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GIRLS AT VOCATIONAL HIGH

AN EXPERIMENT IN SOCIAL WORK INTERVENTION

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Foreword

Is SOCIAL WORK on the wrong track?

This impolite question is neither asked nor answered in this book. The aim of the study reported here was much more modest and practical perhaps, namely, to determine: (1) whether or not potentially problematic subjects can be identified and involved in preventive programs before they present problems, and (2) the extent to which social casework is effective in prevention when applied to subjects so identified and so involved. But in answering their own questions, and they do this extremely well, the authors unavoidably raise the larger question.

Evaluation is a hazardous undertaking for all concerned. It is full of pitfalls for those who design and conduct the research. The institution or profession whose concepts and procedures are being tested risk the discovery of embarrassing discrepancies between claims and accomplishments. Not to be forgotten are the uncertainties confronting those who would interpret findings and draw implications for future policy and courses of action.

But if the risks are great, so are the rewards. Indeed it can be said that in any evaluation, negative findings may be just as important as and sometimes even more important than positive results. It may well be that the latter is true in the present instance.

In any case the study gave clear answers to the questions to which it was addressed. It is possible to identify potentially problematic adolescent girls and to involve them in relationships and activities that were designed to prevent their developing problematic behavior. The impact of the preventive effort, if any, was minor.

These results themselves make the study fully worth the investment of funds and painstaking effort. If nothing else, the findings will cause many to reexamine their assumptions, expectations, and requirements concerning activities variously designated as school social work, school psychology, counseling, and the like. But beyond this are products that make the project an especially valuable one.

In the first place, the effort to test the preventive effectiveness of casework technique led the agency to the discovery that a different technique was more effective at least for involving adolescent girls in the activities aimed at prevention. This technique may well be an important instrument for general therapeutic social work, also.

Second, the requirements of evaluative design revealed how extremely difficult it is to develop explicit descriptions of the complex processes that take place in casework. This finding will undoubtedly stimulate systematic and intensive efforts to make these processes more explicit and to relate them to practice theory.

Third, the study made clear the need both in social work and in social science for conceptualizations relevant to the processes and products of social interaction in types of situations dealt with in this project. Evaluative studies in social work, no matter how meticulously designed and executed, will continue to yield findings of very limited generalizability until more adequate hypotheses are articulated. More persistent and systematic collaboration of social work and social science theorists should emerge from such enterprises as the one here reported.

It is quite possible that the most important contribution of this study is its posing in a very concrete way the question stated at the beginning of this Foreword. Put in other words, the issue is whether or not the social work profession can continue to maintain that the individual casework, clinical approach is its central method for dealing with the kinds of problems presented by the population dealt with in this experiment. Without in the least denigrating the value and importance of clinical and casework approaches in appropriate settings, it is nevertheless proper to

suggest that the profession must move rapidly to develop new technologies and skills for the diagnosis and management of environments in order to keep up with the growing demands for help in dealing with the massive problems of control and prevention of destructively deviant behavior.

A significant test of the value of a research project is the agenda it yields for further productive effort. By this test, the project here reported has more than paid its way.

LEONARD S. COTTRELL, JR.

January, 1965

Acknowledgments

THE NATURE of this project necessitated the close cooperation of a rather large group of collaborators representing a wide range of disciplines. Wellman J. Warner, Department of Sociology and Anthropology, New York University, introduced a research team from his department to Youth Consultation Service. The early phases of cooperative research were supported over a number of years by grants from the Vincent Astor Foundation. On the basis of a successful collaboration, the proposal for this project was presented to Russell Sage Foundation with a request for research funds and to The Grant Foundation with a request for support of the expanded service program required of Youth Consultation Service. We are grateful to these foundations for their generous support, both moral and financial. We are especially indebted to Donald Young, Leonard S. Cottrell, Jr., and Orville G. Brim, Jr., of Russell Sage Foundation, and to John G. Byler and Adele W. Morrison of The Grant Foundation.

We are pleased to give our warmest thanks to Youth Consultation Service. Our special appreciation is due Margaret Hoag, former director, whose prescience in the beginning and persistence in the end saw the project through to completion. The debt to our active collaborators, Elizabeth P. Anderson, director of casework services and now successor to Mrs. Hoag as director of the agency; Dorothy Headley, senior group therapist; and Hanna Grunwald, group therapy consultant, is everywhere evident in this report. In addition, we should like to thank the entire YCS staff who gave of themselves as well as their time and professional skills to the project. The supervisors were Helen Olson, Phoebe Rich, Mary Richards, and Adeline Strongin. The

caseworkers were Erline Collins, Grace Ford, Beatrice Hartley, Ida Lenihan, Caroline Oram, and Marilyn Voight. The group therapists, in addition to Miss Headley, were Evelyn Irby, Marianne Lothar, Greta Meyer, Nilde Molinary, Jean Rinaldi, Phyllis Slaughter, Mary W. Van Hyning, and two students, Suzanne Coral and Suzanne Salter. The casework consultants were William H. Cox, Morton S. Eisenberg, and Bernard Berkowitz. The group therapy program began under the direction of S. R. Slavson, consultant, and continued under Dr. Grunwald. The psychologist was Juliette C. Diller. The agency secretary and clerk, Madeline Carmichael, also served in the very special role of meeting the new referrals and introducing them to YCS. Mrs. Robert Winternitz, above and beyond the usual duties of an agency volunteer, served to interpret YCS to the project school personnel at all levels.

The Board of Education of the City of New York approved the research proposal and authorized cooperation of school personnel in the project. We wish to thank Nathan Brown, principal of the high school and now an assistant superintendent, not only for his help in initiating the project, but also for his sponsorship throughout. Leonore R. Miller, assistant principal of the high school, was the pivot about which the entire project turned. Her interest and enthusiasm, her skill and insight made the crucial difference between success and failure of the operating program. It was she who saw to it that the numerous impediments were overcome. The guidance she gave the girls to facilitate the service program was no more important to the success of the operation than the guidance she gave to the research operations and to the research staff members. The entire faculty and staff of the school accepted the demands of the experiment and contributed at many points to its successful operation. We would like especially to thank Theresa Fanelli, dean of girls; Mary Fuerst, chairman of the trade department; Murray Philips, admissions counselor; and Virginia Eckenrode, attendance teacher. The guidance counselors were the most important link between the agency and the school; we want especially to thank Pauline Bockian, Evelyn Chasan, Milton Dickman, Sophie Leiberman, and Esther

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The research staff itself, while small, was hard-working and loyal. We enjoyed a succession of research assistants—Nathaniel Seigel, John Stimson, and Martin Goldman—who deserve our special thanks. Most of the coding was done during the summer without benefit of air-conditioning; we want to thank Roberta Greene Ehre, Leah Glass, Tamara Obrebska, Ruth Moskowitz, Ann Higley, and Phyllis Esser Gunther for their perseverance. The sociometric tests were hand-scored by student volunteers from the sociology classes of Margaret Benz, New York University. We wish to thank them and her for help we probably could not have bought even if we had had the money. The Make A Sentence Tests were scored by Carola Mann, with some assistance by Ardith Stimson. Most of the early computer work was done by Jonathan Robbins and Joy Marie Hadden handled the later stages. The manuscript typing and retyping has fallen into the willing hands of Marian Iglesias. To these and others go our special and individual thanks.

H. J. M.
E. F. B.
W. C. J.

January, 1965

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I. Objectives and Rationale for the Study

THIS BOOK describes a study of the consequences of providing social work services to high school girls whose record of earlier performance and behavior at school revealed them to be potentially deviant. Over the course of four years girls with potential problems who entered a vocational high school in New York City were identified from information available to the school. From this pool of students a random sample of cases was referred to an agency where they were offered casework or group counseling services by professional social workers. A control group was also selected at random from the same pool of potential problem cases in order that a comparison could be made between girls who received service and similar girls who did not. Since all these girls were identified as potential problem cases, they may be considered latent or early detected deviants. Services to them consisted in efforts to interrupt deviant careers.

Social work agencies and the professional social workers who staff them are dedicated to the achievement of constructive changes in their clients. They are constantly restive to know whether their efforts are successful, where they may be deficient, and how they might be improved. As their sense of professional security increases, social workers not only become more confident that their efforts are worthwhile, they also seek to test them against the hard, objective criteria of achievement.

There are those who contend that evaluation studies in social work are premature,[1] that attempts to assess effectiveness constitute attacks on the competence if not the integrity of the profession,[2] that dedicated effort is its own excuse for being. Others contend that evaluation studies are essential not only to justify

the considerable investment of effort and money in social agency operations and professional services but to provide guidelines for the development of practice principles in casework and in other helping efforts.[3] The research that is the basis of this monograph was undertaken in this spirit of constructive evaluation.

BACKGROUND FOR THE RESEARCH PROJECT

Two conditions constitute the background for the project described here. The first is that there are experimental social agencies that have sought to provide casework and group therapy services to adolescent girls with behavior and adjustment problems. The second is that such agencies have shown interest in rigorous scientific research that may have practical utility for the agencies and also contribute knowledge more generally to the field of social work.

Youth Consultation Service is a nonsectarian, voluntary social agency in New York City that for more than fifty years has specialized in offering services to adolescent girls. The characteristic problems that bring troubled girls and young women between the ages of twelve and twenty-five to YCS are: out-of-wedlock pregnancy, school behavior problems, chronic truancy, unmanageability at home, "immoral conduct," incorrigibility, and "runaway." At the time this research was undertaken, the agency served approximately two hundred clients each year, of whom about two-fifths were unmarried mothers. The urban offices of the agency, located in Manhattan and the Bronx, received relatively larger proportions of clients having general problems, whereas the suburban Westchester office in White Plains tended to serve primarily unmarried mothers.

The major service offered to clients of the agency is casework, but since 1952 it has conducted a supplementary group therapy program and has pioneered in group methods of treatment for unmarried mothers and adolescent girls with other behavior problems.[4] In addition to the regular complement of psychiatric consultants, group therapy consultants have been provided.

Youth Consultation Service has characteristically sought new approaches and methods. In fact, in recent years the agency has

had a distinctly experimental attitude toward its role, seeking less to provide mass services than to represent a site for innovation and experimentation. In this spirit YCS embarked on a research program in the early 1950's and enlisted the services of sociologists and social psychologists to serve part-time as a research staff. A Research Committee of social workers and social scientists was constituted and met weekly to formulate concrete research plans. The widest latitude was given to the consideration of questions that had come out of the experiences of the agency and its staff. The only real limitations were that the research questions have direct import for the agency's program and that they be amenable to objective study.[5]

A persistent concern of the agency's staff has been its experience with adolescent girls identified through school difficulties and referred to the agency by the New York City Youth Board. Youth Consultation Service has had several contracts with the Youth Board to serve such clients which involved many complex problems. In the first place, it was frequently extremely difficult to make even initial contact with referred cases, a considerable proportion of whom never were seen or were seen only once or twice. Second, achieving involvement in casework was difficult or impossible, even when contact was made. The customary approaches to establishing relationships through regular casework interviews did not seem effective. Third, even when a casework contact was established, these clients often seemed to be in such severe stages of maladjustment and psychological pathology that it was felt that only sustaining and ameliorative goals could be set rather than more positive and constructive objectives. The caseworkers frequently felt that contact had been made *after* the optimum point for maximum help. They frequently were of the opinion that earlier intervention might have prevented an almost untreatable condition from developing or at least have permitted restorative treatment to be undertaken with more hope of success. Treatment was seen as having been attempted too late, both in the sense that the girls were older than the most promising ages for effective treatment and that their difficulties had become so severe as to make treatment problematical even as it accentuated

the difficulties of establishing a casework relationship with these adolescent girls.

The Research Committee turned its attention periodically to this experience as various possible studies were proposed which might throw light on the problem of how to increase the agency's success with such cases. Hence an effort was made to conceive a research study of adolescent girls, similar to those that the Youth Board sought to reach, for whom treatment might be provided before severe difficulties developed.

It was clear that the caseworkers were willing to try new approaches for the purpose of research while maintaining professional responsibility in their treatment efforts. The staff of the agency were prepared to test their efforts in a research design that would permit arbitrary assignment of clients of a defined class of adolescent girls in need of help so that they could be compared with girls similar in situation and characteristics who would not receive service. It was recognized that studies confined to the existing caseload would be limited insofar as learning whether the efforts of the caseworkers were successful. A control-group experimental design was proposed which supplied new sources of arbitrary referral for a study of how to prevent adolescent girls from developing serious behavior problems. Thus a project took shape that was intended to study the effectiveness of social work for interrupting potential deviant careers.

Some General Considerations

What is meant by prevention? To prevent the culmination of processes that produce the problems of adolescent girls required, first, the *prior* identification of girls who, if untreated or unsuccessfully treated, subsequently would develop such problems. But to intervene before the problems are critically manifest means to detect general rather than specific tendencies, in the absence of sufficient knowledge about the etiologies of the problems to specify with certainty their preconditions. Nonspecific referrals were typical of the agency's adolescent girl clients. The usual agency caseload included clients coming from complex home situations and presenting a broad spectrum of problems.

It was the task of the caseworkers to make specific such general characteristics of their clients' situations by orderly and sensitive diagnoses so that appropriate treatment plans could be devised to fit the particular needs of each client.

Not only were diagnoses likely to be varied for adolescent clients, but treatment objectives as well were likely to be diverse. Hence successful treatment was likely to represent many different achievements, depending on the problems discovered and the goals set for each client. Unlike the examination of unitary treatment efforts directed toward specific and previously determined problems, preventive casework must apply a range of treatment efforts to a broad spectrum of potential problems. Only after problems can be resolved into diagnostic types for which symptomatic indicators are available can the specification of a particular treatment be appropriate.

What is meant by "treatment" for such an array of unspecified problems of adolescent girls? Casework and group therapy are not precise and limited methods of helping persons with problems. They are flexible approaches, adaptable to the varieties of situations in which clients find themselves. They take their specificity from certain underlying principles based on experience: that a professional person can help an individual in need if an appropriate relationship can be established; that this relationship involves confirmation through action of the willingness and ability of the helper to help; that such help can be provided through continuous interaction between helper and client in which the client is enabled to achieve further self-understanding, so that the components of her problem that arise from emotional conflicts, repressed experiences, and inadequate socialization can be dealt with effectively; that such reeducational processes can be achieved as will increase competence in the client and thereby enable her to meet the demands of her situation adequately and realistically. Such underlying principles as these, rather than specific prescribed actions, constitute the treatment approach of casework when the problems of clients are diffuse.

It is assumed that many of the problems of adolescent girls are amenable to a casework or group therapy approach. Further-

more, caseworkers are trained to be alert to those conditions of their clients that make casework inappropriate, for example, physical disabilities, severe psychological pathology, or extreme environmental circumstances. But, in the main, the kinds of adolescent girls who are referred to social agencies for help are thought to have problems for which casework and group therapy are treatment methods of choice. The screening process of the serving institutions of the community—medical, economic, educational—usually directs persons with specific problems elsewhere, leaving to the social agencies the task of dealing with the problems of behavior and maladjustment.

How can "effective treatment" be determined with so generalized a set of problems and so generalized a treatment approach? The problem of criteria is, of course, a difficult one. But just as it is necessary for prevention to discover clients prior to the emergence of specific problems for specific treatment, so it is necessary to examine a wide range of factors that may catch the evidences of desired change of behavior, reduction of undesirable behavior, or assumed improvement in functioning. Just as an array of behaviors and conditions can be taken to represent incipient problems for adolescent girls, so too can an array of behaviors and changes be taken to represent improvement or movement in the direction of less problematic, more "normal," acceptable conditions. For any one client, the criterion of improvement, of successful treatment, may be concrete and directly related to her particular problem and behavior. For each the criterion may be different, although it is to be expected that general types of problems and hence of changes will be discovered. But for adolescent girl clients as a whole, the criteria of success will be general. They will be reflected in the variety of different "improvements" and "changes" that occur. In the broadest sense, a group of clients should show "improvement" by being more "normal," more like those who do not appear to have problems. We may with some confidence assume that measures of normality will reflect the impact of successful treatment efforts if other factors are not responsible for the changes observed.

How can these "other factors" be taken into account? It is most difficult to determine when treatment rather than maturation, normal experiences, and other conditions are responsible for any changes observed. We must be able to say that clients who improve are not simply those who would improve anyway, that is, without systematic, deliberate treatment. To arrive at an accurate judgment, it is necessary to adopt some sort of comparison-group design so that treatment will constitute an experiment. Then we can discover whether untreated clients change as the treated ones do, whether the multifold processes of living, rather than the efforts of social workers, have achieved the effects we consider desirable. When we can see that adolescent girl clients who have received treatment differ from nontreated girls who were similar in their situations and characteristics before treatment, we can be reasonably sure that it has been the treatment effort that was effective.

Furthermore, through such an experimental design we can discover what aspects of treatment might have been effective, provided we can be specific in describing what constituted the treatment effort. If we can merely say that clients were provided with "casework and group therapy," then we must be content to attribute results to such general treatment efforts. If we can specify what such efforts are, we learn what produces a given result. However, even if we must be content with the general knowledge that "agency services" were provided, we will learn something that may be repeated because such services are identifiably different in some respects from the wide range of other experiences of adolescent girls, such as school, religious, recreational, and play experiences. And it is of value at least to ask whether the impact of "agency services" is visibly and constructively evident.

In short, such considerations as these, in view of the experiences of Youth Consultation Service with its adolescent girl clients and the research intentions of the social workers and researchers, constitute the background for the research project that began in the fall of 1955. It will be described in detail in the next chapter.

NOTES TO CHAPTER I

1. See Greenwood, Ernest, "Social Science and Social Work: A Theory of Their Relationship," *Social Service Review*, vol. 29, March, 1955, p. 31.

2. For discussions of some of the issues presented and positions taken by practitioners in the helping professions, see Blenkner, Margaret, "Obstacles to Evaluative Research in Casework," *Social Casework*, vol. 31, February–March, 1950, pp. 54–60, 97–105; Meyer, Henry J., and Edgar F. Borgatta, "Paradoxes in Evaluating Mental Health Programmes," *International Journal of Social Psychiatry*, vol. 5, Autumn, 1959, pp. 136–141.

3. See Eaton, Joseph W., "A Scientific Basis for Helping" in Kahn, Alfred J., editor, *Issues in American Social Work*, Columbia University Press, New York, 1959, pp. 270–292; Thomas, Edwin J., "Field Experiments and Demonstrations" in Polansky, Norman A., editor, *Social Work Research*, University of Chicago Press, Chicago, 1960, p. 295; French, David G., *An Approach to Measuring Results in Social Work*, Columbia University Press, New York, 1952, pp. 3–73; Herzog, Elizabeth, *Some Guide Lines for Evaluative Research*, U.S. Department of Health, Education, and Welfare, Social Security Administration, Children's Bureau, Washington, 1959, pp. 79–94.

   An extensive consideration of general and technical issues that must be faced in evaluative research is found in Hyman, Herbert H., Charles R. Wright, and Terence K. Hopkins, *Applications of Methods of Evaluation*, University of California Press, Berkeley, 1962, pp. 3–86.

4. MacLennan, Beryce W., and S. R. Slavson, *Group Therapy with Unmarried Mothers*. Youth Consultation Service, New York, 1956.

5. Completed research included: Meyer, Henry J., Wyatt C. Jones, and Edgar F. Borgatta, "The Decision by Unmarried Mothers to Keep or Surrender Their Babies," *Social Work*, vol. 1, April, 1956, pp. 103–109; Meyer, Henry J., Edgar F. Borgatta, and David Fanshel, "Unwed Mothers' Decisions About Their Babies: An Interim Replication Study," *Child Welfare*, vol. 38, February, 1959, pp. 1–6; Meyer, Henry J., Edgar F. Borgatta, and David Fanshel, "A Study of the Interview Process: The Caseworker-Client Relationship," *Genetic Psychology Monographs*, vol. 69, 1964, pp. 274–295; Pollock, Edmund, *An Investigation into Certain Personality Characteristics of Unmarried Mothers*, Ph.D. dissertation, New York University, 1957; Jones, Wyatt C., Henry J. Meyer, and Edgar F. Borgatta, "Social and Psychological Factors in Status Decisions of Unmarried Mothers," *Marriage and Family Living*, vol. 24, August, 1962, pp. 224–230; Jones, Wyatt C., "Correlates of Social Deviance: A Study of Unmarried Mothers." Unpublished manuscript.

