special education and received the appropriate services (Kugelmass, 1987). Of that 3.9 million, approximately 300,000 had been diagnosed as emotionally disturbed (Kugelmass). Those children became eligible for special education and other services under the category of Serious Emotional Disturbance.

In the late eighties, a system congruent with that of a regular education system was established (Kugelmass, 1987). The new system consisted of a separate classroom and segregation of the students with emotional disturbance from their peers. Separating children with abnormal behaviors was hardly a

recent idea. Historically, the American education system has segregated children who were perceived as abnormal. However, up until the late 17th century, children engaged in behaviors that would be considered delinquent or abnormal by today's standards, but were thought of as common and conventional in the past (Conrad & Schneider, 1980). Though it may have been common, those children were still thought to be different and were punished in inhumane ways.

Phillipe Pinel, a French physician, demonstrated how the chronically mentally ill who had been chained and beaten could dramatically improve if people treated them humanely and with care (Fishbein, 1995). Pinel began reforms in the way the metal patients were treated and how they were cared for within mental institutions. However there were no distinctions made between mentally retarded patients and those who would be labeled emotionally disturbed under modern criteria (Fishbein, 1995). His research also did not distinguish between children and adults.

One of Pinel's students, Jean Itard, was one of the earliest scholars to try a different treatment approach with a severely disturbed child. Itard demonstrated the phenomenon in the "Wild Boy of Aveyron" the case of the boy he found running free through the woods in 1799 (Shattuck, 1980). The boy had been isolated socially and emotionally, causing behaviors that most thought was incurable. Itard used treatment that included affection, love, and enthusiasm that reinforced more desirable behaviors. The boy improved drastically and supported the methods of Itard's work (Shattuck). However, people with

disorders and disturbances continued to be placed in mental hospitals, penitentiaries, or other facilities where they were treated as social outcasts. They were segregated from the world to attempt to be rehabilitated from their bad behaviors.

As the 19th century progressed, educational legislation began to be implemented throughout the United States (Kugelmass, 1987). Children with behavioral or emotional disorders continued to be seen as deficient in regard to social skills and intellectual functioning. Responsibility for treatment and education of behavioral or emotional problems was given to the teachers and faculty. At the time of the reauthorization of IDEA, the terminology of serious emotional disturbance was changed to emotional disturbance (Forness, 2000). Though the terminology changed, the definition remained the same. Earlier changes had seen Autism removed from the Emotional Disturbance definition to its own category, alleviating some of the confusion of the criteria.

In the early 1900's, Clifford Beers (1908), the founder of the Mental Hygiene Movement, had been placed in a mental institution at an early age and experienced the emotional turmoil of being within the wall of an institution. The Mental Hygiene Movement was an attempt to alter the way that children and adults with a variety of disorders were treated. Beers recommended that children with disorders be detected and kept in the schools, in child guidance clinics, or that other treatments be used to prevent them from being placed in an institution (Beers). However, the Mental Hygiene Movement did not greatly affect the school systems.

In the New York City school system, special schools were created for the "bad kids", or emotionally disturbed, to allow segregation from their "normal" peers. The children who attended these schools received labels such as "disturbed" that remained with them and made it difficult for the children to be placed in other schools. Interventions that were created in an attempt to help this group of "disturbed" children were based primarily on a medical model (Rimke & Hunt, 2002). The model asserted that the illness exists within the child. None of the programs took into consideration environmental issues such as low socioeconomic status, parental factors, peer pressures, or even racial issues. Rather than attempting to modify any external problems that could have been underlying factors, the child was considered to be ill and was the central focus of interventions and treatment (Rimke & Hunt). They were ostracized and segregated from "normal schools" having received the "disturbed" label.

Historically, children with emotional disturbances have been treated poorly across a variety of settings, especially within the school systems. Even after the enactment of Public Law 94-142, teachers and school personnel were unable to meet the needs of these exceptional children. Some research has shown that even though these children are allowed in the classroom, they are often subject to bias elicited by classroom teachers.

Labels often influence teachers in every day decisions. For instance, teachers may predict that children with certain labels will never be successful and therefore feel that it is unnecessary to put forth effort in helping the child succeed. In some cases, it may be the interpretation of a child's label by a

teacher that may impair the child's future success. The individual label may also be a factor in how a teacher judges or interprets a child's success.

Fox and Stinnett (1996) examined similar situations. The researchers examined "the effects of profession and diagnostic label on predicted outcome for children with behavioral disorders (Fox and Stinnett, 1996, p. 144)." Their participants were professionals who worked as school psychologists, special education teachers, regular education teachers, and undergraduate college students. Each participant was presented with a packet that contained a vignette describing a student with behavior problems. Also included was one of the following diagnostic labels: Severe Emotional Disturbance (SED), Conduct Disorder (CD), Socially Maladjusted (SM), or No Exceptionality (NE). The participants were asked to complete a questionnaire concerning the nature and future behavior of the child. There were no significant effects of professional category on judgment in regards to rating children. Whether the professional was a school psychologist or a student, their perceptions of these labeled children were similar in nature.

Other results from Fox and Stinnett's (1996) study indicate that children with the Seriously Emotionally Disturbed label are judged more negatively than children with different labels such as Conduct Disorder or Social Maladjustment. The most important finding in this study was that children with the label Serious Emotional Disturbance received more negative expectations despite how the child's behavior was described. Overall, the professionals and students judged

children with SED more negatively than children with SM, CD, or NE and had lower expectations of future success for this particular group.

Levin, Arluke, and Smith (1982) found similar results when examining teacher expectations for children who are labeled emotionally disturbed, mentally retarded, or dyslexic. The researchers distributed a psychological report on each student to 75 high school teachers and then asked the teachers to evaluate the behavior and academic achievement of the students. In contrast with earlier research, the mentally retarded label did not impact teacher expectations. However, in congruence with earlier research, the emotionally disturbed label had a negative effect on teacher expectations. Other findings from the study indicated that with specific labels behavior had a consistent negative effect on teacher expectations (Levin et. al.). This study provided important information supporting the hypothesis that the emotional disturbance label appeared to be one of the more powerful labels in affecting a teacher's expectations. Behavior seemed to influence differential expectations as well.

