ED 399 622 EA 027 865

AUTHOR Walker, Doris McEwen; Hudson, Johnetta

TITLE Coping with the Principalship: Health Challenges of

African-American Female School Principals and the Implications for Principal Training Certification

Programs at Colleges and Universities.

PUB DATE 11 Jul 96

NOTE 26p.; Paper presented at the Annual International

Congress on Challenges to Education (Palm Beach,

Aruba, July 11, 1996).

PUB TYPE Speeches/Conference Papers (150) -- Tests/Evaluation

Instruments (160) -- Reports - Research/Technical

(143)

EDRS PRICE MF01/PC02 Plus Postage.

DESCRIPTORS Coping; Elementary Secondary Education; Health

Education; Interpersonal Competence; *Mental Health;

*Physical Health; *Principals; Professional Development; Self Concept; Stress Management;

Surveys

IDENTIFIERS African Americans; *Stress (Biological)

ABSTRACT

School principals face personal challenges as a result of the effect their job has on their health. This paper presents findings of a study that examined the extent to which eight health concepts, developed by the Medical Outcomes Study (MOS) team at the Health Institute, were prevalent within a population of school principals. A survey mailed to 266 elementary and secondary principals and assistant principals in 4 school corporations in northern Indiana and Missouri elicited 166 returns, a 73 percent response rate. When compared to baseline data from the national population, both the sample and the national population reported similar responses to the eight health concepts, and both the principals and the national sample scored lower on measures of vitality. Principals' perceptions of their health were above the national means in physical functioning, bodily pain, and general health perceptions. However, principals ranked below the national means in the health concepts of social functioning, role in physical activities, general mental health, and role activities in emotional health. African-American female principals reported means for their overall physical and emotional health that were higher than those of the national population. It is recommended that training programs be revised to recognize stressors and physical and emotional health in order to increase the overall effectiveness of school principals. Three tables and a copy of the questionnaire are included. (Contains 27 references.) (LMI)



^{*} Reproductions supplied by EDRS are the best that can be made * from the original document.

COPING WITH THE PRINCIPALSHIP: HEALTH CHALLENGES OF AFRICAN-AMERICAN FEMALE SCHOOL PRINCIPALS AND THE IMPLICATIONS FOR PRINCIPAL TRAINING CERTIFICATION PROGRAMS AT COLLEGES AND UNIVERSITIES

Doris McEwen Walker, Ph.D.
Associate Professor
Director of School Administration
Indiana University South Bend

Johnetta Hudson, Ph.D.
Assistant Professor
University of Missouri - Kansas City

BEST COPY AVAILABLE

Paper presented at The Annual International Congress on Challenges to Education Aruba July 11, 1996

U.S. DEPARTMENT OF EDUCATION Office of Educational Research and Improvement EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

- This document has been reproduced as received from the person or organization originating it.
- Minor changes have been made to improve reproduction quality.
- Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

"PERMISSION TO REPRODUCE THIS MATERIAL HAS BEEN GRANTED BY

D. Walker

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)."

COPING WITH THE PRINCIPALSHIP: HEALTH CHALLENGES OF AFRICAN-AMERICAN FEMALE SCHOOL PRINCIPALS AND THE IMPLICATIONS FOR PRINCIPAL TRAINING/CERTIFICATION PROGRAMS AT COLLEGES AND UNIVERSITIES

Doris McEwen Walker, Ph.D. Johnetta Hudson, Ph.D.

School principals are faced with situations that challenge not only their ability to effectively lead instruction and perform the professional aspects of their job, they face personal challenges as a result of the affect the job has on their health. Carr (1994) points out that many principals feel isolated and unsupported. There is a high incidence of anxiety and depression among principals, due primarily to the increased management function. Time management and handling of student discipline issues are ranked the most stress-producing element in the administrative profession (Dickman, 1993). Stress leads to unhealthy behaviors and health problems. And since a degree of stress is inherent within the principalship, the job of school principal is laden with health risks. Pappas (1994) indicates that occupation is a contributor to health. Work conditions and the prestige associated with the job relate to health, particularly as they relate to one's reaction to stress. Scare resources, role ambiguity, role conflict, and serious organizational and administrative problems are the very nature of the principalship. It is these factors that Neville (1981) point to as the reason for occupational hazards experienced by managers. In addition to the common stressors existing among managers, school principals are exposed to stressors stemming from the educational learning environment. These stressors include disillusionment and frustration with academic achievement, student discipline and truancy problems, and unfair and disheartening public reaction to public schools (Friedman, 1995; Byrne, 1991; Sarros, 1988; Ricken, 1980; Ryor, 1978; Scrivens, 1979). Friedman (1995) indicates that,



1

particularly among female principals, home-work conflict is also a major stressor among school principals. Doring (1993) suggests that people work better under some degree of stress, but this degree varies according to the individual and his or her environment. Sires and Tonnsen (1993) also suggest that stress in moderation keeps one alert.

