Abstract

Children at the elementary school level face a great number of stressors including educational, cultural, relational (domestic and societal), and recreational. With all the stress and pressures a child must learn to cope. Children often resort to deliberate self harm (DSH). DSH can range from hitting, to scratching, to the prevention of wounds healing, to cutting, and more. While educators may not see each form of DSH in a general education classroom, a teacher may see a child purposefully destruct his or her body tissue. It can take the form of pulling out hair, eyelashes, cuticles, etc. This study will offer potential solutions to said stressors, which will, in turn, allow children to replace DSH behaviour. The objectives of this program are to provide problem-solving techniques to DSH children, to foster a safe learning environment, to alleviate stressors due to misunderstandings of academic expectations, to assist parents and teachers in setting realistic goals for a child, to promote better emotional experiences for DSH children so that they can know how to regulate what they are experiencing, to make academic, social, and psychological guidance available to DSH children, and to provide parents with opportunities to assist the student with school. This program has shown a decrease in self-harm occurrences in DSH children while preventing self-harm for those participants that show borderline behaviors.

Keywords: stress, children, middle childhood, deliberate self-harm (DSH), problem-solving techniques
Summary of Program

Children in grades three and up are tested on their understanding of mathematical concepts as well as literacy capabilities (connecting reading and writing). In order to be promoted to the subsequent grade, a child must pass both examinations. The grading policy for passing is currently a four point system. The grading is as follows: (1) Far Below Grade Standard; (2) Approaching Grade Level; (3) At Grade Level; and (4) Exceeding Grade Level. If a child receives a one (1) on either of these examinations, the child will attend summer school or quite possibly be placed in the grade for a second year. This places an exorbitant amount of stress upon the children and the children’s families to pass both the math and literacy test.

Since elementary school classroom teachers are filling each period with rigorous whole-class/small-group mini-lessons, preparing the children for the content that will appear on State examinations, little attention is given to real-life problem-solving techniques. In turn, children are hardly taught in school how to solve problems that arise, in a healthy manner and, thus, lack techniques to resolve issues.

When so much pressure is placed upon a child, as early as the age of eight, which is only a third grader, a child can be afraid to make mistakes. The fear of failing, the fear of being retained in the grade for a second year, the fear of not sounding
“smart,” all contribute to the worry of stating wrong information. Children may then choose to remain silent, for fear of being wrong and/or sounding unintelligible.

Many of the elementary schools in New York City show diversity within each classroom. Any given classroom can reflect an array of socioeconomic backgrounds, ethnic backgrounds, nationalities, and religious backgrounds. This very diversity is what makes New York City so unique. Families from across the world are seeking change—for that of better economic opportunities, better education for their children, fleeing hardships of their country, and in search of better living conditions. Many families, thus, migrate to America seeking change. When they arrive to this country, they need to find educational establishments for their children. Naturally, the child(ren) and the family speak a different language and have the challenge of communicating with people in this country. If a child is having difficulty communicating with his or her teacher and/or peers in school, this can cause a child’s stress level to increase.

Since many families have come to America by migrating from their prospective countries, families, therefore, speak only in their native tongue. This makes communicating with school officials (i.e. principals, assistant principals, classroom teachers, cluster teachers, paras, and aids) a difficult undertaking. Each time a parent needs to speak with a school official, he or she must seek a translator; that task alone can be rather difficult, being new to a country. In turn, a parent may choose to have
little to no involvement in his or her child’s academic progress because of the great challenge it poses.

With all the stress and pressures previously stated in this sumSam, a child must learn to cope with it all. Children often resort to deliberate self harm (DSH). DSH is included, but not limited to, self-defeating thoughts, head banging, hitting, scratching, prevent wound healing, and cutting (Hallab & Covic, 2010). While teachers may not see each form of DSH in a general education classroom, a teacher may see a child purposefully destruct body tissue without suicidal intent (Hallab & Covic, 2010). It can take the form of pulling out hair, eyelashes, cuticles, etc.

Children have developed DSH habits as an avoidant coping strategy (Hallab & Covic, 2010). Accordingly, this study, which will herein be referred to as POSH, Preventing and Overcoming Self Harm, will offer potential solutions to said stressors, which will, in turn, allow children to replace DSH behaviour(s).

**Expected Results**

This study is focused on elementary school children. Therefore, the issues and outcomes are for children within the ages of middle childhood (ages six to twelve). While results may be found beneficial to other age categories, it is with the intention to focus on youngsters as a preventative to DSH or a reactive to DSH (see expected outcomes as described in Figure 1). This figure, exclusively created for the POSH
program, lists issues that contribute to children that display DSH and the expected outcomes of the POSH program.

*Figure 1 Expected Outcomes of the Program*

<table>
<thead>
<tr>
<th>ISSUES</th>
<th>EXPECTED OUTCOMES</th>
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<tbody>
<tr>
<td>Lack of Guidance</td>
<td>➢ To make academic, social, and psychological guidance available to DSH children.</td>
</tr>
<tr>
<td>Unclear Feelings and Poor</td>
<td>➢ Promotion of better emotional experiences so that the children can know how to regulate what they are experiencing.</td>
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<tr>
<td>Emotional Regulation</td>
<td></td>
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<tr>
<td>Lack of Problem Solving Strategies</td>
<td>➢ To be able to identify when conflicts arise and to reach a solution.</td>
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<td></td>
<td>➢ Knowing when a situation requires resilience and when it requires the assistance and intervention of an adult.</td>
</tr>
<tr>
<td>Academic Stress/Fear of Making Mistakes</td>
<td>➢ Fostering of a safe learning environment, one that allows a child to feel that it is acceptable to make a mistake.</td>
</tr>
<tr>
<td></td>
<td>➢ Alleviate stresses due to misunderstandings of expectations.</td>
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</tbody>
</table>
Accepting of a child’s self.

Setting realistic goals.

Cultural Pressures

The removal of cultural pressures and the replacement of positive parental support.

Understanding that children have stress.

Immigration/Language/
Involvement of Parent(s)

To provide parents with opportunities to assist the student with his/her academics.

For school officials to accept parental backgrounds and languages.

Lack of Support

For school officials to fill academic gaps (in small or individualized settings), which will allow children to understand whole-class instruction.

To promote independence in situations that child is fully capable of working alone.

Implementing support systems that make classwork, homework, and studying more tangible for a student.

Literature Review
Deliberate self harm refers to the destruction of an individual’s body tissue, without the intent of suicide (Hallab & Covic, 2010). Hallab and Covic describe how childhood trauma, including sexual or physical abuse or emotional neglect, have been reported as common factors for DSH (Hallab & Covic, 2010). Said research is relevant to this program as it supports how emotional stress plays a vital role in a child’s well being. Furthermore, if DSH is not treated early on, it can develop to be more severe and evolve into depression or anxiety. DSH occurs due to an overwhelming amount of stress, but also because of “poor emotional regulation” (Hallab & Covic, 2010, p.94), this means that a child does not know how to cope with what he or she is feeling. Further, relationships are found as a contributing factor to DSH. Relationships with both peers and family have significant impact on social, behavioral, and emotional states of adolescence (Hallab & Covic, 2010). Since this program is not targeted for adolescence, but rather for youth at the elementary school level, rather than disregard the research, it will be taken under consideration to see if relationships also play an integral part in the lives of youngsters.

In many cases, children exhibit DSH to try to cope when parents divorce. Divorce changes the family unit and children not only have a difficult time handling such change, but they do not know how to communicate what they are feeling. In a book entitled “How Do We Tell the Kids?” it offers parents advise as to how to have open lines of communication with their children during the process of divorce. Said
In an article entitled, "Promoting Resilience and Self-Esteem in PriSam School Aged Children," a program was developed for preadolescents (ages ten to twelve) called Reach Rooky’s. Said program has a similar objective to that of this program; the goal of Reach Rooky’s was intended to foster resilient qualities in children, which would prepare them for potential problems in the future (Bourne, 2003). In Reach Rooky’s, “The program aimed to assess the levels of self-esteem, self-efficiency, mode, and coping...” (Bourne, 2003, p. 2). This program plans to teach children the exact same
qualities, but rather than target pre-adolescence, it is aimed to target middle childhood (ages six to ten).