Historically, children with emotional disturbance have been poorly treated, stigmatized, cast out of society, and mentally abused. Research has shown that teachers have differential expectations for children who carry an emotionally disturbed label (Levin et al., 1982; Fox & Stinnett, 1996). These students are perceived as low achievers, having low competency levels, having predicted poor outcomes, and as a disturbance to the classroom. Despite the fact that some of these children may have great potential, review of the literature indicates that teachers can have a negative effect on a child's success (Gillung & Rucker,

1977). Emotional disturbance can create stigmatization that is difficult to overcome in the school systems.

Principals and Labeling Bias

Little research has been conducted concerning principals and labeling bias. The literature on labeling bias has used teachers as participants. Professionals tend to overlook the key role principals play in the school as an authority figure and as a member of multidisciplinary teams (Hartman et al., 2002; Stein & Merrell, 1992). The principal in an elementary school is the top ranked authority figure within the school. They provide guidance, support, and leadership. Teachers, especially new teachers, may be easily swayed by decisions made by principals even if it is not consistent with their beliefs. If principal's illicit negative connotation towards children with labels, teachers may perceived their behavior as appropriate toward this group of children. Principals must establish an environment that provides equality for all children and a presence that considers all children as individuals.

Principals also contribute significantly to the school climate for their school buildings (Heck & Marcoulides, 1990; Hoy & Henderson, 1983; Porter, Lemon, & Landry, 1989). The climate they create effects the entire population of the school. Heck and Marcoulides suggested that with instructional leadership, higher achievement was evidenced. Other research agreed that certain climates can improve behavior in the school, particularly when the principal takes a humanistic approach to the students and treats them like people (Hoy & Henderson). The principal may also help control important decisions as a part of

multidisciplinary teams. Children with disabilities can be affected by everyday by decisions that these teams make. In short, principals are influential on decisions and attitudes in their schools.

Smith Flexer, and Sigelman (1980) examined the attitudes of principals towards exceptional children. In their study, 135 principals completed questionnaires pertaining to adolescents who were labeled as mentally retarded, learning disabled or nonlabeled. Results indicated that adolescents associated with the mentally retarded label were rated less positively than those with the learning disability label. The adolescents with the learning disability label were rated significantly less positive than a nonlabeled person. Overall, the learning disabled person was perceived more similar to the mentally retarded person rather than the nonlabeled person, especially in areas pertaining to personality and morality. The study indicates that principals perceive individuals with labels different than those without labels.

Another study yielded different results. Cline (1981) examined the knowledge of principals about handicapped children and their attitude toward those children. The study compared knowledge and attitude of principals to that of experts. Overall, the only area in which the principals differed significantly from experts in attitude was in rating those who were labeled as mildly handicapped students. The principals rated the children significantly less positively than the experts. In all other areas, principals' ratings were similar to the experts. The principals' knowledge was not comparable to the experts in regards to understanding mental retardation. The study concluded that even with

the presence of a special education class or program within the school, the principals' attitudes and knowledge about handicapped children were not affected.

Stein and Merrell's (1992) study further supported the idea that principals may lack the knowledge needed to cope with special education in their schools and judge certain students fairly. They examined factors that multidisciplinary team members consider when making distinctions between students with serious emotional students and those with social maladjustment. Overall, principals were less able to identify important characteristics related to emotional disturbance and social maladjustment, identifying less important characteristics instead. The main confounding factor in this study was that the information was presented in the form of a questionnaire rather than being presented with a more realistic situation.

In sum, there is little research concerning the attitudes and opinions of principals towards students with labels, handicaps, or disabilities. The collection of research that does exist is contradictory. Some research indicates that principals have negative attitudes toward disabled students while other research provides evidence that indicates principals have similar attitudes to those of school psychologists. Other relevant research suggests that principals have a lack of knowledge of exceptionalities which may have an effect on programs that exist in their schools. Research which has examined principals and labeling bias has focused on adolescents or older youth. However, emotional disturbance is

usually diagnosed while the student is in elementary school. Labeling bias should be examined with principals of this age group.

CHAPTER III

METHOD

Introduction

The method section describes in detail each step and procedure used in this study, including descriptives of participants, instruments, procedures, and data analysis.

Participants

Eighty-eight elementary school principals from different areas of Oklahoma and Texas participated in the current study. Principals were randomly assigned to the study conditions. They represented various ages and experience levels.

Instruments and Materials

Elementary school principals were solicited by mail and received packets with the research information. The packets included an introductory letter, a demographic questionnaire, a vignette, a rating scale, a Behavior Rating Scale for Children-Teacher Rating Scale (BASC-TRS) and a consent form.

Introductory Letter – The introductory letter was the initial sheet of paper the principals read. The letter introduced the study and described it as an investigation of procedures for special education. The letter also explained the confidentiality of the current study.

(See Appendix A)

Consent Form – The consent form was a written, informed consent. The form reiterated the confidentiality procedures in terms of who would have access to the data and that all forms and responses were coded with identification numbers. The form also allowed the participants to request information following the completion of the study. (See Appendix B)

Demographic Questionnaire – The demographic form was used to collect data on items such as age, years in the school system, presence of a special education program in their school, years the program has been in place, size of the school district (rural, urban, suburban), and experience with special education children. (See Appendix C)

Vignettes – The vignettes were used to provide participants with information about the child. The vignettes represented information the principal would hear from other school personnel, parents, or read in a file. The vignettes described the behaviors and characteristics of the child. (See Appendix D)

Rating Scale – The rating scale was completed after all information had been administered to the principal. After reading the vignette, the principal completed the rating scale, based on their impressions and attitudes toward the child. The scale was designed to measure a principal's opinion on need for special

education need and accommodations. The scale was examiner-made and structured as a 4 point Likert Scale, which provided the following choices for all questions: Strongly Agree, Agree, Disagree, and Strongly Disagree (See Appendix E). Raw scores from the scale were added together to produce a total score. Higher scores indicated an attitude of lower need for special education services and educational accommodations. Lower scores indicated and attitude of higher need for special education services and educational accommodations. A reliability analysis of the scale produced an alpha coefficient of .81 (*M* = 44.19, SD = 5.32).

