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ABSTRACT

Functional Therapy (FT) is a social skills training program that enables students to change their overt behaviors by altering their cognitive thoughts. Various aspects of FT and its application are discussed in this paper. The basic constructs of FT are ownership of the problem, accepting responsibility to solve the problem, and developing and implementing coping strategies. The FT program is designed to be utilized primarily with school-age children and can be effectively implemented with a small group of students or can be conducted on an individual basis. It encourages students to focus on their problems in the present. Minimal emphasis is placed on identifying and resolving the causes of deep-seated problems prior to launching into a treatment activity. FT consists of a series of training sessions and each session includes specific goals along with appropriate training activities, which can be completed in 10 meetings. The steps in FT are covered here and include the initial interview, an overview of the causes of behavior, attribution, self-inspection, self-regulation, self-review, self-perception, and a review of the topics covered. An example of an FT interview is also provided. (RJM)

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FUNCTIONAL THERAPY

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FUNCTIONAL THERAPY

INTRODUCTION

Functional Therapy (FT) is a social skills training program that will enable students to change their overt behaviors by altering their cognitive thoughts. Students will learn how to examine their thinking so they can eventually substitute adaptive cognitive thoughts for less effective non-adaptive thinking by utilizing self-instructional training. There is ample evidence to suggest that once disruptive students alter their cognitive thoughts they can behave more appropriately (Douglas, 1983). Kendall and Braswell (1985) reported that self-instructional training resulted in significant improvement in students' self-control as measured by teacher ratings. Another essential goal of FT is to convince students to assume primary ownership of their problems. Students who accept problem ownership increase the likelihood of assuming the responsibility for problem solving. Mott and Krane (1994) reported that good problem solvers, when compared to students who were not good problem solvers, were more likely to be socially well adjusted, socially effective and appropriate, and were less aggressive. Self-instruction procedures prepare students to develop and implement therapeutic coping strategies whenever they are confronted with a problem situation.

Stevens and Pihl (1983) compared the efficacy of two coping skills training programs and found that the program that employed self-instructional training in problem-solving was more flexible and effective. Self-instructional training has also been successful in improving academic performance (Genshaft, 1982). Functional Therapy emphasizes the cognitive process in problem-solving. In the past, educators may have relied on behavior modification techniques or other teacher-directed activities to eliminate undesirable behaviors. Although behavior modification procedures have been successful in managing certain behaviors, they have not produced durable changes nor have newly acquired skills generalized to situations in which that behavior was not reinforced (Kuypers, Becker, and O'Leary, 1968). While cognitive approaches do require more time and effort to implement, Kendall and Braswell (1985) reported the cognitive behavior approach is both viable and manageable in getting students to change their behavior.

Functional Therapy consists of a series of training sessions. Each session includes specific goals along with appropriate training activities. Ideally the training program should be completed in ten meetings, however review of previous sessions may extend the training time for some students. The goal of FT goes beyond just changing immediate behaviors. The long term mission is to promote personal growth and development by teaching students more effective cognitive strategies. When students mature socially and emotionally they are more likely to exhibit functional behavior traits. Further, Goldstein and Glick (1987) reported students who use self-regulation are better able to control their anger.

Few treatment programs focus specifically on school-age students; often educators adapt adult-based programs to deal with typical school problems. The FT program is designed to be utilized primarily with school-age children. More specific details will be provided as to the procedure for selecting suitable candidates for FT. Generally school psychologists, counselors,

or social workers who deal directly with school aged children find it difficult to locate treatment programs that encourage students to analyze their thinking process as a way to change their behavior. Functional Therapy is applicable with either secondary or elementary students. Functional Therapy can be effectively implemented with a small group of students, around six, or it can be conducted on an individual basis. Generally there are better results when FT is used in a one-to-one setting. However, small groups offer many other advantages because they enable students to learn socially appropriate behavior by interacting with their peers.

The basic constructs of FT are: 1. Ownership of the problem, 2. Accepting responsibility to solve the problem, and 3. Developing and implementing coping strategies. Specifically, FT will matriculate a student through three different phases: 1. Mind set, 2. Cognitive Development, and 3. Action.

Functional Therapy will encourage students to focus on their problems in the present. Only minimal emphasis is placed on identifying and resolving the causes of deep-seated problems prior to launching into a treatment activity. This is not to imply that knowing the causes of problems is not important, but rather to stress that improving a student's overt behavior can be achieved without uncovering or curing the actual underlying cause that is purported to be perpetuating the problem. The FT model requires the therapist to be goal oriented so direct treatment is always specific to a particular behavior. Once the actual source of a problem has been identified, a treatment program will be designed and implemented to bring about the desired change.

Another outcome of FT is to empower students to deal with problems in a more confident manner. When students are able to accurately predict the results of their actions by anticipating the consequences of their behavior, they will be in a unique position to monitor and regulate both their overt cognitive thought process and their overt behavior. After students master the ability to examine a problem by analyzing their cognitive thoughts they will ultimately gain confidence in their ability to deal with their overt behaviors.

Functional Therapy requires students to assume an active role in the process of modifying their behavior. The direct application of intervention treatment strategies always increases the power of any intervention program. An effective way to prepare students to become mature adults is to teach them to accept responsibility for their behavior and then how to modify their behavior when they are experiencing negative consequences from it.

PHILOSOPHICAL ORIENTATION OF FUNCTIONAL THERAPY

AN OVERVIEW OF FUNCTIONAL THERAPY

Ownership of the Problem

Accepting Responsibility to
Change the Problem

Develop and Implement
Coping Strategies

1. OWNERSHIP OF THE PROBLEM

The initial goal of FT is to get the student to accept problem ownership; students who do not believe they own the problem are unlikely to be motivated to make any significant changes to improve their situations. Problem ownership puts the burden on the student to seek a resolution to a problem. Of course, problem ownership does not automatically imply that the individual who owns the problem is the source of the problem. It does, however, require the student to become proactive.

2. ACCEPTING RESPONSIBILITY TO CHANGE THE PROBLEM

Problem ownership and accepting the responsibility to change one's behavior should be a logical progression. Also, accepting responsibility for a conflict motivates the student to seek a solution to a problem, hopefully by relying on their own resources. Responsibility makes a student an active participant in the problem solving arena. Once students become responsible, they will learn to avoid unwanted conflict because they can anticipate negative consequences before they actually engage in high-risk behaviors. This anticipation provides a cognitive means to modify a behavior. Students who are socially effective know how to solve problems cognitively and infrequently rely on physical force to influence their environment or react emotionally to a problem.

3. DEVELOP AND IMPLEMENT COPING STRATEGIES

Life is not conflict free, therefore, we must acquire effective coping strategies to deal with conflict when it arises. The ability to effectively cope with typical school problems will greatly enhance a student's social behavior. As a rule, stressful situations seldom improve without some sort of action. Positive coping skills will equip a student with the tools to effectively confront problems whenever they appear. Successful problem solving skills will also enhance a student's self-concept.

PHASES OF FUNCTIONAL THERAPY

Mind Set

Cognitive Development

Action

Functional Therapy will progress a student through three major phases with each phase preparing a student for the next phase. Learning to think responsibly and subsequently acting responsibly will take time and effort. Solving personal problems is not a spectator sport. If FT is to make a lasting change on a student's behavior, that student must be prepared to make a major commitment to adopting new thinking strategies.

1. MIND SET

To become an effective and well-adjusted individual certain basic thinking processes must be practiced. In a social context, students are active players in their social/emotional environment. They are seldom just passive victims. Although it is true that anyone can be victimized, it is also true that a student can minimize the victimization paradigm. While women are not directly responsible for being raped, they can take certain precautions which will greatly reduce the probability of being attacked. For example, they could avoid high danger situations such walking the streets alone at night or being overly friendly with strangers.

Therefore, FT will strive to develop a mind set that will explain how faulty thinking contributes to manifesting unacceptable behaviors. Once students understand the relationship of thinking and their behavior, they will be in a better position to bring about a more favorable change. Students will be taught that they can make a difference in the way they behave by making a major modification in their perception. Eventually, students will develop a functional mind set which will challenge their faulty thinking.

2. COGNITIVE DEVELOPMENT

Students will learn how to analyze their behavior so they can better associate actions with consequences. They will learn how to do this in a non-emotional manner. The treatment of a behavior problem is not only restricted to eliminating its occurrence, it is also important to understand the cognitive dimension and how it may influence behavior. Students need to also understand that commitment to making a behavior change may not be enough. They also need to think more functionally. As long as students are unaware of why they behave like they do or fail to understand what they can do about it, they will remain captives in a frustrating prison of conflict with minimal chances of escaping.