II. The Plan for the Research Project and Its Implementation

AFTER A BRIEF DESCRIPTION of the research design, this chapter will present some of the conditions required for its implementation and the procedures instituted for its fulfillment. The purpose is to describe not only the structure of the research project but the operating context within the organizations—the agency and the school—in which it was conducted.

THE RESEARCH DESIGN[1]

The basic plan of the research was a simple experimental design requiring random assignment of adolescent girls with potential problems (1) as clients of Youth Consultation Service to constitute an *experimental* sample, that is, to receive treatment, and (2) as members of a group of *control* cases, with no treatment provided by YCS. The comparison of these two groups of cases after the former was exposed to the services of the agency will constitute a test of the effects of that service, since in other respects the two groups may be assumed to begin equally and to differ in experiences only to the extent that the control cases have not had the services of YCS. It is to be noted that these are assumptions and therefore require some empirical examination if they are to be accepted with confidence.

In order to check these assumptions, as well as to provide information additional to the experimental test, it was arranged that the total school population from which experimental and control cases were chosen would be tested *prior* to random assignment and periodically throughout the study so that equivalence could be examined and change differentials noted. Similarly, it was arranged that the total school population as well as the

experimental and control cases would be observed at a determinate follow-up point according to criteria that reflected a range of objectives contemplated by YCS in its services to the experimental sample.

Through additional procedures, including clearance with the Social Service Exchange and direct inquiry from both experimental and control subjects, an effort would be made to estimate whether YCS service did, in fact, constitute the primary variation in experience of the two groups of cases, or whether, for example, similar or comparable services might have been provided elsewhere for the control cases. In the strictest sense, therefore, the experimental test was not one of provision of service vs. withholding of service, but rather the known provision of service vs. unknown experiences excluding these specific services. This is a severe test of the impact of such services. But it is also a powerful one and the sort of question that is, in effect, asked of social agencies: "Have your services benefited clients more than no services or services provided on a casual and haphazard basis?"

IMPLEMENTATION OF THE RESEARCH DESIGN

A number of conditions had to be met to implement the research design. These involved both the social agency and cooperating organizations.

Source of the Clients

The first question was the source of the adolescent girls who were to be clients of the agency and the subjects of the experiment. Since the objective was to examine whether fairly early intervention in a deviant career would be possible and effective (experience with Youth Board cases had been felt to be too late and ineffective), it was necessary to find subjects who were either younger than those who had been treated by the Youth Board, or whose problems were less developed. The function and experience of Youth Consultation Service were confined to girls of adolescent years, and hence it was decided that junior high and high school ages must be accepted as limits for the subject

clients. They would be adolescent girls whose problems had not become acute or overtly severe.

Where were such clients to be found? And how were they to be obtained through random selection so that a control group similar in situation and characteristics could be compared with them? Obviously an outside source different from the usual voluntary and uncontrolled intake of the agency was required—a source willing to permit completely arbitrary selection of the experimental cases and completely arbitrary rejection of the control cases. The alternative of waiting for customary intake at the agency to provide the population that could be divided into experimental and control cases was clearly not feasible for several reasons. First of all, the flow of cases to the agency was too uncertain to provide the necessary numbers for the experiment within a reasonable time span. Second, experience had shown that most of the adolescent girl clients of the agency had already reached acute stages in their behavior problems. Furthermore, the ethical norms of social work operated to make it more difficult, or even impossible, to decide arbitrarily to serve or not to serve some clients rather than to make the decision on the basis of need and capacity to be helped by the agency.

The obvious source for the type of client to be served and studied was the school. A high school was sought that was large enough and varied enough in its composition to expect a reasonable number of adolescent girls with potential problems to be identified, and that was willing to cooperate by referring the selected sample of girls to YCS and by permitting the necessary testing and follow-up procedures. The school should not be one designated as primarily for students whose difficulties had already singled them out, such as the "600-schools" of New York City, because the study contemplated preventive rather than ameliorative services. But it also should not be one in which the student body was selected in the opposite manner, because of superior performance or outstanding behavior, or one in which families of higher economic and social class would be likely to provide alternative services to those of YCS for girls with potential problems.

Practical considerations also entered in the selection of the school to be used. It would be convenient as well as desirable to use a school in the neighborhood of the agency so that, if possible, transportation barriers would not make visits to the agency difficult, and so that contacts with YCS could be made during school hours without disruption of the usual school program of the students referred. Previous experience elsewhere with attempts to arrange systematic referrals from outside sources had emphasized the difficulty of getting referrals into contact with the agency.[2]

After some exploratory work, a nearby citywide vocational school, about two-thirds of whose student body were girls, was asked to cooperate in the project. The principal and the administrative assistant in charge of guidance readily agreed to participate. This school had an enrollment of about 1,800 students, with approximately 500 girls and 200 boys admitted each year from all over New York City. Although the school exercised some selection in its admission, the criteria for admission were stated largely in terms of capacity to learn the trades taught in the school. The administrative assistant has described it as follows:

> The high school is a vocational school with approximately 1,800 students, two-thirds of them girls, because the industry for which training is offered employs many women. Most students enter in the tenth grade for three years of study and training; a small number (mostly from parochial schools) enter in the ninth grade. The social composition of the student body reflects the changing population of the city's residents and hence includes various races and cultural and language backgrounds, natives and newcomers, and different socioeconomic levels. Teenagers from the *most* disorganized backgrounds are not heavily represented in the student population but the social class range is certainly wider than one would find in specialized academic high schools.[3]

Selection of Experimental and Control Cases

The cooperating school—here called Vocational High—agreed with the agency that the girls selected by the research staff for referral would be encouraged to accept the help of Youth Consultation Service and that the necessary home permission for the

girls to go to the agency would be sought by the school in cooperation with YCS. Vocational High also agreed that the girls selected could fit into their schoolday schedules the required appointments with caseworkers at the agency and (as group procedures developed) the scheduled group meetings. The school also accepted the condition that the project would continue through four years in order that the requisite numbers could be referred and observed throughout their high school years, normally the time between entrance and graduation from the school (tenth, eleventh, and twelfth grades).[4]

Which girls were to be selected for referral and which for the comparison group? A number of possibilities presented themselves. On the assumption that all adolescent girls might benefit from the services of the agency, a random selection could have been made from the entire school. This is not an unreasonable assumption, since it is sometimes asserted that adolescence normally entails stresses that may be better met when the adolescents are helped to understand the problems of maturation and adjustment which they face. On the other hand, differential degrees of stress and deviant ways of responding to it characterize those adolescents who have been the primary target of agency services and who constitute the group of adolescents whose difficulties give general concern.

Generally, the schools and families and other social organizations that constitute the world of adolescents take the so-called "normal" problems of adolescence as part of the conditions with which they deal. Thus adolescent girls in high school are "normally" expected to have problems in their relationships with boys, with the redefinition of their status at home from childhood to adulthood, with their self-conceptions in this transition, with uncertainties about their future occupational and marital careers, and so forth. These, in addition to academic problems and some problems of social adjustment to high school, are accepted as normal conditions to be dealt with by the school in the course of carrying on its educational functions. It is, however, the extreme expression of such problems and the occurrence of more severe difficulties that extend beyond the limits of "normal" school

responsibilities and interfere with the capacity of the school to perform its primary educational tasks. These are the situations for which specialized help might be most useful.

To meet some of the less extreme situations, schools have developed internal mechanisms, such as guidance and counseling services, disciplinary procedures, and so forth, but these are usually recognized as having limited capacity to deal with the more severe problems and hence frequently require auxiliary services. Further, much of the response to student needs is intended to maintain an acceptable level of behavior while the girls are at the school. Alert teachers and guidance departments are zealous to find resources for a more general and intensive response to student needs. Time and means permitting, they make use of available clinics, medical facilities, recreational and social work agencies on behalf of the students. To deal with some of the unacceptable student behavior directly affecting the school—such as truancy or academic failure—there are services that can be provided within the school system, for example, the services of attendance teachers and disciplinary officers. Measures such as suspension and transfer are also helpful. Rules about handling problems through these procedures are sometimes formal but usually they involve customary informal practices of the particular school.

Another way to select students for referral to a social agency, and one more in keeping with the concept of prevention, would be to make a systematic attempt to identify that segment of the school population that seemed more likely to have severe problems and to use this group as the source of clients. This assumes both that signs of future difficulties are identifiable and that intervention may have an effect on the course of their development. Both these assumptions are in keeping with a conception of social and psychological causation of the problems which YCS and Vocational High wished to prevent.

What indicators could be used to identify a portion of the entering girls at Vocational High who had potential problems and who might therefore benefit from the services of YCS? An elaborate diagnostic procedure might have been adopted, includ-

ing psychological tests and psychiatric examination, but this was neither feasible nor in keeping with the usual routine of the school. Furthermore, with the focus on evaluating preventive effectiveness, it seemed desirable to use information that ordinarily would be available rather than some special body of information collected through procedures available only for this research. In addition, criteria for identifying those with potential problems would be more useful if they were of the kind that school teachers and guidance personnel could readily detect from the cumulative records that routinely accompany students throughout their school careers. It was, therefore, the information available to the school about entering students that was used to identify the potential problem population.

It was established school practice to examine each entering student's record not only to assess academic preparation and plan the student's program, but also to identify problems that might require special planning. Indications of language difficulties, for instance, among the Puerto Rican students whose native tongue is Spanish, were noted and they were assigned to special English classes. So, too, indicators of reading retardation were noted. An effort was made to identify health problems and handicaps, as well as special personal or family problems that might have been entered in the record. As a part of normal school operations, therefore, certain kinds of screening efforts were made and the special screening for purposes of the research project was a simple addition to this usual procedure.

Beginning with the class entering Vocational High in the fall term of 1955, the research staff examined the record of every girl in that class. The records contained a variety of information that could be interpreted as indicative of potential problems. Selection of a student as a potential problem case for the research project was a judgment based on combinations of factors evident from the school record. The primary objectives were to eliminate students for whom there were no or only minimal indicators of future difficulty and to include those for whom the constellation of indicators suggested future difficulties. Since the selection of clients and of the control sample was to be *from* this pool, it was

decided to interpret indicators of potential difficulty liberally rather than by strict definitions, and hence to resolve doubts in favor of inclusion in the pool of potential problem cases.

The cumulative school record contains not only academic information (subjects studied and grades received, schools attended, and so forth), but also ancillary information about the student; for example, scores on intelligence, aptitude, and achievement tests; health information about accidents and operations, defects of sight, hearing, and speech, or exceptional physical conditions; and attendance and excused or unexcused absences. A variety of personal traits and work traits are rated by teachers for each year and notations made of co-curricular activities (clubs, teams, and the like) and special out-of-school activities (hobbies, special activities such as musical and athletic). Honors and other forms of school recognition are also indicated. Some information is also recorded about the family of the student, such as residential address, birthplace and occupation of parents, sex and birth order of siblings, and language spoken in the home. Occasionally, special personal or family problems are indicated. These are the types of information routinely available, and from them the selection criteria for the pool of potential problem cases were developed.

The records permitted judgments to be made about the school behavior of the student, about some of his personal characteristics, and about limited or unusual features of his home situation. With respect to *school behavior*, it was believed that such questions as the following might indicate potential problems for the girl entering high school:

> Do the elementary and junior high school records indicate unsatisfactory student-teacher relationships, such as classroom discipline problems?
>
> Is there evidence of difficulty in getting along with fellow students, such as fighting or arguing excessively with peers?
>
> Has there been formal disciplinary action taken, such as being sent to the principal or other disciplinary officer?
>
> Are there excessive or chronic absences without such reasonable explanations as illness, accident, and the like?
>
> Have there been unusual behaviors noted, such as extreme shyness or irritability?

Is there an obvious inconsistency between intelligence test scores and academic performance?

Are there unusual fluctuations in IQ test scores or in grades, indicating erratic performance, or unusual and marked decline?

Is there any indication of reading retardation?

Is truancy noted, or other formal violation of school regulations?

Such data in the earlier school record, especially in the more recent preceding years, were thought to indicate that the student had been observed by her teachers as behaving sufficiently beyond the normal to warrant inclusion in a pool of those more, rather than less, likely to have future difficulties.

Some of the school records provide additional information on *personal characteristics* similarly considered indicative of continuing or future difficulties, as suggested by the following questions:

Are there notations describing the girl as tense, overburdened, defiant, or anxious?

Has she been noted to have difficulties with regard to physical appearance, such as obesity or skin trouble?

Is she described as restless, depressed, likely to have temper tantrums, or be dishonest?

Are unusual mannerisms noted, or tics, stuttering, chronic crying, and the like?

Where teachers are required to rate personal traits on a scale from outstanding to unsatisfactory, are there frequent negative ratings on such characteristics as interest, self-control, dependability, industry?

It was considered probable that general negative indicators of personal characteristics would make the student more rather than less likely to have continuing or future difficulties and hence likely to benefit from the services of the agency.

Finally, do the school records indicate some unusual *family situation* that might suggest difficulties for the child? Have there been frequent changes of residence? Are one or both parents absent from the home? Are unusual circumstances noted for any family members, such as chronic illness, hospitalization, or difficulties with authorities? Is a special problem of language or acculturation noted? While less direct, these notations might also serve to forewarn of potential difficulties and hence, in combina-

tion with other indicators, qualify the girl as a potential problem case.

It is to be noted that the school records are not uniform in the extent to which all such indicators as the above are recorded. There are variations between the different junior high schools from which the students came, as well as variations in the extent to which different teachers might complete the records. As already noted, those students entering the ninth grade were usually from parochial or other private schools. The form of such records might differ; usually they contain less information than records of students entering the tenth grade from public junior high schools. Also, school records are said to underidentify withdrawn, excessively quiet, or "pathologically good" children and the selection criteria probably miss some such cases. On the other hand, it may be assumed that, in general, the behavior, characteristics, or situation of the student would have to be fairly noticeable and exceptional for such information to be recorded. Therefore, identification probably represented more than adventitious circumstances. It was not likely that the criteria would encourage selection of those students who were well adjusted and in no need of help.

A school teacher or other professional person who has some awareness of variations among adolescents could use criteria such as these to identify a portion of the class that appears likely to face difficulties in the coming school years. This is a deliberately naive procedure to identify potentially deviant persons but it makes use of the kind of information to which school teachers are sensitized and, often, the kind of information that is said to signal need for mental hygiene programs. If a syndrome of such characteristics was described to a social agency as the basis for bringing an adolescent girl there for help, it would generally be accepted as indicating at least the need for further diagnostic study and often the need for casework help of some kind. This identification procedure is nothing more than a formal recognition of the kinds of information to which guidance teachers and counselors, as well as others concerned with anticipating difficulties before they become acute, would give attention in school records. In a

practical sense, the adolescent girls so identified constitute a meaningful population for preventive service and hence for the research purposes of the project.

To recapitulate, the records of four entering cohorts of girls at Vocational High were screened and potential problem cases identified for each. Only those entering in the fall term were included in order to provide as long a time for treatment as possible. Approximately one-fourth of the cohort was included in the potential problem cases and from this pool a random procedure was used to select those to be referred to YCS, the number depending on the capacity of the agency to accept additions to its caseload. At the same time, and by the same random procedure, the control group was selected from the potential problem cases. A total of 200 referred girls and 200 in the control sample was set as the goal and, over the course of four years, 189 referrals and 192 control cases were actually included in the experimental and control samples.

Referral from the School

It is one thing for researchers to screen school records to identify potential clients and another to convert a list of high school girls so selected into actual clients of a social agency. It was precisely at this point that much of the difficulty YCS had experienced with Youth Board referrals occurred. It is therefore worthwhile to examine the procedures and the requisite conditions for this aspect of the project.

When YCS indicated that it could accept a number of clients for the project, the names of those selected were drawn from the pool and given both to the school guidance department and to the agency. Neither the school nor the agency was given the names of other girls who had been selected as control cases, and they were not informed of the students who constituted the rest of the potential problem cases.

As already indicated, the girls selected for referral had to be approached with an explanation of the program and invited to accept help from YCS. They had to obtain parental permission to leave the school premises during school hours and arrange

appointments with the agency within their school schedules. In addition, they had to be given some rationale for this unusual attention directed toward them. Furthermore, in keeping with the design of the research, the entire entering class of girls, including the potential problem cases, were given a series of tests and asked to fill out questionnaires so that uniform information would be available to describe the experimental and control samples. Data-gathering procedures are described later, but are mentioned here to indicate the range of adjustments Vocational High was called on to make. From the viewpoint of the school, referral of a few girls to YCS from time to time was only a part of the commitment to the project. The school's view of its adaptation to those requirements and its interest in cooperating have been described by the administrative assistant in charge of guidance as follows:[5]

> Those who teach or carry responsibility for guidance in a public school do not need to be reminded that it is often too late when an adolescent pupil announces, "I'm leaving school"; or when a student of average intelligence has failed in several subjects; or when a student becomes progressively disruptive so that he cannot be permitted to remain in school. But in the manifold operations of a large high school planned for the "normal" student, it is a complicated business to detect and communicate signs of trouble so that counselors and teachers may do something to prevent such difficulties. In a small community high school, the freshman counselor or guidance director may have watched his future counselees progress from the ABC's to algebra; he may know their parents as former classmates or neighbors. Not so in a large metropolitan, central school drawing its students from more than two hundred feeder schools throughout the many and varied neighborhoods of the city. The student appears first as an application form containing such information as results of group IQ tests, achievement test ratings, subject marks, recent attendance record, course preference, and cursory comments (intended usually to support the application for admission) on personal interests and qualifications. The student's total, cumulative folder, including health and confidential records, is not available until there is but little time to study it before the student arrives to begin classes. To the extent possible, counselors search these records to identify students who may need special attention so as to prepare lists of underachievers, home problems, emo-

tional and health problems, and the like. Then we take a deep breath and get ready for the "high priority" caseload for the fall.

In keeping with the purpose of the school, the staff includes teachers of both academic and vocational subjects with varying orientations toward the functions and services provided. The principal and administrative staff must balance multiple purposes and the program and services are structured accordingly, subject to requirements of the school system of which this school is a part. Despite awareness and concern for students for whom special attention is needed to bring them the full benefits of the school, innovation for such a purpose is difficult.

We were approached in the spring of 1955 by Youth Consultation Service to join in a study for the purpose of discovering criteria for predicting serious trouble for adolescent girls and evaluating methods of preventing trouble from occurring. The principal and the guidance staff agreed that such research would be valuable and would benefit our students as it proceeded. We felt, too, that it would give our staff a practical demonstration of ongoing research and an opportunity to participate in a program articulating the school and a community agency. Administrative approval set in motion the many requirements for implementation that commitment to the research and service project created.

The first requirement, minor though it may seem, was for physical facilities for the research operations. We discovered that research takes space! The guidance coordinator's office became headquarters and everybody moved over a little to make room for test forms, questionnaires, and researchers, who were given access to necessary records so that applications could be screened, data recorded, and operations planned. This was more than a spatial arrangement because it permitted research personnel quietly and tactfully to become accepted members of the office, even by the harassed secretary who stood as guardian. The important point is that the researchers and the research became a part of the school, different, to be sure, but not an operation from the outside.

The second—and continuing—requirement was for communication throughout the staff of the school to explain reasons for the adaptations necessitated by the extensive twice-a-year testing program. This meant scheduling about one and one-half hours for all girl students during their first month in school and again each spring throughout their high school years. At first, the girls were taken from vocational classes to larger rooms for large-group testing; subsequently, testing was arranged in the separate classes. Although testing and data gathering were done by researchers, teachers often volunteered their help.

When the experimental group was chosen, the time schedule for casework interviews had to be met. Appointments outside of school hours were impracticable because of the longer school day in vocational schools, the fact that many students had after-school jobs, and the travel time from school to home. We had again to seek understanding and cooperation from vocational chairman and teachers because appointments were more feasible during the longer trade classes rather than during academic-subject classes. There was some resistance at first about loss of school time: "What's the point of having a student fall behind in her work?" "I thought students came to school for instruction." "Mary is such a nice, clean, quiet girl, why does she need to talk to anyone about her problems?" The guidance department assumed responsibility for orientation of the teaching staff; individual cases were discussed with teachers.

In addition to informal and daily procedures, several formal presentations by agency and research representatives to the total faculty made informal communication easier. Social workers and teachers had not often met under such circumstances. They found the aims of the agency and those of the school not at all antagonistic. With regular and frequent visits of Youth Consultation Service staff to discuss cases with guidance personnel and teachers, mutual appreciation of the responsibilities and the sincere efforts of each increased, not without occasional misunderstandings and minor frictions.