BASC-TRS – The Behavior Assessment System for Children-Teacher Rating Scale (BASC-TRS) was completed after all information was presented to the principal. The scale served as a device to rate the principals' perceptions of behaviors of the students described. The BASC-TRS is a well-established instrument and assesses clinical problems in the broad domains of Externalizing Problems, Internalizing Problems and School Problems (Reynolds & Kamphaus, 1992). It also measures Adaptive Skills. The scale has an internal consistency average of .80, test-retest reliability average of .87, and interrater reliability average of .72 (Reynolds & Kamphaus). The BASC- TRS is designed to sample the symptomatolgy associated with popular diagnostic codes found in the DSM-IV (Reynolds & Kamphaus). There are 148 questions on the BASC-TRS with 4 possible responses: never, sometimes, often, and almost always. The scales produce composite T-scores. Higher T-scores on the externalizing problems,

internalizing problems, and school problem indices indicate problem areas. Lower scores on the adaptive scales indicate difficulties in this domain.

Procedure

Four hundred and fifty packets were mailed out to elementary school principals received packets containing the instructional letter, the consent form, the vignette, the rating scale, the BASC-TRS and the demographic questionnaire. Eighty-eight of the forms were returned to researchers (19.5% return rate). The forms were placed in a specific order, paper clipped within the packet, and mailed to the elementary school principals. The introductory letter was first in the packet with the consent form following, the demographics questionnaire, the vignette, the rating scale, and BASC Teacher Rating Scale.

Each of the principals received a vignette about a child with descriptive factors including problem behavior pattern, a label condition, and achievement style. There were 2 levels of problem behavior pattern (internalizing and externalizing). There were two levels of label (emotionally disturbed and not labeled). There were 2 levels of achievement style (high and low achievement). This resulted in 8 possible cells. An attempt was made to have equivalent numbers of participants in each cell. Participants were randomly assigned to the conditions in the study. After reading the information about the child, the principals were asked to rate the child on an examiner-made scale and the BASC-TRS based on their impressions and opinions of the child. The principals were provided with a self-addressed envelope and were asked to return the studies to the researcher.

CHAPTER IV

RESULTS

The purpose of the study was to determine if elementary school principals held differential expectations for children labeled with emotional disturbance, low or high achievement, and externalizing or internalizing behavior characteristics. It was hypothesized that children labeled emotionally disturbed would receive more negative ratings than those not labeled. Specifically, it was predicted that scores on the BASC would be more elevated in the areas of externalizing behaviors and school problems for children labeled emotionally disturbed while scores on adaptive skills would be much lower than for children not labeled. In the area of achievement, it was hypothesized that children with low achievement would be rated much more negatively than those children described with high achievement. The final hypothesis was that children exhibiting externalizing behaviors would receive poorer scores than those exhibiting internalizing behaviors.

Descriptive and Demographic Information

There were 88 participants in this study. There were 31 males (35.2%) and 57 females (64.8%). All were public school elementary principals. Diverse age groups were included in the sample; 46.6% of the group fell in the >50 years age range, 21.6% in the 46-50 years range, 12.5% in the 41-45 years range,

12.5% in the 36-40 years range, 4.5% in the 31-35 years range and 2.3% in 25-30 years age range. The sample contained six different ethnicities; Caucasian (*n*=66, 75%), Black/African American (*n* = 10, 11.4%), Native American (*n* =4, 4.5%), Japanese (*n* = 1, 1.1%), Hispanic (*n* = 6, 6.8%), and Asian/Pacific Islander (*n* = 1, 1.1%). Participating principals reported the population of their current city. Four different ranges were indicated; rural (*n* = 19, 21.6%), rural/suburban (*n* = 12, 13.6%), suburban (*n* = 15, 17%), and urban (*n*=42, 47.7%). Participants had diverse amounts of teaching experience; 31.8% had more than 20 years, 11.4% had 16-20 years, 21.6% had 11-15 years, 22.7% had 5-10 years, and 12.5% had 1-5 years experience. Years of experience as a principal also varied; 35.2% had 1-5 years, 26.1% had 6-10 years, 18.2% had 11-15 years, 9.1% had 16-20 years, and 11.4% had more than 20 years experience. About 77% of the sample had taken a class related to special education during their education, while 22.7% had not received a special education related class during their education. In the sample, 38.6% had a relative diagnosed with a disability while 62.4% did not. One hundred percent of the sample had special education programs at their schools. Of the programs, 62.5% had a specifying placement for children with emotional disturbance whereas 37.5% of the sample did not.

Analyses

Data from the BASC-TRS were analyzed using a multivariate analysis of variance (MANOVA). Label, achievement style, and problem behavior pattern served as the independent variables and the BASC-TRS composite scores:

externalizing problems, internalizing problems, school problems and adaptive skills, served as the dependent variables. Table 1 presents the complete results of the multivariate analysis. The multivariate (MANOVA) indicated there were group differences on the dependent variables. There was a statistically significant multivariate main effect for label on the BASC TRS scales (F = 2.547, *Wilks'* Λ = .883; p = .046) accounting for 12% of the variance across the dependent variables. There were also significant main effects for achievement style (F = 3.079; *Wilks'* Λ = *.86;* p = .02*)* and problem behavior pattern (F = 26.41; *Wilks'* Λ = .42; p < .001). However, a statistically significant Achievement Style X Problem Behavior Pattern interaction (F = 2.80, *Wilks'* Λ = .873; p = .032) qualified the main effect for achievement style and problem behavior pattern. The interaction accounted for 13% of the variance.

Table 1

Multivariate Analysis of Variance Summary Table

Source	Wilks' Λ	F	p value
Label	.883	2.547	.046
Achievement	.862	3.079	.021
Behavior	.422	26.410	.000
Label x Achievement	.915	1.796	.138
Label x Behavior	.937	1.284	.284
Achievement x Behavior	.873	2.800	.032
Label x Achievement x Behavior	.923	1.597	.184

Further examination of the significant multivariate effects were completed using univariate analysis of variance (ANOVA). For the Label main effect, ANOVA indicated there were significant differences for BASC-TRS Externalizing Problems (F = 8.23; df = 1; p = .005; eta^2 = .093) and BASC-TRS Internalizing Problems (F = 7.22; df = 1; p = .009; eta^2 = .083). The BASC-TRS School Problems dependent variable (F = 3.51; df = 1; p = .064; eta^2 = .042) approached significance. It should be noted that even though there was a problem behavior pattern by achievement style interaction effect, the problem behavior pattern main effect was based on very large group differences.