Children that show DSH behaviors can come to the United States from other countries. In an article entitled “Self-Concept and Anxiety in Immigrant Children,” families often migrate in search of better employment opportunities, healthier living conditions, along with improved educational facilities (Roebers & Schneider, 1999). As a result, families often undergo financial instability, which can be due to unemployment from a parent for a long period of time. Parents may choose to move their family to the United States for improved living, however upon arriving to the country they may experience hardship, so much that they are unable to find a home to live in. Some families are fortunate enough to be able to enter the residence of another relative or friend that is already established in the States. While this provides the family with shelter, the migrated family is actually considered to be homeless unless and until they find a residence of their own to reside in (whether apartment or home). Such stress to find housing can cause problems for a child.

Migration is a major life event. Such an event often involves profound changes that include, but are not limited to, a disruption of well-established relationships (Roebers & Schneider, 1999). If a child had established healthy relationships in his or her native country, the separation from those relationships can pose a tremendous challenge to his or her adaptive capacity in the new country (Roebers & Schneider,
More often than not, a child migrating from his or her former country will “Have to learn a new language, adapt to a new educational system, establish a new social network, and adjust to new customs as well as standards of normative behaviour” (Roebers & Schneider, 1999, p. 126). Such information is relevant to the POSH program since public school educators teach a large immigrant community. Although this particular study does not indicate whether or not immigrant children cause DSH, it does support that stress may be linked to lower mental health, such as escalated anxiety and lower a child’s self-esteem (Roebers & Schneider, 1999).

“FRIENDS Parent Project,” another research article, examined the role of parental involvement in a child’s life to determine whether or not it can reduce anxiety symptoms in school children. Said article indicated the severity of anxiety if left untreated. “Children and youth with anxiety are vulnerable to substantial risk in adulthood for development of mood disorders, suicide, substance use disorders, and higher rates of smoking tobacco” (Fukushima-Flores & Miller, 2011, p. 58). The article indicated that anxiety disorders are frequently overlooked in children as well as undertreated (Fukushima-Flores & Miller, 2011). Research has indicated that children who display anxiety symptoms are likely to have parents with such symptoms. Therefore, “FRIENDS Parent Project” proposed that if they were to effectively treat children with anxiety, it was imperative to provide treatment to, also, parents with
anxiety (Fukushima-Flores & Miller, 2011). This is relevant to the POSH program since it teaches parents healthy coping strategies, which can be modeled in the home setting.

In a pilot study entitled “Treating Depressive Symptoms in Schoolchildren,” the objective was to provide children with opportunities to better grasp their emotional experiences. The treatment allowed children to participate in pleasant activities. In conjunction with said enjoyable activities, children were then taught that there is a relationship between thoughts, feelings, and behaviors (DeCuyper, Timbremont, Braet, DeBacker, & Wullaert, 2004). Additionally, the study also trained the children with problem-solving abilities, how to monitor positive events and pleasant emotions, and how to alter negative thoughts by using counter-techniques (DeCuyper, Timbremont, Braet, DeBacker, & Wullaert, 2004). It was also indicated that every child that participated in the study received a workbook. The treatment plan from this study reflects most of what the POSH program intends on undertaking. Since “Depressive symptoms have been shown to be associated with symptoms of anxiety, low self-esteem, acting out behavior…” (DeCuyper, Timbremont, Braet, DeBacker, & Wullaert, 2004, p. 105), said techniques will be implemented as a preventative as well as a response to DSH. Furthermore, it will be useful to provide participants with handout materials to take home, for future reference.

A program of the Psychology Foundation of Canada entitled “Kids Have Stress Too,” teaches parents and caregivers the signs and symptoms of stress. The website
offers adults helpful tips on how to help a child handle his or her stress, it makes suggestions on how to build a less stressful home, along with offering the contrast between the levels of stress. Since the program has a fully functioning online resource, POSH will help a parent navigate through the website, www.kidshavestresstoo.org so that he or she can be at ease when referring to the site on his or her own. The site, however, is only written in English, which will not be of service to the migrant families that do not speak the language.

In the New York City Public School system, SPINS/SPARK program provides education, prevention, and intervention services to children from kindergarten to twelfth grade. Said program strives to instill positive attitudes in/among children. A trained teacher visits a given classroom, with various units of study ranging from communication skills, assertiveness training, refusal techniques, stress reduction skills, and decision-making skills. This is an outside program that each individual school must elect to take part in. This poses a problem, since not all schools will have the capital for said program. POSH will, in turn, encounter similar obstacles, due to a school’s willingness to provide the funding to keep such a program up and running.

The final article, “The Promotion of Resilience,” summarized what DSH children need. Ronnau-Bose and Frohlich-Gildhoff (2009) explained that resilience, “The ability to manage crises, difficult situations, and developmental tasks” (p. 301) is a characteristic developed throughout early childhood. Research has shown a number of
factors which contribute to a child’s ability to cope, in a healthy manner, when faced with crisis and/or moderate problems. Ronnau-Bose and Frohlich-Gildhoff (2009) state:

> On a personal level, such factors include a) healthy self-esteem and a sense of self-efficacy; b) social skills; c) problem-solving skills; d) emotion regulation; e) a healthy and realistic perception of self and others; f) stress-management skills...

(p. 301)

Ronnau-Bose and Frohlich-Gildhoff’s project, “Empower Children!” aimed to build resilience within children through a variety of methods. Methods included the training and supervising of early childhood educators, offering resilience courses, parental outreach, and made outside institutions readily accessible for ongoing counseling (p. 300). Much like the Empower Children project, POSH, too will teach children resilience as well as involve parents throughout the child’s academic journeys. The main distinction is, to wit, the level of parental involvement. In POSH, it understands that parents speak a language other than English, thus cannot communicate with the general education teacher. POSH aims to open lines of communication between parents and teachers through the accessibility of translators.

**METHODS**

**Description of Intervention**
In the school setting, referrals will be made based on teacher, counselor, and/or administrative observations. An educator from the student’s school will complete a Teacher Questionnaire. (Refer to Form 1.) This questionnaire will help decipher if the child is experiencing stress, anxiety symptoms, and depression or causing DSH. Said questionnaire will be rated from 0 (Never), 1 (Very little), 2 (Often), 3 (Very much), to 4 (Habitually). If observations are made by a para, school aide, or afterschool counselor, said concerns can be brought to the classroom teacher and/or direct supervising assistant principal, and the questionnaire can be completed together.

Parents whose children have been identified as potential receivers of the intervention will be asked to complete a Screen for Child Anxiety Related Emotional Disorders (SCARED) questionnaire. (Refer to Form 2.) According to the FRIENDS Parent Project (2011), this questionnaire consists of 41 questions, which measure the parental observations of his or her child’s anxiety symptoms (Fukushima-Flores & Miller). Said questionnaire will be rated 0 (Not true or hardly ever true), 1 (Somewhat true or sometimes true), to 3 (Very true or often true).

Additionally, the children will also complete a Screen for Child Anxiety Related Emotional Disorders (SCARED) questionnaire. (Refer to Form 3.) As stated in the form, “For children ages 8 to 11, it is recommended that the clinician explain all questions, or have the child answer the questionnaire sitting with an adult in case they have any questions” (Birmaher, Khetarpal, Cully, Brent, McKenzie, 1995, p. 2). This questionnaire
also consists of 41 questions and are also rated 0 (Not true or hardly ever true), 1 (Somewhat true or sometimes true), to 3 (Very true or often true).

When a child enters the public school system, his or her parent is required to complete a set of documentation so that a child can obtain an OSIS number (an identification number within the school system). At this time, parents can also complete a questionnaire that surveys which parents in the school are bilingual. This survey will allow the school to know which parents have the linguistic abilities to speak English along with Spanish or Chinese or Arabic, etc. The survey will also ask parents if they are available and willing to volunteer, from time to time, to assist in the school learning environment to translate for Parent-Teacher Conferences. More often than not, parents are willing to help their child’s school, but are rarely given the opportunity to assist.