There have been some noteworthy studies on job-related stress, however little research exists on the self-perception of school principals on their overall well-being. Even less research has been found that compare school principals' health issues by gender and race and ethnicity. Specific groups within the American population are more likely to be affected by serious health concerns in certain categories. Pappas (1994) indicates that when the socioeconomic factors of income, marital status, and household income are controlled, African Americans are at higher risk for infectious diseases, homicide, and diabetes; and equally at risk for cancer and circulatory diseases. Waitzman and Smith (1994) indicate that hypertension is a major risk factor for heart disease and stroke and has a higher prevalence among African Americans. Another study on life expectancy (Kochanek, Maurer, and Rosenberg, 1994) support the findings of Waitzman and Smith.

A research study conducted by Anson, Para, Neuman, and Chernichovsky (1993) indicates that in general females are less happy, more distressed, and evaluate their health as poor twice as often as men. However, factored into this analysis must be the consideration that females are also more likely to be less educated and unemployed or underemployed.

The research in this study examines the extent to which eight health concepts, developed by the Medical Outcomes Study (MOS) team at The Health Institute, are prevalent within the population of school principals. These eight health concepts determine the overall physical and



emotional well-being of an individual, as they perceive themselves. The major objective of the research study was to obtain data on: 1) limitations in physical activities because of health problems; 2) limitations in social activities because of physical or emotional problems; 3) limitations in usual role activities because of physical health problems; 4) bodily pain; 5) general mental health (psychological distress and well-being); 6) limitations in usual role activities because of emotional problems; 7) vitality (energy and fatigue); and 8) general health perceptions. The responses on the eight health concepts are compared with the national population to determine whether school principals' perception of their health differs from the general population. The research further looks at whether African American females' self-perception of their health differs significantly from the survey and national populations. The major research hypothesis is that there is no significant difference between the self-perception of African American female school principals and the general population on their general health.

The research population consists of elementary and secondary school principals in Indiana and Missouri. Principals were given the MOS* 36-Item Short-Form Health Survey (SF-36). The survey has been researched and tested in the general population as well as in specific populations for validity and reliability (McHorney, Ware, and Raczek, 1993; Brazier, et al., 1992). The survey was constructed for self-administration for ages 14 and higher. The principal investigators sent the survey to school principals (principals and assistant/associate principals) for their responses. The data was disaggregated and compared with baseline data from the national population.

The primary objective of the research is to determine what changes, if any, are needed in school principal training and certification programs to reduce the health risks inherent in the job of

3



school principal. The secondary objective of the research is to comparatively look at specific populations, like African American female school principals, and their self-perceptions of health challenges to determine what, if any, differences exist in the perception of health.

Method

Sample

The subjects in the study were 226 public school principals and assistant principals in Missouri and Indiana. Of the total sample, 48 percent were females and 47 percent were males (5 percent did not disclose their gender); 58 percent were principals, 27 percent were assistant principals, and 5 percent indicated other (12 percent did not disclose their position). The ethnic representation of the sample consisted of 28 percent African American, 62 percent Caucasian, and .6 percent Native American (8 percent did not disclose race and ethnicity). The average age of the sample was 47.6. The average experience was 7.2 years. The proportion of female and male principals, age, years of experience in the sample approximates the general population.

Instrumentation

The MOS 36-Item Short-Form Health Survey (SF-36) was used in this study. A copy of the survey is included in Appendix A. The MOS - SF 36 was developed by the MOS team at The Health Institute in Boston, Massachusetts. The eight health concepts studies have had extensive review for validity and reliability with different populations. The instrument gives information on physical health, mental health, social functioning, vitality, and general health perceptions. In addition, information is obtained on how an individual perceives changes in their health. Exhibit



EXHIBIT 1.1:	INFORM	ATION ABOUT SF-36 HEA	LTH STATUS SCALES	
Health Concept	No. of	Meaning	of Scores	
	Items	Low	High	
Physical Functioning	10	Limited a lot in performing all physical activities including bathing or dressing	Performs all types of physical activities including the most vigorous without limitations due to health	
Role - Physical	4	Problems with work or other daily activities as a result of physical health	No problems with work or other daily activities as a result of physical health	
Bodily Pain	2	Very severe and extremely limiting pain	No pain or limitations due to pain	
General Health	5	Evaluates personal health as poor and believes it is likely to get worse	Evaluates personal health as excellent	
Vitality	4	Feels tired and worn out all of the time	Feels full of pep and energy all of the time	
Social Functioning	2	Extreme and frequent interference with normal social activities due to physical or emotional problems	Performs normal social activities without interference due to physical or emotional problems	
Role-Emotional	3	Problems with work or other daily activities as a result of emotional problems	No problems with work or other daily activities as a result of emotional problems	
Mental Health	5	Feeling of nervousness and depression all of the time	Feels peaceful, happy, and calm all of the time	
Reported Health Transition	1	Believes general health is much better now than one year ago	Believes general health is much worse now than one year ago	

^{*}Source: Ware, J. E. (1993). <u>SF-36 Health Survey: Manual and Interpretation Guide</u>. Boston: The Health Institute, New England Medical Center.

The survey of Indiana and Missouri principals also included a question on reported health



transitions that was not included in the SF-36. This question (#2A) ask principals to compare their health now to what it was when they first entered the principalship. In addition, the Missouri survey also asked principals to respond to whether they had any other ailments not mentioned above which have been brought on by job stress, i.e., high blood pressure, high cholesterol, heart disease, weight gain?