The multivariate interaction was also examined with ANOVA. Univariate analysis revealed the effect was specific to the dependent variable of BASC-TRS Externalizing Problems (F = 5.47; df = 1; p = .022; eta^2 = .064) (see Figure 1 & 2). The interaction accounted for 6% of the variance in Externalizing Problems. No other univariate interaction effects were noted.

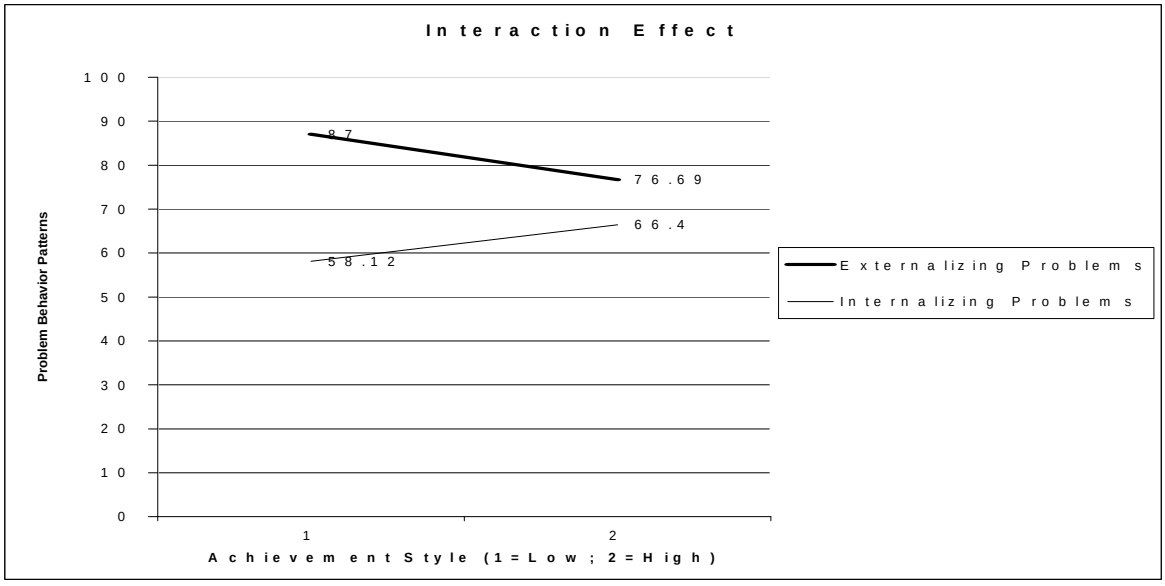
Figure 1

Cell Means for Achievement Style and Problem Behavior Pattern

PROBLEM BEAHVIOR PATTERN	ACHIEVEMENT STYLE: Low Achievement	ACHIEVEMENT STYLE: High Achievement
Externalizing	87.00	76.69
Internalizing	57.62	66.90

Figure 2

Univariate Interaction Effect on Externalizing Problems



The examiner-made rating scale is a measure of principals' attitudes toward need for special education placement and educational accommodations, provided 14 item raw scores which were added together to make a Total Score. An ANOVA was used to analyze the Total Score computed by summing the item raw scores on the scale. Table 2 presents the ANOVA summary table. There was a statistically significant main effect for behavior ($F = 26.65$; $p < .001$). No other main effects are present. There was a significant interaction between label and achievement style ($F = 4.21$; $df = 1$; $p = .043$; $eta^2 = .050$) which accounted for 5% of the variance (See Figures 3 & 4). No other interaction effects are present.

Table 2

Analysis of Variance Summary Table for Examiner-Made Scale

Source	Mean Square	*F*	*p* value
Label	20.05	.877	.352
Achievement	3.46	.152	.698
Behavior	609.60	26.653	.000
Label x Achievement	96.44	4.217	.043
Label x Behavior	30.83	1.348	.249
Achievement x Behavior	2.37	.104	.748
Label x Achievement x Behavior	83.48	3.650	.060

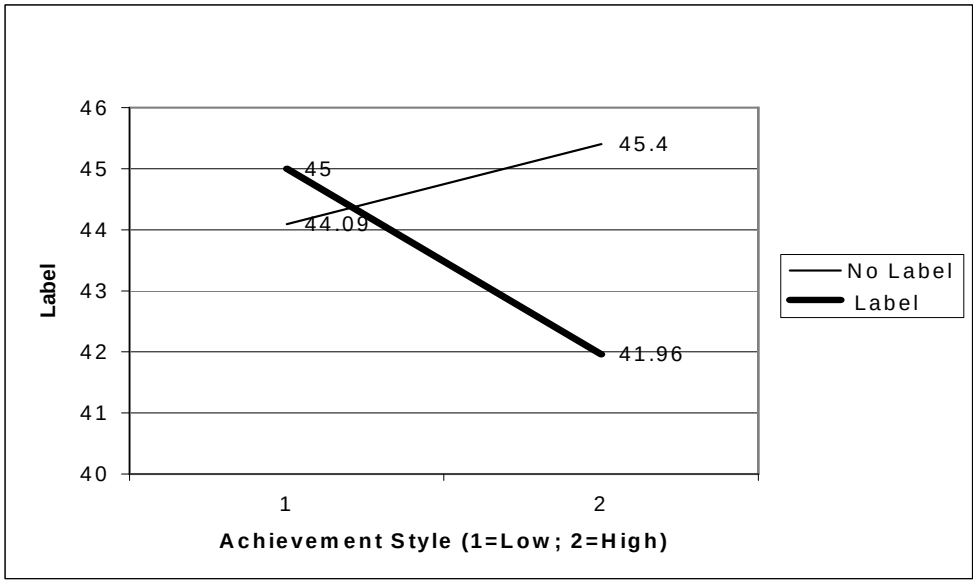
Figure 3

Interaction Effect for Achievement Style X Label on the Examiner-Made Scale

		ACHIEVEMENT STYLE	
		Low Achievement	High Achievement
LABEL	No Label	44.09	45.40
	Emotionally Disturbed	45.00	41.96

Figure 4

Interaction Effects for Achievement Style X Label on the Examiner-Made Scale



CHAPTER V

DISCUSSION

Half a century ago, social psychologists implied that people must categorize others in order to reduce the complexity of every day life. Therefore, people will continue to place others into categories despite having a formal label or not. Such categorization may have detrimental effects on children in that it may result in a condition of self-fulfilling prophecy (Foster & Ysseldyke, 1976). However, labels may also help guide principals to create successful programs for children with disabilities. The major purpose of this research was to further examine how labels might effect attributions made by educators.