In addition to surveying the parent population, it is proposed that each school have on the premise 3 (three) to 4 (four) translators, based on the size of the school. Said translators will be imperative to parental outreach, whether written or oral, since they can effectively communicate with the families. Also within the school, it is proposed that select teachers, whether for English as a Second Language (ESL) classes or just those whom are bilingual, have the ability to speak a second language that can accommodate the school population. Said teachers will need to be given a free preparation period to either translate for other educators in the school as well as
prepare and hold parent workshops about grade expectations. At said workshops, parents will receive clear expectations, in hopes to remove cultural pressures and replace them with relevant, applicable, individualistic goals for their child.

To assist on the academic front, pre-written Peer Tutoring Request forms will be readily accessible to DSH children. It is proposed that students in good academic standing, along with suitable communication skills, be available to tutor DSH children within the school. For assisting (DSH) children in academic need, they will receive volunteer recognition. At said tutoring sessions, DSH children can receive assistance with homework, class-work, or studying. It is further proposed that children can participate in a mentoring partnership. DSH children can be paired with a suitable, older mentor to develop a sense of comfort. The proposed tutoring and mentorship sessions will be monitored by a certified individual, to be sure that topics being discussed are relevant to the topic at hand, age appropriate, and effective.

Once DSH children have been detected, a classroom teacher may want to make subtle changes to his or her learning environment. DSH children need to feel that the learning environment is safe, one in which mistakes are accepted and not ridiculed. Therefore, teachers can elect to see modeled whole-class discussions that are particularly accepting to a wide range of thinking. Modeled lessons/discussions can reflect a range of participation levels, so long as those answers that are inaccurate are not mocked.
Another two techniques that can be implemented to help DSH students are behavior logs and special stones. A behavior log is a small post-it sized paper that is taped to the child’s desk. When it is observed that the child is self-harming, the teacher is to log the time on the paper. This will bring awareness to the behavior that the child is doing. Furthermore, it will be a concrete record of the number of occurrences that happen each day. The special stone, on the other hand, will be given to DSH students (and preventative participants) to help cope with stress. Rather than self-harm (or for the preventative participants, have anger outburst or use words that hurt others), the child can rub the stone so that they feel as if they are “doing” something with their feelings.

Should a DSH child be in poor academic standing, public schools can enroll said child in Academic Intervention Services (AIS). Said services place select children in a small group setting, so that they can concentrate on either reading or mathematics. DSH children will receive the academic attention that he or she needs, in a group with six to twelve children.

Another method of intervention is through Reading Workshop. A literature program widely used in New York City is from Teacher’s College Institute on Teaching Reading. The teaching points listed in Figure 2 have been obtained and adapted from the TC program. For this intervention, the teacher will teach a character study unit wherein the children will get to know the main character of a book, envision the main
character of a book, place themselves in the main character’s shoes by understanding
the main character’s situation, feelings, and motives, to see if their character changes
over time, and to take away lessons from the books that they read.

*Figure 2 Character Unit of Study (Created by Teacher’s College, adapted by Stacey
Shubitz, and objectives written by Christina Rodriguez)*

**Possible Teaching Points**

<table>
<thead>
<tr>
<th>Lesson Objectives</th>
<th>Possible Teaching Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>To see that actions can be external (walks, says, runs, jumps, yells) as well as</td>
<td></td>
</tr>
<tr>
<td>internal (thought, wanted).</td>
<td>1. To pay attention to a character’s <em>actions</em>.</td>
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<tr>
<td></td>
<td>Handout 1</td>
</tr>
<tr>
<td></td>
<td>Suggested Reading: “Tales of a Fourth Grade Nothing” or “Noisy Nora”</td>
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<tr>
<td></td>
<td>2. To pay attention to a character’s <em>traits</em>.</td>
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<td></td>
<td>Handout 2</td>
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<td></td>
<td>Suggested Reading: “Wanda’s First Day”</td>
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<td></td>
<td>3. To pay attention to how a character interacts with others.</td>
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<td></td>
<td>Suggested Reading: “Duck &amp; Goose”</td>
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<td>4. To pay attention to a character’s <em>emotions</em>.</td>
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Handout 3

Suggested Reading: “Dog Earred”

5. To pay attention to a character’s strengths and weaknesses.

Handout 4

Suggested Reading: Edwurd Fudwupper Fibbed Big

6. To stop and think about the main character in relation to the challenges s/he faces.

Handout 6

Suggested Reading: “Something Beautiful”

7. To pay attention to a character’s goals.

Handout 5

Suggested Reading: (revisit) “Something Beautiful” or “Thank You, Mr. Falker”

8. To pay close attention to what the main

Facebook
character does, sees, thinks and says.

Suggested Reading: “A Frog Thing”

9. To stop and think about how the main character solves problems, which allows them to think about how they would react or respond to that same problem.

Refer to Handout 6

Suggested Reading: “Double Fudge”

10. To stop and think about how we would react if we were in the main character’s shoes.

Teaching point may be revisited for two days

Refer to Handout 6

Suggested Reading: “Peter’s Chair” or “Edwina the Dinosaur that Didn’t Know She was Extinct” or “Noisy Nora”

11. To “walk in the main character’s shoes” by looking for the challenges their

Preventing and Overcoming Self-Harm 21
characters face and think about how we would deal with those same challenges.

Refer to Handout 6

Suggested Reading: “Double Fudge” or “The Brand New Kid”

12. To use a character’s traits to make predictions about what is going to happen next to the main character.

13. To notice when the main character is acting out of character.

14. To notice when a character is changing and to think about who or what brought about the change.

15. To ask, “What did the main character learn that I should have learned,” which

To consider how others would respond to problems.

To consider how others would respond to problems;

To be able to identify when friends or family are acting outside of what they normally say and do.

To be able to identify positive and negative change;

To see that others can be influential to our choices.

To learn valuable lessons from
helps them take away a lesson from their reading.

- To be open to learning new things from others experiences.

Suggested Reading: “My Name is Maria Isabel” or “It’s Okay to Be Different”

**Suggested Readings:**

Synopsis: The main character of this book is from a Hispanic background. The character, Maria Isabel, tells of her experience going to school in America. This text, narrated by a child, portrays her experience in a monolingual classroom, while struggling with self-identity.
Synopsis: Edwina is a dinosaur in town that plays with kids, helps people in the neighborhood, and even bakes cookies for the children. The character, Reginald Von Hoobie-Doobie, wants to prove that dinosaurs are extinct, but no one will listen to him.

When feeling all alone and ignored, the one to listen to him was, to his surprise, Edwina.

Synopsis: Otis is a dog that enjoys his daily strolls in the park. One day a bully dog taunts him about having big ears. Otis is disheartened. He struggles with what he should do about his ears, till later that night his owner snuggles up beside him and enjoys the warmth of his large, silky ears. He feels accepted, relieved, and knows how to handle the bully dog when he sees him again.

Synopsis: Duck and Goose are faced with a conflict. They can’t agree upon who an “egg” belongs to. Duck insists that it’s his, while Goose claims to have touched it first. They soon agree on the fact that the “egg” is indeed beautiful. To take care of this “egg,” they begin to work
together. In the end they learn that it wasn’t actually an egg at all, but rather a ball. By then, they can enjoy the ball together, as friends.

Synopsis: This text teaches that it’s okay to be a different color, enjoy different activities, to have disabilities, to own different things, and to live in different households.

Synopsis: Wanda is a witch that is preparing for her first day of school. When Wanda arrived at school, she looked around at the other students and felt that she looked different (as all the other students were fairies). She asked her teacher if she belonged in this class. The teacher affirmed for her that she belonged in their class. Feeling happy and accepted, she learned new things and made new friends. Later that day, she saw students from another class passing by. (It was a school of witches and one fairy.) She had that feeling again that maybe she wasn’t in the right class. Wanda went to her teacher again to see if she was in fact in the right class and was affirmed by the teacher once more.
Synopsis: A little girl describes the day-to-day sights in her neighborhood (graffiti, homelessness, dark alleys, etc.). When she arrives to school, the teacher writes the word *beautiful* on the board. She then decides to look for something beautiful in her neighborhood. On this journey, she talks to her friends, family, and neighborhood store owners, who each share the beauties in their lives. Her search for something beautiful leaves her encouraged for she realizes that she the beauty of hope, friendship, and love.