3. ACTION

Even when a student is committed to making a significant behavior change, it is unlikely he will succeed unless he possesses the necessary skills to execute a change. If a student can

be convinced that an action plan will facilitate his ability to positively affect his social environment, he will be more inclined to adopt a formal treatment plan. There is a temptation, however, to implement a plan prior to fully understanding how behavior is regulated and how it may be managed. At the conclusion of FT, students will be able to correctly analyze how their thinking affects their behavior. If students want a behavior eliminated or drastically changed, they must be willing to invest whatever energies are necessary to achieve that goal.

MAJOR STEPS FOR DEVELOPING SELF-INSTRUCTIONAL SKILLS

Initially FT will process a student through three major areas: Self-Inspection, Self-Regulation, and Self-Review. Understanding how each of these areas is related to changing behavior is essential when utilizing FT.

Self-Inspection

If students are going to make substantial changes in their behavior, they must be taught how to analyze their internal cognitive process. When students acquire a systematic self-inspection technique, they will possess the necessary skills to identify components of their behavior which may be interfering with positive growth and development. Also, it will provide them with a procedure they can implement whenever they are confronted with a conflict situation.

Self-inspection puts students in charge of understanding their behavior. They will be taught to monitor their emotional reactions and to approach a conflict situation in a more cognitive manner. The basic assumption underlying self-inspection is that students have the responsibility to search for both a cause and solution when they encounter a conflict situation.

Frequently students deal with problems in a maladaptive manner by either withdrawing or rebelling. The get sad or get mad! Unfortunately, neither response will provide a student with appropriate skills to solve future problems. While it is impractical to expect students to always respond in a non-emotional manner whenever they encounter conflict, it nevertheless is important to provide them with the mechanism to analyze their behavior in a non-emotional manner.

Self-inspection is the process of asking questions so the students can gain a better understanding of their problems. Self-inspection does not always require an actual change in a behavior: sometimes shifts in perception or interpretation of an event is all that is required to bring about a desirable change. Therefore, one of the first components of self-inspection is to examine the language and the cognitive patterns a student typically employs when confronting a conflict.

When engaged in self-inspection, the student will be processing through a series of questions which are designed to help clarify or determine who is responsible for the problem. The purpose for asking questions during self-inspection is to provide information so an objective evaluation

of the rationale for a behavior can be determined. It is not to assign blame. Once the rationality of a behavior has been established, its resolution can be determined.

Self-inspection will teach students how to explore their thoughts, emotions, and behaviors in a linguistic manner; eventually they will learn how to regulate their overt behavior by adopting new cognitive thought processes.

Self-Regulation

After students have mastered self-inspection, then they are ready to be taught self-regulation. The function of self-regulation is to prepare students to monitor their thoughts, emotions, and behaviors. For example, if a student is unable to control his behavior and suddenly blurts out in the classroom, more than likely he will be reprimanded. There is a good probability that he may incorrectly conclude that the teacher was unreasonable in issuing a reprimand. The student may now become angry with his teacher if he believed that the reprimand was unfair. If the student knew how to use self-regulation, he would first examine the total situation unemotionally and then determine whose behavior needs to be changed. Perhaps the student was not aware of the classroom rules which deal with talking out without first getting permission? Or maybe the student had raised his hand several times without being recognized by the teacher. If this was the case, the student may have inaccurately concluded that he had earned the right to break the rules. By employing self-regulation, a student can learn to act appropriately even when he may feel justified in breaking the rules.

During self-inspection the student must ask a variety of questions to pinpoint the justification used to defend their behavior. Most students will defend their misbehavior once they get caught or they will deny the importance of the behavior. This information is critical when trying to modify habitual behaviors. When a student uses self-regulation he acts as his own teacher and takes an active role in the learning process which makes him responsible for his own learning (Harris and Pressley, 1991).

It is assumed that once a behavior has been targeted for change, the first step is to make a linguistic change in the covert process. The student will be expected to first verbalize the target behavior. Initially, he will make self-correcting statements which will provide the groundwork for lasting change. He will be taught to make specific self-correcting statements on a repeated basis until the statement becomes cognitively congruent with the student.

Self-regulation comprises strong and appropriate self-talk statements. Once this linguistic set is completed, the student will possess a cognitive skill to assist in regulating his behavior in the event he is once again challenged. Self-talks have been effectively utilized to modify the student's behavior (Meichenbaum, 1977).

Self-Review

In order to complete the cognitive linguistic cycle, the student must be taught to evaluate their therapeutic efforts. A cognitive linguistic cycle consists of a student acting and thinking in the same manner in which they speak. The primary source of the behavior should be established. If linguistic statements are shaping the thinking process, then it would be assumed that linguistic statements influence overt actions. Therefore, students must be cognizant of the potential effects of self-talk because it may affect their thinking and eventually their overt behavior. Learning to talk to oneself is an important skill that has significant ramifications. For example, whenever a student completes a goal, the student could provide himself with a verbal reinforcer and in some cases he may even reward himself with a special activity. In any event, he must be taught how to speak to himself in a constructive manner. The self-review process will teach a student how to evaluate his therapeutic effort and how to deal with the results. Successes are easy to deal with but there will be plenty of times when the results are not satisfactory. The need for self-review is critical whenever a therapeutic act does not result in bringing about a desirable change.

Several important aspects of self-review are essential whenever the students experience a sense of failure. First, the students must have a coping skill to deal with failure. It is imperative that students understand that when they fail at managing their behavior they must return to ground zero and start again with self-inspection. Just because a desired solution was not quickly achieved, they should not give up or believe they are unable to improve their situation.

Self-review will teach them the appropriate self-talk so they will redirect their energies to problem solving. For example, a student may say to himself, "My plan didn't work. I need to analyze my thoughts, emotions, and behaviors, and set up a new self-regulating plan."

Another important factor of self-review is to teach the student to make clear assertive statements when they experience failure, such as, "I didn't do as well as I wanted, but I can still improve. I just need to continue to try."

Teaching students to make coping and/or assertive statements when they fail will increase the likelihood of employing a cognitive-linguistic reaction to a conflict rather than an irrational emotional one. It will create an expectation that they own their behavior and are in charge of their thoughts, emotions and behaviors.

A general overview of sample questions for each of the training phases is presented. It is important to understand that the program's basic foundation is rooted in a cognitive linguistic dialogue. Students should learn how to positively use internal dialogue. They need to both ask and answer questions regarding the rationality of their thinking and eventual behavior.

It is assumed that a lasting change in behavior will not be fully assimilated until the student is freed from irrational and self-defeating beliefs which are influencing his behavior.

I. Self-Inspection

A. Self-directed questions for clarification of the conflict situation:

1. What is the main problem?
2. What factors are contributing to the conflict situation?
3. How are other people reacting?

B. Self-directed questions which examine how I am contributing to the conflict situation in either a positive or negative manner:

1. Why am I reacting the way I am?
2. Do I have any control over any of the factors?
3. What have I done to improve the situation?
4. What have I done to make it worse?
5. What can I do to improve the situation?
6. What can I do to make the situation worse?
7. Has this ever happened to me before?

II. Self-Regulation

A. Self-Directed Questions

1. Whenever I am in this situation, what am I supposed to do?
2. What must I do to change my self-defeating behavior so it will become a self-enhancing behavior?
3. What must I say to myself whenever I am in this situation?

B. Self-Talk Guiding Statements: (Mind Set)

1. I must take control of my behavior in this situation.
2. I must accept what has happened and now direct my action towards responsible and constructive behavior.
3. I must recognize when my "alarm" is about to go off and to take the necessary steps to regulate it.
4. I must stop making excuses for my self-defeating behavior and to say appropriate statements which will increase self-enhancing behavior.
5. I must understand that I don't have to be perfect, but I must be functional.

C. Self-Talk Monitoring Statements: (Implementation)

1. I must remember to always use my self-talk statements whenever I find myself in this situation.
2. I must use my self-talk statements to gain control over my behavior.
3. I must remember to practice my self-talk statements so they become automatic.

III. Self-Review

A. Evaluation

1. How are things going? Are my self-talk statements making a difference?
2. Am I gaining more self-control over my behavior?
3. What factors are influencing my behavior, either positively or negatively?

B. Redirecting treatment effort (if necessary)

1. I found that trying to change this behavior was more difficult than I expected, I must search for a better solution.
2. There are certain behaviors that cannot be changed much. I must learn how to accept that.
3. Were my goals realistic or were they too easy or too hard; should I take another look?
4. If I made substantial progress, I should reinforce myself with a positive action or statement.
5. Do I know where I go from here?

Bandura (1978) maintains that behavior is shaped by a triadic reciprocity. The triadic reciprocity model implies that behavior is influenced by behavior, person, and the environment. Bandura's interactive model is helpful in understanding how behavior is initiated and how it is maintain. The rudiments of Bandura's theory are adhered to in FT.