School and agency collaboration was also required for external communication in the crucial task of informing and enlisting cooperation of students selected for referral to the agency and their parents. The agency director of casework services and school guidance personnel together drafted a letter acceptable under Board of Education rules to inform parents and solicit permission of students to leave the school premises during school hours. The guidance department took responsibility for following up on these letters, explaining to students and parents what was involved, and interpreting the service program to skeptical parents and students. The number of parental refusals was negligible. Student cooperation was enhanced by initial contact, first on an individual basis and later in groups, between social worker and students at the school, with school sanction but without the presence of school personnel. Subsequent treatment interviews and group meetings were held at the agency or in a nearby Y building.

Whatever the IBM machines may show about our project, we in the school are convinced of the practical values it has held for our students and for our staff. Procedures became almost routine over the life of the project; research and agency personnel "belong"; teachers

now want to know how they can get Mary to Youth Consultation Service: "She's such a nice, clean, quiet girl. She deserves to be helped." Some students themselves have asked to be allowed to go to Youth Consultation Service. The highest compliment, I believe, came when the Teachers' Council sent a letter of thanks to the agency and made a plea that the project be extended and made permanent.

The specific act of referral was handled in various ways by the Guidance Department but, in general, it consisted in telling the girls individually that they had been selected because the school thought that they deserved the opportunity to have the extra assistance that YCS could give them with the problems usual for high school girls. They were told that such opportunity was available only to a few of the students and they were encouraged to take advantage of it. There is little doubt that the warm and friendly interest of the administrative assistant in charge of guidance was a factor in conveying a positive attitude toward referral even if, as the caseworkers subsequently reported, the girls were uncertain and confused about the basis of their selection and expressed the fear that they were thought "crazy" or otherwise invidiously identified. The school's interest was emphasized to them by its willingness to permit them to go to YCS on school time and this, also, undoubtedly entered into the success with which referral was achieved. Whatever doubts the referred girls entertained, they did, for the most part, make contact with the agency. As the project proceeded, the referral and first contact procedures were modified; these will be described later when the agency's efforts are described. It is to be noted at this point, however, that of the 189 girls who completed the intake procedure, only 3 per cent failed to have at least one further service contact with a social worker at YCS. The median number of casework interviews or group counseling services that the experimental group had with YCS workers was 16.

Acceptance at the Agency

Just as the school had no choice, under the design of the project, with respect to which students it could refer to YCS, so, too, the agency relinquished its freedom to decide by its own

criteria which girls it wished to accept for treatment. Both accepted this restriction to protect the validity of the experimental results from unknown selective processes that would affect the equivalence of the experimental and control cases. In the interest of the preventive goal of the project, it is also to be noted that the agency agreed to accept clients without the overt presenting problems customary for its intake, which is a novel situation for a voluntary social agency. However, as will be indicated later when the treatment efforts as seen by the social workers and consultants are considered, it constituted not only a challenge but a fruitful professional experience.

From the standpoint of evaluative research, the requirement of arbitrary referral and acceptance created an experimental population that could be expected to differ in some ways from the usual clientele of the agency, but in what ways it was not possible to say. One might speculate that Vocational High students were less motivated to accept help than clients who came on their own initiative. However, adolescent girls were often seen by YCS under conditions not likely to encourage positive motivation. They frequently came with problems and difficulties that were serious and with attitudes resistant or even hostile to adult help. The arbitrary referrals from Vocational High might not have been as visibly in need of help as some of the usual clients of YCS. But, as previously indicated, the preventive objective of the project accepted this as the major question to examine. That is, could help given *before* problems were clearly visible prevent them from developing? It was not the effectiveness of the agency with its usual clientele that was in question but rather the effectiveness of its special effort with a determinate clientele that was to be examined through the experimental project.

The agency's procedures changed with experience as the adolescent girls referred through the school to the project continued throughout four years. The obligation to accept meant also the obligation to make contact and to try to offer appropriate services. These obligations were faithfully pursued and hence the caseworkers and group therapists took more than customary initiative to involve project clients. Again, such "aggressive case-

work" was in keeping with the objective of the agency when it undertook the project: to seek out clients with potential problems and treat them so that the potential would not be realized.

Administrative adaptations at YCS were also necessary. The most obvious consisted of increasing the staff. This entailed rearrangements of supervision and shifting of caseloads; it also entailed new arrangements with consultants. In a more subtle sense, it required reorientation of staff viewpoint with respect to approaches to clients, bases for determining treatment plans, and procedures of service. All these were modified as the project itself evolved; hence they represent not the customary activities of the agency but its special effort in a preventive project.

The most elusive aspect of the project, and the heart of the agency's effort, is the specification of what is meant by treatment. The analysis of what was attempted, the treatment philosophy and the procedures used, will be described later. In the initial plan for the project it was proposed that "treatment" be described more systematically than was the usual practice at YCS or other social agencies. The plan was described as follows in the research proposal:

> Services currently provided by YCS for adolescent girls include individual casework treatment and activity and interview group therapy. Appropriate treatment is determined on the basis of conferences between caseworker and supervisor (with psychiatric and/or psychological consultation where deemed necessary by the staff).
>
> Current procedure at YCS calls for the statement of casework goals in each case and the making of plans for casework or group therapy treatment. It is proposed to standardize this procedure so that the case record will be as explicit as possible as to the objectives and treatment intended.
>
> In addition, caseworkers will be asked to indicate for each case after each interview the nature of the activity which took place during the interview by means of a form (now under development) on which they can record, "How much attention and effort during the interview just completed was devoted to: . . . ," for example, establishing rapport or "transference," overcoming resistance, encouraging talk about problems, interpreting feelings, discussing practical problems, etc. Although this is a limited objectification of the casework process, it constitutes an advance over information now available about what caseworkers actually do for their clients.

Although the Casework Interview Checksheet was developed and used in a pilot study with other cases, and although it appeared to be a promising device for describing the interview process, it was not possible to carry out its routine use with the girls from Vocational High referred to the project. In the first place, the administrative problems of instituting and supervising the completion of this instrument after each interview could not be overcome. There was a limit to what could be reasonably expected of the caseworkers faced with so many other unfamiliar adaptations required by the project. Second, the treatment approach, after the first year and a half, shifted from individual casework to group and individual methods, especially for initial involvement and diagnostic purposes. The Casework Interview Checksheet was not adapted to group therapy.[6]

RESEARCH DATA OBTAINED FOR THE STUDY

With the focus of the research on evaluation of effectiveness by comparing referred and control samples, data on criteria of success and change were required. This section considers the kinds of information sought and the rationale for seeking them. Since the same sorts of data are also useful to provide knowledge about adolescents generally as well as about treatment efforts, some note will be taken of the potential use of the data for such purposes.

Criteria of Successful Preventive Treatment

The professional staff of Youth Consultation Service, the school officials, and the researchers were all well aware from the beginning of the project of the common difficulties of establishing criteria by which to test effectiveness of preventive efforts. Establishing such criteria, of course, is a central requirement for evaluative research. But criteria of success in social work, as in other helping and counseling professions, are often extremely vague and elusive. And in a preventive effort, with undifferentiated client problems and generalized treatment approaches, the problem of measuring success might be viewed as even more difficult.

The fact that the project had an experimental design imposed certain restrictions on the kinds of criteria that might be used. It was necessary that the criteria be applied with equal objectivity to the treated (experimental) and the untreated (control) samples. Therefore, judgments on the part of caseworkers of their own success, whatever other merits or deficiencies they may have as criteria, could not be directly used, since similar judgments would not be available for the control cases. It was theoretically possible to have clinical judgments of both samples made "blind" by outside social workers or clinicians but practically this was not possible with available resources. To rely on the judgments of teachers in the school as indications of success was also deemed unsatisfactory because of the possibility of biases. It was decided that caseworker assessments of the treated clients would be obtained and explored but not used as criteria. It was also decided that limited appraisals by school guidance personnel would be sought on all the girls in the cohorts included in the project. Although such judgments might contain biases (since girls referred to YCS would be known by the judges), they would provide uniform professional judgmental data on the total school population.

Another restriction on the type of criteria arose from the fact that the needs of the clients selected for preventive services were varied and of a general nature. The bases for selection of clients have been described earlier. It was not possible to match these general, perhaps almost intuitive, potential-problem indicators with their counterparts three years later. Since no clear diagnosis of disability or need was possible in a preventive effort, no measure of the absence or diminution of symptoms could be obtained. To use such a diagnosis as a baseline would, if it were possible at all, require extensive contact and observation of the control cases (as well as the treated cases), and this might in itself have an unknown effect.

In thinking of appropriate criteria, the key questions are: What sorts of behavior are we seeking to encourage or to prevent? What sorts of characteristics do we seek to develop in adolescent girls that will be more likely to promise a "normal," "healthy,"

or "nondeviant" future? Thus criteria were developed that would reflect appropriate current behavior of adolescent girls on the one hand, and "healthy" or "normal" personal characteristics on the other hand.

Criteria of appropriate behavior of adolescent high school girls can, at the least, be defined in the commonly expected performance of main social tasks of such girls: to complete their education without interruption and with maximum achievement in keeping with the school program; to conform adequately to school rules and to the norms of proper behavior out of school; to maintain suitable relationships with peers; to prepare for normal vocational and marital careers. Although these criteria can be stated positively, they must be measured negatively, since "normal" is usually a global range of behaviors the limits of which are known primarily by deviant or abnormal behavior. In the negative sense, "getting into trouble" is the general statement of failure and "not getting into trouble" is the inclusive statement of success.

Thus for experimental and control cases alike, information was obtained about *school performance and behavior*. Did the student finish school or drop out? Was she ever suspended or expelled from school? Was she "truant" from school? Did she pursue the vocational training program provided for her? Was her attendance at school good or poor? Was her school conduct satisfactory or unsatisfactory? Did she receive honors, awards, and good ratings for school service? Did teachers regard her as outstanding or as presenting a serious problem to them?

Some *out-of-school behavior* also is indicative of getting into trouble but this was more difficult to obtain without resources for an extended field follow-up. Out-of-wedlock pregnancy, however, was one event that became known to the school and represented unsatisfactory behavior and it was included among the criteria. Also, getting into trouble with police or becoming known through delinquent acts was a relevant negative behavioral criterion, and an effort was made to obtain information about this for experimental and control cases through use of the Social Service Exchange, in which contact with juvenile authori-

ties as well as social agencies is recorded. In general, it might be expected that out-of-school serious trouble for a girl would result in her removal from school or impairment of her school record so that school continuity was considered a reflection at least in part of out-of-school situation.

It may be asked whether such behavioral and objective criteria as these can be expected to reflect the type of treatment offered by an agency such as YCS. From one point of view, the agency is not directing its primary effort to achieving school continuity and good behavior. It is more likely to see itself as seeking to achieve optimal functioning, healthy personalities, satisfactory interpersonal relations, and the like. It can certainly be argued, however, that the latter are not ends in themselves but are basic to "normal and appropriate" living and hence the more objective criteria are minimum secondary objectives of treatment.

It may be asserted that for some adolescent girls "misbehavior," "acting out behavior," or even concrete acts such as truancy and dropping out of school are signs of growth and appropriate personality change under casework or other therapies. However, it can hardly be maintained that school dropout, truancy, out-of-wedlock pregnancy, and the like are desirable in general, and for a group of clients served by a social agency one would expect an effort to be made to achieve constructive psychological changes without such drastic intervening difficulties. At any rate, lack of educational success may be expected to have serious consequences for later life and increase in educational success may reasonably be assumed to be beneficial. A group of high school students who had been helped by a social agency ought to show more satisfactory school records.

In addition to objective differences such as those just discussed, adolescent girls who have been helped by social workers may be expected to differ in more personal ways from those who have not received help, if success is to be attributed to treatment. From the viewpoint of prevention, more positive attitudes toward the future, more confidence about meeting problems, more acceptance of social norms of behavior ought to be manifest. Likewise, indications of more balanced and less extreme person-

ality characteristics might be expected to promise less difficulty in the future life of the girl. Therefore, a set of what might be called *clinical criteria of success* is useful in assessing the effects of preventive treatment.

We are on uncertain ground when we attempt to state the characteristics of "healthy personalities"; nevertheless, it cannot be denied that casework and similar counseling services are directed toward enhancing such psychological good health. Therefore, we must at least seek to examine changes that occur and interpret them in the light of available clinical concepts of normality, effective functioning, and personal competence. From this point of view, a number of measures were introduced that could be examined in relationship to treatment and judged in terms of criteria of success.

Our measures included a general personality inventory, a projective test, and self-report indicators of social adjustment and attitudes. On some of these measures we sought to detect trends, or changes through time, and on others we sought only to discover if the treated experimental group differed from the control group and from the rest of the school population.

Two direct measures of *personality change* were used, the Junior Personality Quiz[7] and the Make A Sentence Test.[8] The JPQ is a questionnaire containing items that have been selected through factor analysis to reflect twelve personality dimensions. This personality test was expressly developed for use with young adolescents between twelve and sixteen years of age. Its dimensions have meaningful relationship in content to the more fully developed 16 Personality Factor Test that has been widely used in studies of adult personality.

One of the common criticisms of measures on such "objective" personality tests as the JPQ is that they will not be sufficiently "sensitive" to reveal changes that therapists say they "see" in their clients. It is sometimes asserted, for example, that paper-and-pencil questionnaires of self-report personality items, or preference statements, or value orientations will be so general that only superficial verbal responses are tapped. These might be relatively impervious to demonstrations of change even when

persons actually do change. Furthermore, such measures may, it is sometimes noted, have little relationship between personality and the behaviors on which the clinicians are focusing. Finally, it is sometimes held that socially expected responses are more readily given to questionnaire items than to projective test stimuli and hence systematically false presentations are provided, rather than valid representations of personality such as might be available with extended clinical interviewing.

With such considerations in mind, an alternative method of reflecting personality was sought. It appeared that the sentence-completion form had more advantages and fewer liabilities than other projective tests. Responses to sentence-completion test items are capable of content analysis by standardized techniques and such surface interpretation of content appears to be an important part of even the more subtle uses of projective tests. Other projective test approaches—the TAT and Rorschach, for example—appeared too demanding of language ability for group administration as well as prohibitive in individual administration. Therefore, the MAST was adopted after considerable developmental work. The scoring categories have been used reliably and have been shown to be correlated with apparently similar dimensions as measured by a number of objective personality tests.[9]

It may be argued that the type of treatment to which the adolescent girls referred to YCS were exposed cannot be expected to affect fundamental personality characteristics such as those presumably measured by these tests. Persons may not change basically from limited contact with social workers. This may very well be true but it is an open question and one on which light may be shed by examining these measures. Plausible differences to be expected from "healthier," "more normal," "less disturbed," "better functioning" persons may readily be hypothesized in terms of the categories of these tests and therefore they may suggest differences between treated and control cases that are in directions accepted as indicative of successful treatment.

It may also be argued that some changes in personality characteristics are normal concomitants of adolescent growth; that

this is a period of maturation most likely to see such changes. One of the advantages of a control group design is that it permits examination of changes that might be attributable to the different experiences of the treated adolescent girls when they are compared to the nontreated control sample rather than to maturation, selection, or other factors. Furthermore, when successive measures of each girl are taken through the years of the study, it is possible to examine "normal" changes as well, especially since the entire cohort is observed by use of the same tests and other instruments.

A more superficial level of change for successfully treated adolescent girls might be expected to be reflected in *general attitudes* toward themselves and their situations. Particularly relevant attitudes might be those concerned with self-assessment of difficulties, of felt capacity to handle their own problems, and of attitudes toward accepting help with their problems. A short questionnaire was included to permit the girls to rate how they felt, whether they felt better "now" than in the recent past, how well they were getting along with friends, schoolmates, and family, whether they felt they were bothered by many problems, and whether they felt that they would be able to take care of these problems in the future.

Although it might be meaningful to hypothesize the type of differential responses of successfully treated girls compared to the control group, it would seem preferable to examine changes and make comparisons on an exploratory basis because we have no norms of "healthier" or "more appropriate" responses. Further, in studying attitudes one must be especially cautious because of variations in verbal meanings and, even when meanings are certain, because of tendencies of respondents to give socially desirable or conventional responses. Nevertheless, examination of attitude differences may contribute to assessment of effects on the clients referred by Vocational High to YCS.

Special attention has been given to *attitudes toward dynamics of behavior* and the use and *value of getting help from others* when one has problems. Casework, like most efforts to counsel, seeks to develop some insight into feelings and the psychological sources

of a person's behavior. To succeed in doing this, caseworkers seek to establish a relationship with their clients and gradually to explore with them some of the less obvious aspects of their personalities. For adolescents, in particular, this would seem to be a crucial precondition of the kind of help YCS believed would be useful for girls with potential problems. It will be recalled that establishing contact and involvement in a relationship were most difficult with Youth Board referrals and hence a point of particular interest in this research. If girls who were clients of YCS expressed more self-understanding and more acceptance of efforts to help them, they might be considered benefited by the agency.

A questionnaire was constructed and administered to all girls in Vocational High during one year to detect such attitudes. Unlike the measures previously discussed, this questionnaire was used only once but at a time when the school population would contain the maximum number of YCS clients having contact with the agency. Thus comparisons could be made between experimental cases of varying periods of treatment and control cases and other high school girls.

A final inquiry into general attitudes, as well as future outlook by the girls, was made by having all senior girls complete a questionnaire about their plans, their confidence or worry about the future, and their judgment as to whether they had been helped outside of school in personal problems by designated "helpful persons," such as parents, friends, doctors, social workers, ministers, and the like. They were also asked about their employment plans and marital expectations. In addition, they were asked to assess their recent (last two or three years) troubles as compared to those of "most girls in school," and to write what they liked best and least about being in school.

Although it might be reasonable to expect girls who had been in contact with YCS for several years to give more positive responses to such questions, it was not hypothesized as to what differences, if any, between them and the control group might be found. It was thought preferable to interpret findings as they occurred. Nevertheless, it was assumed that the existence of even

some differences in a positive direction might be taken as an indication of success in treatment.

In addition to the objective criteria and the more clinical criteria that have just been described, another behavioral measure was sought that might possibly have some relationship to changes induced by treatment and hence become available as an interpretable criterion of successful preventive treatment. This was a general *sociometric questionnaire* asking the student to list classmates who are "friends of yours, whom you pal around with." Several alternative hypotheses bearing on successful treatment experience might be investigated with such sociometric data. First, it might be hypothesized that casework treatment might reduce perception of social isolation at school or increase gregariousness. Second, it might be hypothesized that the healthier girls would be more often chosen than those with more manifest problems. Third, the hypothesis might be proposed that composition of the friendship circle might change for successfully treated girls toward greater association with those showing positive rather than negative characteristics. Thus successfully influenced clients might be expected to have fewer "bad associates." In particular, changes through the years in the type of choices made and received might reflect trends in positive or negative directions that could be indicative of beneficial influence from YCS.

For reasons mentioned earlier, the *judgments of the social workers* of their own clients could not be taken as criteria of success with them. Nevertheless, in order to examine such judgments against the criteria that were used, the social worker with primary responsibility for each of the referred clients was asked to make a series of judgments as to the need of the client for help, the type and degree of involvement developed, and the amount of change perceived, including estimates of movement based on the Hunt-Kogan Movement Scale.[10] Social workers were also asked to make certain prognostic ratings about the future for each client. In addition to serving as indirect criteria of perceived benefit, such ratings would permit a subjective differentiation among the experimental cases on the basis of judgments of success. Hence

those clients seen most to benefit could be compared with those not thought to derive any good from it and with the control group. Such judgmental observations could also be compared with objective indicators of treatment, such as number of contacts with the agency.

Conclusion with Respect to Criteria of Successful Preventive Treatment

The viewpoint taken toward the crucial question of criteria of success is evident in the lengthy discussion of measures sought. To meet the lack of specificity in latent problems, the uncertainty as to definitive indicators of appropriate change and behavior, and the generalized treatment approach necessarily used, a wide range of objective, clinical, and behavioral criteria was used. It could not be expected that differences between the experimental group and the control group would be found for all, or even for many, of these varied criteria measures. But it was believed that at least some of them should detect the kind of effects that preventive efforts of social workers could produce.