Synopsis: Peter is a boy that’s notices all the changes in his home due to his new baby sister. Things that even once belonged to Peter are now being given to the baby. By the end of this picture book, Peter sees that he is still important in his family. Instead of sitting in his baby chair, he can now sit in the grown up chair.

Synopsis: Trisha grows up in a family that values reading. When she was little, reading was magical. Once she began school, however, she felt that reading was tricky. Still, her family encouraged her and promised her that she’d learn how to read. Each year, reading got harder for Trisha. As all her peers learned to read, she continued to struggle, which made her feel different and illiterate. With the loss of her grandmother,
she felt like she had no one to talk to, which made school even harder. When she moved to a new city, a child from school began to torment her about her reading abilities day after day. Trisha dreaded school. It was a dedicated teacher, Mr. Falker, which was committed to helping her read on her own. Trisha, with the right encouragement and help, learned to read.

Synopsis: Frank dreams of being able to fly. The problem is, Frank is a frog! Frogs don’t fly. Frogs do frog things, like hop. Birds do bird things like fly. Frank hears time and time again that he will never be able to fly. One day, to his surprise, a baby bird falls into the pond and almost drowns. Frank being a good swimmer saves a baby bird. The mother bird is so thankful for his bravery, that she offers Frank anything. Frank admits to want to fly. So to repay him, the birds carry him in the air. So he had a chance to experience flying, but he learned about himself that he was indeed a terrific swimmer.
Synopsis: This fiction book, written in rhyme, is about a boy that spends all his time telling lies. Page after page, people believed Edwurd Fudwupper’s lies. The only one that sees his true side is his little sister, Fannie Fudwupper. By the end of the book, Edwurd Fudwupper sees the impact his lies have on other people and he learns the importance to telling the truth.

Synopsis: This book is about a boy named Lazlo Gasky who moves to a new town and enrolls in a new school. Shy, worried, and fearful, Lazlo has a hard time fitting in. The other children feels that he looks and sounds different. When children begin to tease him in school, he goes home and cries to his mother. Lazlo’s mother gets emotional and considers pulling him out from the school until one child decides to give Lazlo a chance. Ellie, a girl from school, invites Lazlo to her house one day and soon learns that Lazlo is actually quite fun. When the children at school begin to question her and her new friend, Ellie stands up for Lazlo and stands up for her decision to be his friend.

Synopsis: Nora is the middle mouse in her family. She has a big sister and a little brother that are both getting the attention of her
parents. Nora then decides to make as much noise as possible to receive attention from her parents. Nora, not pleased with the attention she’s getting, threatens to leave the family. In the end, the parents show Nora just how much they care about her.

Synopsis: This is book one of the humorous Judy Blume series with the Hatcher siblings. Peter, a fourth grader, loses his temper with his annoying two year old little brother, Fudge. This realistic fiction book shows the day-to-day difficulties kids face in school and at home.

Synopsis: This is book four of the Judy Blume series with the Hatcher siblings. Fudge, now five years old, is obsessed with money. The book goes on to show Fudge acting selfish, rude, greedy, and it even shows him throwing temper tantrums. Throughout this, Peter now almost twelve years old, experiences self-doubt, embarrassment, worry, and sadness (when his best friend moves away).
Synopsis: This picture book teaches children that it is okay to try new things. Rather than stick to the same old thing, it is okay to see if you are good at something new.

Assessment

The program will assess the student’s social and academic growth. In reading, the child is assessed through a running record wherein the child reads aloud to the teacher, while the teacher notates inaccuracies, expression, and checks for comprehension. Results from said running record will be used to determine the child’s independent reading level. This independent reading level is then used to determine if the child’s reading score is below grade level, approaching grade level, at grade level, or exceeding grade level. Said reading scores are determined based upon the Teachers College Reading and Writing Project Benchmark Reading Levels and Marking Period Assessments. Furthermore, the children will be assessed, periodically, based upon his or her understanding of the character unit of study. At the conclusion of the unit, the student will be able to explain character traits, share opinions, indentify problems and make predictions, retell a story, and note how a character changes through time (see literacy rubric described in Figure 3).
In the area of mathematics, the students are assessed through quizzes, unit examinations, and open response questions. Quizzes are given weekly strictly to assess students’ computation skills (example: multiplication, division, addition, subtraction). Unit examinations are given at the conclusion of the unit as a cumulative assessment of concepts and skills taught in that unit of study (example: fractions, decimals, percentages, geometry). Open response questions are also given at the end of a unit of study. An open response question gives a mathematical situation wherein the student is to show all possible ways to solve that problem, while showing any and all diagrams, number sentences (ex. \(5+5+5=15\) or \(3\times5=15\)), and thinking.

Behavior is monitored in terms of listening and speaking, conduct, and DSH occurrences. A rubric was created for this program that is in accordance with age-appropriate behaviors (see behavior described in Figure 4). The grading is as follows: (1) Far Below Grade Standard; (2) Approaching Grade Level; (3) At Grade Level; and (4) Exceeding Grade Level. The teacher recorded the number of DSH occurrences so to determine whether or not there was a decrease in DSH acts.

Figure 3 Literary Rubric

<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>4</th>
<th>3</th>
<th>2</th>
<th>1</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Explains</strong> character traits</td>
<td>Student lists all of the character's traits using his/her book and Post-Its methodically.</td>
<td>The student lists several of the character's traits, using his/her book and/or Post-Its for reference.</td>
<td>The student lists a couple of the character's traits, using only his/her book for reference. S/he does not highlight any unimportant points.</td>
<td>The student cannot list any of the character's traits with accuracy.</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td><strong>Shares opinions</strong></td>
<td>Student articulates his/her opinions about the main character in the book. S/he gives a clear explanation of why these are opinions about the main character in the book.</td>
<td>Student articulates his/her opinions about the main character in the book. S/he gives a reasonable explanation of why s/he has developed these opinions about the main character in the book.</td>
<td>Student articulates his/her opinions about the main character in the book. Explanations are weak.</td>
<td>Student has difficulty formulating opinions about the main character in the book.</td>
</tr>
<tr>
<td>Problems and predicting</td>
<td>Student clearly identifies the problem the main character faces in the story. S/he makes a clear prediction about the way the character will deal with the problem.</td>
<td>Student identifies the problem the main character faces in the story. S/he makes a weak prediction about the way the character will deal with the problem.</td>
<td>Student identifies the problem the main character faces in the story. S/he makes a weak prediction about the way the character will deal with the problem.</td>
<td>Student cannot identify the problem the main character faces in the story.</td>
</tr>
<tr>
<td>-------------------------</td>
<td>---------------------------------------------------------------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Character change through time</td>
<td>Student recalls several details about how the main character changes through the story.</td>
<td>Student recalls several details about how the main character changes through the story.</td>
<td>Student is able to recall a couple of details about how the main character changes through the story.</td>
<td>Student cannot explain how the main character changes through the story.</td>
</tr>
</tbody>
</table>
### Retelling

<table>
<thead>
<tr>
<th>Criteria</th>
<th>4 – Above level</th>
<th>3 – At level</th>
<th>2 – Below level</th>
<th>1 – Far below level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Listening and Speaking</td>
<td>Focused and listens to lesson</td>
<td>Often focused and listens to lesson</td>
<td>Somewhat unfocused during the instruction.</td>
<td>Often unfocused during the lesson, when lesson as well</td>
</tr>
<tr>
<td>Articulates</td>
<td>Answers are in instructions are</td>
<td>as when</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Figure 4 Behavior Rubric*
| Respects Class and Rules (Conduct) | Student shows self control during lessons and transitions. | Language choice is exceptional, reflecting words that are kind and respectful. | Talking occurs occasionally, either during lesson or transitions. | Language choice reflects words that are kind and respectful. | Needs to be refocused often. | Student’s talking tends to be excessive. | Uses poor language to other students and/ or teachers | Does not hit | Be hurtful or disrespectful. |
RESULTS

Participants

John

This student is a former English language learner (ELL) whose family migrated from Mexico. He has been diagnosed with attention deficit hyperactivity disorder (ADHD). John currently receives medication for said diagnosis. While John was in the fourth grade, it was observed that the student would pick at his cuticles. John would pick his cuticles until his teacher redirected his attention to the given academic task. On three occasions, John notified the teacher that he made himself bleed. Since fourth grade and presently in his fifth grade class, he is above grade level in all areas. John
does not, however, have the social skills to keep friends that he makes. At the beginning of this program, John transferred classes due to social issues. (The fourth grade teacher and the two fifth grade teachers were involved with the intervention program.)