Procedure

Surveys were mailed to school principals and assistant principals in four school corporations in Northern Indiana (Elkhart, School City of Mishawaka, Penn-Harris-Madison, and South Bend) and Missouri (Kansas City School District). The research directors obtained permission from the respective school corporations and school districts and university to conduct research. The survey was accompanied by letters from the research directors. The letters set out the research aims and explained its importance. A total of 266 surveys were mailed, of which 166 were completed and returned (a 73 percent return rate). Indiana populations had a return rate of 90 percent and Missouri's return rate was 56 percent. The overall response rate was higher than the 65.1 percent used as a gauge for an acceptable response rate for a survey done by mail in some national studies (McHorney, Kosinski, and Ware, 1994).

Results

The following results were generated from the SF-36 information received from school principals. School principals' self-perception of their health, compared with the national population indicates that school principals are above the national means in physical functioning, bodily pain, and general health perceptions. School principals score below the national means in the health concepts of social functioning, role in physical activities, general mental health, and role activities



of vitality. In response to general health transition, or how school principals feel their health is compared with one year ago, they fall just below the national population. This response indicates that in general school principals feel their health is about the same as it was one year ago. Exhibit 1.2 shows school principals' self-perception of their health compared to state and national populations.

EXHIBIT 1.2: SCHOOL PRINCIPALS' SELF-PERCEPTION OF THEIR HEALTH (MEANS)									
Health Concept	Indiana	Missouri	Total Population	*National Population					
Physical Functioning (PF)	88	85	85.6	84					
Social Functioning (SF)	76	78	77	83					
Role - Physical Activities (RP)	84	75	79.5	81					
Bodily Pain (BP)	75	81	78	75					
General Mental Health (MH)	70	78	74	75					
Role Activities-Emotional Health (RE)	72	75	73.5	81					
Vitality (VT)	57	65	61	61					
General Health (GH) Perceptions	75	83	79	72					
Health Transition (HT)	3.41	2.85	3.19	3.37 .					

The difference in responses between African American female school principals and Caucasian females school principals were determined based on an item by item response. There were no significant difference between the responses of African American female school principals in comparison with Caucasian female school principals or the total population surveyed. Variations in item responses are indicated in Exhibit 1.3.



EXHIBIT 1.3 - COPING WITH THE PRINCIPALSHIP COMPARISON OF SURVEY POPULATION WITH NATIONAL MEANS								
Item	African American Females	Caucasian Females	Total Population	*National Population				
PHYSICAL FUNCTIONING								
3a	2.36	2.23	2.24	1.82				
3b	2.76	2.81	2.78	2.48				
3c	2.86	2.88	2.87	2.56				
3d	2.57	2.56	2.61	2.25				
3e	2.83	2.91	2.88	2.66				
3f	2.48	2.60	2.61	2.44				
3g	2.63	2.79	2.74	2.28				
3h	2.73	2.86	2.81	2.52				
3i	2.81	2.95	2.92	2.76				
3j	2.88	3.00	2.96	2.88				
Item Average	2.691	2.759	2.742	2.465				
ROLE - PHYSICAL								
4a	1.88	1.88	1.88	1.63				
4b	1.77	1.71	1.70	1.62				
4c	1.76	1.88	1.87	1.46				
4d	1.72	1.88	1.83	1.57				
Item Average	1.7825	1.8375	1.82	1.57				
BODILY PAIN								
7	5.27	5.05	5.14	4.31				
8	4.67	4.79	4.73	4.38				
Item Average	4.97	4.92	4.935	4.345				
GENERAL HEALTH								



1	4.21	4.27	4.19	3.15
11a	4.47	4.33	4.44	3.03
11b	3.93	4.02	3.96	3.12
11c	4.24	3.71	3.91	4.01
11d	4.07	3.98	3.98	3.43
Item Average	4.184	4.062	4.096	3.348
VITALITY				
9a	4.23	3.62	3.98	3.11
9e	4.0	3.93	4.03	3.43
9g	4.2	4.46	4.59	4.16
9i	3.2	3.16	3.11	3.99
Item Average	3.9075	3.7925	3.9275	3.6725
SOCIAL FUNCTIONING				
6	4.00	4.0	4.08	4.18
10	4.57	4.57	4.46	4.27
Item Average	4.285	4.285	4.27	4.225
ROLE EMOTIONAL				
5a	1.74	1.71	1.79	1.73
5b	1.63	1.64	1.64	1.60
5c	1.79	1.76	1.84	1.74
Item Average	1.72	1.70333333	1.75666666	1.69
MENTAL HEALTH				
9b	5.27	4.70	4.82	4.67
9c	5.24	5.30	5.31	5.34
	3.24	1		
9d	3.93	3.49	3.81	3.96



9h ,	4.3	3.95	3.82	4.14
Item Average	4.654	4.312	4.444	4.576
REPORTED HEALTH	ITRANSITION			
2	2.97	3.14	3.19	3.37
2a	3.12	2.93	2.91	N/A

The item average for Physical Functioning for African American females is slightly below the responses for Caucasian female, and both are higher than the national population. The same is true for the health concept -- General Health. The item averages for Pain, Vitality, Role-Emotional, and Mental Health indicate that African American females responses are higher than Caucasian females, and all three are higher than the nation populations. Both African American females and Caucasian females scored the same on Social Functioning and Role-Physical, each slightly higher than the national population.