SESSION I - INITIAL INTERVIEW

OVERVIEW

- I. How to Select Appropriate Clients for Functional Therapy
 - A. Age factors
 - B. Ability factors

- II. Procedure for Conducting an Interview
 - A. Essential Interview Data
 - 1. Problem Issues
 - 2. Problem Solving
 - 3. Problem Justification
 - 4. Problem Consequences
 - 5. Problem Resolution

 - B. How to Get a Commitment from the Client

FORMAT

The purpose of this session is to make a decision as to whether a student should be considered for treatment. A specific interview will be conducted so appropriate cognitive data can be collected and the student will matriculate through a dialogue so the student's cognitive ability can be assessed.

CONTENT AREA

How To Select a Client

The primary goal of the initial interview is to determine if the student is a suitable candidate to enter into a cognitive training program. The first factor that should be considered is age. As a rule, individuals younger than eight are not good candidates for cognitive therapy because they are less likely to be cognitively regulated. When working with younger children traditional behavior modification procedures may be considered to bring about desirable changes in the student's behavior.

In addition to age, the student should possess adequate verbal skills and mental ability. To process through the activities in this program, the student should be of average intelligence and

have sufficient verbal skills to express his thoughts and feelings. This is essential because the client will be expected to manage his overt behavior by employing cognitive strategies.

Older students of below average ability may also lack the sophistication to understand complex cognitive inquiry or to effectively employ self-talk strategies. The therapist will have to make the final determination, and the decision should take into account all essential variables.

While there are no hard and fast rules on who should be accepted for treatment, the ideal candidate would be at least ten years old, with adequate verbal skills, and a willingness to express his thoughts and emotions through verbal discourse. Further, he should be manifesting a pattern of irrational thinking. Individuals who freely share their feelings and are open about their personal situation make excellent cognitive therapy clients. The final decision of whether to accept or reject a client for treatment should occur after the interview.

Setting Up The Interview (Intake)

Once the decision has been made to engage the client through the cognitive activities, a specific interview has to be conducted. This interview will consist of an open dialogue that has the sole purpose of collecting information. During this interview no form of therapy is implemented in either a direct or indirect manner. The student will be asked to explain his interpretation of the situation without having to defend his opinion. No effort should be made to influence the student's thinking. It is also a good idea not to unduly focus on the student's feelings. If a student starts to express feelings, accept them but do not reinforce the expression of feelings. The primary purpose of the interview is to collect information which will help the therapist to aid the student to solve problems through cognitive procedure.

There are five components to the interview in terms of data collection. But prior to conducting the interview, it is necessary to establish a level of rapport which will enable the therapist to probe into a problem situation so the client can reveal feelings, thoughts, and behaviors in a comfortable fashion.

It is essential to establish and maintain rapport throughout FT if real changes in the student's attitude and behavior are to be achieved. While FT stresses more of a treatment emphasis, the basic fundamental concepts of counseling are still operational. A warm and supportive relationship between the helper and helped is a prerequisite to implementing an effective treatment program.

In order to obtain rapport, the following factors are regarded as essential:

Non-Threatening Environment

It is imperative that the student gains a sense of safety and security. Many of the students who become candidates for FT have a history of violating discipline policies. They are accustomed to being reprimanded and may suspect that all help givers eventually end up imposing disciplinary mandates.

This fear may preclude the creation of an environment which is conducive to therapy. The student may feel a need to be defensive, thus reducing the likelihood of personal growth and development.

Trust/Acceptance

The notion of trust is always important in therapy because it implies that we have confidence in the student and we expect the student to make positive gains. Acceptance is expressed in our attitude toward the student. We must learn to accept a student unconditionally.

In order to create an environment which fosters acceptance, the therapist must convey a non judgmental attitude towards the student. We may not necessarily approve of past behaviors but we are not compelled to read the riot act either. Telling someone what he is doing wrong or threatening a student, will result in the student adopting a defensive posture.

Empathy

If we are to fully understand a student's position, we will have to know how he/she thinks and feels. One way to achieve this is to try to put ourselves in the student's shoes. This will enable us to get a sense of life as he/she is experiencing it.

Clinical Interview

The five interview components are: problem issues, problem solving, problem cause, problem consequences, and problem resolution.

Program Guide to be used for Group Presentation

When planning to use FT with a group it will be necessary to design a situation in which all students can respond to most of the questions. Because the initial interview is not intended to be therapeutic, you may conduct the session with a classroom atmosphere. If you plan to implement FT exclusively in a group, you need to establish group rules.

Generally, the rules would require that only one student may speak at a time while the rest of the students are expected to listen. It is permissible to use group strategies to solve problems. The content of FT easily generalizes to most situations and students of similar age frequently experience many of the same problems; therefore, when a group solves a problem for one student the whole group will benefit. However, when specific "Self-Talk Scripts" are created they must be individually designed. Group application of FT is encouraged because there are times when a student may be able to identify irrational ideas in others easier than in themselves.

PROBLEM ISSUE

After exploring the primary reason for the referral, the therapist should delve into the student's social-emotional status. It is important to determine what events in the student's life are contributing to either frustration or discomfort.

Some key questions which may illicit useful information from the student regarding his treatment needs are:

"If you could change something in your life, what would it be?"

"What is making you uncomfortable at this time?"

"How could I help you?"

"What kind of problems are you having at school?"

Problem issues also include situation concerns. During this phase of the interview the therapist wants to know what is going on in the student's life and what immediate factors are inhibiting the development of functional social-emotional adjustment.

PROBLEM SOLVING

The student has undoubtedly attempted to solve the problem, albeit unsuccessfully. Therefore, the therapist must discover what strategies the student has employed which will provide an indication of the student's problem solving skills. Generally students who have persisting problems tend to use an ineffective problem solving scheme. These techniques must be uncovered so they can be examined. The irrational components of a student's behavior must be replaced with more appropriate and effective strategies.

Questions which may reveal how the student has engaged in problem solving are:

"What do you usually do when event 'X' happens?"

"What seems to work best for you whenever you are confronted with problems?"

"When you are confronted with problems, what do you do so you feel better?"

Get as much information as possible regarding the student's problem solving strategies. Don't evaluate or criticize, only record the information so you have an accurate picture of the child's typical reaction to conflict. Tell the student that a miracle just happened and all his problems disappeared. Ask him what different behavior would a stranger see.

PROBLEM CAUSE

One of the most perplexing puzzlements regarding problem solving is the determination of the cause--who is at fault? While who is at fault may seem clear to some the truth is that often

the wrong reasons have been identified as the cause. It is extremely unlikely that problems can be effectively treated if an incorrect cause has been accepted. The cause of the problem is closely related to problem ownership which will be discussed in later sessions.

Examples of probing questions to evaluate problem causes are:

"Why is this happening?"

"Who is responsible for this?"

"Why is this problem bothering you?"

At this time it is best for the therapist to accept whatever explanation the student provides without questioning or challenging their validity. Later in the program the student will be taught how to examine his beliefs and subsequent behaviors.

PROBLEM CONSEQUENCES

All problems carry certain consequences: some consequences are minor and should be ignored while others are severe enough to require professional help. The severity of the consequences must be determined so appropriate levels of intervention can be established.

The following questions will facilitate the evaluation of consequences.

"What happens when behavior 'X' occurs?"

"How do you feel when behavior 'X' occurs?"

"What are some of the things you really dislike whenever behavior 'X' happens?"

"When behavior 'X' occurs, how does it affect you?"

Because there is a subjective element to reacting to consequences, allow the student to elaborate as much as he wants to. He needs to tell it all.

PROBLEM RESOLUTION

Now the therapist will ask the student to propose a solution to the problem. This activity is valuable because it reveals the student's true understanding of who owns the problem. If these solutions never require him to make any real changes, then it is safe to assume that he believes that someone else must solve the problem for him.

Some helpful questions to ask are:

"What's the best way to solve the problem?"

"Who can solve this problem?"

"What must happen for this situation to improve?"

At the conclusion of the data collecting interview, decide if the student should be placed in this program for treatment and what behaviors should be targeted for change. Because this program requires the student to assume an active role, the student must be motivated to participate. If the student appears indifferent or resistant in any form, then a different treatment procedure should be considered.

If the student appears to be a suitable candidate and a definite treatable problem is proposed, the next step is to present the program to the student. Although the therapist should never overstate the potential value of the program, it is permissible to create the impression that the program will be beneficial and significant change in behavior will result. Students should always be encouraged to believe that their lives can be improved.

It is desirable for the student to have high expectations of the program's ability to positively change his life because it will facilitate its implementation by enhancing the student's willingness to put forth a concerted work effort.

A model dialogue is presented which may be used when exploring the feasibility of asking the student to participate in the FT treatment activities. Two critical questions need to be answered: First, is the student cognitively ready for FT, and secondly is the student prepared to extend the necessary time and effort to make the program work? A therapist who attempts this program with a student who does not meet the prerequisites may be placing the student in a treatment program which has little hope for success.