Sam

At the age of seven, Sam was placed in a cage as a form of punishment by her biological father. When the school became aware of this, Sam was immediately placed in foster care. When she turned eight, both her parents were incarcerated for other reasons. While in the fourth grade, at the age of nine, Sam’s biological mother was released from prison as her sentence was over. The biological mother began to see Sam one day each week. Also during her fourth grade year, Sam’s father took ill while in prison. Sam visited him during this time. It was observed that Sam would fidget with her fingers. Then, it was observed that Sam would pull her hair, strand by strand, from the top of her scalp. A patch of hair was missing from her head. At the beginning of her fourth grade school year, Sam was a level (3) At Grade Level in all subjects. As the year progressed, her grades fell to (1) Far Below Grade Standard and (2) Approaching Grade Level, while her attendance fell below ninety percent. Sam has been diagnosed with ADHD, which she takes medication for.

Marco
This child, of Mexican descent, is an ELL. Tracing back to his third grade year, Marco would run away from his teacher and classmates. The student would make fists when angry and he would also destruct papers in his path. When he entered fourth grade he responded to the behavior management system* in place. Behavior, then, was at grade level. His anger/frustration appeared to take the form of tears. Since he tried to control his outbursts and rages, he would not receive a consequence with the behavior system. Due to the structure of the behavior system, academics came into focus. Homework and class-work was difficult for Marco. He received a wide range of services which include academic intervention service (AIS) in both mathematics and reading, extended day, and Saturday academy.

Mary

This is the youngest participant in the study as she is a third grader. She began this present school year with another teacher. Mary displayed poor behavior with this teacher, which included a principal’s suspension due to bullying of other children. Her academics, however, are sound and above grade level. As a result, she was placed in the third grade gifted and talented program. Mary responded to the behavior management system and followed the clear expectations. Lunchtime and trips to the bathroom were the times throughout the week that posed to be a challenge because the teacher was not present. The behavior management system, however, extended throughout all times in school and other students are to hold one another accountable.
Results of Intervention

Student herein identified as John showed an increase in reading level and score. In mathematics, John was above grade level on unit assessments and quizzes and at grade level on open response assessments. In the social area, however, John was approaching grade level as a result of his DSH. The behavior log on John’s desk showed a decrease in the number of DSH incidents. John did not use the special stone. While anecdotal logs showed a drop, the behavior is still present and it has taken the form of biting at the cuticle. This now occurs when the child is thinking of his response for the teacher in whole group settings. Further, the teacher has reported that the child has become defiant with other authoritative figures in the school building. All of John’s teachers reported that his mother’s level of involvement at school was atypical of a parent. It was reported that the mother made unannounced visits to the school to speak with the teacher(s) and administrators, approached children that did not wish to be friends with John, insisted that the child be placed in another fifth grade class, and placed calls to the 311 telephone hotline when dissatisfied with the school.

The student referred to as Sam showed little growth in both reading level and score. In mathematics, Sam’s scores were inconsistent, which has her approaching grade level. In the social aspect, Sam practiced better listening and speaking skills while displaying better conduct. While Sam has practiced age appropriate skills in whole class settings, Sam continues to struggle to make friends. When the program
began, the student displayed DSH behaviors. Since Sam DSH at the meeting area (social settings), a behavior log was not kept on her desk. Instead, the teacher logged such things in an anecdotal book. At the conclusion of the program, in the middle of April, Sam stopped harming herself. It was also apparent that Sam’s weight began to increase. It is difficult to determine whether or not the child was beginning to cope with food or if it is a side effect of medication.

The child labeled as Marco showed the least academic growth of all participants. His social skills are approaching grade level. He continues to refrain from DSH. He did not need a behavior log on his desk and he did not use the special stone. During the execution of the program, the student would make remarks like “What a stupid answer” or “Even I know the answer to that” to other students when they would answer questions wrong. After waiting a year for an evaluation, the student will now be able to receive academic and behavioral support in his sixth grade year in a collaborative team teaching (CTT) class.

The final student referred to in this study as Mary had shown steady grown in the area of reading. In mathematics, Mary’s grades were approaching grade level as she was adjusting to the rigor of the new class placement. In the class environment, when listening and speaking, the student began to show behaviors that are approaching grade level. In settings where the teacher is not present, however, the student’s behavior did not show change; behaviors worsened. As a result, the teacher differentiated her
behavior management for said child and established a contract. The teacher agreed to give a special reward, beyond the reward box when student of the day, provided that she showed appropriate behavior in the needed areas. Said contract was based on receiving a “ticket” from each teacher or para that was watching her. Due to repeated incidents at lunch and to avoid future incidents, Mary was ejected from the cafeteria as per the direction of the assistant principal. She did not have a behavior log on her desk and she did not use the special stone.

DISCUSSION

Reflection and Implications

There were several parts of the program that were executed, while others were left out. For example, teacher, parent, and student questionnaires were not completed. As a result, little outreach to the parent was made, beyond the initial parental consent form. If there had been more parental outreach, observations could have been made to see if the children were mirroring behaviours seen in either parent. In the “FRIENDS Parent Project,” it was stated that “Parents of anxious children are more likely to have symptoms consistent with anxiety disorders than those of non-anxious children” (Fukushima-Flores & Miller, 2011, p. 58). Also with regard to parent outreach, the program was not able to survey the parental population of the school to see which parents were bilingual. So while Roebers & Schneider (1999) found that migration can
be a life event that involves profound changes in a person’s life, it would have been beneficial to welcome parents to the school so that they can make ties to their new community. Another part to the POSH program that was not utilized was the peer tutoring request form. This may have been due to all other academic support that was being given to students through AIS. This did, however, help to lower the level of stress as a child knew that he or she could submit a peer tutor request form if they struggled with a subject area. In turn, that gave children a way to handle everyday stress ([http://www.psychologyfoundation.org](http://www.psychologyfoundation.org/)). Since detection of academic help was made, retention in the same grade was prevented. Another successful component to POSH was the reading workshop character unit of study. Said unit fulfilled the common core standards of the country, while differentiating to meet the social needs of the students. All assessments were clear, appropriate both academically and behaviorally, and purposeful.

**Future of the Program**

This program helps teachers to identify students that self-harm. Ronnau-Bose and Frohlich-Gildhoff (2009) found that such programs train educators and supervisors how to teach children to build resilience. The advantages to incorporating POSH, school-wide, is it provides sequential steps to help extinguish DSH behaviours. If taught whole-class, all children can benefit from learning conflict resolution techniques since they are far too often neglected due to the demands of curriculums. In the
research field, it means that with proper guidance, discussion, and solutions, children at the elementary school level are capable of extinguishing DSH behaviours. Further research, however, needs to be done to see if children begin to overeat to cope with stress.

**LIMITATIONS**

One limitation to the program was the distribution of survey to parents and students. Had data been obtained through the survey, it could have been used to gain insight on how the parent and student view the behaviour and how the child handles stress. Another limitation was that the students were determined based upon referrals made, six months ago from the priSam researcher. In turn, referrals were not made from separate, distinct teachers. A third limitation is with regard to the number of participants. The reading workshop unit of study was taught to a total of fifty-five participants. The only students that showed DSH behaviours and/or potential behaviours were those referred to in this study. There are, however, more students in the selected school that have DSH behaviours that POSH did not have access to. The final limitation was due to funding. In order to have a full functioning program, support in the building needs to be available. This means that there needs to be someone to assist in modeling of lessons, setting up classroom environments, training of teachers, purchasing of suggested readings, and access to the internet for online resources.
REFERENCES


http://www.wpic.pitt.edu/research/AssessmentTools/


Fukushima-Flores, M., Miller, L. (2011). FRIENDS parent project: Effectiveness of parent


http://www.psychologyfoundation.org/


International Journal of Behavioral Development, Volume 23, pp. 125-147

centered perspective of prevention in early childhood institutions. *Person-Centered and Experiential Psychotherapies, Volume 8, pp. 299-318*


Teacher’s College Reading and Writing Project. (2010.) *Benchmark Reading Levels and Marking Period Assessments.*


APPENDIX

*Suggested Reading


Preventing and Overcoming Self-Harm


*Behavior Management System — created by Christina Rodriguez, which each child receives in their Student Handbook their first day of class.