Discussion

The findings of this study suggest that African American female school principals differ in their perceptions of their physical and emotional health from Caucasian females and the total population surveyed. African American females indicated that in general they are very good at performing most physical activities, including the most vigorous without limitation due to health. Their general health is higher than the national population by 1.1 points. Their emotional health is also higher than the general population.

The data suggest that the research hypothesis that there is no significant difference between the self-perception of African American female school principals and the general population is not supported. While specific disorders may exist in the African American



population, like diabetes and high blood pressure, this study indicates that overall the physical and emotional health of African American female school principals and assistant principals is better than the national population. However, in reviewing this data it should be noted that the mean age of African American females in this study is two years younger than others in the study. Also the number of years in the position is two years less for African American females. Fifty percent of the African American female survey respondents were principals and 33 percent were assistant principals (17 percent did not indicate position).

The survey focuses on eight health concepts that have a history of study in general populations. Responses by school principals to the eight health concepts were compared with the general population, as well as between the two states serving as population for the study. Slight differences were found in the survey responses, however the variances are small. Except for the category of Vitality, the survey population and the national population are above 70 percent on health concepts. Vitality falls at 61 percent for both the survey population and the national populations.

The suggestions from the survey indicate that change in principal training and certification programs relate to assisting aspiring principals in dealing with stress. Vitality is proportional to stress. The low scores on vitality translates into the energy level versus fatigue that one is experiencing. While some research suggest that school principals have a higher-than-average group well-being score and a range of healthful behaviors regarding drug use, job satisfaction, and coping, they could improve by increasing their physical exercise, diet, stress, and time management (Smith, 1988). The research that exists on burnout and stress in the principalship indicate that it is necessary to consider these factors as principal training and certification



programs are developed. This is especially true in light of the responses in the category of Vitality. The energy it takes to be a school principal is unquestioned. Although the responses are not different from the national population, the low percentage indicates that this is an area that remains one to consider as we look at longevity in the principalship. Vitality is akin to stress and burnout. Assisting principals with coping with the principalship includes attention to stressors in the principalship.

The fatigue and discontentment experienced by school principals limits the available pool of persons aspiring to be school principals. Some potential school principals do not see advantages in assuming building leadership. They are just as comfortable in their teaching assignment - with less management challenges. A burned-out school principal experiences physical, mental, and cognitive exhaustion; personal detachment from recipients of services (teachers, students, and parents); and belittles and derogates those who work for or with him or her (Friedman, 1995, p. 649). With the mounting challenges in education we need school leaders who eagerly embrace the demands, while maintaining physical and emotional fitness programs designed to enhance their capabilities. Attention to identified stress relievers like physical activity, mental control, and management skill development (Gmelch, 1982) increases a principal's effectiveness. Since school principals in the population that was surveyed are feeling good about their physical and emotional health, programs need to focus on maintaining and increasing that perception and minimizing stressors. Rather than preventing risk factors from happening, healthy people must be encouraged to lead lifestyles that will maintain and improve their state of wellbeing (Kanters, M. A., Montelpare, W. J., and Carter, M., 1994). Principals need to learn how to take time out of everyday to remove themselves from stress producing situations. The end result



will be longevity to their career (Goldstein, 1992). Revisions in training programs with attention to stressors and physical and emotional health increase the overall effectiveness of school principals.



References

Anson, O., Paran, E., Neumann, L., & Chernichovsky, D. (1993). Gender differences in health perceptions and their predictors. Social Science Medicine, 36(4), pp. 419-427.

Brazier J. E., Harper, R., Jones, N. M., O'Caithain, A., Thomas, K. J., Usherwood, T., Westlake, L. (1992). Validating the SF-36 health survey questionnaire: New outcome measure for primary care. British Medical Journal, 305, 160-164.

Byrne, B. M. (1991). Burnout: Investigating the impact of background variables for elementary, secondary, and university educators. <u>Teaching and Teacher Education</u>, 7(2), 197-209.

Carr, A. (1994). Anxiety and depression among school principals--warning, principalship can be hazardous to your health. <u>Journal of Educational Administration</u>, 32(3), 18-34.

Dickman, U. (1993). Reducing anxiety and stress. The Teacher Educator, 29(2), 17-25.

Doring, A. (1993). <u>Stressed who me?</u> Queensland, Australia: The Association of Catholic Secondary Schools Queensland Conference of Deputies and Assistant Principals. (ERIC Document Reproduction Service No. ED 362 497)

Friedman, I. A. (1995, August). Measuring school principal - experienced burnout. <u>Educational</u> and <u>Psychological Measurement</u>, <u>55(4)</u>, pp. 641-651.

Friedman, I. A. (1995). School principal burnout: The concept and its components. <u>Journal of Organizational Behavior</u>, 16, 191-198.

Gmelch, W. H. (1988). What stresses school administrators--and how they cope. New York: The American Educational Research Association. (ERIC Document Reproduction Service No. ED 218 760)

Goldstein, A. (1992, October). Stress in the superintendency. <u>The School Administrator</u>, 70(5), pp. 9-17.