T "It seems that you are having some real problems at school and nothing that you have tried has helped very much, is this true?"

S "Yeah, I guess."

T "Well, I have a plan that I feel will help you gain control over your problem, interested?"

S "What is it?"

T "Well, I'm going to teach you how to think differently about your situation. You will learn how to examine your thoughts, feelings, and your behaviors so you can solve your problems in a constructive way."

S "I don't know...what do I do?"

T "It's not difficult. I will take you through a series of sessions, teaching you some techniques, and then I will help you set up a treatment plan. I guarantee that you will enjoy the activities and you will learn how to improve your life in almost all situations."

S "Well, OK, I will try it if you think it will help me."

ACTIVITIES

1. Carefully evaluate the student's potential to profit from participating in a cognitive program.
2. Take the student through the five factor interview. Be sure to record all relevant information.
3. If the student is to be enrolled in the program, solicit his cooperation by convincing him to participate: be careful to select a student who would profit from FT.

SESSION II - INTRODUCTION - CAUSE OF BEHAVIOR

OVERVIEW

- I. Who is in charge of my behavior?
 - A. How I think and feel is how I act.
 - B. I can change my behavior by thinking differently.

- II. What I say to myself affects how I behave.
 - A. Negative Statements (Self-Defeating)
 - B. Positive Statements (Affirmations)
 - C. Therapeutic Statements (Coping)

FORMAT

Present the content - source of behavior - and guide the student through the material. It is important that all aspects of the content be fully understood. A thirty-minute session should be sufficient.

How to Teach the Content Areas in FT

It is not recommended that the content material be read to students. You should plan on reviewing the material prior to starting the session and you should have a good understanding of what you plan to do. Different ages of students will influence your choice of vocabulary and illustrations. Present the content in your own words. If students demonstrate a lack of understanding you will need to repeat and expand your presentation. Adopt and modify as you go along. Read the entire FT program before you begin teaching any of the lessons. When you understand the progression of ideas within the program and how each lesson is developed, you will be able to guide the students systematically so they can acquire the essential logic of FT.

CONTENT-SOURCE OF BEHAVIOR

Social behavior is interrelated among those who are participating in a social interaction. When we engage in a social function we are expected to behave in a prescribed fashion and we, in turn, expect others to do the same. Therefore, our behavior will gain acceptance or

nonacceptance according to its impact on a social situation or how others perceive us and we perceive them.

This reliance on others for assigning meaning to our behavior often creates confusion. It may lead us to incorrectly conclude that others are responsible for regulating our behaviors and the way we feel. If we believe that other people shape our behaviors and feelings then we accept the idea that we are not in charge of our behaviors or feelings. Therefore, we eventually believe that we are neither accountable for our actions, nor can we be expected to modify them.

This is simply not so. We must accept the consequences of our behavior and acknowledge that we, not others, control how we act.

The first step in learning how to change our behavior is to understand how "the way we feel" influences our behavior. If we believe the reason we earned a poor grade on a test can be totally attributed to the teacher giving a difficult test, then we are inclined to not change our study behavior because we believe that the teacher is primarily responsible for the low test score. Similarly, if we feel our parents are unfair, then we don't see the need to change our behavior because they are in charge and the situation will not improve until they initiate a change.

The major drawback to this kind of thinking is that the next time we take a test we may not adequately prepare ourselves because we believe that our score is contingent on how the teacher writes the test, not on our ability or study effort. Also, if we fail to modify our behavior because we believe that the only real change must come from our parents, then we will likely become an inactive participant in managing our behavior.

But if we were to say to ourselves that the teacher gives hard tests and we must study harder to earn a better score, then we believe that we are in control of our grade, not the teacher. And if we feel that our parents are unfair, we can introduce new ways of behaving that will improve the situation even with unfair parents. Whenever we do this we are being responsible and accepting the consequences of our behavior.

One of the primary goals of FT is to teach you to talk to yourself in a constructive manner so you can grow and mature emotionally. But first we must learn that most self-statements fall into one of three categories: Negative, Positive, or Therapeutic.

Let's examine a negative self-statement. Whenever we make a strong disapproving statement about our actions which generalizes how we feel about ourselves, we have made a negative statement. If you say "I am stupid," that statement generalizes to your total intellectual self. If on the other hand you said "I failed that test," it does not generalize. It only addresses your performance on the test and is not necessarily a negative statement.

A positive statement is similar to a negative statement but in reverse direction. It deals with an approving statement which generalizes. When we say, "I'm a good athlete," it generalizes to many different sports. But if you say, "I hit a home run," it simply states what you did.

Therapeutic statements, on the other hand, are quite different because they do not generalize; they are statements which summarize what actually happened along with an additional coping statement. An example would be, "Because I am a slow reader, I need to schedule more time to study."

It is important to use therapeutic statements because they provide a coping mechanism along with problem ownership. Both of these factors are necessary for growth and development. While positive statements are appealing, they often misrepresent or distort a situation. Telling a poor student that he is smart is not an honest statement and is unlikely to improve his behavior because it does not provide a coping cue.

Although other programs may define therapeutic statements in a more assertive manner, FT stresses the coping aspect.

ACTIVITIES

1. Overview the material in the content area and emphasize the importance of understanding the difference between externally and internally controlled behavior. Have the student present examples of typical problems he has encountered and help him analyze who actually controlled the behavior.
2. Write a list of at least three externally controlled behaviors the student has provided. Then help him visualize what he would do differently if he explained what happened in terms of internal control.
3. Review the differences between positive, negative and therapeutic statements. Then ask the student to convert the following statements to therapeutic statements.

"I am dumb, I can't pass anything."

"No one likes me because I am a jerk."

"I just can't sit still in class. I have no control."

"Because I am ugly, no one wants to be my friend."

EXAMPLES OF THERAPEUTIC STATEMENTS

"Because school is hard for me, I have to study harder."

"People find it difficult to like me when I act stupid. If I want more friends I am going to have to change the way I act."

"It's hard for me to sit still in class, I'm going to have to work harder on concentrating."

"I may not be the best looking kid, but I can still have friends if I act friendly."

SESSION III - ATTRIBUTION

OVERVIEW

- I. Attribution - Problem Ownership
 - A. What a person does when they own the problem.
 - B. How to determine who owns the problem.

- II. Attribution - Problem Reaction
 - A. Perceived Problem
 - B. Untreatable Problem (External Control)
 - C. Treatable Problem (Internal Control)

FORMAT

Teach the content area and ask the students to relate their personal experiences to the formation of attributions. This session has four case studies which should provide the student with the needed practice to fully understand the attribution options and how they relate to problem solving.

CONTENT - PROBLEM OWNERSHIP

Whenever we encounter social conflict, we are inclined to seek an immediate solution. While this is certainly desirable, we should be careful not to launch into a resolution until after we establish problem attribution. Once a student understands to what he is attributing a problem, he is in an excellent position to determine who owns the problem and who is going to assume the responsibility to solve it. It is important to understand that problem ownership does not imply that the person who owns the problem is necessarily the source of the problem. Rather, problem ownership essentially identifies the person who is affected by the consequences and therefore should be motivated to lessen the severity of the problem.

As a rule, when an individual owns the problem the following behaviors are usually manifested.

1. He wants to make change.
2. He believes that change is possible.
3. He is willing to assume the responsibility to initiate a change.
4. He wants to grow and mature emotionally.
5. He wants to live more comfortably.
6. He is self-disciplined.

HOW TO DETERMINE PROBLEM OWNERSHIP

The actual process of determining problem ownership is not complicated; generally there are two basic questions you must ask yourself:

1. Do you regard this behavior (situation) as being important enough to change?
2. Are the consequences of the behavior negatively affecting you in a significant way?

If you answered "yes" to either of the above questions, you should consider assuming problem ownership.

ATTRIBUTION APPROACHES

There are various ways to react whenever a conflict arises. One major concern is to determine what the source of the discomfort is, thereby all change efforts can be directed towards a specific target. For our purposes, we have identified three different ways to attribute the conflict to a source. They are as follows:

Conflicts Caused by Perception

There will be times when we react to a situation in a strong emotional manner. When this happens, our emotional reaction may become the source of the problem. On the other hand, if we carefully examine the situation unemotionally, we may discover that our reactions may not be justified.

When our interpretations and expectations become unrealistic, we may best be served by moderating our positions. What this means in a therapeutic sense is that no specific behavior change is necessary other than altering the way we are perceiving the situation.

An example of a conflict caused by unrealistic perception would be, "When my teacher doesn't smile at me, it means that she is upset with me and that makes me sad."

Whenever the problem is attributed to the way we interpret how other people think, we must understand that often our interpretation is subjective and faulty. So to resolve this problem a modification in perception is all that is required. Students cannot assume that when a teacher fails to greet us with a smile that she is upset with us. She may have a lot on her mind and it has nothing to do with us.