OTHER DATA OBTAINED

It has been indicated that most data were collected in successive testing sessions for the entire school cohort. Specifically, the class of girls was tested (on all the research instruments) within the first month of their entry to Vocational High and subsequently during the last month of each school year that they remained in school. Thus for students entering the tenth grade and remaining through graduation in the twelfth grade, four sets of data were obtained. For students dropping out before their senior year, data were obtained for as many years as the time in the school permitted. Objective information from school records and from school personnel was obtained for all students who had entered, whether they completed the school years or not. Also, in the initial period of testing, certain information about all the students' family and home backgrounds was obtained.

NOTES TO CHAPTER II

1. A general description of the project, including the research design, appears in Meyer, Henry J., and Edgar F. Borgatta, "Social Agency and School as the Context for Studies of Mental Health: Research in Progress," *Social Work*, vol. 5, January, 1960, pp. 21–26.

2. See Meyer, Henry J., and Edgar F. Borgatta, *An Experiment in Mental Patient Rehabilitation*, Russell Sage Foundation, New York, 1959, pp. 34–45. As it turned out, the agency moved its location during the course of the present project but provision was made to meet referred clients in the neighborhood of the school.

3. From comments by Leonore R. Miller in a panel discussion (unpublished) on "Preventive Treatment for Adolescent Girls: A Pilot Project," at National Conference on Social Welfare, Atlantic City, June, 1960.

4. A few girls entering the ninth grade were also included, but the designated period of observation was three years.

5. Miller, Leonore R., *op. cit.*

6. A study of the casework interview process based on the use of the Casework Interview Checksheet was carried out in another social agency, which is reported in Meyer, Henry J., Edgar F. Borgatta, and David Fanshel, "A Study of the Interview Process: The Caseworker-Client Relationship," *Genetic Psychology Monographs*, vol. 69, 1964, pp. 247–295.

7. Test developed by R. B. Cattell, J. Beloff, D. Flint, and W. Gruen, Institute for Personality and Ability Testing, Champaign, Ill. For a description, see Cattell, R. B., and H. Beloff, "Research Origin and Construction of the I.P.A.T. Junior Personality Quiz: The J.P.Q.," *Journal of Consulting Psychology*, vol. 17, 1953, pp. 436–442.

8. Test developed by Edgar F. Borgatta and Henry J. Meyer. For description, see Borgatta, Edgar F., in collaboration with Henry J. Meyer, "Make A Sentence Test: An Approach to Objective Scoring of Sentence Completions," *Genetic Psychology Monographs*, vol. 63, 1961, pp. 3–65. Also Borgatta, Edgar F., and Henry J. Meyer, "The Reliability of an Objective Sentence Completion Scoring Technique," *Journal of Social Psychology*, vol. 58, 1962, pp. 163–166; Borgatta, Edgar F., "The Make A Sentence Test (MAST): A Replication Study," *Journal of General Psychology*, vol. 65, 1961, pp. 269–292.

9. Borgatta, Edgar F., in collaboration with Henry J. Meyer, *op. cit.*, pp. 27–46.

10. Hunt, J. McVicker, and Leonard S. Kogan, *Measuring Results in Social Casework: A Manual for Judging Movement*. Family Service Association of America, New York, 1950.

III. Social Characteristics of Potential Problem Girls Within the Total School Population

SINCE DESCRIPTIVE INFORMATION about the social characteristics of high school students is not commonly available, this chapter will describe the characteristics of the total population of girls attending Vocational High. It also has three other objectives: (1) to compare the segment of the student population designated as "potential problem cases" with the students not deemed to be potential problems, termed "residual cases"; (2) to compare the potential problem cases that were referred to Youth Consultation Service (identified as "experimental cases") with the potential problem cases that were not referred (identified as "control cases"); and (3) to note any changes in the characteristics of the samples of residual cases and of potential problem cases that might appear as a result of selective effects during the course of their high school careers.

The comparison of potential problem and residual cases is necessary in order to test the intention of the project to identify girls especially in need of social work services so that a random sample of them might be referred for help. Therefore, we shall be looking for differences between potential problem and residual cases. On the other hand, the design of the research called for initially similar experimental and control cases to be drawn from the pool of potential problem cases. Random assignment was the procedure chosen to achieve such similarity. A comparison of experimental and control cases will be a test of whether this procedure did, in fact, achieve initial similarity on those variables for which measures are available.

As cohorts of students go through their high school years, certain students drop out and the composition of the remainder

of the cohort may be selectively altered. Although not a primary objective of this research, it will be of some interest to observe any differences between the social characteristics of the girls who began their high school careers but dropped out and those who graduated. Such information has obvious bearing on the question of which girls drop out and which girls stay to graduate.

The development of the inclusive sample of girls involved in the research occurred in stages over a period of four years. Four consecutive entering cohorts of girls were utilized (1955 to 1958), and from each a pool of potential problem cases was designated. Entering students in each of these cohorts completed questionnaires and tests during the first month of school, in the fall of the year (September). They were subsequently retested the following spring during the last month of the school year (May or June) and each spring thereafter until the cohort had completed the three years of high school to graduation or until the project terminated. The following chart summarizes the development of the inclusive sample.

	Cohorts Entering School in the Fall of Each Year:			
Test Period	*1955*	*1956*	*1957*	*1958*
1955–1956				
Fall	First test			
Spring	Second test			
1956–1957				
Fall		First test		
Spring	Third test	Second test		
1957–1958				
Fall			First test	
Spring	Fourth test	Third test	Second test	
1958–1959				
Fall				First test
Spring		Fourth test	Third test	Second test
1959–1960				
Fall				
Spring			Fourth test	Third test

The first cohort (1955), used for developmental or pilot experience, was particularly concerned with the potential problem group, the suitability of research instruments, and the administrative arrangements necessary for the experiment. Com-

plete data collection was achieved for the potential problem cases of this cohort but certain background information was not obtained for the residual cases. The last cohort (1958) had completed only two of the three years of high school when the project terminated and, although data were obtained for the potential problem cases of this cohort that paralleled the other cohorts, this cohort differs from the earlier three cohorts in duration of the observation period in school. The second (1956) and third (1957) cohorts thus constitute the central sources of data to be described in this chapter, since these entire cohorts were tested at entrance and at each of the three subsequent end-of-year test periods. These cohorts represent two classes of students observed through all three years of high school. Information about the 1955 cohort will be utilized as a supplement when potential problem cases are compared with the residual cases from the two central cohorts. Data for residual cases in the 1958 cohort will not be used in this chapter since the full three-year period cannot be examined. In later chapters when experimental and control cases are compared, the potential problem cases from all four cohorts can be included.

BASIC COMPARISON OF POTENTIAL PROBLEM AND RESIDUAL CASES

The design of the experiment was predicated on the assumption that high school girls who constituted potential problem cases could be identified so that an experimental sample offered social work services could be compared with a control sample. In the sections of this chapter that follow, differences between the social characteristics of potential problem cases and those of the residual cases will be examined and comparisons made to support the basic assumption. However, there is one important criterion available to test whether this assumption was meaningful, namely, whether potential problem cases completed school to the same extent as the other girls in their cohorts. Using this criterion, it is dramatically clear that a smaller proportion of potential problem cases remained in school long enough to be present at the final test period at the end of their graduation year. Table 1

shows that 61 per cent of the residual cases as compared to 49 per cent of the potential problem cases were present at the final test period. The difference is statistically significant at the .05 level accepted for this study.

TABLE 1. POTENTIAL PROBLEM AND RESIDUAL CASES BY PRESENCE AT FINAL TEST

Presence at Final Test	Potential Problem Cases		Residual Cases	
	Number	Per cent	Number	Per cent
Present at final test	127	*49*	334	*61*
Not present at final test	134	*51*	212	*39*
Total	261	*100*	546	*100*

Thus the initial designation of potential problem cases may be viewed as a successful delineation of high school girls who are less likely to complete their high school careers and in this sense, at least, constitute girls for whom social work services would seem desirable. In other words, the girls identified as potential problems differed from the rest of the girls in their high school cohorts by dropping out of school in greater numbers, and hence can be said to constitute a special group.

The potential problem cases include both experimental and control cases but we will not discuss at this point any differences between them. It is to be noted, however, that if referral to YCS of the experimental cases had any effect on remaining in school until the final testing period, it is not sufficient to obliterate the difference implied in the initial division of girls into potential problem and residual cases.

ETHNIC COMPOSITION OF THE SCHOOL POPULATION

As previously indicated, the vocational school studied accepts students from all areas of the city but entrance is not necessarily representative of the ethnic composition of the city. Of more direct concern to our study is whether potential problem and residual cases differ in this respect. The relevant data are presented in Table 2.

TABLE 2. ETHNIC COMPOSITION OF POTENTIAL PROBLEM AND RESIDUAL CASES PRESENT AT FIRST AND FINAL TESTS

Ethnic Group	Potential Problem Cases			Residual Cases
	Experimentals	Controls	Total	
		(Per cent)		(Per cent)
First test				
White	*27*	*27*	*27*	*26*
Negro	*50*	*58*	*54*	*41*
Puerto Rican	*23*	*15*	*19*	*33*
Total	*100*	*100*	*100*	*100*
Number of cases	129	132	261	546
Final test				
White	*28*	*23*	*26*	*27*
Negro	*51*	*64*	*57*	*44*
Puerto Rican	*21*	*13*	*17*	*29*
Total	*100*	*100*	*100*	*100*
Number of cases	67	60	127	334

Approximately one-fourth of both the potential problem and the residual cases are white girls. Significant differences do occur, however, between the proportions of Negro and Puerto Rican girls in these two samples, with a greater proportion of Negroes and a smaller proportion of Puerto Ricans appearing in the potential problem group than in the residual group. The same ethnic composition is maintained at the final test, as indicated in the lower section of Table 2.

In the absence of further data, we may only speculate on the reasons that Negro girls are overselected and Puerto Rican girls are underselected among the potential problem cases. The population of the school as a whole, it should be noted, is disproportionately composed of nonwhite girls compared with the population of the city from which the students are drawn. Data from the 1960 census indicate that 14 per cent of the female population of New York City, fifteen to nineteen years of age, were Negro and 21 per cent were Puerto Rican, whereas the proportions in the total sample for the school are 32 per cent and 28 per cent, respectively. Even when the ethnic composition of the school sample is compared with the population of Manhattan—with its greater concentration of Negro and Puerto Rican families—there

is still a disproportionate number of nonwhite girls in the school. Evidently, the labor force of the industry for which this school offers vocational training attracts nonwhite female workers. What is of particular interest, however, is the unequal number of Negroes and Puerto Ricans among the potential problem and the residual cases. The higher rate of Negroes identified as potential problems may reflect some tendency to direct troublesome Negro girls to the trade schools as a measure of social control of deviant behavior. On the other hand, Puerto Ricans may be channeled into the school more explicitly to learn the trades and hence the less troublesome are so directed. These interpretations are compatible with the data but should not be mistaken for knowledge of actual selective factors that produce the differences indicated in the data.

Within the potential problem group, as between the experimental and control cases, there are only minor differences. The random selection procedure apparently equalized ethnic composition. This composition was maintained at the time of the final test.

Despite the overrepresentation of Negroes among potential problem cases relative to Puerto Ricans, a significantly greater proportion of Negro girls than Puerto Ricans remained in school through their senior year. Dropout was relatively greatest for Puerto Ricans, least for Negroes, and intermediate for white girls. (See Table 3.) This difference may well reflect, however, higher residential mobility of Puerto Ricans in New York rather than factors more directly concerned with school work or behavior.

TABLE 3. ETHNIC COMPOSITION OF POTENTIAL PROBLEM AND RESIDUAL CASES PRESENT AT FINAL TEST

Ethnic Group	Potential Problem Cases		Residual Cases	
	Number at first test	Per cent at final test	Number at first test	Per cent at final test
White	71	*47*	141	*62*
Negro	140	*51*	226	*65*
Puerto Rican	50	*44*	178	*55*
Total	261	*49*	545[a]	*61*

[a] Excludes one case whose ethnic designation was "other."

As might be expected from the disproportionate number of Puerto Rican girls among the residual cases, a significantly higher percentage of potential problem cases than of residual cases (71 per cent compared to 53 per cent) report English as the only language spoken in their homes. Conversely, 32 per cent of the residual cases compared with 19 per cent of the potential problem cases indicated that Spanish was spoken at home.

CHARACTERISTICS OF FAMILIES

High school students who have school difficulties have often been found to come from home backgrounds revealing greater disorganization and lower economic status, and differing in other ways from students not having difficulties. We may compare the potential problem cases among the population of high school girls in this study with residual cases on a number of family characteristics.

Presence of Parents in Home

As shown in Table 4, the percentage of potential problem cases with both father and mother present (56 per cent) is somewhat less than the percentage found for residual cases (63 per

TABLE 4. PRESENCE OF PARENTS OF POTENTIAL PROBLEM AND RESIDUAL CASES AT FIRST AND FINAL TESTS

Presence of Parents	Potential Problem Cases			Residual Cases
	Experimentals	Controls	Total	
		(Per cent)		(Per cent)
First test				
Both father and mother	*54*	*58*	*56*	*63*
Only mother	*40*	*36*	*38*	*28*
Only other persons	*6*	*6*	*6*	*9*
Total	*100*	*100*	*100*	*100*
Number of cases	129	132	261	546
Final test				
Both father and mother	*55*	*59*	*57*	*69*
Only mother	*37*	*38*	*38*	*25*
Only other persons	*8*	*3*	*5*	*6*
Total	*100*	*100*	*100*	*100*
Number of cases	67	60	127	334

cent), but this difference is not statistically significant. However, the proportion of potential problem cases in which only the mother is present (38 per cent) is significantly greater than the proportion among residual cases (28 per cent). Thus girls whose school records caused them to be designated potential problems came disproportionately from broken homes.

Between first and final test periods, selective processes were at work that evidently intensified this difference in family composition. Because disproportionate numbers of residual cases from homes with both father and mother present remained in school, the residual group differed significantly at the final test from the potential problem group in percentages from homes with both parents present as well as from homes where only a mother was present. (See Table 4, lower section.) For residual cases, but not for potential problem cases, absence of both father and mother is positively related to leaving school. One may speculate that in the constellation of factors related to dropout, broken homes play a greater part when girls are not already visibly headed for trouble, whereas other factors have greater effects on girls identifiable as potential problems. It should be remembered, however, that the latter drop out disproportionately (see Table 1) despite the selective effect of broken homes on residual cases.

As would be expected from the random selection procedure, there are no significant differences at first or final test period between experimental and control cases with respect to the presence of parents in the home.

Family Extension

Girls designated as potential problem cases show a somewhat greater likelihood of coming exclusively from nuclear families, whereas residual cases come disproportionately from extended families. Although not a statistically significant difference, 79 per cent of the potential problem cases as compared to 73 per cent of the residual cases reported that they lived only with their nuclear families. This difference is worth noting in view of a common expectation that the nuclear family constitutes a superior setting

for the type of parental supervision and control that is thought to be related to educational success. If the finding here were borne out in additional study, it would support the hypothesis that presence within the home of additional adults in the extended family may deter, rather than encourage, behavior likely to result in identification as potential problem. It might be suggested that the simple addition of adults adds weight to parental values, or that the structure of the extended-family home protects adolescents from influences leading toward potential problems.

There are negligible differences in family extension between first and last test periods, and between experimental and control cases.

Size of Household

The size of household, independent of family type involved, is approximately the same for potential problem and residual cases. The former reported an average size of 5.32 members present in the household and the latter reported an average size of 5.35. No differences of a systematic or meaningful nature were found in size of household between girls who stayed in school and those who dropped out, nor between experimental and control cases.

Sibling Structure

The average number of siblings living at home with potential problem cases was 2.51 and the average for residual cases was 2.31. This small difference is not statistically significant, although it is consistent with the suggestion that potential problem cases might be more likely to occur in families where available resources for supervision and control have to be spread over more children. No differences were found in number of siblings at home of girls who remained in school and those who dropped out before the final test period.

One finding became obvious in examination of the data on sibling structure. For both potential problem and residual cases, the number of younger siblings living with the family is significantly larger than the number of older siblings reported. The potential problem cases indicated an average of .86 older siblings

and 1.65 younger siblings, and the residual cases reported .87 and 1.44, respectively.

Although it may be tempting to speculate that the effects of a different structural position predispose older children to attend vocational school, the explanation is more simple and direct. The question as asked creates an artifact of data collection, since older siblings are those not likely to be living at home and so were not enumerated.

Family Housing

On the single measure of housing for the samples in the study—number of rooms per person—there were no significant differences between potential problem and residual cases, between cases remaining in school and those dropping out before the final test period, or between experimental and control cases. Of the residual cases, 45 per cent reported one or more rooms per person compared to 43 per cent of the potential problem cases.

SOCIAL AND ECONOMIC LEVELS OF FAMILIES

We may examine first the employment and occupational characteristics of the families in the school samples of this study. Then we shall examine educational level.

Employment

Somewhat more of the residual cases than of the potential problem cases reported two or more employed persons in their households. There were 46 per cent of the former and 40 per cent of the latter, but the difference is not statistically significant. Almost equal proportions (16 per cent for residuals and 17 per cent for potential problem) reported no employed persons. Therefore, slightly more of the potential problem cases (43 per cent) than of the residual cases (38 per cent) had one employed person in the household. Thus the two major divisions of the school population do not appear to be greatly dissimilar in this respect.

With respect to employed persons in the household, however, a significant difference was found between the experimental and

control cases within the potential problem group. The proportion of control cases was 49 per cent with two or more employed persons, whereas only 33 per cent of the experimental cases so reported. Proportionately fewer of the control cases came from households where there was only one or no employed person. Since selection of experimental and control cases was random, no explanation can be given for the difference between them other than random error. It is necessary, however, to note such differential characteristics when they occur.

Occupational Level

Table 5 shows the occupational levels of the samples in the study. It is apparent that only small (and statistically insignificant) differences occur between potential problem and residual

TABLE 5. OCCUPATIONAL LEVEL OF FAMILIES OF POTENTIAL PROBLEM AND RESIDUAL CASES AT FIRST TEST

Occupational Level	Potential Problem Cases			Residual Cases
	Experimentals	Controls	Total	
	(Per cent)			(Per cent)
Professionals, proprietors, managers, officials	*1*	*4*	*3*	*5*
Clerks, salesmen and kindred white collar workers	*9*	*8*	*8*	*8*
Skilled workers	*12*	*13*	*13*	*15*
Semi-skilled: factory workers	*17*	*16*	*16*	*23*
Semi-skilled other than factory workers	*22*	*20*	*21*	*19*
Unskilled, common labor	*8*	*5*	*7*	*7*
Domestic and personal service	*9*	*7*	*8*	*2*
Not employed	*22*	*27*	*24*	*21*
Total	*100*	*100*	*100*	*100*
Number of cases	129	132	261	496[a]

[a] Excludes 50 cases for whom occupation was unknown.

cases. What differences there are suggest that the level of potential problem cases is somewhat lower than that of residual cases. Thus higher proportions in the levels of semi-skilled factory workers and above tend to be associated with residual cases, whereas the lower levels appear slightly associated with potential problem cases.

As a whole, the population of the study is clearly from working-class occupational backgrounds, and probably more from less skilled and lower income occupations than skilled work. A little more than one-fifth of the heads of households were reported as not employed; in all probability these families depend on irregular employment or public sources of support. The occupational level is in keeping with what one would expect for the students of a vocational school.

Educational Level

The high school girls involved in this study had already attained higher educational levels than most of their parents, as might be expected with a working-class background and a high proportion of Negro and Puerto Rican families. Thus as Table 6 reveals, approximately one-third of both fathers and mothers had only elementary schooling, another third had some high school, and the remaining third are reported as having a high school

TABLE 6. EDUCATIONAL ATTAINMENT OF FATHERS AND MOTHERS OF POTENTIAL PROBLEM AND RESIDUAL CASES AT FIRST TEST

Educational Level Attained	Potential Problem Cases			Residual Cases
	Experimentals	Controls	Total	
		(Per cent)		(Per cent)
Mothers				
Elementary school only	*38*	*42*	*41*	*30*
Some high school	*29*	*28*	*28*	*34*
High school graduate or more	*33*	*30*	*31*	*36*
Total	*100*	*100*	*100*	*100*
Number of cases	129	132	261	463[a]
Fathers				
Elementary school only	*39*	*45*	*42*	*34*
Some high school	*26*	*28*	*27*	*34*
High school graduate or more	*35*	*27*	*31*	*32*
Total	*100*	*100*	*100*	*100*
Number of cases	129	132	261	405[b]

[a] Excludes 83 cases for whom educational attainment of mother was unknown.