Kanters, M. A., Montelpare, W. J., & Carter, M. (1994, April). Enabling healthy lives through leisure. The Journal of Physical Education, Recreation & Dance, 65(4), pp. 26-28.

Kochanek, K. D., Maurer, J. D., & Rosenberg, H. M. (1994, June). Why did Black life expectancy decline from 1984 through 1989 in the United States? <u>American Journal of Public Health</u>, 84(6), pp. 938-944.

McHorney, C. A., Kosinski, M., Ware, J. E. (1994). Comparisons of the costs and quality of norms for the SF-36 health survey collected by mail versus telephone interview: Results from a



national survey. Medical Care, 32(6), 551-567.

McHorney, C. A., Ware, J. E., & Raczek, A. E. (1993). The MOS 36-Item Short Form Health Survey (SF-36): II. Psychometric and clinical tests of validity in measuring physical and mental health constructs. Medical Care, 31(3), 247-263.

Neville, S. H. (1981). Job stress and burnout: Occupational hazards for service staff. <u>College and Research Libraries</u>, 42, 242-247.

Pappas, G. (1994, June). Elucidating the relationship between race, socioeconomic status, and health. The American Journal of Public Health, 84(6), pp. 892-894.

Ricken, F. (1980). Teacher burnout--A failure in the supervisory process. <u>NASSP Bulletin</u>, 64(434), 21-24.

Ryor, J. P. L. (1978). The perspective of regular education. <u>Learning Disabilities Quarterly</u>, <u>1</u>, 6-16.

Sarros, J. C. (1988). Administrator burnout: Findings and future directions. <u>Journal of Educational Administration</u>, <u>26</u>, 184-196.

Scrivens, R. (1979). The big click. Todays Education, 68(4), 34-39.

Sires, C. & Tonnsen, S. (1993, February). Special education: A challenge for principals. <u>NASSP</u> <u>Bulletin</u>, <u>77(550)</u>, pp. 8-11.

Smith, D. W. (1988, December). Health-related characteristics of selected school principals. <u>Journal of School Health</u>, 58(10), pp. 397-400.

Waitzman, N. J. & Smith, K. R. (1994, June). The effects of occupational class transitions on hypertension: Racial disparities among working-age men. <u>American Journal of Public Health</u>, 84(6), pp. 945-950.

Ware, J. E. (1993). <u>SF-36 Health Survey: Manual and Interpretation Guide.</u> Boston: The Health Institute, New England Medical Center.

Ware, J. E. (1995, March). Self-evaluated transitions in general health. <u>Medical Outcomes Trust Bulletin</u>, 3(2), p. 2.

Ware, J. E. (1996). The MOS 36-Item Short-Form Health Survey (SF 36). In Sederer, L. I. & Dickey, B., (Eds.), Outcomes assessment in clinical practice, pp. 61-64. Baltimore, Maryland: Williams & Wilkins.



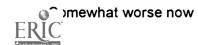
Ware, J. E., & Sherbourne, C. D. (1992, June). The MOS 36-item short form health survey (SF-36): I. Conceptual framework and item selection. <u>Medical Care</u>, 30(6), pp. 473-483.



COPING WITH THE PRINCIPALSHIP

Thank you for helping me with this survey. The survey was developed by the Medical Outcomes Study, which has been tested and validated extensively. All responses will be reported as composite data and will be strictly anonymous. The number codes are to determine response rate only.

	PLEASE CHECK THE RESPONSE YOU FEEL IS MOST ACCURATE										
DE	EMOGRAPHIC INFORMATION: In each category below, please CIRCLE the appropriate response:										
School Corporation:		Elkhart	Schoo	ol City of Mishawaka	Penn-Harris-Madison						
		South Bend									
Cu	rrent Position:	Principal	Assist	ant Principal	Other/Specify						
Nu	mber of Years in th	ne Position Circled	Above:								
Yo	ur Age:	years				-					
Ge	nder:	Female		Male							
Ra	ce/Ethnicity:	African-Amer	ican	Caucasian	Hispanic American						
		Asian-Americ	an	Native American	Other/Specify						
1.	In general, would y	ou say your health is	: (Select O	ne and Circle)		-					
	Excellent	Very Good	Good	Fair	Poor						
2.	Compared to one	year ago, how would	d you rate y	our health in general no v	v? (Select One and Circle)						
	Much better now th	an one year ago	-								
	Somewhat better n	ow than one year ag	·								
	About the same										
	Somewhat worse r	now than one year ag	0								
	Much worse now th	nan one year ago									
2a.		year you first becan (Select One and Cir		admiṇistrator, how wo	uld you rate your health in						
	Much better			Much worse no	w						
	Somewhat better										
	About the same										