Once students understand how their emotional reaction to a neutral event can be changed by dealing with the problem internally, they will have acquired a skill that will enable them to successfully cope with a variety of daily encounters.

Externally Controlled Conflict

Often we will conclude that there is not much we can do to change a situation and we become convinced that all of the controls reside outside ourselves.

Essentially what we are believing is that only others have the power to change the situation and we are helpless. This deduction is predicated on the notion that life is unfair and sometimes painful, and we must learn to endure.

There are two basic assumptions which support this line of reasoning. First, we are helpless and it would be futile to imagine that we could actually initiate any kind of action which would make any difference. Secondly, we reject problem ownership. Therefore, the conclusion is, if we don't own the problem then we are not obligated to correct it and we are stuck with the negative consequences.

If we accept the external control proposition, it is unlikely that we will be motivated to take appropriate measures to improve the situation. It renders us helpless and reduces us to a passive role.

When we become convinced that there is virtually nothing we can do to substantially improve a situation, we are buying into an externally controlled notion. If a student gets caught breaking rules at school and is punished and he adopts the external control approach, his reasoning would follow this scenario. "The reason I'm in trouble is because of bad luck I got caught and the system is unfair and dumb." He does not consider what he did was wrong; he is only concerned with the fact that he got caught and the system is dumb.

This reaction will interfere with the student's ability to launch an effective problem solving solution. This response also conveys "The only thing I did wrong was to get caught." It is not adaptive.

Internally Controlled Conflict

If we adhere to an internal control approach we believe that we have some control over a situation and we are in a position to alter the conditions. This does not mean that we have absolute power, but rather it means that we are not helpless victims. Therefore, we accept problem ownership and strive to improve the situation by our actions.

The acceptance of problem ownership allows us to adopt a hopeful attitude toward life. Once we understand our relation to a conflict, we develop more confidence in our ability to deal with it because we are no longer subjected to a helpless state.

It is important to stress that adults are more likely to employ an internal control interpretation to a conflict situation. This represents a clear differentiation between adult and child problem solving approaches.

In an internally controlled approach we are more likely to examine all the variables unemotionally and then attempt to determine their relationship to the problem. If an internally controlled student finds himself being picked on by several other students, the first question that would be asked is "What am I doing to cause other people to dislike me?" This response both accepts problem ownership and it puts the student in charge of improving the situation.

ACTIVITIES

1. Review the content materials with the student. Be sure that he fully understand the attribution theory and its consequences.
2. Read the situation and the reaction of the four case studies and have the student answer the questions. Take this time to clarify any misunderstandings.

CASE STUDY #1 - CHRIS

SITUATION:

Mrs. Grady is an English teacher who is very demanding. Students in her class are expected to write at least ten pages per week or they automatically fail her class.

Chris was not a particularly good student in English and she seldom turned in ten pages. At the end of the term Chris received an "F" for the class. Chris became quite upset once she received her grade.

REACTION:

Chris immediately complained to the teacher and demanded that her grade be changed. Her justification was that she turned in an average of seven pages per week and that was worth more than an "F" grade. Mrs. Grady refused.

QUESTIONS:

1. Who owns the problem and why?
2. What problem attribution does Chris believe?
3. If you were Chris, how would you go about solving the problem?

CASE STUDY #2 - JEFF

SITUATION:

Jeff's Dad told him that the next time he skipped school he would lose the following privileges for two weeks: TV, friends over, phone, or leaving the house in the evenings.

Jeff skipped school, got caught, and his Dad imposed the consequences.

REACTION:

Jeff feels that his Dad is very unfair and skipping school is not really a big deal. He also said that he was going to get even with the principal for telling his Dad.

QUESTIONS:

1. In Jeff's view, does he own the problem?
2. What problem attribution has Jeff adopted?
3. If you were using FT, how would you redesign Jeff's cognitive interpretation of the situation in terms of problem ownership and consequence modification?

CASE STUDY #3 - SHARON

SITUATION:

One of the most popular girls in school was having a party and she invited 20 kids to the party. Sharon was not invited. This bothered Sharon very much because she really wanted to attend.

PROBLEM ATTRIBUTION:

Sharon becomes emotionally upset and tells her mother that she is dumb and unlikable because she was not invited to the party. She is convinced that no one will ever like her.

QUESTIONS:

1. According to the problem attribution, which one has Sharon accepted to explain her situation?
2. If you want to help Sharon, which attribution would you encourage her to accept and why?
3. What would be some therapeutic statements that Sharon could say to herself that would enable her to more effectively cope with her situation?

CASE STUDY #4 - GREG

SITUATION:

Greg is the shortest student in the 6th grade and he is not very athletic. But his dream is to play center on the school's basketball team. Greg tried out for the team and was cut after the first practice.

REACTION:

Greg was angry and hurt and asked his parents to go to the school board and force the coach to put him back on the team and let him play center.

QUESTIONS:

1. Which attribute is Greg using?
2. If Greg was realistic, which attribute should he select? Why?
3. What therapeutic statements would you recommend Greg use to enable him to cope with his situation?

SESSION IV - SELF INSPECTION

OVERVIEW

- I. Examining One's Behavior to Determine the Problem
 - A. What is the problem?
 - B. What factors are contributing to the conflict surrounding the problem?
 - C. What are the consequences of the problem?

- II. Examining Thoughts and Actions
 - A. Who has control over my behaviors?
 - B. What can be done to improve the situation?
 - C. What must I do to resolve the problem?

FORMAT

Teach the content topic - Self-Inspection - and relate the theoretical concepts to the student's real situation. Complete both of the activities. A 40-minute session should provide enough time for the student to master the techniques of Self-Inspection.

CONTENT - SELF-INSPECTION

Whenever we encounter a sense of discomfort or experience stress we are prone to infer some cause and effect relationship. This outcome is natural and sometimes helpful, but only if it follows a constructive process. As a rule, when we are challenged by a problem, we can respond in basically three different ways. First, we could assume that we are essentially the cause of the problem and, therefore, should assume the primary responsibility for resolving it. If this were done we would be claiming problem ownership and start to prepare ourselves to deal with the problem.

Secondly, we could project blame on another person and attack them with the expectation so we can get them to solve the problem. Thirdly, we may simply conclude that the problem is environmentally / socially rooted and not subject to change.

Obviously, at times all of these interpretations hold true. However, the challenge is how we uncover all of the salient elements so we can correctly select the treatable component of the conflict.

The real payoff for identifying the source of the problem is measured by its impact on the therapeutic plan for problem resolution. So the major function of conducting a self-inspection is not to assign fault but rather to determine what facets of the behavior must be modified to improve the problem situation.

Students should be encouraged to view a conflict from the orientation of "What can I do to solve the problem." This interpretation should not be regarded as placing the blame solely on the student. It should, however, aid a student to strive for problem ownership whenever they encounter a potentially negative event. This approach should discourage them from reacting emotionally to conflict.

Before a student can conduct a meaningful self-inspection he must become aware of critical variables such as his relationship to the problem. Also, he must remember that the ultimate goal of self-inspection is to generate a functional coping statement.

First, students need to be taught to examine the situation in terms of the consequences. They must also determine if there is a significant problem that requires major behavioral changes or if it would be better to just reconsider how they are reacting to the consequences. In other words, does the situation require a behavioral or a perceptual change?

Next, students must establish how much control they have over the event. If they have substantial control they are in a good position to initiate a change. Conversely, if they have little control over an event, then they may want to rethink their reaction to the consequences and formulate a plan to cope with the situation.

Finally, some sort of plan needs to be devised which incorporates the facts of the situation. The plan should have a statement of problem ownership along with a coping mechanism.

ACTIVITIES

1. Teach the tenets of self-analysis by examining the relationship between thoughts and behavior. Be sure to relate as much as possible to the student's actual life.
2. Ask the student to share a real problem situation with you. The referral may provide you with a clue. Then help the student complete the Self-Analysis form.

SELF-ANALYSIS FORM

1. What is the problem?

2. What factors are contributing to the conflict situation?

SELF-ANALYSIS FORM

3. How are people reacting?

4. What do I have control over?

SELF-ANALYSIS FORM

5. What am I doing to improve the situation?

6. What can I do to improve the situation?

SESSION V - SELF-REGULATION

OVERVIEW

- I. Preparing for a Treatment Plan
 - A. Problem Statement
 - B. Target Behaviors or Thoughts for Change

- II. Designing a Treatment Plan (Dialogue)
 - A. What is the problem?
 - B. What are the consequences?
 - C. What can I do?
 - D. What are my coping strategies (self-talks)?
 1. Situation
 2. Strategies
 3. Coping
 4. Evaluation
 5. Reinforcement

FORMAT

In this session the student will be taught the basic rudiments of cognitive therapy and utilize them in an applied activity. Present the basic content material and complete all of the assignments. This is an important session and it may require more than a single presentation to master the essential concepts. Homework activities must be completed. A model plan is included.