Principals are of particular interest to researchers because they have not been studied in terms of labeling bias. Principals play a vital role in how children are viewed by teachers throughout children's educational career. Not only do principals often sit on multidisciplinary team meetings and make special education decisions, they also set the climate for the school atmosphere (Heck & Marcoulides, 1990; Wallace, 1994).

Principals are seen as role models and leaders with a broad knowledge base. If principals have differential expectations for children who need special education services or for students in general, teachers can be influenced about how they approach these children. Principals need to provide the appropriate

climate in schools and present an attitude that all students have the right to be successful despite their label or any characteristics associated with them.

Many researchers have demonstrated labeling effects (Algozzine & Stoller, 1981; Feldman et al., 1983; Field et al., 1992; Foster et al., 1998; Fox & Stinnett, 1996; Taylor et al., 1983;). Teachers rate students labeled emotionally disturbed far more negatively than those not labeled. This was a general finding in the current study. Children who are labeled and display either internalizing or externalizing problems can elicit negative biases. However, researchers have failed to explore the attitudes and expectations of principals toward labeled children.

The current research examined the effects of labels, achievement style, and problem behavior patterns on elementary school principals' judgments. There was an interaction effect between problem behavior patterns and achievement style on the BASC rating scales. Low achievement paired with externalizing behaviors was responsible for the effect. Children with externalizing behaviors and low achievement received much more negative scores than low achievement and internalizing behaviors. Principals make more negative judgments toward students who are not performing well and exhibit externalizing behaviors in the classroom. When children are disruptive, it interferes with instructional time, annoys teachers and peers, seeking attention, and interferes with academic tasks. They may be personally blamed for problems in the classroom. Overt acting out makes it easier for school officials to attribute disruption in the classroom to children who are labeled emotionally disturbed and

are not achieving in the classroom. When students are a disturbance and low achievers, it makes it difficult for teachers to remain positive toward this group of students.

Internalizers who are low achievers are not as noticed in the classroom. These students are often withdrawn, do not interrupt instructional time, do not annoy others, do not seek attention, and do not exhibit overt problem behaviors in the classroom. Rosenthal and Jacobson (1968) found that teachers make judgments based on previous achievement. Algozzine and Stoller (1981) suggested that students with higher achievement are not rated as negatively as those with lower achievement. They indicate that special education teachers are attentive to a child's functional abilities and use them as a basis for future expectations (Algozzine & Stoller. For instance, an ED child who is integrated into regular education classes is seen as more competent than those who are not integrated.

The current study revealed a small label effect. Elementary school principals rated children labeled emotionally disturbed more negatively than those not labeled. Even though both groups were described with the same behavior problems, principals perceived students labeled emotionally disturbed as having more internalizing and externalizing problems than those who are not labeled. The BASC-TRS research indicates that those students categorized under the emotional disturbance label generally receive elevated scores in the areas of depression, school problems, and externalizing problems (Reynolds & Kamphaus, 1992).

Internalizing problems are usually not elevated. Scores on school problems and study skills are mostly very low. When a label was provided for a principal, he or she rated the child high on internalizing, externalizing, and school problems. Children with identical behaviors and descriptions who were not labeled did not receive the significant ratings. Social psychologists state that every person makes decisions based on heuristics (Aronson, 1996). Heuristics place information into categories based on the amount of knowledge a person has on a particular topic. If a person has limited information, then he or she may make rash decisions. As more knowledge is gained, a person is better able to follow more accurate decision-making steps without biased judgment. During this process, it is also possible that the person may decide to collect more research on the topic rather than make a rash or unsupported decision. When examining the results of the label effect in this research, it is necessary to consider that the principals were using the label information to attempt to make a more educated assessment of the child. They may have associated certain behaviors with the emotional disturbance label in which they based their decision on how to rate the child.

The examiner-made scale was produced based on information that may be discussed during IEP meetings. The questions are often answered during the meetings as part of the placement decision for the child. The scale was created to determine attitudes toward special education placement and educational accommodations. The examiner-made rating scale produced results that indicated that problem behavior pattern had a main effect in the manner in which

the principals rated the child. Principal's rated students with externalizing behaviors more negatively than those with internalizing behaviors. Theoretically, the research agrees with this finding in that externalizing behaviors are much more noticeable than internalizing behaviors.

Researchers have found that externalizing behaviors are often described as aggressive, impulsive and negativistic (Lambros, Ward, Bocian, MacMillan, & Gresham, 1998; Woodward, Roberts, Santa-Barbara, & Johnson, 1974). Internalizers are often withdrawn, fearful, and anxious and many times go unnoticed by society because they are compliant and seem well-behaved (Lambros et al.). Therefore, externalizing behavior descriptions should produce more negative ratings than internalizing behaviors because the students with these behaviors are much more disruptive in the classroom and interrupt instruction time. Internalizers keep to themselves and do not cause a disturbance during class time. The rating scale also produced an interaction effect between label and achievement. Students with no label and high achievement received the highest scores. Surprisingly, those with high achievement paired with a label produced the lowest scores. It would be expected that students with low achievement and a label would receive the lowest scores. However, it may be possible that the principals consider children with higher achievement as more successful with special education programs than those with low achievement. Principals may perceive that this group of children could most benefit from a special education program whereas those with low achievement may not benefit. Therefore, they may have anticipated that this

group of students would be most appropriately placed in a special education setting.

On final note, there were significant effects for problem behavior pattern on both rating scales. Despite having interaction effects, problem behavior pattern influenced ratings more than any other independent variable. Principals seem most concerned with children who are exhibiting externalizing behaviors in the classroom and cause a disturbance to instructional time. Further research should be conducted examining the effects of externalizing behaviors on expectations in the educational setting.