3.	Th in	ne following items are about activities you these activities? If so, how much? [Ci	ou might do du rcle one in (a	uring -j) b	g a typi elow]	ical day	/. Does you	r health no	ow limit you
	a.	Vigorous activities, such as running,	lifting heavy o	bjec	cts, pa	rticipat	ing in strenu	ous sports	
		Yes, limited a Lot	Yes, limited a	a littl	le	No, no	t limited at a	II .	
	b.	Moderate activities, such as moving	a table, pushir	ng a	vacuu	ım clea	ner, bowling	, or playinզ	g golf
		Yes, limited a Lot	Yes, limited a	a littl	le	No, no	t limited at a	II	
	C.	Lifting or carrying groceries							
		Yes, limited a Lot	Yes, limited a	a littl	le	No, no	t limited at a	11	
	d.	Climbing several flights of stairs							
		Yes, limited a lot	Yes, limited a	a littl	e	No, no	t limited at a	II .	
	e.	Climbing one flight of stairs							
		Yes, limited a lot	Yes, limited a	a littl	е	No, no	t limited at a	11	
	f.	Bending, kneeling, or stooping							
		Yes, limited a lot	Yes, limited a	a littl	е	No, no	t limited at al	II ·	
	g.	Walking more than a mile							
		Yes, limited a lot	Yes, limited a	a littl	е	No, no	t limited at al	II	
	h.	Walking several blocks							
		Yes, limited a lot	Yes, limited a	littl	е	No, no	t limited at al	li	
	l. '	Walking one block							
		Yes, limited a lot	Yes, limited a	littl	е	No, no	t limited at al	II	
	j. l	Bathing or dressing yourself							
		Yes, limited a lot	Yes, limited a	little	е	No, no	t limited at al	İ	
		ring the past 4 weeks, have you had a ivities as a result of your physical he						or other re	egular daily
	a.	Cut down the amount of time you spe work or other activities	nt on	C.	Were activit		in the kind	of work or	other
		Yes No					'es	No	
	b.	Accomplished less than you would lik Yes No	е	d.		ies (fo	ty performing rexample, it res		



4.

•									
5.	act	ring the past ivities as a r c) below]	t 4 weeks, esult of a	have you l า y emotio r	nad any of the fo nal problems (su	llowin uch as	g problems with you feeling depressed	r work or other ror anxious)? [Ci	egular daily rcle one in
	a.	Cut	down the a	amount of	time you spent o	on wo	rk or other activities		
		Yes		No					
	b.	Acc	omplished	l less than	you would like				
		Yes		No					
	C.	Didr	ı't do work	or other ac	ctivities as caref	ully as	s usual		
		Yes		No					
6.	Dur nor	ing the past mal social a	: 4 weeks , ctivities wit	to what ex th family, fr	tent has your phy iends, neighbors	ysical , or g	health or emotional roups? (Select One	problems interfe and Circle)	ered with your
	Not	at all	Slightly		Moderately	,	Quite a bit	Extremely	
7.	Ηον	v much bo d	ily pain ha	ve you had	during the past	4 wee	eks? (Select One a	and Circle)	
	Nor	ne	Very M	ild	Mild		Moderate	Severe	
	Ver	y Severe							
8.	Dur the	ing the past home and h	4 weeks, ousework)	how much ? (Select	did <i>pain</i> interfer One and Circle)	e with	your normal work (including both w	ork outside
	Not	at all	A little l	oit	Moderately	,	Quite a bit	Extremely	
9.	eac	ese question h question, e in (a-l) belo	please give	t how you to the one a	feel and how thir nswer that come	ngs ha	ive been with you du sest to the way you	uring the past 4 v have been feelin	weeks. For g. [Circle
	,	Did you feel All of the tim	e	?			Some of the time A little bit of the tim None of the time	ne	
	;	Most of the t A good bit of Some of the A little bit of None of the	the time time the time			d.	Have you felt calm All of the time Most of the time	·	
	,	Have you be	e	nervous pe	rson?		A good bit of the tin Some of the time A little bit of the tim None of the time		
	;	Most of the t A good bit of Some of the A little bit of None of the	the time time the time			e.	Did you have a lot All of the time Most of the time		
e	İ	Have you fel nothing coul All of the tim	d cheer yo		os that		A good bit of the tin Some of the time A little bit of the tim None of the time		

Most of the time
A good bit of the time

f. Have you felt downhearted and blue?

All of the time
Most of the time
A good bit of the time
Some of the time
A little bit of the time
None of the time

g. Did you feel worn out?

All of the time
Most of the time
A good bit of the time
Some of the time
A little bit of the time
None of the time

h. Have you been a happy person?

All of the time
Most of the time
A good bit of the time
Some of the time
A little bit of the time
None of the time

I. Did you feel tired?

All of the time
Most of the time
A good bit of the time
Some of the time
A little bit of the time
None of the time

10. During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities (like visiting with friends, relatives, etc.)? (Select One and Circle)

All of the time

Most of the time

Some of the time

A little bit of the time

None of the time

11. How true or false is each of the following statements for you? [Circle one in (a-d) below]

a. I seem to get sick a little easier than other

people

Definitely true Mostly true Don't know Mostly false Definitely false c. I expect my health to get worse

Definitely true Mostly true Don't know Mostly false Definitely false

b. I am as healthy as anybody I know

Definitely true Mostly true Don't know Mostly false Definitely false d. My health is excellent

Definitely true Mostly true Don't know Mostly false Definitely false

THANK YOU!!!!!!!!