CONTENT - SELF-REGULATION

Up to this point we have discussed problem situations and who is in charge of modifying the problem to reduce the conflict. Also, we emphasized that sometimes it is more prudent to change the way we think about a problem and its consequences than to actually try to modify the

behavior. Now, we are going to incorporate all that was presented in the previous sessions, formulate a treatment plan, and implement it.

The first step is to finalize on a specific problem which is suitable for treatment. It is strongly recommended that extremely difficult problems not be selected for treatment during the initial phase of the program. It is imperative that the student experience some measure of success therefore only problems of moderate difficulty should be considered at the beginning.

At the same time, however, problems which result in minimal consequences should not be selected. It is unlikely they would sustain the application of an involved treatment plan for any length of time. Problems that respond best to cognitive treatment are those which are situation-specific and where a clear outcome goal can be established. Numerous behaviors which occur in the classroom or at certain times in the home meet this criteria.

An example of a problem which lends itself to functional therapy is off-task behavior because it can be attached to a specific activity. If you want to reduce all off-task behavior throughout the day however, it would be quite difficult. But, if you target math seat work in the morning, then it would be manageable.

Once a specific problem has been selected, the next step is to focus on what needs to be changed. Do we want to change a behavior, or should we attempt to change how the student is thinking about the problem, or challenge an irrational belief? While there are times when a general statement suffices to get us on target, it is better to specify the problem as clearly as possible.

Typical workable targets would be: completion of assignments, reduction of negative statements, or staying on-task. Although they all maintain a general component, they can be measured on a scaled system so definite changes can be noted. Mastery levels of performance could be established, but they are not absolutely required. Often we contrive a mastery level by assigning a value like 90% correct, but in reality we really don't know what 90% means in terms of skill acquisition. In one activity a student could master only 50% of the content but learn a great deal more than a 90% mastery in a less difficult activity.

Now that we have identified a problem and chosen a target behavior, we can start to write a script to improve the behavior. In order to equip the student with a concrete plan, all of the steps must be written down. The completion of the Treatment Plan will follow a systematic three-step sequence.

Step 1 - What is the problem?

A specific problem statement should be agreed upon. It should be stated in a manner that permits the implementation of a student oriented treatment effort. If the problem statement does not delineate between the consequence of the problem and the student's role to solve the problem, then it is unlikely that the student will commit to an intervention action.

Step 2 - What can I do?

This step reinforces the basic thrust of a program. It places the responsibility for problem resolution on the shoulders of the student. Of course, this is where it belongs if the student is going to grow and mature. It also requires a student to seek out coping strategies for dealing with problems.

Step 3 - What are my coping strategies? Self-Talk Script

At this stage, the student is ready to formulate a treatment program. There are basically five parts to the self - talk script. To obtain mastery level in script comprehension the self-talk scripts must be written in as brief and direct a manner as possible. The script will later be rehearsed until it reaches an automatic level. Directions for achieving this will be presented later in the program.

3.1 Situation

The situation in which the script is going to be implemented must be clearly determined. To be effective, the situation must have a beginning and an end. All day settings don't work well. The situation should be tied into a specific activity.

3.2 Strategy

Students must know what they need to do whenever they encounter the identified problem. Precise direct statements work best, such as: "I must be quiet," "I must not waste time," or "I must read my assignments."

3.3 Coping

It would be fool-hardy to believe that a student will dutifully obey all of the strategy statements all of the time. So it is important to teach the student to use a coping mechanism whenever he experiences a set back.

Once the student deviates from the target goal, we want him to redirect himself back on target without any assistance. Coping statements will help us achieve that.

Effective coping statements are never complex or judgmental: to work they must be forceful and understandable. Statements like "If I find myself not working, I must remind myself to get back to work," or "Whenever I am out of my seat without permission, I must remind myself to sit down." Coping statements are easy to understand and will clearly guide the student to the target behavior.

3.4 Evaluation

No treatment program can be expected to work 100% of the time. Therefore, constant monitoring is essential. The most useful form of monitoring is self-monitoring. Self-monitoring reinforces the need to assume responsibility for their behavior.

To facilitate self-monitoring, students will complete the "How Am I Doing Index." The completion of this form will insure that students focus on their behavior. By asking the students to quantify the quality of their behavior we are actually teaching the students they can evaluate how they are doing and also they are in charge of improving behavior.

3.5 How Am I Doing Index

The "How Am I Doing Index" is designed to enable a student to monitor the implementation of the "Self Talk Script." During the target period, the student should monitor the effectiveness of his program. For each ten-minute interval, the student should record how things are going. An "X" is used to indicate the level of performance. If the student utilizes the self-talk script, then he should use an "O" instead of an "X". An "O" indicates that the self-talk script was used.

Because this may be an intrusive procedure for a student to perform, an external reward may be provided to encourage the student to complete the Index.

3.6 Reinforcement

If we wish to strengthen a desirable behavior we must reinforce it. Two different reinforcement options should be considered, self-reinforcement (internal) and other-reinforcement (external). Students can be taught to reward themselves for achieving certain goals. This approach is consistent with assuming responsibility for their behavior. Students with a built-in reinforcement procedure are better equipped to modify their behavior in an independent fashion.

The use of external reinforcers, however, is still valuable and should be utilized, particularly at the beginning of the program. The major drawback to external reinforcers is that students seldom develop spontaneous ownership of their behaviors. Generally the classroom teacher will administer external reinforcers. If the teacher stops administering the program, there is a good chance the student will resort back to the original behavior because he was not required to assume ownership of his behavior.

ACTIVITIES

1. Teach the content material. Be sure to provide examples for each of the categories of the Treatment Plan. A model is provided which should be used to illustrate how the procedure works.

2. Help the student select a problem for intervention, then complete the Treatment Plan. This may take some time and revisions should be anticipated. Keep it simple and direct.
3. Once the plan has been written, it has to be mastered. In order to achieve this, numerous trials are required. A general rule is presented below. Some students will learn the plan with relative ease while others may struggle. You must make the determination as to when the student has mastered the self-talk script.
 - a. Model the Self-Talk - 3 times
 - b. Guide the students through it - 3 times
 - c. Have the student perform it independently - 3 times
 - d. Ask the student to say it silently to himself - 3 times
 - e. Ask the student to apply it for a week
4. Explain how the "How Am I Doing Index" is to be used. Initially set up some external reinforcers for implementing the plan. Check it in one week to see if any modification is required.

TREATMENT PLAN MODEL

SELF-REGULATION GUIDE

STUDENT RESPONSES

What is the problem?

I am not completing my math assignments

What are the consequences?

I will earn a poor grade in math

What can I do? I can develop a plan to get more work done

What are my coping strategies? (Self-Talk Script)

Situation: Math assignment - complete a page of math problems

Strategy: "Whenever I get a math assignment, I will open my book and start working on the first problem. I must be careful not to waste time."

Coping: "If I find myself not working I will say, 'I must get back to work and not waste time'."

Evaluation: "I must record my behavior on my "How Am I Doing Index." If I am achieving my goal I should reward myself.

TREATMENT PLAN

SELF-REGULATION GUIDE:

What is the problem?

What are the consequences?

What can I do?

What are my coping strategies? (Self-Talk Script)

Situation

Strategy

Coping

Evaluation

Reinforcement

SESSION VI - SELF-REVIEW

- I. Evaluation
 - A. How do I evaluate my plan?
 - B. Why is evaluation important?

- II. Problem Areas
 - A. Lack of compliance to treatment plan
 - B. Faulty written self-talk script

- III. Reinforcement
 - A. External reinforcers--why and how?
 - B. Internal reinforcers--their effect.

FORMAT

This session will evaluate the effectiveness of the treatment plan. Because this session will be held after the student has used FT, the importance of this session cannot be overemphasized. Success is neither guaranteed nor is it permanent; continuous feedback and modifications are critical. The student needs to be supported, in particular if the plan was a disaster.

The intensity of teaching this session will vary according to the effectiveness of the student's plan. But even if there was a fair amount of success, the evaluative procedure should still be reviewed.

CONTENT - SELF-REVIEW

Self-review is a procedure a student uses to examine the effectiveness of the treatment plan. It is of value to establish what worked as well as what did not work. If the plan resulted in success then appropriate reinforcers should be dispensed. Just as important, if the plan was disappointing then a strategy for its redesign must be outlined.

An essential but somewhat indirect outcome of self-review is delegating the responsibility to the student for either the success or failure of the plan. We should always stress that the primary

person accountable for the plan is the student. If there was success the student is rewarded. If not, the student has the responsibility for modifying the plan. We must, however, provide the student with a vehicle to conduct an evaluation.

In Session III, the student was introduced to the "How Am I Doing Index" and was required to use it for a week. The Index, however, only provides an indication of whether or not the student is achieving the stated goal. It does not yield any information to explain why there was either success or failure. Other variables must be consulted to determine this.