Limitations of the Study

Previous research has not studied principals' expectations of children identified with special education codes, particularly emotional disturbance. On the other hand, research with teachers began many years ago. Brophy and Good (1970) suggested several future studies with teachers and their expectations toward children. Many studies followed to provide supporting evidence that differential expectations are present in teacher ratings and attitudes. Just as research supported that phenomenon, the current research needs further supporting evidence to provide justification that labels do have an effect on principals' expectations. Another area that may limit the current study is the locations from which the sample was taken. The data were primarily collected in Oklahoma and Texas. Principals from other regions of the country may have different attitudes and polices concerning special education and labeled students. Different attitudes could certainly produce either more positive

or more negative ratings toward the students described in the vignettes. In conjunction with this idea, knowledge about emotional disturbance was not fully accounted for. Knowledge of the characteristics of children with these types of behavior difficulties could have influenced judgments. Though the majority of the sample took a class related to special education, this does not control for the lack of knowledge about emotional disturbance. The study also did not provide a condition in which label was presented in isolation, without information describing the child. Instead, label was presented with achievement style and problem behavior pattern. Because there were other factors, the effect may have been influenced by the other variables.

There seems to be an implied expectation for participants to provide ratings for vignettes that accurately reflect the nature of the child without bias. McConaughy (1992; 1993) reported this is a limitation of rating scales because the ratings reflect perceptions of a child's behaviors or learning problems and can vary from one participant to the next. Ratings can be influenced by a variety of factors (i.e., context, relationships, experiences, and tolerance for behavior). Because rating scales are perceptions of a participant based on what they have read, interpretation can be generally confounded. Vignettes can not truly account for how a person would react in a real life situation.

Implications

These results have implications for school professionals. The label emotionally disturbed can have effects, particularly as it relates to judgments placed on children. Negative expectations of a child's ability may interfere with

acquisition of skills in the school setting and help to perpetuate school adjustment difficulties. The research adds to the growing body of literature that addresses the effect that labels have on children. Some children do require special class placement to be successful and it may be adding a label is the only solution to provide appropriate services (Foster & Ysseldyke, 1976). There is well-established literature base regarding the poor outcomes for these types of children (Loeber et al., 1991; Phelps & McClintock, 1994; Robins and Price, 1991). Attempting to discard all labels is an oversimplification of the problem. When describing children to others, educators should not just indicate a label, but also depict behaviors that provide information regarding what a child is or is not able to do, how to alleviate certain behaviors, and how the child has been successful.

Many principals reported that they felt uncomfortable completing the scales due to lack of information. This indicates that principals are aware that it is important to have a generous amount of information about a child before passing judgment. Several principals reported that they would like to receive results following the completion of the study. Principals are recognizing the need for knowledge in the area of special education in order to make the best possible decisions for children. Principals are aware how important it is for all educators to consistently receive updated training and review new literature and research. In conjunction, educator training programs could be designed for school districts to stress the importance of the individuality of the child and the broad range of behaviors that can encompass different disabilities and even be regarded as

normal. Perhaps with additional training, educators could become more objective of students, labels associated with students, and their individual needs.

Future Research

The current study found that principals demonstrate labeling bias with children who are labeled emotionally disturbed. The study did not fully account for previous knowledge or experience in dealing with emotionally disturbed children. Future research should examine treatment effects of specific training in the area of emotional disturbance and the idea of individuality of children. Additionally, research examining specific school climates including styles of principals (i. e. authoritarian, passive, collaborative, etc.) may provide another factor that explains certain attitudes toward children and their labels. Research with principals is quite limited when examining special education and attitude or expectations. Studies should look at larger geographical locations for future implications as different areas have different attitudes and training in the area of special education and labels. Finally, future research should focus on the effects of externalizing behaviors on expectations. Problem Behavior Patterns produced large effects in this study. A study strictly focusing on this concept would be beneficial to the database of research concerning children in the educational setting.

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APPENDIX A

INTRODUCTORY LETTER

Introductory Letter

Dear Principal _____:

My name is Brande Kettner and I am conducting research through Oklahoma State University. The purpose of my research is to determine procedures of special education across different school districts. The information being gathered from this project is very important to the future of special education. Participation in this study is completely voluntary. However, with completion of the information, you will be entered in a drawing for $50.

Information will be kept entirely confidential. All the questionnaires will be identified only by numerical codes. Information containing your name (i.e., informed consent form) will be kept separate from numbered materials and in a secure place. Therefore, all information provided will be anonymous.

If you choose to participate, please complete all materials enclosed in the package and return in the self-addressed envelope. Also, if you would like to be debriefed on the data collected from this project, please indicate so on the consent form.

Thank you for your time.

Sincerely,

Brande Kettner
Graduate Student, Oklahoma State University

APPENDIX B

CONSENT FORM

Consent Form

I,_____, hereby authorize or direct Brande L. Kettner to perform the procedures listed here.

A. **Purpose**: This study is designed to investigate different procedures of special education. This research is being conducted in order to determine behaviors that effect the placement of a child and to determine the amount of knowledge principals have in certain behavior disorders.

B. **Procedures**: In participating in this experiment, you will be asked to complete a demographic information sheet, read a short vignette, complete a behavior rating scale(BASC)and complete a survey regarding your impression and opinion about the student. After you have participated, you may contact the researcher to obtain more information pertaining to the nature of the study and any questions you may have will be answered.

C. **Length of Participation**It is estimated that your parti cipation will require a total of 30 minutes. Your participation is entirely voluntary; you can withdraw your consent at any time and discontinue participation.

D. **Confidentiality and Privacy**: All the questionnaires will be identified only by numerical codes. Information containing your name (i.e., informed consent form) will be kept separate from numbered materials and in a secure place. Therefore, all information provided will be anonymous. Participants have the option of obtaining results of this study. However, results are limited to main effects and significance for learning purposes. No specific information pertaining to individual participants, location, or personal detail of any sort will be released.

E. **Risks**: The risks in this study are minimal and do not exceed those ordinarily encountered in daily life. If at any point you experience discomfort or have questions or concerns, the researcher will discuss these with you.