“Together, the children and I have created a list of classroom rules. Each student’s success will be tracked on the “How am I Doing Today” Behavior Management Chart. Everyone begins each day with green cards in their pocket on the chart. Students who forget to follow the rules will have their green cards replaced with yellow and red.

- A green card means “All is well! Keep up the good work.”
- A yellow card means “Warning! It’s time to slow down and think about what you’re doing. You now have a loss of time (also known as a time-out).”
  - If a student has a loss of time, it is not a time for negotiation.
Preventing and Overcoming Self-Harm

Time-outs are only temporary and are used to help the child regain self-control and think of how to get refocused so he/she can come back and participate in a positive way.

• A red card means “Stop! Your behaviors have gone too far. You now have a loss of a special privilege and action will be taken.” (For example, a note or phone call to your parent/guardian, referred to general office, sent to another classroom, etc.)

• A blue card usually reflects missing assignments or an extreme behavior. This can either mean that the child cannot be student of the day for that given day or that a consequence will be given (For example, homework detention.)

“As I’ve mentioned to the children, if they do not understand why their card has been changed or if they disagree about the reason their card has been changed, the child should bring it up at a later moment and not interrupt the instruction or activity taking place.

“On the other hand, sometimes we have days when we’re doing just fabulous. In other words, the student is doing better than a green card! At those times, your child can receive a silver or a gold card.
• A silver card means that “You’re doing great!!! Not only are you on task, following directions, and listening, but your hard work shows because I can see it in your work.”

• A gold card means that “You’re performance today was spectacular!!! You have done ‘silver’ and beyond! You will receive something complimenting your efforts and work. Congratulations, you are student of the day!”
Form 1- Teacher Questionnaire

Teacher’s Observation Form

<table>
<thead>
<tr>
<th>Student’s Name: ______________________________</th>
<th>School: ______________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student’s Date of Birth: _____________________</td>
<td>Grade: ______________________________</td>
</tr>
<tr>
<td></td>
<td>Class: ______________________________</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Each rating should be considered in the context of what is appropriate for the age of the children you are rating.

**Frequency Code: 0 = Never; 1 = Occasionally; 2 = Often; 3 = Very Often**

1. Fails to give attention to details or makes careless mistakes in schoolwork
   
<table>
<thead>
<tr>
<th>0</th>
<th>1</th>
<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Has difficulty sustaining attention to tasks or activities
   
<table>
<thead>
<tr>
<th>0</th>
<th>1</th>
<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

3. Does not seem to listen when spoken to directly
   
<table>
<thead>
<tr>
<th>0</th>
<th>1</th>
<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
4. Does not follow through on instruction and fails to finish schoolwork
   0 1
   2 3

   (not due to oppositional behavior or failure to understand)

5. Loses temper
   0 1 2
   3

6. Actively defies or refuses to comply with adults’ requests or rules
   0 1
   2 3

7. Is angry or resentful
   0 1 2
   3

8. Is spiteful and vindictive
   0 1 2
   3

9. Bullies, threatens, or intimidates others
   0 1 2
   3

10. Initiates physical fights
    0 1 2
    3

11. Is fearful, anxious, or worried
    0 1 2
    3

12. Is self-conscious or easily embarrassed
    0 1 2
    3
13. Is afraid to try new things for fear of making mistakes

14. Feels worthless or inferior

15. Blames self for problems, feels guilty

16. Feels lonely, unwanted, or unloved; complains that "no one loves him/her"

17. Is sad, unhappy, or depressed

**PERFORMANCE**

<table>
<thead>
<tr>
<th>Academic Performance</th>
<th>Problematic</th>
<th>Average</th>
<th>Above Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Reading</td>
<td>1 2 3 4 5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Mathematics</td>
<td>1 2 3 4 5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Written expression</td>
<td>1 2 3 4 5</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Classroom Behavioral Performance**

<p>| 1. Relationships with peers | 1 2 3 4 5 |</p>
<table>
<thead>
<tr>
<th></th>
<th>Following directions/rules</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Disrupting class</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>Assignment completion</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>Organizational skills</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>
Preventing and Overcoming Self-Harm

Form 2- Parent Questionnaire

SELF-REPORT FOR CHILDHOOD ANXIETY RELATED DISORDERS (SCARED)

PARENT FORM

Below is a list of items that describe how people feel. For each item, please darken the circle that best describes your child's feelings now or in the past 2 weeks. Please answer all items as well as you can, even if some do not seem to concern your child.

0 Not True or Hardly Ever True 1 Somewhat True or Sometimes True 2 Very True or Often True

1. When my child feels frightened, it is hard for him/her to breathe.
   0 1 2

2. My child gets headaches when he/she is at school.
   0 1 2

3. My child doesn't like to be with people he/she doesn't know well.
   0 1 2

4. My child gets scared if he/she sleeps away from home.
   0 1 2
5. My child worries about other people liking him/her.
   0  1  2

6. When my child gets frightened, he/she feels like passing out.
   0  1  2

7. My child is nervous.
   0  1  2

8. My child follows me wherever I go (he/she is like my shadow).
   0  1  2

9. People tell my child that he/she looks nervous.
   0  1  2

10. My child feels nervous with people he/she doesn’t know well.
    0  1  2

11. My child gets stomach aches at school.
    0  1  2

12. When my child gets frightened, he/she feels like he/she is going crazy.
    0  1  2

    0  1  2

14. My child worries about being as good as other kids.
    0  1  2
15. When my child gets frightened, he/she feels like things are not real.
   
   0  1  2

16. My child has nightmares about something bad happening to his/her parents.
   
   0  1  2

17. My child worries about going to school.

   0
   1  2

18. When my child gets frightened, his/her heart beats fast.

   0  1  2

19. My child gets shaky.

   0  1  2

20. My child has nightmares about something bad happening to him/herself.

   0  1  2


   0  1  2

22. When my child gets frightened, he/she sweats a lot.

   0  1  2

23. My child is a worrier.

   0  1  2

24. My child gets really frightened for no reason at all.

   0  1  2
<table>
<thead>
<tr>
<th></th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>25.</td>
<td>My child is afraid to be alone in the house.</td>
</tr>
<tr>
<td>26.</td>
<td>It is hard for my child to talk with people he/she doesn't know well.</td>
</tr>
<tr>
<td>27.</td>
<td>When my child gets frightened, he/she feels like he/she is choking.</td>
</tr>
<tr>
<td>28.</td>
<td>People tell my child that he/she worries too much.</td>
</tr>
<tr>
<td>29.</td>
<td>My child doesn't like to be away from his/her family.</td>
</tr>
<tr>
<td>30.</td>
<td>My child is afraid of having anxiety (or panic) attacks.</td>
</tr>
<tr>
<td>31.</td>
<td>My child worries that something bad might happen to his/her parents.</td>
</tr>
<tr>
<td>32.</td>
<td>My child feels shy with people he/she doesn't know well.</td>
</tr>
<tr>
<td>33.</td>
<td>My child worries about what is going to happen in the future.</td>
</tr>
<tr>
<td>34.</td>
<td>When my child gets frightened, he/she feels like throwing up.</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>35.</td>
<td>My child worries about how well he/she does things.</td>
</tr>
<tr>
<td>36.</td>
<td>My child is scared to go to school.</td>
</tr>
<tr>
<td>37.</td>
<td>My child worries about things that have already happened.</td>
</tr>
<tr>
<td>38.</td>
<td>When my child gets frightened, he/she feels dizzy.</td>
</tr>
<tr>
<td>39.</td>
<td>My child feels nervous when he/she is with other children or adults and has to do something while they watch him/her (for example: read aloud, speak, play a game, play a sport).</td>
</tr>
<tr>
<td>40.</td>
<td>My child feels nervous when he/she is going to parties, dances, or any place where there will be people that he/she does not know well.</td>
</tr>
<tr>
<td>41.</td>
<td>My child is shy.</td>
</tr>
</tbody>
</table>
Form 3- Child Questionnaire

SELF-REPORT FOR CHILDHOOD ANXIETY RELATED DISORDERS (SCARED)

CHILD FORM (8 years and older*)

Name: _______________________________ Date: ____________________ Identification #: ______________________

Below is a list of items that describe how people feel. For each item that describes you, please circle the 2 if the item is very true or often true of you. Circle the 1 if the item is somewhat or sometimes true of you. If the item is not true of you, please circle the 0. Please answer all items as well as you can, even if some do not seem to concern you.