The first area of investigation should be adherence to the treatment plan: complying with the script will not happen automatically. While it will be difficult to determine the degree of compliance, the student's comments on how he employed the script should serve as a reasonable indication of script utilization. If you suspect that the student used the script in a lackluster manner, you may want to review a portion of the rationale of problem ownership and accepting responsibility for his actions.

If the student faithfully used the plan but still had meager results then the strategies of the plan should be examined. For FT to work it must be packaged in a precise and powerful dialogue. When the script takes on a general theme or if it is too complex, then the statement will become ineffective and should be modified.

To illustrate this point two examples are presented:

Example 1: "When I am doing my math assignment I must keep working and I should be careful not to waste time."

Example 2: "When I am doing my math assignment I must concentrate on what I am doing, not talk to anyone or day dream, and I must try not to make any careless mistakes."

The goals of both of these examples are acceptable. However, in Example 1, there is only one primary goal--keep working, whereas in Example 2, we see several related goals. Because Example 2 has so many facets to remember, it may itself become a distraction. It would be more functional to rewrite Example 2 so it emphasizes only one essential goal. Self-talk statements can be easily repaired.

There may be students who are carefully adhering to a plan with an excellent self-talk script but still there is no substantial improvement in behavior. If this occurs, the reinforcement procedures should be reviewed. As a general rule, when the plan is being introduced it should be immediately reinforced by an external source. Either the teacher, parent, or therapist could serve as the initial reinforcer. A point system could be devised which would reward the student for making improvement in reaching the target behavior. Points could be easily dispensed for the number of completed problems or a reduction of demerits from the teacher. By directing rewards to contingent behaviors, we are less likely to reward frivolous non-targeted behaviors.

Another powerful technique is to teach the student to reinforce himself. This could be done by either subvocalizing a verbal statement or by jotting down points to be exchanged for a reward at a later time.

Because several components of this program are intrusive, insuring their continuous application may require a great deal of time and effort by both the student and program supervisor. Even if the program brings about the desired results, it will still require periodic attention to maintain its effect. Great care must be taken once the novelty of the plan has worn off, since old habits are quick to return.

ACTIVITIES

1. Take the student through the evaluation procedure. Pay close attention to any confusion the student may have about any phase of the program. Remediate all suspicious concerns that exist. If needed, review portions of the previous lessons.
2. Prepare the Treatment Plan, reinforce the student for any gains and then encourage him to implement it for another week.

SESSION VII - HOW I FEEL

OVERVIEW

- I. What are feelings and where do they come from?
 - A. Pleasant feelings will be examined in terms of how and why they happen, and how they are maintained.
 - B. Unpleasant feelings will also be examined in terms of how and why. In addition, procedures will be taught on how to modify unpleasant feelings.

- II. How I Feel Index
 - A. Students will be taught how they can quantify their feelings.
 - B. Students will complete the "How I Feel Index" and tally sheet.

FORMAT

Students will be taught how feelings develop and how this information can be used to bring about desirable changes in one's behavior. After students acquire a sense of how feelings operate, they will be taught how they can measure and record them.

CONTENT - FEELINGS AND HOW TO MEASURE THEM

Feelings do not thrive in a vacuum; they are dependent upon interactions and interpretations. We have more control over our feelings than we realize. If we are interested in personal growth and development, we must gain a measure of understanding about our feelings by learning why they occur and how to modify them.

First of all, let's define what feelings are. In a broad sense, a feeling is a state of perceiving and experiencing a wide spectrum of sensations ranging from very pleasant to very painful. Webster also describes a feeling as an emotion which results from one's impression or emotional state and becomes an unreasoned belief.

Whenever we feel, we experience a physical or emotional reaction to a particular behavior or event. If the reactions are judged to be positive, we have pleasant feelings. If the reactions are judged negative, we experience pain. Clearly there is a subjective component to how we feel.

When we attempt to understand our feelings we must always remember that to a high degree our feelings reflect our perceptions which suggests we are primarily responsible for our feelings, pleasant or unpleasant. Often the actual event is neutral until we assign a feeling that is drawn from our emotional state.

Consequently, we are instrumental in shaping our feelings because feelings are not automatic or universally attached to certain events. Once we become aware of our role in regulating how we feel, we can learn to cope with our negative feelings in a more constructive manner.

It is imperative that we become fully cognizant of the fact that we do not have to be held hostage to our emotions. Either we acknowledge responsibility for our feelings and manage them or we will continue to believe that others control how we feel. If we are in charge of our feelings, we can become in charge of our actions.

But before we can hope to change how we think about our feelings, we must first learn how to quantify them in terms of intensity. This will require the use of a rating system which consists of various levels which can be easily used throughout the day. Other advantages of a rating scale is that it will allow us to compare how we feel at different times of the day, week, month, etc. This will assist us in determining if we are improving or if a certain time of the day is more of a problem for us.

For this purpose, the "How I Feel Index" was developed. The Index is divided into six levels which range from an emphatic state of happiness to a low level of deep despair. A rating can be completed quite easily by rotating a dial to the appropriate level and recording the score.

The six levels, along with a description are:

- Level 1 = I feel great, life is terrific
- Level 2 = I feel pretty good, life is fun
- Level 3 = I feel OK, life is acceptable
- Level 4 = I feel sad, life is hard
- Level 5 = I feel stressed and unhappy, life is the pits
- Level 6 = I feel depressed, life is not worth the pain

Each level is segmented into five units which range from high to low so a student can report differences within a level, making the Index more sensitive so it can reflect slight shifts in mood change. Scores on the Index will be recorded on the Tally Sheet. For example, if he felt like a low level 2, he could record 2.4. This would mean they are in the number 2 level but at the lower end. At a subsequent rating their feelings may improve some and their rating could become a 2.1.

The use of this procedure should be limited to critical behaviors or in situations where other more conventional treatment efforts have failed. Once a student becomes comfortable with the rating system they will find that they now have an effective tool to communicate their feelings

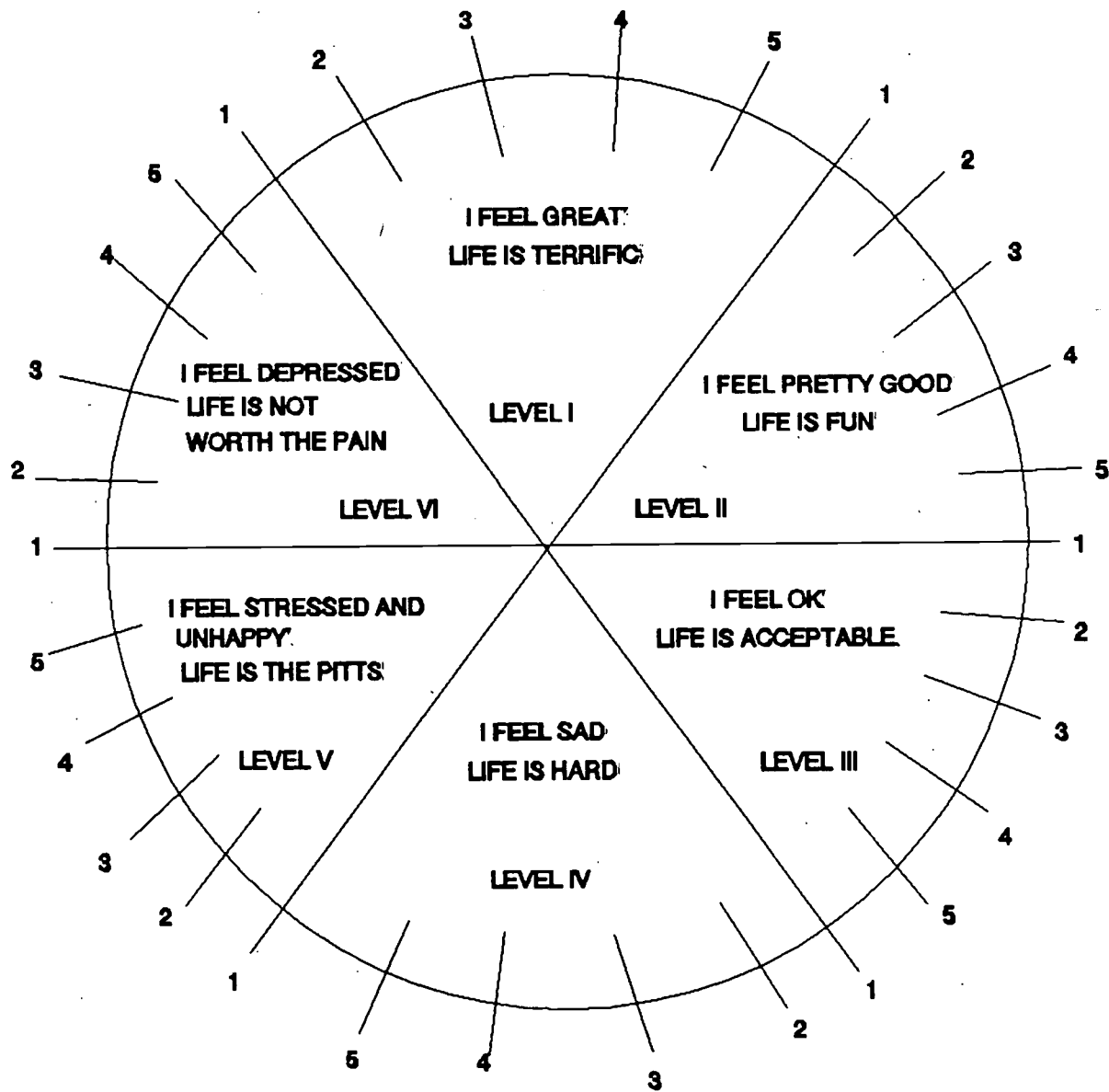
to others. The use of the Index will permit a clear communication between two parties regarding their interpretation of feelings because they will be utilizing the same vocabulary.