F. **Benefits**: As a research participant, you will be exposed to the conduct of scientific psychological research and may gain insight into your own beliefs and attitudes. In addition, you will gain helpful information if you pursue the results obtained within this study.

****

I have been fully informed about the procedures listed here. I am aware of what I will be asked to do and of the risks and benefits in this study. I also understand the following statements:

I understand that participation is voluntary and that I will not be penalized if I choose not to participate. I also understand that I am free to withdraw my consent and end my participation in this project at any time without penalty after I notify the researchers.

I may contact Sharon Bacher, IRB Executive Secretary, Oklahoma State University, 415 Whitehurst, Stillwater, OK 74078 for more information concerning my rights as a subject. Phone: 405-744-5700.

I have read and fully understand the consent form. I sign it freely and voluntarily. A copy has been given to me.

Date:_____

Time:_____ (a.m./p.m.)

Signed: _____

_____ Please check here if you would like to receive the results of this study.

I certify that I have provided explanation for all elements of this form to the before requesting the subject to sign it.

Signed: _____
Project director or authorized representative

Signed: _____
Dissertation Advisor: Terry A. Stinnett, Ph.D.

APPENDIX C

DEMOGRAPHIC QUESTIONNAIRE

Demographic Questionnaire

1. Sex_____

2. Age Range _____ <25
_____ 26-30
_____ 31-35
_____ 36-40
_____ 41-45
_____ 46-50
_____ >50

3. Ethnicity
_____ Caucasian
_____ Black/African American
_____ Native American
_____ Chinese
_____ Japanese
_____ Hispanic
_____ Asian/Pacific Islander
_____ Other (Please Specify)_____

4. Population
_____ Rural (< 5,000)
_____ Rural/Suburban (< 15,000)
_____ Suburban (< 50,000)
_____ Urban (> 50,000)

5. Teaching Experience
_____ 1-5 years
_____ 5-10 years
_____ 11-15 years
_____ 16-20 years
_____ >20 years

6. Principal Experience
_____ 1-5 years
_____ 5-10 years
_____ 11-15 years
_____ 16-20 years
_____ >20 years

7. During your education, did you participate in classes related to special education? ____yes ____no

8. Experience with Special Education
_____ Specialty
_____ Teacher in a school with a special education program
_____ Principal of school with a special education program
_____ Other (please indicate)_____

9. Do you have a relative diagnosed with any type of disability or disorder?
____yes ____no

10. Does your school have a special education program?
____ yes ____no

11. Which of the following does your school have appropriate programs for?
(If your answer to #10 was no, you may choose none)

_____ Mild Mental Retardation (ER 1)
_____ Moderate Mental Retardation (ER 2)
_____ Profound Mental Retardation (ER 3)
_____ Emotional Disturbance/Behavior Disorder
_____ Autism
_____ Academic Learning Disability
_____ Psychological Disorders or Disturbances
_____ Physical Disorders
_____ Other (please specify)_____
_____ None

12. How often do you participate in Multidisciplinary Team decisions?

_____ 1-2 times a month
_____ 3-4 times a month
_____ 5 or more times a month
_____ Never

APPENDIX D

VIGNETTES

Vignettes

1. John is a 9-year-old boy in the fourth grade. Teachers are experiencing difficulties with him in the classroom despite the fact that he is a high achiever. John was recently diagnosed as being emotionally disturbed and exhibits behaviors such as hyperactivity, aggression, and opposition toward peers, teachers and school personnel. He is becoming more and more of a disturbance in the classroom.

2. John is a 9-year-old boy in the fourth grade. Teachers are experiencing difficulties with him in the classroom behaviorally and academically. John is not performing well in the classroom and is showing signs of being a low achiever. John was recently diagnosed as being emotionally disturbed and exhibits behaviors such as hyperactivity, aggression, and opposition toward peers, teachers and school personnel. He is becoming more and more of a disturbance in the classroom.

3. John is a 9-year-old boy in the fourth grade. Teachers are experiencing difficulties with him in the classroom despite the fact that he is a high achiever. John is exhibiting behaviors such as hyperactivity, aggression, and opposition toward peers, teachers and school personnel. He is becoming more and more of a disturbance in the classroom.

4. John is a 9-year-old boy in the fourth grade. Teachers are experiencing difficulties with him in the classroom behaviorally and academically. John is not performing well in the classroom and is showing signs of being a low achiever. John is exhibiting behaviors such as hyperactivity, aggression, and opposition toward peers, teachers and school personnel. He is becoming more and more of a disturbance in the classroom.

5. John is a 9-year-old boy in the fourth grade. John's teachers are becoming concerned with his behaviors. John is a high achiever, but appears to have low self-confidence, is quite shy, and does not seem to have many friends. John keeps to himself throughout most of the day. He was recently diagnosed as being emotionally disturbed. Though he is not a disturbance in class, John's teachers are concerned with his future success.

6. John is a 9-year-old boy in the fourth grade. John's teachers are becoming concerned with his behaviors. John is a low achiever. He appears to have low self-confidence, is quite shy, and does not seem to have many friends.

John keeps to himself throughout most of the day. He was recently diagnosed as being emotionally disturbed. Though he is not a disturbance in class, John's teachers are concerned with his future success.

7. John is a 9-year-old boy in the fourth grade. John's teachers are becoming concerned with his behaviors. Though John is a high achiever, he appears to have low self-confidence, is quite shy, and does not seem to have many friends. John keeps to himself throughout most of the day. Though he is not a disturbance in class, John's teachers are concerned with his future success.

8. John is a 9-year-old boy in the fourth grade. John's teachers are becoming concerned with his behaviors. John is a low achiever. He appears to have low self-confidence, is quite shy, and does not seem to have many friends. John keeps to himself throughout most of the day. Though he is not a disturbance in class, John's teachers are concerned with his future success.

APPENDIX E

RATING SCALE

Rating Scale

Please respond to the items using the following scale. Circle one item.