1. When I feel frightened, it is hard to breathe. 0 1 2
2. I get headaches when I am at school. 0 1 2
3. I don’t like to be with people I don’t know well. 0 1 2
4. I get scared if I sleep away from home. 0 1 2
5. I worry about other people liking me. 0 1 2
6. When I get frightened, I feel like passing out. 0 1 2
7. I am nervous.  
8. I follow my mother or father wherever they go.  
9. People tell me that I look nervous.  
10. I feel nervous with people I don’t know well.  
11. I get stomach aches at school.  
12. When I get frightened, I feel like I am going crazy.  
13. I worry about sleeping alone.  
14. I worry about being as good as other kids.  
15. When I get frightened, I feel like things are not real.  
16. I have nightmares about something bad happening to my parents.  
17. I worry about going to school.  
18. When I get frightened, my heart beats fast.  
19. I get shaky.  
20. I have nightmares about something bad happening to me.  
21. I worry about things working out for me.  
22. When I get frightened, I sweat a lot.
<p>| | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>23.</td>
<td>I am a worrier.</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>24.</td>
<td>I get really frightened for no reason at all.</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>25.</td>
<td>I am afraid to be alone in the house.</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>26.</td>
<td>It is hard for me to talk with people I don’t know well.</td>
<td></td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>27.</td>
<td>When I get frightened, I feel like I am choking.</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>28.</td>
<td>People tell me that I worry too much.</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>29.</td>
<td>I do not like to be away from my family.</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>30.</td>
<td>I am afraid of having anxiety (or panic) attacks.</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>31.</td>
<td>I worry that something bad might happen to my parents.</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>32.</td>
<td>I feel shy with people I don’t know well.</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>33.</td>
<td>I worry about what is going to happen in the future.</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>34.</td>
<td>When I get frightened, I feel like throwing up.</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>35.</td>
<td>I worry about how well I do things.</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>36.</td>
<td>I am scared to go to school.</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>37.</td>
<td>I worry about things that have already happened.</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>38.</td>
<td>When I get frightened, I feel dizzy.</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>39.</td>
<td>I feel nervous when I am with other children or adults and</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
40. I have to do something while they watch me
   (for example: read aloud, speak, play a game, play a sport). 0 1

2

41. I feel nervous about going to parties, dances, or any place
   where there will be people that I don’t know well. 0 1

2

42. I am shy. 0 1 2

*For children ages 8 to 11, it is recommended that the clinician explain all
questions, or have the child answer the questionnaire sitting with an adult in
case they have any questions.
Form 4- Peer Tutoring Request

Academic Support

Peer Tutor Request Form

Student’s Name _________________________________
Date ___________ Class ___________
I am requesting tutoring for the following:

*Example:*

<table>
<thead>
<tr>
<th>Subject</th>
<th>Topic</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Mathematics</em></td>
<td><em>Common denominators</em></td>
</tr>
<tr>
<td>Subject</td>
<td>Topic</td>
</tr>
<tr>
<td>Subject</td>
<td>Topic</td>
</tr>
<tr>
<td>Subject</td>
<td>Topic</td>
</tr>
</tbody>
</table>
I learn best by:

◊ Writing things over and over
◊ Listening to someone explain it
◊ Looking at diagrams and figures
◊ Making songs, rhymes, phrases and other ways to memorize information
◊ Looking at a problem step by step
◊ Using Flash cards
◊ Having someone do the example and then giving me a chance to do
Handout 1

What Are Actions?

What would happen if we didn’t have verbs? Not much at all. Verbs are perhaps the most important part of speech in the English language. You can’t do or be anything unless a verb lets you. Verbs are everywhere, and it’s about time you got to know them.

**Action verbs** tell about something a person, animal, force of nature or thing can do or be.

<table>
<thead>
<tr>
<th>add</th>
<th>destroy</th>
<th>hang</th>
<th>knit</th>
<th>obey</th>
<th>say</th>
<th>visit</th>
</tr>
</thead>
<tbody>
<tr>
<td>allow</td>
<td>end</td>
<td>hug</td>
<td>land</td>
<td>open</td>
<td>stay</td>
<td>walk</td>
</tr>
<tr>
<td>bake</td>
<td>escape</td>
<td>hurt</td>
<td>lock</td>
<td>pass</td>
<td>talk</td>
<td>work</td>
</tr>
<tr>
<td>bang</td>
<td>fasten</td>
<td>itch</td>
<td>march</td>
<td>promise</td>
<td>think</td>
<td>yawn</td>
</tr>
<tr>
<td>call</td>
<td>fix</td>
<td>jog</td>
<td>mix</td>
<td>question</td>
<td>throw</td>
<td>yell</td>
</tr>
<tr>
<td>cry</td>
<td>gather</td>
<td>jump</td>
<td>name</td>
<td>reach</td>
<td>turn</td>
<td>zip</td>
</tr>
<tr>
<td>damage</td>
<td>grab</td>
<td>kick</td>
<td>notice</td>
<td>run</td>
<td>vanish</td>
<td>zoom</td>
</tr>
</tbody>
</table>

**What are some positive actions you do?**

1) __________ 2) __________ 3) __________

**When do you use these actions?**
What are some negative actions you do?

1) __________  2) __________  3) __________

When do you use these actions?

1) __________  2) __________  3) __________
Handout 2

Character Traits

Characters (and real-life people) have unique attributes called traits.

- Honest
- Leader
- Expert
- Brave
- Mischievous
- Demanding
- Thoughtful
- Bright
- Courageous
- Serious
- Funny
- Humorous
- Sad
- Humble
- Friendly
- Adventurous
- Hard-working
- Shy
- Bold
- Daring
- Simple
- Fancy
- Plain
- Excited
- Studious
- Creative
- Independent
- Intelligent
- Complaisant
- Gentle
- Proud
- Wild
- Messy
- Neat
- Joyful
- Strong
- Handsome
- Selfish
- Unselfish
- Self-confident
- Respectful
- Considerate
- Imaginative
- Busy
- Responsible
- Lazy
- Dreamer
- Helpful
- Cooperative
- Lovable
- Able
- Quiet
- Curious
- Reserved
- Pleasing
- Bossy
- Fighter
• Tireless • Cheerful

• Energetic

On the back of this page, list 10 character/personality traits that describe you.
What emotion do you usually feel when thinking about school?

________________________________________________________________________________________

_ What emotion do you usually feel about going to lunch?

________________________________________________________________________________________

_ What emotion do you usually feel about doing group work?

________________________________________________________________________________________

_ What emotion do you usually feel when someone does not give you attention?

________________________________________________________________________________________

_ What emotion do you usually feel when someone puts-down something about you?

________________________________________________________________________________________

_ What emotion do you usually feel when someone yells at you?

________________________________________________________________________________________
What emotion do you usually feel about going home?

____________________________________________________________________
Defining Your Strengths and Weaknesses

“Strength” is any skill, ability, or trait that you possess (have) that can be used in a positive way. *Use your Character Trait list to help find some positive traits that you possess.

Courage
Positive
Encouraging
Organized
Intelligence
Social
Belief in Self

Hope

Can’t be alone
Can’t stop talking

A “weakness,” on the other hand, is a trait that you possess (have) that causes you difficulty. This weakness can occur often or just from time to time. Sometimes, it can even be extreme. *Use your Character Trait list to help you determine what negative traits that you may show.
Can't stand silence

Greedy

Grumpy

Focused on self

____________

____________
Handout 5

What’s Your Goal?