[b] Excludes 141 cases for whom educational attainment of father was unknown.

education or more. This educational background for the high school students is by no means unusual in American society where the general trend has been for succeeding generations to receive more education than preceding ones. However, it may be noted that two-thirds of the parents did not finish high school and therefore represented models of educational attainment lower than that expected of the girls in the study, namely, that they complete their high school education.

The educational level of the parents of potential problem cases is somewhat lower than that of residual cases. The difference is most evident in the proportions reported as attaining only elementary school level where it is statistically significant for mothers but not quite significant for fathers. It is probably justifiable to say, therefore, that potential problem cases are drawn from somewhat lower educational backgrounds than residual cases.

No meaningful differences were found between parental educational backgrounds of girls who stayed in school through the final test period and those who dropped out.

Although control cases had somewhat lower parental educational backgrounds than experimental cases (see Table 6), the differences are not statistically significant.

So far as family members might represent educational models for the girls involved in this study, the educational attainment of older siblings is of interest. The girls were asked to indicate how much schooling their oldest sibling had completed, regardless of whether the oldest brother or sister was presently living in the household. As may be noted in Table 7, most of the girls (94 per cent of the potential problem cases and 92 per cent of the residual cases) reported that an older sibling—if they had one—had at least some high school education. About two-fifths (41 per cent of the potential problem cases and 45 per cent of the residual cases) reported that their oldest brother or sister had at least finished high school. The difference between potential problem and residual cases, favoring the latter, is not significant. The somewhat larger difference, favoring experimental cases (44 per cent high school graduates or more) over control cases (39 per cent),

TABLE 7. EDUCATIONAL ATTAINMENT OF OLDEST SIBLINGS OF POTENTIAL PROBLEM AND RESIDUAL CASES AT FIRST TEST

Educational Level Attained	Potential Problem Cases			Residual Cases
	Experimentals	Controls	Total	
		(Per cent)		(Per cent)
Elementary school only	*3*	*8*	*6*	*8*
Some high school	*53*	*53*	*53*	*47*
High school graduate or more	*44*	*39*	*41*	*45*
Total	*100*	*100*	*100*	*100*
Number with older siblings	61	89	150	287
Number with no older siblings	68	43[a]	111[a]	259[b]

[a] Includes 3 cases for whom information was not available.

[b] Includes 12 cases for whom information was not available.

indicates some selective effect within the potential problem group but the difference is not statistically significant. No significant differences were found with respect to educational attainment of oldest siblings of girls who remained in school and those who dropped out.

An indirect comparison may be made between the educational success of girls in this study and that achieved by their parents and oldest siblings. All of the girls in the study had entered high school and their success in finishing school can be compared to the success of parents and oldest siblings who at least entered high school. In this way both intergenerational and intragenerational models of educational achievement available in their nuclear families can be examined. Such comparisons are presented in Table 8.

Of the potential problem cases, approximately the same proportion of girls completed high school (remained through the final test period) as the proportion of their mothers who had some high school education but did not stay to graduate. A significantly larger percentage of potential problem girls than their fathers who had ever attended high school (49 per cent and 34 per cent, respectively) did finish. Furthermore, more of these girls than of their oldest siblings (49 per cent compared to 44 per cent) finished high school, but the difference is not statistically significant. Thus once having entered high school the potential

TABLE 8. SUCCESS IN ACHIEVING HIGH SCHOOL GRADUATION OF POTENTIAL PROBLEM AND RESIDUAL GIRLS, COMPARED TO THEIR MOTHERS, FATHERS, AND OLDEST SIBLINGS WHO HAD AT LEAST SOME HIGH SCHOOL EDUCATION

Educational Level Attained	Potential Problem Cases				Residual Cases			
	Girls	Mothers	Fathers	Oldest Siblings	Girls	Mothers	Fathers	Oldest Siblings
	(Per cent)				(Per cent)			
Some high school	*51*	*48*	*66*	*56*	*39*	*49*	*52*	*51*
High school graduate or more	*49*	*52*	*34*	*44*	*61*	*51*	*48*	*49*
Total	*100*	*100*	*100*	*100*	*100*	*100*	*100*	*100*
Number of cases	261	155	107	141	546	323	267	264

problem girls exceeded their fathers and oldest siblings and approximately equaled their mothers in achieving graduation.

The girls who constitute the residual cases, on the other hand, show significantly greater educational achievement than the other members of their families (mothers, fathers, and oldest siblings) who had ever entered high school. Approximately one-half of the other family members, compared to three-fifths of the girls, were reported as high school graduates or more.

The educational achievement of the girls in the samples when compared to their oldest siblings is probably somewhat understated in these data. Some of the oldest siblings may still have been in high school at the time their educational attainment was reported by their younger sisters. It is unlikely, however, that a substantial number of girls had older brothers or sisters still in high school when they entered. Since it is generally observed that boys drop out of high school in greater proportion than girls, one must only with caution conclude from the data that the proportion of girls in our samples who succeeded in finishing high school exceeded that of their older siblings. It is likely that they exceeded their oldest brothers and equaled their oldest sisters but our data do not allow us to examine this hypothesis directly. The difference between girls and oldest siblings among the residual cases is great enough to suggest that perhaps these girls do exceed both brothers and sisters. Since residual cases, by design of the re-

search, exclude girls thought to have potential problems, such a difference would not be surprising.

When potential problem and residual cases are compared, the most noticeable difference (aside from that between the girls themselves) is between the percentage of fathers of residual cases and that of fathers of potential problem cases; 48 per cent of the former compared to 34 per cent of the latter are reported to be high school graduates or more, a statistically significant difference. The effect of this difference as an example of educational achievement set by their fathers would not seem to be substantial, however, since girls among the potential problem as well as the residual cases exceed their fathers to approximately the same extent.

The upward educational mobility of the girls among the residual cases is unmistakable but it must be remembered that this is a sample from which girls with potential problems have been removed. Upward educational mobility of girls among the potential problem cases is limited to their achievement in comparison with their fathers. They approximately duplicate the achievement of their mothers and probably of their oldest siblings as well. Except for the fathers, the educational models in the nuclear family represented in these data are approximately the same for potential problem and residual cases. Factors other than the example set by high school graduation of nuclear family members would seem to account for the lesser achievement of potential problem cases. Upward educational mobility is normally expected in American society. We may speculate that personal life histories and greater deprivations of other kinds, perhaps associated with greater proportions of Negroes among the potential problem cases, have inhibited such mobility. We cannot confirm such a speculation from our data. It is quite clear, however, that relative to the achievement of high school graduation by nuclear family members once they had entered high school, the potential problem cases achieve less than the residual cases.

We may summarize the available data on family characteristics by noting that potential problem cases, compared to

residual cases, tend to come from Negro families but not from Puerto Rican families, from homes in which only the mother is present, from somewhat lower occupational and educational levels. No important differences appear with respect to these variables between girls who dropped out of school and those who remained through their senior year. Except for a greater proportion of families with two or more persons employed among the control cases, the experimental and control cases are essentially similar. Potential problem cases at least equaled their parents and oldest siblings in educational attainment, and residual cases exceeded them.

REPORTED HOME SITUATIONS AND FEELINGS ABOUT SELF OF POTENTIAL PROBLEM AND RESIDUAL CASES

The description of the backgrounds of the high school girls involved in the research in the preceding sections has utilized demographic and social characteristics found in many sociological studies to be related to various aspects of social and personal disorganization. Thus ethnic background, occupational level, family size and composition, and educational attainment are variables that usually differentiate segments of urban populations in which disproportionate incidence of school retardation and dropout, delinquency, poor mental health, dependency, and other social and personal problems are found. These variables, in one degree or another, constitute the indicators of what is often abbreviated by the designation "lower social class." It is assumed that such a position in the class structure of American society indicates limited attainment of styles of life deemed "normal" by middle-class standards and, hence, lower-class position exposes its members to the attention of official and unofficial agencies of social control and amelioration. It is not surprising, therefore, that the girls identified as potential problems should generally come from backgrounds that may be considered somewhat lower in socioeconomic status than the rest of their high school peers who constitute the residual cases. That the difference is not more evident is perhaps due to the fact that the entire population involved is primarily from working-class backgrounds.

Lower-class status is sometimes assumed, as well, to signify differential subcultures. In the context of socialization experiences these are assumed to result in different attitudes and personality characteristics. Under the further assumption that such differences are related to adequate personal and social functioning, social work agencies often seek to deal with them. Attitudinal and personality characteristics, seen as individualized in each person, are deemed to be not only crucial factors in the problems such clients present but they are usually considered to be accessible to the techniques of social work. It is therefore of interest to compare potential problem cases in this study with residual cases on such characteristics, to the extent that our data permit.

Girls' Perceptions of Aspects of Their Home Situations

At the time of their first test period, all girls were asked four questions about aspects of their home situations believed to be especially important for adolescents. These questions were necessarily general, subject to the limitations of the test situation, but they sought to reflect the girls' sense of affective cohesion of the home, their perception of the discipline they were subject to, and their feeling of independence.

Sense of Affective Cohesion. The girls were asked: "Do you think that people in your home feel very close to one another or does each one go his own way?" Responses of residual cases indicated a sense of somewhat closer feeling in the family than responses of potential problem cases, but the difference was not statistically significant. As Table 9 shows, 58 per cent of the residual cases compared to 53 per cent of the potential problem cases reported, "We are very closely tied together," the extreme response category available. Only 10 per cent of both groups indicated that family members "fairly often" or "always go their own way."

A more substantial difference, not quite statistically significant, appears between experimental and control cases. Forty-seven per cent of the former compared to 59 per cent of the latter reported people in their homes as "very closely tied together."

Perception of Discipline. When asked: "How does your family treat you at home about the things you are supposed to do?" the

TABLE 9. SENSE OF AFFECTIVE COHESION EXPRESSED BY POTENTIAL PROBLEM AND RESIDUAL CASES AT FIRST TEST

"Do you think that people in your home feel very close to one another or does each one go his own way?"	Potential Problem Cases			Residual Cases
	Experimentals	Controls	Total	
		(Per cent)		(Per cent)
Very closely tied together	*47*	*59*	*53*	*58*
Fairly closely tied together	*42*	*33*	*37*	*32*
Each goes own way fairly often or always	*11*	*8*	*10*	*10*
Total	*100*	*100*	*100*	*100*
Number of cases	129	132	261	545[a]

[a] Excludes one case for whom information was not available.

potential problem cases saw themselves somewhat more "pushed" and "punished" but, once more, the difference was not quite statistically significant. Of the potential problem cases, 40 per cent compared to 34 per cent of the residual cases checked the categories, "They push me and punish me severely if I don't do them" or "They push me and punish me at first, but then let up." Thus the potential problem group reported that they were somewhat more often disciplined than the residual group. But for both groups, more than half reported that their families "remind me about (things I am supposed to do) but don't do much else."

When compared to the experimental cases, the control cases also reported they were more often disciplined but the difference between the two groups was not large.

Sense of Independence. Two questions were asked relating to a sense of independence in the family situation and on neither were the differences between the responses of potential problem and residual cases significant. To the question: "At home, does your family decide important things for you or do you make the important decisions that affect you by yourself?" 12 per cent of the potential problems and 11 per cent of the residuals reported: "My family decide these things." Most of the girls (61 per cent of the potential problems and 65 per cent of the residuals) reported "My family mostly decide but they talk to me about them."

The other question bearing on independence concerns sources of spending money. The same proportion of both potential problem and residual cases (59 per cent) reported that they got spending money "From my family when I need it." "Regular allowances" were reported for approximately the same proportions of potential problem and residual cases: 28 per cent of the former and 32 per cent of the latter. Relatively few of either group got their spending money by working or indicated that they "really don't have any spending money."

For neither of these questions were there statistically significant differences between experimental and control cases or between girls who stayed in school and those who dropped out.

At least insofar as these questions could detect them, the aspects of home life considered do not appear different for the potential problem and the residual cases. On the whole, both groups see their families as closely tied together, as exercising only mild discipline, and themselves as fairly dependent on the family for important decisions and for spending money. This is the situation that would reasonably be expected for girls of fourteen or fifteen years of age.

General Feelings About Self and Others

A series of questions asked how the girls felt, how they thought they were getting along with friends and family, whether they felt they had problems that were bothering them, and whether they felt they could take care of their problems in the future. These questions were not intended to probe deeply into the girls' perceptions of their own situations; the operational restrictions on the research precluded more extended inquiry. But it was considered useful to obtain a general sense of how the girls felt things were going so that any changes in such feelings could be noted as a result of treatment by social workers.

Approximately three-fifths of the potential problem and of the residual cases answered that they were getting along "very well" with their families and with their friends, people they work or go to school with, and other acquaintances. What slight differences there were showed residual cases less likely than potential problem cases to report that they were getting along "not too

well" or "not well at all." Nine per cent of the potential problem group so reported as compared to 5 per cent of the residual group (not a statistically significant difference).

To the direct question: "Generally speaking, how do you feel?" almost exactly half of the potential problem and of the residual cases answered "excellent" or "very well." Once more, however, potential problem cases tended more than residual cases to report negatively even though the difference between the two samples did not achieve statistical significance. Thus 13 per cent of the potential problem cases compared to 8 per cent of the residual cases said they felt "not too well" or "not well at all." Similarly, the same difference was found in the negative responses of "a little bit worse," "worse," or "much worse" in reply to the question: "Do you feel better than you did about two months ago?" These replies were given to that question by 15 per cent of the potential problem compared to 10 per cent of the residual cases. Proportions were essentially equal (70 and 71 per cent, respectively) between these groups for those feeling "much better" or "better" now than about two months ago.

Potential problem and residual cases were almost identical in responses to the question: "Do you feel you are going to be able to take care of your problems all right in the future?" Approximately three-fifths of each sample said they would be able to take care of their problems "very well" or "satisfactorily" and about one-seventh said they would have "a little trouble" or "a lot of trouble." Nevertheless, a greater percentage of potential problem than of residual cases indicated that they had "a great many" or "quite a few" problems that were bothering them. This statistically significant difference is shown in Table 10.

Considering all these self-attitude questions together, we may conclude that potential problem cases tended to see themselves with respect to their feelings, associations, and sense of having problems somewhat more negatively but by no means dramatically so. One should perhaps not expect marked differences in replies to such direct, undisguised questions but the differences that did appear may indicate the utility of self-prognostic reports —particularly when they are at the negative extreme. In any

TABLE 10. SELF-REPORT ON PROBLEMS BOTHERING POTENTIAL PROBLEM AND RESIDUAL CASES AT FIRST TEST

"Do you have a lot of problems that are bothering you?"	Potential Problem Cases			Residual Cases
	Experimentals	Controls	Total	
		(Per cent)		(Per cent)
A great many problems	*12*	*9*	*11*	*6*
Quite a few problems	*19*	*16*	*18*	*14*
A few problems	*37*	*38*	*37*	*40*
Hardly any problems	*32*	*37*	*34*	*40*
Total	*100*	*100*	*100*	*100*
Number of cases	129	132	261	521[a]

[a] Excludes 25 cases for whom information was not available.

event, it appears that high school girls selected because their school records suggested potential problems confirm the selection in their self-appraisals. They tend to show a subjective counterpart to the lower socioeconomic level found to characterize their backgrounds.

Experimental and control cases did not differ significantly in their responses on any of these attitude questions, nor were any significant differences found between girls who remained in school through the fourth test period and those who dropped out.

PERSONALITY TEST MEASURES OF POTENTIAL PROBLEM AND RESIDUAL CASES

The major descriptive measure of personality used in the research is the IPAT Junior Personality Quiz (Cattell). The JPQ was administered both to potential problem and to residual cases at every test period. Therefore, it provides comparative data for these populations; in addition, it allows us to examine changes over a period of time. Here we shall be mainly concerned with significant or suggestive differences or trends rather than with consequences of the experimental intervention, although the latter will be noted when they appear in the data.

The JPQ was selected because it appeared to be the best available instrument developed for the age group involved, having some validation data and experience in its use reported in published form. The subtests of the instrument are based on

factor analytic study and were especially developed for high school students. The subtests have been reported to be generally parallel in structure to factors in the IPAT 16 Personality Factor Test at the adult level. In addition, the manifest content of most of the factors appears to be particularly relevant for our study of a high school population.

In order to convey the nature of this test and our reasons for choosing it, we quote at some length from that section of the handbook on the JPQ entitled "What the Test Measures":[1]

> The need for an effective, penetrating measure of personality in the preadult, middle-childhood age range has always been very great. Notably, in clinical psychology, we need to know the personality resources of the child-in-a-quandary and to measure reliably his progress under therapy. Again, in modern education, we are concerned to analyze and predict progress with respect to more than is encompassed by measures of achievement or scholastic achievement alone. . . .
>
> However, unless the various measures used are concerned with what is psychologically real, functionally unitary, and practically important, the test is a mere toy. It is only recently that factor analytic research in personality has extended to the childhood range and produced tests systematically related to independent traits. The present questionnaire is, indeed, the first practicable, standardized, routine measuring tool resulting from basic research which has related questionnaire factors to rating factors and to objective test factors, in child personality.
>
> As a questionnaire it partakes of some of the weaknesses of the inventory method. . . . But it also has advantages: principally that it can be used in those frequent situations where shortage of time or professional help preclude the apparatus and time requirements of objective tests. Besides, when properly designed and validated a *factorized* questionnaire avoids most weaknesses of the older inventories. It does not take introspective answers at their face value, e.g., by assuming that when a child *says* he is shy he *is* shy, but treats them as behavioral responses to be validated by correlation with observed social behavior and objective test factors.
>
> As to the nature of the actual personality dimensions incorporated in this questionnaire . . . essentially they are those already familiar as the "primary personality factors" of Emotional Stability or Ego Strength, Dominance vs. Submissiveness, High Intelligence vs. Low Intelligence, Surgency vs. Desurgency (the principal factor in so-

called "extraversion"), Cyclothymia vs. Schizothymia, Will Control, Nervous Tension, and Emotional Sensitivity. The deliberately comprehensive sampling of personality responses in the original research has ensured that no important aspect of the total personality has been omitted in these factors. For the JPQ is meant to be an all-purpose analytical tool, dealing with the essentials of personality as they show themselves alike in guidance, education, clinical diagnosis, and clinical treatment.

Some overbusy psychologists may initially be disinclined to a test that requires the calculation of twelve separate subscores. But . . . research indicates that the real complexity of personality is such that most prediction situations require specially weighted scores of many different factors. . . . The psychologist does a better job by respecting this complexity than by indulging in the fool's paradise of oversimplification shown in much direct test-to-criterion "prediction."

The same form of the test was used at each test period even though there was some danger that students might remember some of their earlier responses. This danger seems minimal, however, when a test of this length is repeated with at least eight months and usually a year intervening. Scores utilized in analysis of the test data were standardized according to the instructions of the test manual and all comparisons and statistical operations have been carried out using the standardized scores. The meaning of each factor will be briefly described before findings concerning the factor are presented.

It is the assumption of the test and a premise of the approach of this research that all the components of personality measured by the subtests of the JPQ are relevant. Therefore, findings with respect to each factor will be considered here. Since we are primarily concerned, however, with differences between potential problem and residual cases, and with any selective or time changes evident in the data, we shall present first those factors in which differences are evident. Brief notice can then be taken of the remaining factors.

1. Emotional Sensitivity vs. Toughness

According to the test manual, when a person is high on this score he is ". . . sensitive, imaginative, timid, friendly, soft-

hearted, kindly, preferring adventures in imagination to those in fact." The low score is associated with ". . . toughness, emotional hardness, practicality, independence, and lack of artistic feeling."

When we compare the scores of potential problem and residual cases, we find scores of 5.00 and 5.49, respectively. Thus potential problem cases are more associated with the "toughness" pole of this factor, and the difference is statistically significant. Apparently, the selection of potential problem cases from their school records also identified girls exhibiting "toughness," "emotional hardness" as personality concomitants of school behavior. Perhaps this characteristic is associated as well with the differential backgrounds from which the potential problem girls come.

No differences were observed between experimental and control cases at first or at last testing and no differences were found between girls who remained in school and those who dropped out.

The test manual notes that emotional sensitivity tends to decline with age and in our data such a trend is quite clear. For the 127 potential problem cases available for first and fourth tests there is a statistically significant decrease in this score between the two time periods covering three high school years. A smaller but not statistically significant decrease is also noted for residual cases, and the data are parallel when experimental and control cases are examined separately. Thus in every comparison, the decrease in score with increase in age is visible, suggesting that as the school population gets older its responses on this personality test become more associated with "toughness" and "practicality" and less associated with "sensitivity" and "timidity." From a common-sense viewpoint, this is a plausible change accompanying increasing experience during the high school years.