ACTIVITIES

1. Discuss the content material and stress the notion that feelings are not automatic but rather the result of how we interpret certain events. Ask the students to recall both the good and bad feelings they have experienced, then try to get them to examine how they interpreted each situation. If possible, now try to get them to assign a different interpretation.
2. Ask the student to use the "How I Feel Index" for a week. There should be at least five ratings per day, more if possible. Target behaviors should be rated daily and frequently. It is important for students to understand how feelings change throughout the day and why they change.

Students should also complete the tally sheet.

HOW I FEEL INDEX



SESSION VIII - REVIEW

OVERVIEW

This is a review session and no new material will be presented.

FORMAT

A list of statements, which represents the substance of FT, will be presented for review. The student must clearly and accurately explain the logic behind each statement and demonstrate how he has employed it in his situation.

It is important that the student provide a response which is free of confusion or misperceptions. If the student fails to give a suitable response, a review session should be conducted. If it is determined that the student has failed to grasp the basic concept of the statement, it may be necessary to go back and review the entire session.

REVIEW STATEMENTS

When we become emotional, we may act before we think.
The way we talk to ourselves has a lot to do with the way we feel and act.
Just because we are not good at a certain skill does not mean we can't do anything well.
When emotions run high we may forget to think about consequences.
It is not always necessary to make positive statements about our behavior.
Even if we are not very attractive we can still have friends and fun.
Other people do not control how we feel, we do.
Sometimes we have to learn how to cope with a difficult situation without changing it.
We must be willing to put pressure on ourselves so we can improve our performance.
We can understand our feelings better once we learn how to measure them.
Failure only means that we must make changes.
When we accept the consequences for our behaviors, we are responsible.
Only after we learn how to monitor our behaviors can we hope to make substantial improvements.
By learning how to use "self-talk" we can guide ourselves through difficult times.
Self-analysis is the first step in improving our behavior.
When you own the problem, you are in charge of solving it.
Feeling is an emotion, susceptible to impression and unreasoned opinion.

EXAMPLE OF AN FT INTERVIEW

- Therapist: "I understand that you are having problems on the playground."
- Student: "Yeah, I usually get into fights."
- Therapist: "On average, how many fights do you get into a week?"
- Student: "Three to four, it depends."
- Therapist: "How do these fights get started?"
- Student: "These guys pick on me, they call me names, they make fun of the way I dress. I just lose my temper and I try to hit them."
- Therapist: "Then what happens."
- Student: "Sometimes they really get mad and they beat me up. Then I get into trouble with the principal."
- Therapist: "When they pick on you, does it always end up in a fight?"
- Student: "Yes, when I lose my temper."
- Therapist: "Do you have any control over the situation?"
- Student: "No."
- Therapist: "Are there times when they pick on you and you don't fight?"
- Student: "Yes."
- Therapist: "Why do you fight sometimes and not others?"
- Student: "Well, sometimes I don't lose my temper and I just walk away."
- Therapist: "It sounds like sometimes you have control over your temper and other times you don't. Is that true?"
- Student: "No."
- Therapist: "But you just told me that there are times when you don't fight and you just walk away."

Student: "I don't fight if I don't lose my temper."

Therapist: "That's correct because you don't fight every time you do have some control over your temper."

Student: "OK, I see. It's true I don't always fight when they pick on me."

Therapist: "That's important because it tells me that when you take charge of your emotions you can regulate your fighting."

Student: "It depends."

Therapist: "Remember when we talked about the attribution theory? Which theory would apply to your situation?"

Student: "I don't know."

Therapist: "Tell me, is your problem being caused by perception, external control, or internal control?"

Student: "I don't know, I guess it is caused by external control because they are picking on me."

Therapist: "If it is caused by external control, what does that mean?"

Student: "That I can't change it."

Therapist: "Do you think you can change it?"

Student: "No."

Therapist: "Remember when we talked about problem ownership?"

Student: "Yes."

Therapist: "Do you own this problem?"

Student: "Yes, but there is not much that I can do about it."

Therapist: "Do you like the consequences of the problem?"

Student: "No I don't, but I can't control other people, they don't like me."

Therapist: "I agree you can't control other people. Can you control yourself?"

Student: "Sometimes."

Therapist: "So it sounds like you're telling me that there is nothing you can do about your situation: you have to just wait until they no longer want to pick on you."

Student: "What could I do?"

Therapist: "First you can learn to regulate your behavior."

Student: "You think that I can learn to regulate my behavior and avoid fights?"

Therapist: "That is absolutely correct. Would you like to learn a way to regulate your behavior so you can avoid fighting?"

Student: "I guess."

Therapist: "Great. First we have to set up a plan that you can use. So what I would like to do is have us develop a treatment plan to assist you in changing your behavior."

Student: "What do I have to do?"

Therapist: "First we have to define the problem."

Student: "Ok."

Therapist: "From what you have told me I would say the problem is that you get into fights at noon on the playground because you are unable to control your temper when other kids tease you. Is that right?"

Student: "Yeah."

Therapist: "Now we need to identify the consequences of your problem. Let's see if I have it, when you lose your temper and fight you get beat up and get in trouble with your principal. Is that right?"

Student: "Yes."

Therapist: "Now I have to ask you, what can you do to change the situation?"

Student: "Well, I should stop fighting, but it's not easy."

Therapist: "I understand, but tell me what you could do instead of fighting."

Student: "I could just walk away."

Therapist: "That's good, now we have to set up a plan to help you walk away. So let's determine in what situation you will use your plan."

Student: "I guess it would be at noon on the playground."

Therapist: "Let's see if we can come up with a strategy that you can use. You told me that you are more likely to get picked on when you hang around certain students during noon time on the playground. Is that true?"

Student: "Yes."

Therapist: "Well we need to set up a plan so you can avoid certain problems. A plan will help you regulate your behaviors."

Student: "What do you mean by regulate?"

Therapist: "When you regulate your behavior it means that you think before you act. This way you can prevent certain problems from happening and when problems do happen you still regulate your behavior. Can you think of a way you could regulate your behavior?"

Student: "Well, like when I'm on the playground and kids start to pick on me I can learn to regulate my behavior so I won't get into trouble."

Therapist: "Good, do you see that when you choose to regulate your behavior that you are saying that you are in charge?"

Student: "And then I won't have any more problems."

Therapist: "No, not necessarily. There may be times when your plan won't work and then you are going to use coping skills."

Student: "What's a coping skill?"

Therapist: "Well, let's say when you are being picked on and you start to get angry and are just about to lose your temper. Now that's when you can use a coping skill. Many times a coping skill is a self-help reminder statement."

Student: "You mean like using self-talk script?"

Therapist: "Yes, let's say that whenever you start to feel that you are about to lose your temper and fight that first you do three things: 1) count to 20 slowly, 2) walk away, and 3) say to yourself 'good job you regulated your behavior and you didn't fight.'"

Student: "You want me to count to 20 out loud?"

Therapist: "No, I would rather you count slowly to yourself."

Student: "Do you think it will work?"

Therapist: "I think it will help you a lot and it will provide you with a different choice than fighting."

Student: "Oh!"

Therapist: "Now I will write down your plan and have you practice it until you learn it."

What Is The Problem: Fighting on the playground at noon because I lose my temper when kids tease me.

Consequences: I get beat up and then I get in trouble with the principal.

What Can I Do: I guess I could learn how not to fight and try to walk away.

Situation: Noon time out on the playground.

Strategy: I must regulate my behavior so I don't encourage trouble.

Coping: Whenever I feel like I am going to lose my temper and fight, I must count slowly to 20 and then walk away.

Evaluation: It worked. I counted to 20 and walked away without losing my temper or fighting. Good job! I regulated my behavior.

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