COPING WITH THE PRINCIPALSHIP

PLEASE CHECK THE RESPONSE YOU FEEL IS MOST ACCURATE

Na	maleMale_ itive American e Position Check Al	African Americ _Other Princip bove	can pal	Caucasian Assistant F	His Principal _	spanic	Asian Number of	—— Years in
1.	In general, would	you say your health is:	(Select One	and Circle)				
	Excellent	Very Good	Good	F	air	Po	or	
2.	Compared to one	e year ag o, how would	you rate you	r health in g	eneral nov	w? (Select	t One and Cir	rcle)
	Much better now	than one year ago						
	Somewhat better	now than one year ago						
	About the same							
	Somewhat worse	now than one year ago	o					
	Much worse now	than one year ago						
2a.	. Compared to the general now?	year you first becam (Select One and Circ		dministrato	r, how wo	uld you rat	te your healt	h in
	Much better							
	Somewhat better							
	About the same							
	Somewhat worse	now						
	Much worse now							
3.	The following item	ns are about activities y	you might do ∢	during a typ	ical day. [Does vour	health now	limit vou
		? If so, how much? [C				•		y
	a. Vigorous activ	vities, such as running	, lifting heavy	objects, pa	rticipating	in strenuo	us sports	
	Yes, limited a	Lot	Yes, limited	l a little	No, not lir	mited at all	I	
	b. Moderate acti	vities, such as moving	a table, push	ning a vacuu	um cleane	r, bowling,	or playing g	olf .
	Yes, limited a	Lot	Yes, limited	l a little	No, not lir	mited at all	· !	
	c. Lifting or carryi	ing groceries						
	Yes, limited a L	₋ot	Yes, limited	l a little	No, not lir	mited at all	I	
	d. Climbing seve	ral flights of stairs			,			
TD.	Yes, limited a	lot	Ves limited	l a little	No not lie	mited at all	ı	

	e. Climb	oing o ne flig	th of stairs					
	Yes,	limited a lo	t	Yes, limit	ed a little	No, not limited	d at all	
	f. Bendi	ng, kneeling	g, or stooping	3				
	Yes, li	mited a lot		Yes, limit	ed a little	No, not limited	d at all	•
	g. Walki	ng more th	nan a mile					
	Yes,	limited a lot	t	Yes, limit	ed a little	No, not limited	d at all	
	h. Walki	ng several	blocks					
	Yes, I	imited a lot	:	Yes, limit	ed a little	No, not limited	d at all	
	I. Walkir	ng o ne bl oo	c k					
	Yes, li	mited a lot		Yes, limit	ed a little	No, not limited	l at all	
	j. Bathin	g or dressii	ng yourself					
	Yes, li	mited a lot		Yes, limit	ed a little	No, not limited	l at all	
4.	During th activities	e past 4 w as a resul	eeks, have y t of your phy	ou had any of the fysical health? [Ci	ollowing p	roblems with your r no in (a-d) belov	work or other regu	ılar daily
		or other act		you spent on		/ere limited in the lectivities Yes	kind of work or oth	ner
	b. Acc or		ess than you es	would like No			rming the work or a le, it took extra eff No	
5.	During th activities (a-c) belo	as a result	eeks, have y t of any emo	ou had any of the f tional problems (s	ollowing p such as fe	roblems with your eling depressed or	work or other regu anxious)? [Circle	ılar daily e one in
	a.	Cut dowr	the amoun	t of time you spent	on work o	or other activities	•	
		Yes		No				
	b.	Accomp	lished less t	han you woul d like				
		Yes		No				
	C.	Didn't do	work or othe	er activities as care	fully as u	sual		
		Yes	No					
6.	During th normal so	e past 4 wo	eeks, to wha ies with famil	t extent has your p y, friends, neighbor	nysical he s, or grou	alth or emotional p	roblems interfered	l with your
ED.	int at all	s	lightly	Moderate	у	Quite a bit	Extremely	

7. How much bodily pain have you had during the past 4 weeks? (Select One and Circle)

None

Very Mild

Mild

Moderate

Severe

Very Severe

8. During the **past 4 weeks**, how much did *pain* interfere with your normal work (including both work outside the home and housework)? (Select One and Circle)

Not at all

A little bit

Moderately

Quite a bit

Extremely

9. These questions are about how you feel and how things have been with you during the past 4 weeks. For each question, please give the one answer that comes closest to the way you have been feeling. [Circle one in (a-l) below]

a. Did you feel full of pep?

All of the time
Most of the time
A good bit of the time
Some of the time
A little bit of the time
None of the time

b. Have you been a very nervous person?

All of the time
Most of the time
A good bit of the time
Some of the time
A little bit of the time
None of the time

c. Have you felt so down in the dumps that nothing could cheer you up?

All of the time
Most of the time
A good bit of the time
Some of the time
A little bit of the time
None of the time

d. Have you felt calm and peaceful?

All of the time
Most of the time
A good bit of the time
Some of the time
A little bit of the time
None of the time

e. Did you have a lot of energy?