SA=Strongly Agree
A=Agree
D=Disagree
SD=Strongly Disagree

1. This student is likely to be disruptive in the classroom.
   SA A D SD
2. This student has emotional problems and should be placed in special education. **SA A D SD**

3. This student has behavioral problems and should be placed in special education. **SA A D SD**

4. This student will obtain an appropriate educational experience in your school.
   SA A D SD

5. The student's behavior difficulties are due to internal problems within the student. **SA A D SD**

6. This child will be a disturbance to other students in the school.
   SA A D SD

7. This child will not be successful in your school.
   SA A D SD

8. This child should be placed into regular elective classes (PE, Art, etc), but placed in a resource room the remainder of the day.
   SA A D SD

9. This student should be integrated into the regular classroom.
   SA A D SD

10. This student should be self-contained during the full school day period.
    SA A D SD

11. This student should be placed with other students who have the same behavioral/emotional problems.
    SA A D SD

12. This student should be entirely homebound and provided with an aid.
    SA A D SD

13. This student should be placed in a private care facility.

SA A D SD

14. This student should be placed in a children's hospital on the psychiatric ward.

SA A D SD

APPENDIX F

Definition of Emotional Disturbance

Definition of Emotional Disturbance is defined as follows under the Individuals with Disabilities Education Act (IDEA), Public Law 101-476, as follows:

(i) The term means a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a child's educational performance: (A) An inability to learn that cannot be explained by intellectual, sensory, or health factors. (B) An inability to build or maintain satisfactory interpersonal relationships with peers and teachers. (C) Inappropriate types of behavior or feelings under normal circumstances. (D) A general pervasive mood of unhappiness or depression. (E) A tendency to develop physical symptoms or fears associated with personal or school problems. (ii) The term includes schizophrenia. The term does not apply to children who are socially maladjusted, unless it is determined that they have an emotional disturbance. [Code of Federal Regulations, Title 34, Section 300.7(c)(4)]

APPENDIX G

IRB Approval

Oklahoma State University
Institutional Review Board

Protocol Expires: 6/12/2004

Date: Friday, June 13, 2003 IRB Application No ED03116

Proposal Title: ELEMENTARY SCHOOL PRINCIPAL'S EXPECTATIONS FOR CHILDREN LABELED WITH EMOTIONAL DISTURBANCE

Principal Investigator(s):

Brandie Kettner
434 Willard
Stillwater, OK 74078

Reviewed and Processed as: Exempt

Approval Status Recommended by Reviewer(s): Approved

Dear PI :

Your IRB application referenced above has been approved for one calendar year. Please make note of the expiration date indicated above. It is the judgment of the reviewers that the rights and welfare of individuals who may be asked to participate in this study will be respected, and that the research will be conducted in a manner consistent with the IRB requirements as outlined in section 45 CFR 46.

As Principal Investigator, it is your responsibility to do the following:

1. Conduct this study exactly as it has been approved. Any modifications to the research protocol must be submitted with the appropriate signatures for IRB approval.
2. Submit a request for continuation if the study extends beyond the approval period of one calendar year. This continuation must receive IRB review and approval before the research can continue.
3. Report any adverse events to the IRB Chair promptly. Adverse events are those which are unanticipated and impact the subjects during the course of this research; and
4. Notify the IRB office in writing when your research project is complete.

Please note that approved projects are subject to monitoring by the IRB. If you have questions about the IRB procedures or need any assistance from the Board, please contact Sharon Bacher, the Executive Secretary to the IRB, in 415 Whitehurst (phone: 405-744-5700, sbacher@okstate.edu).

Sincerely,

Carol Olson

Carol Olson, Chair
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VITA

Brande Lea Kettner

Candidate for the Degree of

Doctor of Philosophy

Dissertation: ELEMENTARY SCHOOL PRINCIPALS' EXPECTATIONS FOR CHILDREN LABELED WITH EMOTIONAL DISTURBANCE

Major Field: School Psychology

Biographical:

Personal Data: Born in Pryor Oklahoma, June 11, 1977, the daughter of Bobby and Cheryl Jackson.

Education: Graduated from Pryor High School, Pryor Oklahoma in May, 1995; received a Bachelor of Arts degree in Psychology from Oklahoma State University, Stillwater, Oklahoma in May, 1999; received a Master of Science Degree in Applied Behavioral Studies from Oklahoma State University, June, 2001. Completed the requirements for the Doctor of Philosophy degree with a major in School Psychology at Oklahoma State University in May 2005.

Professional Experience: Graduate Assistant, School of Applied Health and Educational Psychology, Oklahoma State University, August 1999-June 2003; Doctoral Intern, Fort Worth Independent School District, July 2003-July 2004; School Psychologist, Fort Worth Independent School district July 2004-present.

Professional Organizations: International School Psychology Association, National Association of School Psychologists, American Psychological Association, Texas Association of School Psychologists, Dallas/Fort Worth Regional Association of School Psychologists

Name: Brande Kettner Date of Degree: May, 2005

Institution: Oklahoma State University

Location: Stillwater, Oklahoma

Title of Study: ELEMENTARY SCHOOL PRINCIPALS' EXPECTATIONS FOR CHILDREN LABELED WITH EMOTIONAL DISTURBANCE

Pages in Study: 82

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Scope and Method of the Study: The purpose of the study was to examine elementary school principals' expectations for children labeled with emotional disturbance. The study also investigated the effects of problem behavior patterns (externalizing versus internalizing), and achievement style (high versus low). The participants were 88 elementary school principals from different areas of Oklahoma and Texas. Each participant received a research packet that included an introductory letter, consent form, demographic questionnaire, vignette, BASC-TRS and an examiner made rating scale. MANOVA and ANOVA procedures were used to analyze the data gathered with the BASC scales and the examiner made rating scale.

Findings and Conclusions: A significant multivariate main effect for label occurred on the BASC-TRS. Univariate follow-up analysis indicated the effect occurred on the BASC Externalizing Problems, and Internalizing Problems dependent variables. A multivariate Achievement Style X Problem Behavior Pattern interaction effect was also found on the BASC-TRS scales. Univariate analysis indicated the interaction effect occurred on the BASC Externalizing Problems dependent variable. There was also a significant main effect for Problem Behavior Pattern on the examiner made rating scale. There was also a significant interaction effect for Label and Achievement Style. The findings indicate that principals rate children with labels differently than those who do not have a label on the BASC-TRS. Problem behavior patterns also produced differential ratings for children who have externalizing behavior descriptions on the examiner made rating scale which was created to measure need for special education services.

Advisor's Approval: Dr. Terry Stinnett