2. *Impatient Dominance*

According to the test manual, a person who scores high on this factor is ". . . impatient, quick to anger, slow to calm down, unable to tolerate differences of opinion with others. . . ." The manual indicates that the factor is not well defined and may be

subject to refinement with further research, so that any interpretation of it should be provisional.

In our data, the potential problem cases score significantly higher on this factor than the residual cases (4.96 compared to 4.22). Insofar as we may legitimately interpret this finding with the reservation already noted, the association of the characteristics of the high scorer on this factor with girls who have been selected because their school records indicate potential problems is reasonable.

No time trends appear in the data on this factor, nor are differences found between experimental and control cases either initially or at the conclusion of the experiment.

3. *Socialized Morale vs. Dislike of Education*

The test manual states that "children *high* on this factor are fond of school and all that goes with it, quick to accept cultural standards, and attentive and friendly to their associates. . . . The *low* scoring individuals dislike learning, feel they are badly treated, and have a surly reaction to authority and to associates." The content suggested in the description makes it particularly relevant for the type of study we have undertaken. The manual also notes that there may be some decline in this factor on entering adolescence but the age reference of adolescence is not clear and therefore any time trends in our data must be interpreted cautiously.

Residual cases are significantly higher in scores on this factor than potential problem cases (4.75 compared to 4.03). Since the selection procedures were designed to divide the school population into those more and those less successful in school, this difference between the two groups is not unexpected. Girls noted as likely to get into trouble at school would reasonably be expected to exhibit the negative orientations characterizing the lower scores of the factor.

The only other finding of note on this factor relates to the difference between girls who remain in school and those who drop out. When the initial score of those among the potential problem cases who drop out before a second testing ($N = 30$) are compared with those who were present for at least a second test ($N = 231$),

the latter are significantly higher on this factor (3.07 and 4.16, respectively). Other differences in the same direction, though not statistically significant, are found when other comparisons are made between "dropouts" and "successes." The data also suggest that the scores on this factor tend to decline with increasing age but differences are relatively small.

Thus the findings on this personality variable appear to correspond generally to expectations, although not at a level of statistical significance in every instance. Persons who drop out of school seem to exhibit more dislike for learning and surly reactions to school than those who remain, and there appears to be a slight decline in such an orientation as time passes. It should be noted that this time trend does not occur among the residual cases; their somewhat higher scores—indicating more fondness for school—remain relatively constant.

4. Energetic Conformity vs. Quiet Eccentricity

According to the test manual, the person who scores high on this factor ". . . is lively, goes along with the group, is a good mixer, has 'cheap' interests, and does not think much for himself. The low scorer is eccentric, likes to think on his own, has more thoughtful tastes, and reports fatigue and slowness in action." This appears to be a somewhat complicated variable and neither end of the dimension can be taken on face value as necessarily a more favorable personality characteristic in terms of the interests of this study.

However, potential problem cases are significantly higher (4.52) than residual cases (4.08) in scores on this factor. The implication is that the former are more likely to respond to others rather than determine their own behavior, and this is not an unlikely characteristic of girls who may be headed for difficulties.

One time trend that appears in the data is the statistically significant difference among the residual cases between scores at first and last tests, with the latter being higher. Since a similar shift is not found for potential problem cases, interpretation is uncertain. The manual notes "a slight but significant rise at adolescence" for this factor. It is possible that potential problem

cases are somewhat more precocious than residual cases and the time trend of the latter may represent a reduction in the lag between the two groups.

5. *Will Control vs. Relaxed Casualness*

"The high scoring child," according to the test manual, "is self-controlled, orderly, inhibited, persistent, and punctual. . . . [The factor] is presumably associated with more parental attention to behavior standards and character training."

The scores for residual cases are slightly higher than those of potential problem cases on this factor, but the difference is not statistically significant.

Time changes are more evident in the data. There are statistically significant shifts for residual cases (N = 334) and for experimental cases (N = 67), but not for control cases (N = 60), between the first and the fourth tests. (At the first and fourth tests, the scores for residual cases are 4.95 and 5.72, respectively; for experimental cases, 4.63 and 5.24.) It would appear that, during their high school years, the girls selected as potential problems but not provided with therapeutic services (control cases) do not gain more self-control, persistence, and the other characteristics of this factor, whereas similar girls who had access to the therapeutic program do acquire more. Before interpreting this finding as an effect of therapeutic intervention, however, we must note that a similar effect is observed for girls who were not identified as potential problem cases (that is, residual cases). In this instance, the change must be attributed to maturation alone. Exposure to social work services would seem, therefore, to have facilitated in the experimental cases an apparently desirable change that occurred in any event among residual cases. Put somewhat differently, the findings may be interpreted to suggest that the absence of social work treatment for potential problem cases inhibited an otherwise expected development.

6. *Adventurous Cyclothymia vs. Withdrawn Schizothymia*

The manual describes this factor as follows: "The *high* scorer is bold, boisterous; the *low* is shy, quiet, polite, aloof, and lacking

in confidence. . . . Children high (on the factor) are rather more frequently in trouble for breaking rules, but also tend to be chosen as leaders. This factor would seem to have potential predictive value in a great variety of performance and adjustment situations." The manifest meaning of the factor is obviously relevant to this particular study.

Nevertheless, the data show no statistically significant differences between potential problem and residual cases, or between "dropouts" and "successes." There is a slight numerical difference found through time, suggesting a possible increase in adventurous behavior for experimental cases and a possible decrease in such behavior (or increase in shyness and aloofness) for control cases.

7. *Nervous Tension vs. Autonomic Relaxation*

According to the manual, ". . . the *high* scoring person is overwrought, tense, excited, irritable, anxious, despondent, easily upset. . . . In children it is particularly diagnostic of a certain type of high-strung, over-extended child. As far as we know, this factor measure can change rather markedly over the course of time with change of environmental stress, therapy, etc."

With such a characterization, it is of note in our data that no meaningful differences were found in any of the comparisons. Potential problem and residual cases did not differ, nor were time trends observable. Furthermore, no interpretable difference was found in comparisons of experimental and control cases.

8. *Neurotic, Fearful Emotionality vs. Stability or Ego Strength*

"The high-scoring child," the test manual reports, "is emotionally unstable, discouraged with himself, overwhelmed by his difficulties, prone to anxiety, and lacking in self-confidence."

No difference was found between potential problem and residual cases, between experimental and control cases, between "dropouts" and "successes," or in test scores through time. With respect to the last of these comparisons, however, a very small decrease in score is perceptible from first to fourth testing. Although not statistically significant, the difference is worth noting,

since it occurred in parallel for experimental, control, and residual cases. Such a decrease with greater age and experience in high school is consistent with the expectation of increased personality integration and in keeping with the manual's comment that persons high on the factor show ". . . marked need for attention and encouragement directed toward better personality integration and self-realization."

9. Cyclothymia vs. Schizothymia

According to the manual, ". . . The *low* scoring individual dislikes groups, is rather rigid, and sticks to old ways, has sleep disorder, and prefers serious friends to fun-loving ones. The *high* score indicates a cyclothymia, sociable, easy-going, warm-hearted individual." Examination of our data does not reveal any meaningful differences in scores on this factor for any of the possible comparisons between groups or for the time trends. A slight difference (not significant) is found when comparing "dropouts" with "successes," the latter having the higher score among the potential problem cases. If this finding were to be borne out in additional research, it would suggest that persons likely to drop out of high school disproportionately give responses indicating rigidity and lack of sociability.

10. Independent Dominance

The manual describes the high scorer on this factor as one who ". . . is dominant, competitive, sticks to his own opinions, feels that he has difficulty in getting across what he wants to say, and does not appreciate obeying rules." The manual also indicates that this is an experiment factor in the questionnaire and requires research clarification.

No differences between any groups compared and no time trends of any magnitude or consistency were observed in our data.

11. Surgency vs. Desurgency

According to the manual, a high scorer on this factor ". . . is talkative and excitable, likes gay parties, prefers occupations like actor and lawyer, and likes constant variety. The low scorer is

serious, prefers mechanical interests, and tends to be quiet and anxious."

No meaningful differences were found in our data between the various groups that could be compared. One possible time trend was observed, although it was not statistically significant and time trends of other groups did not clearly support it: among potential problem cases that are "dropouts" there is a slight increase in score on this factor in contrast with stability or slight downward trend for all other groups.

12. Intelligence

Since there are other performance measures in our data, the JPQ factor of intelligence is not dealt with here extensively. The consistent increase in score on this factor with age is statistically significant but may well have been affected by repeated testing on the same test form. No differences were found between potential problem and residual cases, or between experimental and control cases. There is a slight difference (not statistically significant) showing those remaining in school higher on this factor than "dropouts." The *absence* of difference between potential problem and residual cases when one might have been expected is more impressive than the findings that are essentially consistent with expectations of maturation for the age group involved in the study.

Discussion of Objective Personality Data

We may recapitulate what has been found in the data from objective personality testing. On factors of personality where significant or meaningful differences occurred between potential problem and residual cases, the characteristics that might be expected to be associated with girls headed for trouble were generally found. Thus potential problem girls appear to be more tough and insensitive, less tolerant of others and more quick to anger, express more dislike of education and a more surly reaction to authority and to associates, are less likely to think for themselves and more likely to go along with the group, and show slightly less self-control. Potential problem and residual cases did

not differ in interpretable degree with respect to self-confidence, tension and excitability, emotional stability or ego strength, sociability, stubborn adherence to opinions, extraversion, or intelligence. Sufficient evidence was found to justify the conclusion that there are personality characteristics concomitant with the differences in background and attitude already noted between high school girls whose records suggest difficulties and those for whom this is not the case. Further research would be needed to establish a socio-psychological syndrome of potential problem high school girls but our data encourage such research.

With respect to personality characteristics of school "dropouts" as compared to those who stay in school, our data offer very little confirmation that important differences obtain. Those who drop out do show greater dislike of learning and more negative reactions to authority and to their associates, and they possibly exhibit more rigidity. There is little evidence that personality characteristics—at least as detected by the test we used—are very good indicators of potential school "dropouts."

A few maturational trends were found in the data. Emotional sensitivity seems to decline with age; intelligence probably increases. There is the slight suggestion that liking for learning decreases and that being more bold and a good mixer increases. What is most striking about the data on maturation is that the measures of personality we have used show such remarkable stability during the three high school years that were studied. It is often assumed that entrance into high school signals a period of rapid and even dramatic change in adolescents. Perhaps external changes in dress and language, in dating interests and behavior, and in other manifest ways of "growing up" have deceived us into believing that fundamental personality changes were also occurring. Obviously, data from our study alone cannot be accepted as conclusive contrary evidence but certainly there is no support for such a belief in our findings.

We do not wish to anticipate at this time any conclusion with respect to the consequences of social work services for the experimental cases in our study. We may note with respect to the personality characteristics that have been measured, however,

that relatively little difference appears in the comparison of experimental and control cases. Only with respect to the factor described as Will Control vs. Relaxed Casualness does a significant effect occur in the data. Experimental cases, in contrast with control cases, shift toward self-control, persistence, orderliness. There is also the suggestion of a slight increase for experimental cases in adventurous, bold behavior and a contrary decrease for control cases in such respects. Clearly no wide-ranging, dramatic effects on the measured components of personality have resulted from the exposure of girls among the experimental cases to social work treatment.

PROJECTIVE TEST DATA

As indicated in Chapter II, the MAST sentence-completion test was administered as a projective test measure of personality in order to detect, if possible, more subtle characteristics than those that might be visible in an objective test such as the JPQ. Although differences between experimental and control cases did not appear, there were minor trends through time in some of the MAST scoring categories as well as some small differences between those girls who dropped out and those who remained in school. Because of practical limitations, MAST protocols were scored only for potential problem cases and not for residual cases.

The demands of verbal performance even on a test like the MAST were such as to reduce the number of subjects completing two usable protocols to 330 cases. A minimally usable protocol was one that had at least one-third of the responses interpretable. The number of omitted items (prorated for statistical analysis) in protocols that were minimally usable decreased significantly between the first and last tests taken by the subjects. This is, of course, in keeping with the expectation that language abilities of the girls should improve through the high school years.

MAST 1, Paranoid

This category—given priority in scoring when responses could also fall into other categories—reflects resentment, untrusting, negativistic orientations. No difference was found between girls

who dropped out and those who stayed in school. A time trend for the 330 cases was suggested, however, between first and last test scores with the average number of negativistic responses higher at the last test. The difference does not quite attain our criterion of statistical significance.

MAST 2, Hostile

This scoring category includes responses indicating aggressive, cruel, and directly rivalrous as well as hostile meanings. This category is given priority over *MAST 4, Annoyed*, when there is uncertainty in scoring a response. There is a suggestive (but not statistically significant) difference, indicating more hostility among girls who dropped out than among those remaining in school. Whether such a difference is cause or effect is not determinable without further evidence. The difference is, however, consistent with the finding on JPQ Factor 3—Socialized Morale vs. Dislike of Education.

Through time, the last available test scores clearly show an increase in *MAST 2, Hostile* responses, over first test scores. This statistically significant difference may in a rather harsh environment reflect maturation toward self-assertion and greater autonomy. However, this is a speculative interpretation of the evident trend. It does not seem to be a maturational trend toward a more superficial exhibition of assertiveness because no trend was found in the third scoring category.

MAST 3, Assertive

This category includes boastful, self-assured, "cocky," immodest, self-oriented responses. Dropouts were not distinguished from those remaining in school on this category. There were no meaningful differences between first and fourth test scores.

MAST 4, Annoyed

This category includes responses suggesting boredom, annoyance, laziness, frustration, or situations that cause these responses. The category differs from MAST 2 by reflecting a social situation that makes the response interpretable as more rational, the less rational hostile responses being scored as MAST 2.

Differences appeared on this scoring category between girls who dropped out and those who did not, with the greatest difference—statistically significant despite the small number of cases—between first-year dropouts and those completing school. Girls who dropped out consistently show fewer *MAST 4, Annoyed* responses. Furthermore, the time trend also provided statistically significant results, with the average number of responses in this category decreasing between the first and the last tests taken by the girls.

These somewhat paradoxical findings are difficult to interpret consistently. It is plausible that expressions of annoyance and frustration decrease with maturation but it is not equally plausible that fewer such expressions should be associated with early leaving of school. One possible interpretation might suggest that potential dropouts are less involved emotionally in their present situations, even to the extent that they do not exhibit annoyance and frustration. Those who remain in school might be seen, in such an interpretation, as exhibiting at least some emotional response. This interpretation is speculative at best and it is more appropriate to leave the findings on this category of the sentence-completion test without explanation until further data become available.

MAST 5, Conventional

This category captures responses that reflect the common morality, conventionality, moral indignation, self-righteousness, and similar expressions. Objective rather than personalized responses were directed into this category, responses that in the extreme might be designated in categories 1 and 2. MAST 5 favors banal or commonplace statements and, more than any other scoring category for the test, tends to be a residual one.

No differences were found for this MAST category in comparisons of dropouts and nondropouts, or in time-trend analyses.

MAST 6, Avoidant

Withdrawal, avoidance, shyness, overmodesty, timidity, preference or liking for isolation are the terms that define this scoring

category. None of the comparisons yields statistically significant differences. However, girls who dropped out of school show fewer avoidant responses and, in time trends, fewer avoidant responses occur in the later tests. These findings suggest, without the strength of statistical significance, that the less withdrawn girls leave school but that those girls who remain become less shy or isolated through the course of their school years.

MAST 7, Depressive

Responses indicating hopelessness, depressiveness, sad, morbid, resigned, pessimistic feelings are classified in this scoring category. A difference was found between dropouts and nondropouts with the latter having fewer depressive responses, but the difference was not at the accepted level of statistical significance. Such a difference would be compatible with the idea that a feeling of futility is expressed by those without potential for success, if it may be assumed that they are aware of this. On the other hand, the interpretation might be turned around: depressiveness could be seen as a cause of failure. In either view, interpretation can only be speculative and suggestive of hypotheses for further investigation.

MAST 8, Anxious

This scoring category is defined to include responses indicating worry, fear, nervousness, anxiety. Dropouts appear to show fewer anxious responses in their initial test, although the difference between their scores and those of nondropouts is not statistically significant. In time trends, again not statistically significant, the later tests show more anxious responses, perhaps anticipating the time when the girls leave school.

MAST 9, Introspective Mood

Self-doubting, guilty feelings, social sensitivity, and concern with others characterize the responses of this category which emphasizes reflection rather than action. No differences appeared between dropouts and nondropouts in the initial test period.

A substantial and statistically significant time trend did occur in the analysis with the self-analytic responses considerably higher in the last test taken by the girls. This suggests the development of a more introspective mood as the end of schooling approaches, perhaps a reasonable accompaniment to the anticipation of a change in status.

MAST 10, Hypochondriac

This scoring category, developed for the test when it was used in a study of a rehabilitation service, centers on references to sickness, pain, disease, and concern over these. It might also be thought to reflect expressions of neurotic symptoms of a somatic type. For the girls in this high school sample, however, no differences between dropouts and nondropouts and no time trends were found.

MAST 11, Optimistic

Euphoric, manic, optimistic, expressions of good feeling and trust are included in this category. Those not completing even the first year show a somewhat lower number of responses on this variable than those continuing in school, but the difference is not statistically significant. With respect to time trends, however, there is a significant decrease in optimistic responses. Possibly, again, this reflects intrusion of reality in consideration of the future as girls prepare to leave school.

Discussion of Projective Personality Data

The findings reflected in the projective sentence-completion test (MAST) are not impressive and they did not seem to warrant analysis of residual cases so as to compare these with potential problem cases. No differences were found between experimental and control cases, and few meaningful differences appear in the comparisons of dropouts and nondropouts. The dropouts, if they differ, may express more hostility, more depressive, and fewer optimistic responses. On the other hand, they show fewer annoyed, avoidant, and anxious responses. Even these weak findings

do not suggest a consistent clinical picture and it is perhaps best not to try to develop one on the evidence available. Clearly the use of the projective test did not add to the potential predictors of school dropout.

If the somewhat stronger but still not impressive time trends are summarized, the maturational development is one of increased reality orientation as the girls proceed toward the end of their schooling. They thus become somewhat more untrusting and aggressive, more anxious and introspective. At the same time, responses of annoyance, avoidance or withdrawal, and optimism decrease. The implication is one of greater autonomy, or more adult realism. But as in the case of the objective measures of personality, the overall impression of lack of change outweighs the slight evidence of maturational trends. It is noteworthy that these adolescent years do not exhibit—on the personality measures used—the dramatic changes sometimes said to be characteristic. Nor is there evidence in these data that personality changes of visible importance accompany exposure to the experimental treatment provided or that personality characteristics anticipate failure or success in continuation in school.

CONCLUSION

This chapter has presented data on social and family background characteristics of the population of high school girls involved in the study, on some of their attitudes, and on their personality characteristics as indicated by a standard personality test and a projective sentence completion test. When differences were observed between potential problem cases and residual cases, they were generally in keeping with the intention of the project to identify for treatment a group of girls for whom future school and personal difficulties could be anticipated. It is clear that this intention was achieved and it is to be noted that potential problem girls dropped out of school in greater proportion than their peers who were not so identified.

Of the limited number of observed variables associated with school dropout, those indicating lower socioeconomic back-

grounds were most evident and these were not strongly related. There is very little evidence that attitudinal or personality variables that were measured differentiate "dropouts" and school "successes."

The data also indicate that the random procedure for selecting experimental and control cases among the potential problem population resulted in generally similar groups on which to examine effectiveness of social work intervention.

In the following chapters we may turn to the description of the treatment program offered to the experimental cases and to its effects.

NOTE TO CHAPTER III

1. Cattell, R. B., J. Beloff, D. Flint, and W. Gruen, *IPAT Handbook for the Junior Personality Quiz*. Institute for Personality and Ability Testing, Champaign, Ill., 1953, pp. 1–2.