All of the time
Most of the time
A good bit of the time
Some of the time
Ittle bit of the time

٠.	f.	Have you felt downhearted and blue?	h.	Have you been a happy person?
		All of the time Most of the time A good bit of the time Some of the time A little bit of the time None of the time		All of the time Most of the time A good bit of the time Some of the time A little bit of the time None of the time
	g.	Did you feel worn out?	l.	Did you feel tired?
		All of the time Most of the time A good bit of the time Some of the time A little bit of the time None of the time		All of the time Most of the time A good bit of the time Some of the time A little bit of the time None of the time
10.	D in	uring the past 4 weeks , how much of the time has y terfered with your social activities (like visiting with fi	our _l	physical health or emotional problems is, relatives, etc.)? (Select One and Circle)
	ΑII	of the time Most of the time Some of the	time	A little bit of the time
	No	ne of the time		
11.	Н	ow true or false is each of the following statements f	or y	ou? [Circle one in (a-d) below]
	۱s	ow true or false is each of the following statements feem to get sick a little easier than other ople	-	I expect my health to get worse
	l se pe De Mo Do Mo	eem to get sick a little easier than other	-	. , .
a .	De Mo Do Mo De	eem to get sick a little easier than other ople finitely true ostly true n't know ostly false	-	I expect my health to get worse Definitely true Mostly true Don't know Mostly false
a .	I so pe Mo Do Mo D	eem to get sick a little easier than other ople finitely true ostly true n't know ostly false finitely false	C.	I expect my health to get worse Definitely true Mostly true Don't know Mostly false Definitely false
a. b.	I sepended De Mode De Mode De Mode De Mode De Mode De Mode De De De De De De De Mode De Mode De	eem to get sick a little easier than other ople finitely true ostly true ostly false finitely false m as healthy as anybody I know finitely true ostly false	c.	Definitely true Mostly true Don't know Mostly false Definitely false My health is excellent Definitely true Mostly true Don't know Mostly true Don't know Mostly true Don't know Mostly false Definitely false Ch you feel have been brought on by job stress,

THANK YOU!!!!!!!!





U.S. DEPARTMENT OF EDUCATION

Office of Educational Research and Improvement (OERI) Educational Resources Information Center (ERIC)



REPRODUCTION RELEASE

(Specific Document)

I. DOCUMENT IDENTIFICATION:

Tille: Coping with the principalship: Health Challenges of school principals and the implications for principal programs at colleges and universities	African-American female training/certification
Author(s): DORIS MCEWEN WALKER & JOHNETTA HUDSON	
Corporate Source:	Publication Date:
	July 11, 1996

II. REPRODUCTION RELEASE:

In order to disseminate as widely as possible timely and significant materials of interest to the educational community, documents announced in the monthly abstract journal of the ERIC system, *Resources in Education* (RIE), are usually made available to users in microfiche, reproduced paper copy, and electronic/optical media, and sold through the ERIC Document Reproduction Service (EDRS) or other ERIC vendors. Credit is given to the source of each document, and, if reproduction release is granted, one of the following notices is affixed to the document.

If permission is granted to reproduce the identified document, please CHECK ONE of the following options and sign the release below.

Check here Permitting microfiche (4"x 6" film), paper copy, electronic, and optical media reproduction	PERMISSION TO REPRODUCE THIS MATERIAL HAS BEEN GRANTED BY Some Source TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)."	"PERMISSION TO REPRODUCE THIS MATERIAL IN OTHER THAN PAPER COPY HAS BEEN GRANTED BY Somple TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)."	Or here Permitting reproduction in other than paper copy.
Sign Here,	Level 1	Level 2	,

Documents will be processed as indicated provided reproduction quality permits. If permission to reproduce is granted, but neither box is checked, documents will be processed at Level 1.

indicated above. Reproduction from the ERIC microfiche or	enter (ERIC) nonexclusive permission to reproduce this document as electronic/optical media by persons other than ERIC employees and its nolder. Exception is made for non-profit reproduction by libraries and other in response to discrete inquiries."	
Signature: Walker	Position: Director of School Administration/Associate P	rof
Printed Name: Doris McEwen Walker	Organization: Indiana University South Bend	
Address: 1700 Mishawaka Avenue.	Telephone Number: (219) 237 - 4804	
P.O. Box 7111 South Rend Indiana 46634 7111	Date: 8-22-96	



III. DOCUMENT AVAILABILITY INFORMATION (FROM NON-ERIC SOURCE):

If permission to reproduce is not granted to ERIC, or, if you wish ERIC to cite the availability of this document from another source, please provide the following information regarding the availability of the document. (ERIC will not announce a document unless it is publicly available, and a dependable source can be specified. Contributors should also be aware that ERIC selection criteria are significantly more stringent for documents which cannot be made available through EDRS).

Publisher/Distributor:	
Address:	· · · · · · · · · · · · · · · · · · ·
Price Per Copy:	Quantity Price:
. REFERRAL OF ERIC	TO COPYRIGHT/REPRODUCTION RIGHTS HOLDER:
If the right to grant reproduction name and address:	n release is held by someone other than the addressee, please provide the appropriate
Name and address of current copyright/re	production rights holder:
Name:	
Address:	
Addioss.	
. Where to send th	IS FORM:
Send this form to the following ERIC Clear	inghouse:

if you are making an unsolicited contribution to ERIC, you may return this form (and the document being contributed) to:

ERIC Facility

4301 Piccard Brive, Sulte 300Bockville, Waryland 20050 4305
Telephone: (001) 250 5500