What are some goals you have...

**Academically**

_____________________________________________________________________________
_____________________________________________________________________________

**Socially**

_____________________________________________________________________________
_____________________________________________________________________________

**Presently**

_____________________________________________________________________________
_____________________________________________________________________________

**Short term**

_____________________________________________________________________________

**Long term**

_____________________________________________________________________________
Handout 6 (All the contents of this Handout can originally be found and downloaded from Kids’ Health)

Conflict Resolution

Contents

- What is conflict resolution?
- Understand
- Avoid making things worse
- Work together
- Find the solution
- Possible outcomes
- Dr Kim says
- Multi-selection quiz

What is Conflict Resolution?

Sometimes we all get pretty angry.

We may feel that something is unfair, something has been taken or broken that we value, someone is being mean, we're not getting a fair share, etc.

So what do you do?

Well, you could throw a huge tantrum, get really upset, be mean to everybody etc.

Would any of these things solve the problem? I don't think so!

Well, what could you do?

Conflict Resolution

Try to sort things out so that everyone gets a fair go and something of what they want. There are 4 things that you need to do.

1. Understand
2. Avoid making things worse
3. Work together
4. Find the solution
Understand
Everyone involved needs to understand what the conflict (argument) is about.

To do this, everyone needs to:

😊 say what they feel about it (without interruptions).

😊 listen to what other people have to say about their feelings (without interrupting them).

😊 try to put themselves in the other person's shoes and try to understand their point of view.

Avoid making things worse

◆ no put-downs

◆ no mean, nasty remarks that will hurt people's feelings - no personal remarks about a person's looks, gender (whether they are a boy or girl), their 'secrets' or things that have happened in the past

◆ no screaming and shouting

◆ no fighting, hitting, kicking, pushing or any kind of hurting the other person's body.

Work together
Make "I" statements, like:
"I feel hurt when..."
"I need to feel or be..."
"I hear what you are saying, but I feel..."

✔ Say what you feel without blaming the other person, e.g. "I feel sad when you shout" is better to say than "Your shouting makes me feel sad."
Take turns at speaking. You might even want to decide on a time limit for each person to speak before you get started. That way everybody gets the same chance to say what he or she wants.

Talk quietly. It's hard to keep your voice down when you feel upset, but a quiet firm voice is far better than someone shouting. A loud nasty voice makes everyone upset and unwilling to listen.

Write down what you each see as the problem and then read what the other person has written.

Do some **active listening (show the person that you are listening)** by:

- **looking at them**, to show that you are giving your full attention. Don't overdo it though. Staring hard at someone makes that person feel uncomfortable.

- **making 'listening noises'** (but not interrupting). You know the sort of thing - "Uh huh", saying "yes" or "no" in the right places.

- **repeating what you heard**. When they've finished, say what you think you've heard from them, e.g. "So, your problem is that I haven't tidied my part of our room?"

**Find the solution**

Once you have listened to each other and found what the problem is, then you need to look for a solution.

- Brainstorm together to think of ways in which you could resolve the conflict. Think of as many solutions as you can, even if they seem silly at first.

- Another person may be helpful to write down your ideas or suggest ways of making your ideas work so that you can resolve the conflict.
Possible outcomes

Yes/Yes when both of you are pleased with what you worked out.

Yes/No when one side is happy because they got what they wanted and the other is sad because they didn't get what they wanted.

No/No when neither side is happy because nobody got what they wanted (you know the sort of thing, when mum or dad step in and say that no-one gets anything, because you can't work out your problem!)

Which do you think is the best outcome?

Yes/Yes is the best because everyone gets something. But, you will need to be very good at these conflict-solving skills so that each gets something that he/she wanted.

When you have come to a solution that both of you can agree with, then you have to be responsible for carrying it out.

If things don’t work out then you need to go through the whole process again to see how it could be improved.

Conflict resolution is not easy. It takes everyone involved to work together willingly and to accept and carry out what has been decided.

Some schools have peer mediators. These are children who go through a special training so that they can help other children to work through the problems they are having with each other.

Parents, teachers and counselors can all help you to learn the skills for resolving conflict and becoming a more confident, responsible and independent person.

Dr Kim says:
Problems don't go away if you ignore them - in fact usually they get worse. It's a good idea to face problems and get them sorted out as soon as you can.

How would you resolve the following conflicts?

1. You and your friend are watching TV. You want to watch one program and your friend wants to watch another. What could you do?
2. Your friend gave you some pencils belonging to her brother and he wants them back. What could you do?
3. You have lost your friend's library book. What could you do?
4. Your sister is always going into your room and borrowing your stuff without asking. What could you do?
5. Your baby brother/sister chews your homework! What do you do?

Remember to

- **Think** about the problem.
- **Say** what you feel.
- **Listen** to the other person.
- **Brainstorm** solutions.
- **Decide** what each one will do.
- **Stick to** what you have decided.
- **Talk again** if the solution is not working.
The reading levels indicated in Figure 5, have been obtained prior to the program and at the conclusion of the program. The program began in the month of April. Said levels have been determined based upon the Teachers College Reading and Writing Project Benchmark Reading Levels and Marking Period Assessments. The grading is as follows: (1) Far Below Grade Standard; (2) Approaching Grade Level; (3) At Grade Level; and (4) Exceeding Grade Level.

**Figure 5 Reading Levels and Scores**

<table>
<thead>
<tr>
<th></th>
<th>Sept.</th>
<th>Dec.</th>
<th>May</th>
</tr>
</thead>
<tbody>
<tr>
<td>John</td>
<td>S</td>
<td>T</td>
<td>V</td>
</tr>
<tr>
<td>Sam</td>
<td>R</td>
<td>R</td>
<td>S</td>
</tr>
<tr>
<td>Marco</td>
<td>L</td>
<td>L</td>
<td>L</td>
</tr>
<tr>
<td>Mary</td>
<td>O</td>
<td>P</td>
<td>Q</td>
</tr>
</tbody>
</table>

The math levels indicated in Figure 6, have been obtained prior to the program and at the conclusion of the program. Said scores have been obtained based on Everyday Mathematics Unit Assessments. The grading is as follows: (1) Far Below Grade Standard; (2) Approaching Grade Level; (3) At Grade Level; and (4) Exceeding Grade Level.

**Figure 6 Unit, Quiz, and Open Response Averages**

<table>
<thead>
<tr>
<th></th>
<th>Unit Average</th>
<th>Quiz Average</th>
<th>Open Response Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>John</td>
<td>91</td>
<td>95</td>
<td>3.3</td>
</tr>
<tr>
<td>Sam</td>
<td>62</td>
<td>75</td>
<td>2.5</td>
</tr>
<tr>
<td>Marco</td>
<td>55</td>
<td>95</td>
<td>1.5</td>
</tr>
<tr>
<td>Mary</td>
<td>77</td>
<td>80</td>
<td>2.5</td>
</tr>
</tbody>
</table>
The social levels indicated in Figure 7, have been obtained prior to the program and at the conclusion of the program. A rubric was created for this program that is in accordance with age-appropriate behaviors. The grading is as follows: (1) Far Below Grade Standard; (2) Approaching Grade Level; (3) At Grade Level; and (4) Exceeding Grade Level.

**Figure 7 Social Levels**

The DSH occurrences indicated in Figure 8 have been obtained prior to the program, for forty school days. A school day takes place from the hours 8:30 a.m. through 3:00 p.m. (six hours and thirty minutes). The only times that DSH have not been recorded are times during teacher preparation periods and lunch, which totals one hour and forty minutes. For participants that DSH, logs were kept at the students’ desk and collected at the end of each school week. It has also been recorded the number of occurrences of DSH once the program concluded.

**Figure 8 DSH Occurrences**

<table>
<thead>
<tr>
<th></th>
<th>February</th>
<th>March</th>
<th>April</th>
</tr>
</thead>
<tbody>
<tr>
<td>John</td>
<td>138</td>
<td>142</td>
<td>46</td>
</tr>
<tr>
<td>Sam</td>
<td>94</td>
<td>85</td>
<td>31</td>
</tr>
<tr>
<td>Marco</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Mary</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>