IV. Treatment Philosophy and Rationale*

A CONSCIOUS ATTEMPT was made by the staff of Youth Consultation Service to integrate the demands of the research design of the project into the general philosophy and rationale of the agency's casework services. These do not differ in important respects from the practices and principles customarily associated with diagnostic casework. The experimental attitude pervading the activities at YCS enabled the agency not only to adjust to the rigorous design of the research, but also to profit from its day-to-day experiences. In the second year, the staff concluded that limitations of the individual treatment plan originally proposed warranted a shift into a new and relatively untried scheme of group referral and treatment. The structure and purpose of these groups were subject to continuous revision in techniques and procedures.

INDIVIDUAL TREATMENT

Research operations were not a new experience for YCS and its staff. However, this project presented a major challenge at both the administrative and the treatment levels. In the original planning, the clients were referred to the agency's central office, which was within walking distance of the school. The casework staff at this office consisted of five caseworkers, one casework supervisor, and the director of casework. The agency's psychiatrist and psychologist served as consultants to this project. During

* Chapters IV and V draw heavily for their organization and almost entirely for their content, observations, and expressions of judgment on extensive reports prepared for this purpose by Elizabeth P. Anderson, director of casework at Youth Consultation Service; Dorothy Headley, senior group therapist; and Hanna Grunwald, group therapy consultant. The experiences described here are not research findings; rather they are observations of the professional persons involved in the treatment programs and represent their viewpoints.

the first year of the project, 53 cases were referred for individual treatment. The first 5 cases came into treatment in September, 1955, 25 more in the spring of 1956, and 20 in October, 1956. Three additional cases were added as replacements for clients who dropped out of school prior to agency contact. The first cases treated were in the nature of a test administered to try out the referral procedures. Referral was completed for 50 cases (93 per cent) for individual casework. The first year constituted a pilot stage for the study and, in view of the drastic changes in the plan for provision of treatment that ensued, may well be viewed in that light.

The administration of the agency was faced with the impact of this increased caseload and it was necessary to adjust its regular intake to meet the new demands on its staff. At the same time, careful attention had to be given to distributing the workload so that the agency could maintain its quality of service to all its clients. Additional hours for psychiatric consultation had to be arranged to enable caseworkers to make full use of such consultation. Extra time for psychological testing also had to be provided. In addition to the caseworkers' regular weekly supervisory conferences, extra staff meetings presided over by the director of casework were held each month for the discussion of diagnostic problems, the formulation of treatment plans, and the exploration of special techniques for handling these cases. Monthly meetings of the research committee afforded a critical review of developments as they evolved and permitted the incorporation of relevant changes into the revised design of the service program.

The major problem confronting the casework staff in dealing with the project referrals was the need to involve them as clients in a meaningful relationship when they were not consciously presenting a problem. This required thoughtful and creative extension of the usual casework approach, especially in the area of stimulating motivation. The basic treatment philosophy, based on the conviction that there is capacity for strength in every human being, varying in degree, remained firm. It is probably fair to describe the general treatment aim, therefore, as helping the individual to develop and realize her own potentialities to the

extent of her capacities so that she can use her intelligence, her emotions, her aptitudes—her total self—in taking her place as an adult in our society.

Agency-School Cooperation

Considerable time and thought were also given in the early planning for working out an effective liaison with the referring school. It was necessary for the administrative person in the agency, the director of casework, to be in regular communication with her counterpart at the school, the administrative assistant in charge of guidance. Together they arranged to open channels for frequent communication between the agency's caseworkers and the school's guidance counselors and teachers.

When cases were randomly selected for inclusion in the experimental sample, the school was given only the name of the girl. She, in turn, was told of her selection and was encouraged to accept the opportunity to discuss with a skilled person the problems of growing up. A letter requesting the parents' permission for their daughter to attend sessions during school hours was prepared by the casework staff in consultation with the school's guidance department. It gave the parents a positive interpretation of the reasons for their daughter's referral to the agency, prepared them for a future contact by a caseworker, and informed them how they could establish contact with the agency themselves at any time.

With regard to schedules, the school agreed to allow the girls to keep appointments during school hours. Schedules were arranged to permit the school to exercise discretion as to what particular times would be best for the individual girl to be absent for a little over an hour. In accordance with the philosophy of the project, the school exerted no pressure upon the girls to keep appointments. The plan worked as follows: The individual caseworker informed the dean of students of the client's appointment time. A building pass was issued and the girl was excused from class at that hour. If the client did not wish to keep the appointment, she simply remained in class and nothing was said to her about it. For appointments at the first or last hour of school, per-

mission was granted to report late for school or not to return to school after the appointment. Missed appointments were later checked against the school's attendance records, but the information was used by the agency only to distinguish in its records between missed appointments and absences from school. No instance was reported in which a girl left school at the appointed time and did not go to the agency.

Casework Handling

The casework staff found that a remarkably high percentage of the referred girls kept their first appointment, but often with acute anxiety and great concern manifest as to the real reason they were being sent. This in no way reflected on the school's preparation. It did, however, indicate the kind of emotional response evoked by choosing at random girls of this age for referral to a social agency. It became apparent that regardless of what was said in preparing them for the appointment, the girls feared they had been chosen because they were bad, "crazy," not studying enough, or otherwise inadequate in school performance.

This response from the girls underscored the agency's conviction that it was necessary to have experienced, carefully supervised caseworkers carry these cases, and prompted the immediate setting up of additional supervisory staff meetings and the arrangement for full attendance of the casework staff at all psychiatric consultations on project cases. Each case was carefully worked up by the staff, with psychological testing and psychiatric consultation, even if there were seemingly no problems in setting up the treatment plan in supervision alone. The diagnosis and treatment plan, as well as the explicit techniques for carrying out the plan, were written into the record.

As had been anticipated, the major difficulties that arose in establishing a treatment plan for these cases centered about the problem of involving them in treatment—helping them to understand why they were asked to come. Of 47 of the girls referred for individual treatment for whom caseworkers made ratings at the conclusion of the project, 18 (38 per cent) were described as "negative" or "hostile" in their initial relationship with the case-

workers and 5 others were said to be "indifferent." (See Chapter VI, Table 13.) For this reason there was considerable need for interpretation to clarify that their selection was in no way connected with their having been singled out as a behavior problem, as mentally unsound, or as related to any effort to force them to study harder in school. The girls were told that all young people could benefit by casework help, since adolescence was a period of life in which it was natural to have problems of some kind. The caseworkers indicated that because everyone in school could not be seen, the girls who could be seen were chosen more or less at random. Emphasis was placed on the confidentiality of the contact; the girls knew the agency did not share their material with the school and the school understood this as well.

As tentative diagnoses were made, the caseworkers reached the conclusion that without exception every girl referred to the agency needed casework help. Of the 47 girls who were rated by caseworkers on a 6-point scale, 30 (64 per cent) were felt to need treatment "very much" or "to a considerable extent" and only 2 were deemed "not at all" or "slightly" in need of treatment. The conviction that the girls had serious problems strengthened the agency's motivation to find a way to reach them. The caseworkers involved in the handling of these cases adapted themselves readily to this situation. It was exceptional for them to work with clients who did not manifest some definite problem, so it was necessary for the staff to concentrate on getting to know the clients and forming a relationship that would have some meaning and motivating force.

The skills and insights of the consultation staff were utilized in dealing with the problems encountered in diagnosing and treating these cases. From the point of view of the caseworkers, the consultants helped to enlarge their knowledge of the psychodynamic structures of the girls they were seeing, worked with them to develop new and different techniques, and strengthened their security in attempting the unfamiliar. The techniques used were mainly geared to reaching out in a warm, interested, but not overwhelming way. The fact was emphasized that all adolescents are beset by many problems and confusions about the busi-

ness of living, such as getting along with parents and peers, being popular, handling the problems of dating, planning for future education and career, and other problems as previously suggested. The caseworkers were encouraged to learn the adolescents' language and truly to be "with it," always to be on their side but at the same time represent reality and provide guidance and control. Some of the girls saw their caseworker as being "in the know" and appeared to accept her as an ego ideal.

The caseworkers consciously sought to avoid the mistake of overresponding to the rebelliousness that is found to varying degrees in all adolescents. They were always aware that these children were members of families and had to be able to live and adjust to that reality even if, as in many instances, the family environment was a very difficult or even pathological one. They realized that they could not make up to these girls for all they lacked or for the many deprivations experienced in their early years.

Techniques for carrying out treatment plans were discussed and worked out on a case-by-case basis related to the diagnostic appraisal and the appropriate treatment goal. All the girls were encouraged to keep regular weekly appointments at the agency but the caseworkers did make numerous school visits to talk with the girls in the early stages of the project. It was soon evident that the clients who became involved in treatment were conscientious about keeping regular appointments at the agency. Indeed, the median number of casework interviews (excluding conferences at school and casual contacts) was 9, and 15 girls (30 per cent of the 50 completed referrals) were seen in 16 or more interviews. Nevertheless, the caseworkers did not feel that many of their clients became seriously involved in a treatment relationship. On a 6-point scale, the caseworkers judged 22 (47 per cent) of the 47 girls for whom ratings are available to have become "hardly" or "not at all" involved in a treatment relationship. On the other hand, 13 girls (27 per cent) were rated "very much" or "quite a bit" involved in treatment. (See Chapter VI, Table 11.) Thus the caseworkers saw themselves as quite successful in reaching approximately one-fourth of the girls referred but, despite

great effort, unsuccessful in achieving the involvement deemed necessary with about one-half of the girls.

Aware of this problem, the staff at YCS considered other ways of making meaningful contact with more clients. As indicated earlier, the agency was already using group treatment methods with some other clients. This approach had been discussed but discarded before the project began. With the experience of a year it was reasonable, therefore, to consider whether group methods would be more satisfactory.

From Individual to Group Treatment

A few girls among the first fifty referred had some experience in group therapy. This service was concurrent with individual treatment and the agency's existing activity group therapy program was used. Although the first year's experience with individual treatment in the caseworkers' assessments produced some gratifying success with some of this group of cases, the workers were sensitive to the degree of anxiety evoked in a substantial percentage of these clients. Many of those who came to the agency for treatment described their initial feelings in vivid terms after a period of three to six months. The situation was discussed at length among the caseworkers, supervisors, and director, and in consultation with the psychiatrist. The possibility of a less painful method of involving future clients from the project in a helpful agency contact was thoroughly explored. The "facts" already known about adolescents were carefully considered. Those suggested included anxiety at being singled out of the group, an expression of fear of being considered different, and inhibition in communicating fears and asking questions, many of which they feared would sound fantastic to an adult. These facts, together with the girls' apparent suspiciousness of adults in general and their concern with regard to new and untried experiences, gave the staff cause for serious thought. Their discussion was greatly helped by the school's experience, as described by the administrative assistant in charge of guidance, that handling high school students in groups was more successful and far less

anxiety-producing than singling them out individually for any kind of attention.

As a result of all these considerations, the decision was made to attempt a group treatment approach with the girls in this project. Despite the fact that the random selection of the experimental sample was a marked deviation from the usual diagnostic workup of clients prior to assignment for group treatment, it was decided to experiment with referrals from the potential problem pool in a group setting.

GROUP TREATMENT

In preparation for this new approach to the girls, careful planning and evaluation based on knowledge of adolescent behavior, casework principles, and group therapy practices were considered in full staff meetings involving the director of casework, the senior group therapist, and the group therapy consultant. Also, extensive consultations were held with caseworkers who had carried the individual cases.

Group Referrals

This new approach was accomplished by stressing the voluntary nature of the girls' participation in groups and the universality of puzzling questions that young people face in their everyday lives. Agency services were interpreted to emphasize factors that might appeal to the girls on the pleasure principle, for example, planned trips, refreshment periods, and time off from school. The refreshment period was considered to be of particular significance, for it was believed that such a break would provide a social experience for these deprived girls. Thus the idea of stigma or uniqueness in having problems was de-emphasized, and the idea that everyone faces day-to-day questions was introduced. The universality of problems and the provision of pleasurable experiences became the keynotes of this group approach which, it was hoped, would be less threatening to the girls.

A letter written by the agency staff which had been used earlier by the school to explain the purposes of the project to parents

was revised in the light of the group counseling program. In order to emphasize the voluntary nature of the program and to minimize the agency involvement in their decision, preference was given to the girls "signing up" for group participation in the school. To this end, a secretary from the agency, whom the girls had not had any contact with previously met with them at the school, received their parents' permission letters, and invited them to the first meeting of their new group. She answered all factual inquiries, but any questions of interpretation she referred to the leader, who was scheduled to meet with them the following week.

Recognizing that more traditional casework methods might be preferred for some girls, it was decided that these should be made available when appropriate. Girls who for one reason or another were thought unsuitable for group treatment, would be referred to the casework department for appropriate handling.

During the course of the project 147 girls were referred for group treatment at the agency and referral was completed for 139 (95 per cent) of them. The need for treatment for the group referrals was considered to be approximately as great as that for individual referrals. However, the group approach to making contact with project clients was judged by the social workers to be more successful than the individual treatment approach. The median number of counseling sessions attended by girls referred to groups was 19, and 31 per cent of them attended 31 or more group sessions. Only 19 per cent of the girls in groups who were rated by the social workers on a 6-point scale were judged to have become "hardly" or "not at all" involved in treatment. (See Chapter VI, Table 11.)

Schedule and Setting

The vocational trade classes at the high school were double periods lasting approximately two hours, which fitted well with the group therapy plans for hour and a half sessions and allowed thirty minutes for travel to and from the school. As already indicated, the central office of the agency was within walking dis-

tance of the school. When the agency office moved its quarters, the travel time and cost of transportation precluded regular meetings there. For a short period, space was found in the educational building of a nearby church. This setting seemed to the group therapists to have a somewhat repressive effect on the girls who needed a permissive environment, but it was not considered a serious handicap. As the program expanded, quarters were found at the YMCA, which was nearer the school and could accommodate more groups. The atmosphere of the "Y" was congenial, its equipment was adequate, and its coffee shop was available for refreshments.

The question of holding group meetings during school hours was discussed in staff conference. Did this affect the girls' attitude toward using the group for therapeutic purposes? To what extent were the agency and the group leader successfully distinguishing themselves from the school system as a whole? It was recognized that there were disadvantages to the therapeutic effectiveness of groups scheduled during school hours. But these were balanced by disadvantages in attempting to hold meetings after school hours. The school population was drawn from all sections of the city and travel time and carfare would be serious problems for many of the girls. As the group program progressed, the therapists observed fewer drawbacks to the school schedule. One group, however, became so identified with the agency that they asked to have their meetings at the agency. This was tried for a short time but practical factors of time and money soon forced a return to the "Y" during school hours.

The staff also considered the possibility of holding group meetings in the school building. It was felt that this might work out satisfactorily. The neurotic girls might not be expected to have any difficulty discussing their problems in a school setting. The "acting out" girls might present some difficulty in the beginning, but it was felt that their reaction would not be sufficient to prevent treatment from continuing. No opportunity actually arose to hold a group meeting in the school building, but in general the staff felt that the role of the therapist was more important than the setting.

Role of the Therapist

In all the groups the role of the therapists remained basically the same. They were caseworkers utilizing casework concepts and techniques. Although they were always aware of the group's dynamics, the focus was on the individual member and her adjustment.

In the large unselected groups formed at first, the permissive and passive role of the therapist often seemed to create undue anxiety on the part of the girls. With the benefit of this experience, the therapist changed her technique to a mental health educational approach whenever she felt she did not have sufficient diagnostic understanding of the group for a more intensive approach. In groups that included immature and impulsive girls, the therapist needed to be directive. In groups composed of girls with more ego strength, the members were considered able to assume more responsibility for the course of the discussion. The attitude of acceptance on the part of the therapist was met with a general longing for acceptance on the part of these girls. The degree to which it could be given and the way in which it was communicated differed with the various groups.

It was assumed that the success of the program would depend on the skill of the caseworkers and their experience in group therapy. A project of this size and scope requires a stable and competent staff. In the early stages, groups were formed that could be carried by one full-time therapist. As the program expanded, she became responsible for the administrative aspects of the program, for supervision, and for coordination of the project with the other departments of the agency. During the course of the project, ten therapists were employed on a part-time basis. All of these were caseworkers with extensive experience in group therapy. Some of them had worked previously for YCS and several were working at other agencies under the guidance of the group therapy consultant. One was from Puerto Rico and her knowledge of the Spanish language and Latin American culture was a great help to many of the Spanish-speaking girls in the project. Students from Sarah Lawrence College participated in the Activity Groups, in which a "big-sister" role was appropriate. They led

the Activity Group sessions, took the girls on trips, and helped with a variety of adjunct services.

At the end of each six months' period, conferences were held at the agency with the director of casework, the senior group therapist, the group therapy consultant, and the several therapists, as well as the agency's casework staff. The major purpose of these conferences was to discuss the experience with the groups as they developed, evaluate their progress, and chart their direction and focus.

Two group therapy consultants were active at different times during the course of the project; one served during the first year and the other took over during the final years. Each had advisory responsibility for setting up the program and for organizing the groups that operated during these periods. The agency psychiatric consultant was used to review diagnoses and treatment plans for girls referred to the casework department and for clients receiving a combination of individual and group treatment. Many of the girls were tested by one of the three psychologists serving the agency during the period of this study. At first the girls were tested in the school without any obvious connection with the program. When this approach proved cumbersome and ineffective, the clients were tested directly by the agency psychologist. Another important member of the team was a volunteer who had been active in the agency in other capacities for several years. She compiled school records on all the clients and kept up with their academic status. Her excellent rapport with school personnel frequently enabled her to interpret the agency's program to the teachers and guidance personnel in a most effective manner.

Contact with the School

From its inception, the group program was in an advantageous position, in that the agency already had a history of good relations with the school and its personnel. The previous year's experience with individual referrals had familiarized them with agency policies and practices. This contact, however, had been a relatively unstructured one. In view of the large number of students who would be involved in the group program, it became

practical to designate a liaison person from the agency and another from the school.

The agency liaison person performed several functions. She abstracted school records, scheduled meetings to conform with class schedules, effected class changes for girls whose class schedules conflicted with their group meetings, followed up on absentees, and checked on the girls' current progress in school. This liaison person was also able to interpret the agency's program to teachers and clear up any misconceptions the school staff might have about the agency's services. Occasionally, she was called upon to talk with a teacher who had a misconception of the agency's purpose, believing that it worked exclusively with "bad" girls and, unfortunately, had made inappropriate remarks to a client. In almost every instance, however, the teacher was cooperative when the program had been explained. The functions of the school liaison person were the counterpart of these: answering questions, making reports and records available, and following through on school routines in regard to referrals, parental permission, passes, absentees, and the like.

Both the school and the girls understood that participation in the program was entirely voluntary. However, well-intentioned teachers occasionally put pressure on girls who were having school problems to attend meetings. At one point, the school wanted attendance records from the agency, believing that a girl had left the school building but had not gone to her scheduled meeting. The school accepted the agency's refusal to comply with this request on the grounds that the therapeutic environment would be disturbed if the clients had reason to think that their material was shared with the school in any way.

By and large, teachers were cooperative in giving full reports on the girls and alerting the staff to acute situations arising at school. They also accepted the workers' recommendations for handling particular problems of girls in the project. For example, one girl of limited abilities had a work assignment that was too advanced for her. The school, recognizing that she had been seen in a group for many months and had received psychological tests, was willing to try her out on another job more in keeping with her limitations.

In this and in many other instances, the cooperative effort worked out satisfactorily, but the level of this cooperation would have been improved if the school personnel and the agency staff could have had time for regular monthly conferences. Nevertheless, the continuous close relationship and effective cooperation between the agency and the school reflected their mutual concern for the success of the program and facilitated the formulation of long-term goals for the program.

Early Group Experience

The first five groups were organized between April, 1957, and June, 1958, with S. L. Slavson as consultant. These differed from orthodox therapy groups in several important respects.

Previous groups at YCS involving other types of clients had been composed of five to eight members who were referred to the group only after careful psychosocial evaluation had been made. Members of a group were chosen because they had a good potential for ready identification with each other. Clients assigned to the same group had common central problems, even though their symptoms and clinical diagnoses might vary. However, group therapists differ in their judgments as to what types of clients profit most from group treatment, the length of time clients should be seen in individual treatment before being assigned to groups, and the degree of importance they attach to differences among group members in temperament and approaches to problems. In the absence of any consensus in philosophy or rationale, of any uniformity in the experience and practice of therapists, and of any rigorous research in these areas, it was decided that a measure of innovation and experimentation was not only justified but might yield significant new results.

Recognizing both the obligation to serve the cases prescribed by the research design and the limited basis for composing groups on known criteria, it was decided to attempt larger groups than are usual for treatment aims. From previous experience with individual cases it was anticipated that a considerable number of cases referred would be lost through school dropouts, extreme resistance, or their elimination as unsuitable for group therapy.

The decision was made to refer girls in groups of thirteen, with the expectation that as many as three or four might be lost to each group. The appeal of this new group approach to the girls was apparent in two important respects. In the first place, a very much lower percentage of cases were lost than had been anticipated; and secondly, the therapists recognized some benefits for the girls, in spite of the shortcomings believed to be associated with the larger size of the groups.

The context of referral, that is, the absence of clear and explicit presenting problems as well as anxiety and suspiciousness on the part of many of the girls at the time of referral, precluded the psychological testing and psychosocial evaluation customarily thought necessary for clinical diagnosis. There was not sufficient time available or the usual situation of agency intake for an individual study of each girl prior to referral to the group, although such study (including contact with the family) would have been useful in view of the sparseness of details available on each girl.

In any group therapy program it is always difficult to determine the appropriate moment for closing contact because of the difficulty of evaluating treatment gains. Usually clients are selected because of their apparent need for help in handling a specific problem. Therefore, the evaluation of their improvement depends largely upon a comparison of the client's present handling of her problem with that at the beginning of contact. However, in this project the definite areas of poor functioning of the group members at the time of their referral were known only in the most general way. It was necessary, therefore, to develop criteria upon which to base a clinical evaluation of improvement. The task of evaluation was further complicated by the lack of frequent contacts on an individual basis either with group members or with members of their families (although such contacts were occasionally made in emergency situations). Objective criteria used by the group therapists were essentially restricted to information gained from the school about the girls' academic performance and their general school conduct. This information at times was used to substantiate the therapists' impressions of progress based upon the girls' behavior within the group.

Later Group Experience

When Dr. Hanna Grunwald was appointed as the new group therapy consultant in June, 1958, the group treatment services of the project to date were evaluated and specific plans were made for serving the last eighty cases needed to fulfill the research sample of two hundred experimental cases.

In reviewing the experiences of the first year with groups, it was noted that the leaders of the five large unselective groups had been successful in creating a permissive atmosphere that was similar to the one created in small, selective treatment groups. This permissive atmosphere was conducive to spontaneity on the part of the girls and several of them brought out emotionally associated material. However, others showed little or no responsiveness to the group contact. Moreover, some members of the group interfered with the involvement of other members, by inappropriate behavior. Their failure to show any understanding of painful material brought by one girl was considered even more disturbing. Also, the large number of members in the group made it difficult for the girls to become well acquainted with each other. Some girls, who might have been able in a smaller group to empathize fully with another member, were restrained from doing so because they could not absorb so many situations appropriately. In spite of these characteristics, most of the members of the group seemed to enjoy attending the sessions. Almost all the girls responded favorably to the permissive atmosphere in the group, which enabled them to have a more realistic understanding of many of the problems typical of adolescence.

Using this assessment of experience with the first five groups, the group therapy consultant and the senior group therapist made a judgment as to each girl's responsiveness to group treatment. In addition, this analysis differentiated the girls according to their common problem areas, their capacity for handling problems, and their ability to use the group experience constructively.

On the basis of this analysis, new groups limited to eight members were formed with more specific focus, and only those girls were included whose previous experience indicated that they could profit from them. Corresponding to the pattern of needs

and capacities discerned among the girls to be referred, these newly formed groups were of three basic types: Family Life Education Groups, Interview Treatment Groups, and Protective Groups. Those who apparently did not fit into any of the earlier groups were excluded from these new groups. For some of them, Activity Groups were created. The remaining cases were referred to the agency's casework department for disposition.

Family Life Education Groups

The first of the new groups formed could best be classified as Family Life Education Groups. They followed in structure, method, and process the outline of similar groups formed in social welfare agencies for mothers or parents. The content, of course, differed, since these were for adolescent girls. Through a planned series of discussions, they sought to strengthen family life and prevent personal maladjustment growing out of unhealthy family relations. The approach was basically educational as contrasted with therapy or treatment. It differed from more didactic teaching, in that the group members' feelings and concerns and the sharing of their everyday experiences were the basis for the group's discussions. Group members were given an opportunity to explore their feelings and attitudes, as well as to gain knowledge. Building on the healthy aspects of the egos of the members, the purpose of these groups was preventive rather than ameliorative.

The response of the clients and group leaders to these newly formed Family Life Education Groups was most encouraging. The absence of inappropriate interruptions made possible a much greater evenness in the group discussions and the attention span of the girls was longer. Also, there was a more intensive give and take among the girls. Most of the discussion centered around the common problems of adolescence, with discussion of "individual" problems occurring only occasionally. It was obvious that these groups, however, were different from treatment groups. There was less of a conscious expectation within the group that members would use the group experience constructively. The nature of their involvement remained more uncommitted. The new setup

allowed the group leaders to play a more clearly defined role than in the former groups, where they often were obliged to remain vague because an approach that would have been helpful to some members might have been confusing to those operating on a different level.

Interview Treatment Groups

Not all of the girls who seemed to have gained by attending one of the first five groups were referred to the Family Life Education Groups. A second type of group, called Interview Treatment Groups, was set up for the more intelligent and verbal girls who appeared, because of their preoccupation with fears and their reports of severe conflicts with parents and/or siblings, to exhibit neurotic problems. In order to judge their ability to accept help with these problems, the casework department of YCS was asked to secure additional information on each case. In the cases where the neurotic conflict seemed to be severe, they were asked, if possible, to get projective data.

Protective Groups

A third type of group was formed for intelligent, verbal girls who had both enjoyed and profited from their former group attendance, but were forced to cope with severe environmental problems. This type of group was labeled Protective Groups. In general, these girls came from the so-called "hard-core" families, but despite this background seemed to have the ability to function very well and showed surprising potential for growth and development. In most instances, this strength could be traced to the influence in early life of some family member, often an aunt or a grandmother, who had managed to escape the general family pathology.

Many girls who appeared to have gained little or nothing from group attendance were also referred to Protective Groups. However, these girls differed from the girls mentioned above, in that they were less intelligent and less verbal. They resembled those in the first category, in that they also suffered from serious environmental problems and came from extremely disturbed

families. However, those in the second category functioned very poorly and showed very little potential for growth. The decision to separate these two categories of girls, who came from similar backgrounds but showed differences of personality makeup, proved to be a significant one.

Activity Groups

Activity Groups were formed for girls who seemed to be fixed in a rather rigid way at a low level of development and who did not show incentive to change. It was hoped that sessions of supervised interaction might provide such girls with healthy, growth-producing experiences that they probably missed in earlier years. Most girls included in these groups came from multi-problem families and lived in the city's worst slum areas. In forming these groups, special care was taken not to select girls who might be likely to regress too rapidly when allowed to feel it was safe to act in an immature way.

Casework Referrals

Before the newly formed groups were started, it was possible to refer some of the cases from earlier groups to the agency's casework department for closing. The contact was closed for any girl who had left school and had not continued with casework service. Cases were also closed when it was felt that the former group members were relatively mature, were coping adequately with their problems, or were in no immediate need of further help. Sometimes the girls were not very sensitive to the difficulties of co-members who looked for problem solutions that might be in conflict with their parents' values. These girls felt secure in their choice of "right and wrong." Their stable sense of identity seemed to stem from their belonging to closely knit family units with definite sets of values that were never questioned by the girls. Most of the girls in the latter category were Puerto Ricans.

Some girls who showed severe problems—for example, serious psychosomatic symptoms, psychotic trends, or who were "acting out" severely—were referred to the casework department for individual attention. After careful study, some of these cases were

carried in individual treatment; a few were later returned to the group that seemed best suited to their present needs; and others were referred to appropriate community agencies for indicated treatment. Cases representing girls who could not be reached at any level were closed or kept inactive awaiting further developments.

Observation Groups

The immediate results of these new types of groups were so encouraging that it was felt advisable to refer the eighty new girls into short-term Observation Groups and repeat this screening process with them. Data obtained were used to determine which type of group seemed most suitable for each girl. The use of short-term groups for screening purposes seemed justified because an analysis of the former groups showed that observations made very early in the life of these groups were seldom contradicted by observations gained in later meetings. After five to eight sessions in the Observation Groups, each member was referred to the specific treatment group of choice. Only very rarely did it become necessary to transfer girls to a different type of group.

The following chapter will discuss in detail treatment experiences and observations made with respect to the total experimental sample, including the girls in individual treatment and those in both phases of the group treatment program.

V. Treatment Experiences and Observations

THE OBJECTIVE EVALUATION of the results of this project and the effectiveness of the treatment intervention was built into the research design as a comparison of the treated sample cases and the untreated control cases. However, among the experimental cases there were variations in the type of service offered, in the efficiency with which contact was established and maintained, in the degree of involvement achieved, and in the amount of time expended on each case. Social workers and group therapists are accustomed to categorizing cases along these as well as more clinical and diagnostic dimensions. In supervision and consultation, varying treatment plans and goals are tailored to meet the specific needs of clients. In the course of treatment, these plans and goals are frequently reevaluated and adjusted in the light of experience. The determination of client involvement and evidence of movement in each case are also subject to frequent review by the professional staff.

These judgments, quite apart from the experimental design, constitute a type of evaluation using such categories as "before and after," "involved vs. uninvolved," "treated vs. relatively untreated." Previous research[1] has indicated that within the necessary limitations of such designs, trained and objective caseworkers can achieve relatively high levels of validity and reliability. While the design of this research is not forced to rely exclusively on such methodologies, the experiences and observations of the caseworkers and group therapists constitute an additional source of data, supply valuable insights into the treatment process, and provide a body of subjective judgments against which the more objective results may be checked.

The primary data for these judgments of treatment experiences and observations are the case records of the workers and the group records of the therapists. These individual and group records were reviewed regularly by the supervisors and served as the basis for periodic discussions with the appropriate consultants. The reports of these consultations were also incorporated into the permanent records of each case and group. In preparing summaries of this material for research purposes, a supervisor and the director of casework read the complete records of all individual cases. The senior group therapist and the group therapy consultant read all of the group records. Each of these readers prepared an extensive analysis of the cases involved and these documents, in turn, became the primary source material for this chapter.

INDIVIDUAL TREATMENT[2]

Insofar as the experimental setting would permit, the 53 cases referred for individual treatment in the first phase of the project were handled within the framework of the agency's normal intake processes. When these were not effective in reaching a girl, more intensive efforts were directed toward making contact with her and finding some way to involve her in the agency's program. In six of these cases, such efforts were of no avail and the girls were not seen at all. When the caseload was reviewed by the director of casework, a little more than half of the girls who were seen, 27, were not considered to be involved in treatment to any appreciable degree. The other 20 girls were judged by their caseworkers to have been treated significantly.

Cases Not Seen

Of the six cases not seen, three were discharged from school before casework contact could be attempted. Of the other three, one ran away from home prior to her first interview and could not be located, one girl's grandmother who could not speak English refused to give permission for the girl to attend, and one girl was so fearful that she could not be encouraged to make even the first contact with the caseworker.

Cases Not Involved

The 27 cases considered not appreciably involved in treatment were seen from one to nineteen times by the caseworkers, but little or no progress was reported toward motivating the clients to use the agency's services constructively. Three of the girls were seen once, one was seen twice, four were seen three times, and four were seen four times. In contrast to these 12 short-term cases, 11 girls had from 5 to 8 interviews and 4 girls had from 11 to 19 individual sessions.

These 27 girls ranged in ages from fourteen to seventeen years, with a median age of 15.7 years. Fourteen were Negro, 9 were white, and 4 were Puerto Rican. Thirteen of them were Roman Catholic, 9 were Protestant, 2 were Jewish, and the religion of 3 was unknown. Group intelligence tests from the school's records were not complete, but the scores available ranged from 65 to 100, averaging about 85. Since group test scores are usually lower than individual test scores, the intelligence level of this group of cases should not be considered abnormally low. The clinical diagnoses of the majority of the girls in this category were not precisely known, but severe disturbance was suspected in 16 cases. Of the other cases in this group, the disorders of 7 were classified as character disorders, 2 as schizophrenia, and one each as psychoneurosis and extreme dependency.

Five types of disposition were made of these 27 cases. The following descriptions indicate the number of cases of each type and include a brief case history of a typical example of the girls in each group.

(1) Six cases were either known to other agencies or referral was made for special services. Lola Thomas,* for example, was seen five times by the caseworker. She was an only child, born out of wedlock. She had been a behavior problem in school for some time and had come to the attention of the Juvenile Court for delinquent behavior before being referred to Youth Consultation Service. She had run away from home, been remanded to Youth House, and paroled in the custody of her mother. This example is typical of the cases, such as many Youth Board referrals, that come to the attention of an

* All names and other identifying information about clients have been altered to preserve anonymity.

agency so late that casework is of limited utility. Lola obviously needed help and might have received it from a competent agency if she were available to help. She ran away a second time, was sent back to the Court and placed in a New York State Training School for girls. No progress was reported in the agency's brief contact with Lola, although the decision was made to attempt an authoritative role in an effort to compensate for her mother's limitations.

(2) Five girls were discharged from school early in their contact with YCS. One of these, Louise Chamber, was a shy, passive girl of low average intelligence, considered by the caseworker to have a weak ego, diagnosed as schizoid. She was seen thirteen times in individual treatment. An effort was made to establish a relationship that might help her feel less fearful and become less withdrawn. Individual treatment did not seem able to accomplish this and group therapy was felt to be the treatment of choice. Therefore, Louise was referred to the agency's regular activity group therapy program. However, she went to only one group meeting before she dropped out of school. Efforts were made to help Louise return to school, but school authorities would not permit her to continue after her seventeenth birthday because of her low intelligence and poor performance. Without any connection with the school, the agency was not able to maintain contact and the case was closed.

(3) Four girls moved out of the city early in their contact with YCS. Freda Klein, for example, was seen twice and then transferred to a high school in the Long Island community to which her family moved. These two interviews did not provide enough indication of need for treatment to warrant a referral to an agency near her new home. Both the caseworker and the guidance counselor thought Freda was reasonably well adjusted and would require no further attention from a social agency at this time.

(4) Two girls were judged to be functioning adequately and were not pursued in the face of extreme resistance. Elsie Wharton was seen eight times. She was the foster daughter of a childless couple who had separated the year before Elsie came to the attention of YCS. She was doing fairly well in school, was active in the Glee Club, but seemed to have many problems in her relationships with her estranged parents. According to the caseworker, she was exceedingly resistant to efforts to establish a "real" relationship with her. The conclusion was reached in psychiatric consultation that Elsie was probably a psychopathic personality. A sustained effort was made to maintain contact with her in order to explore this tentative diagnosis and to offer her a supportive relationship. However, this failed and Elsie withdrew from any further contact with the agency.

(5) In ten cases the girls were judged by the caseworkers and supervisor to be too disturbed and fearful for individual casework to be hazarded. Bernice Claussen was seen eight times and her mother twice. She was a very depressed, fearful girl with a poor self-image and was diagnosed as schizophrenic. The record describes a very pathological family history, with the mother having been declared unfit because of heavy drinking and the children removed by the Court when Bernice was nine. The Court had found the mother to be somewhat improved and the children had been returned to her some years before Bernice was referred to YCS. Both mother and daughter were extremely fearful of contact with anyone. If a relationship could be established, the treatment plan was to use a mental hygiene approach with a limited goal focused on clarification with Bernice of some of her extremely unrealistic fears with regard to herself. However, neither Bernice nor her mother became involved in treatment; both withdrew. One year and four months after the case was closed, Mrs. Claussen telephoned to complain that her daughter was misbehaving and engaged in sexual activities. An appointment was offered which was not kept.

In most of these 27 cases the families were reported as not interested in having any contact with the agency, although they had given permission for their daughters to be seen. In one situation, the mother had got in touch with the school about her daughter's problems and in another situation the father had been seen by school personnel. Two mothers made appointments at YCS but failed to keep them. Seven mothers were seen by the caseworker and 16 did not make any contact or respond to any of the agency's efforts to reach them.

Cases Reported to Have Been Treated Significantly

The other 20 cases referred for individual treatment were judged by the caseworkers to have been sufficiently involved in the relationship for it to have had some significant effect upon them. The number of interviews with these clients ranged from one client who was seen only five times, 15 who were seen from ten to fifty times, and four who were seen from sixty to ninety times. The average for this group was about 35 interviews. This figure is approximately one per week for a school year of nine months. These girls ranged in age at the time of referral from

fourteen to seventeen years but their median age, 15.4 years, was somewhat lower than that of the group who did not become involved. Eight of these clients were Negro, 8 were white, and 4 were Puerto Rican. Nine were Roman Catholic, 7 were Protestant, 3 were Jewish, and one was Greek Orthodox. Their group IQ scores as reported in school records ranged from 60 to 100, averaging about 87. The differential diagnoses made of the cases in this group were clearer than those in the previous group. The disorders of ten were classified as schizophrenic, seven as character disorders, two as psychoneurotic, and one case was judged normal but living in a severely pathological home situation.

The disposition of these cases was judged by the caseworkers to fall into three categories corresponding to the degree of improvement observed in each girl.

(1) Six of the cases were judged to have shown no appreciable improvement in their behavior and psychological adjustment. Of these, three were diagnosed as character disorders and three schizophrenic. In three situations the mothers were seen one or two times, but no contact was made with the families of the other girls. Three of the girls became pregnant out of wedlock shortly before or just after withdrawing from treatment. All of these girls were said to be severely disturbed and unable to respond to casework methods. The workers were doubtful that they could have been successfully treated by any method. The inability of the workers to reach these girls was not due to lack of time or limited contact; each client was seen an appreciable number of times. The interviews numbered 65, 49, 29, 17, 13, and 10, respectively.

(2) Eight girls were judged by the caseworkers to have improved when the case was closed. The average number of interviews with these girls was about one-half that received by the girls who showed no improvement. One girl in this group, Doris Kramer, was seen only five times. The goal of this contact was to help the mother accept Doris' intellectual limitations and refrain from putting pressure on her to strive for impossible goals in her school work and career plans. The caseworker judged that this limited goal was accomplished. The other seven girls were seen on a weekly basis for three to eight months. They all related well

to the treatment situation and were judged to have improved in their school performance and social functioning. The workers felt that their clients would make adequate work adjustments after graduation and, in all probability, would achieve normal marriages. Two of the girls were said to need further treatment through a family agency but both families refused to involve themselves in another referral. However, it was felt that these girls made a good adjustment to the limitations of their families.

(3) Six cases were discharged by YCS as greatly improved. Three of these girls were seen on a weekly basis for about one year and the other three were seen for more than two years. Three girls in this category were Negro, one was white, and two were Puerto Rican. All of them were said to come from extremely unhappy and deprived home backgrounds, and three of the families were judged pathological by the caseworkers.

> In the case of Jane Spanner, the second oldest of eight siblings, the agency's activity group therapy program and camping services were used in addition to individual casework. Support, environmental manipulation, and help with health problems, including a serious dental condition, were all a part of the treatment plan for Joan Ehrenwald. According to the record, Nora Jones was an extremely fearful girl with marked anxiety in regard to authority figures and a primary problem in her relationship to her mother. At first Nora was unable to relate at all except to ask a few questions designed to test the worker. She thought all adults were against her. As she came to trust the worker, a marked improvement in her social life was reported and her relationship to her mother became more meaningful and satisfying. The caseworker found that Nancy Mann at first had difficulty verbalizing but as she became able to discuss the problems she faced at home, she was better able to handle her relationship with her mother. When the case was closed, she had an excellent job but was considering going back to school to study practical nursing. Early in the course of treatment, Daphne Poteat, the only white girl in this category, was faced with the responsibility of caring for five siblings when her mother deserted the family. She managed to keep up her school work, run the household, and help her father in the small family business.

In spite of these handicaps, all of the clients are said to have responded well to the casework situation, used the opportunity

appropriately, and showed great gains in their school performance and personal adjustment. All of them graduated from high school and obtained jobs in line with their vocational training. Two of the girls had married at the time this report by the casework director was prepared. In the course of treatment, both the mother and the fiancé of Rita Tollo, one of the Puerto Rican girls, was seen by the agency. Some time after her case was closed, Joan Ehrenwald returned to the agency to discuss some problems she was encountering in her marriage. She accepted a referral to a family agency for marital counseling.

FROM GROUP TO CASEWORK TREATMENT

In the later years of the project, girls were referred from groups to the casework department for individual treatment when the group therapist and consultant thought this might be the preferred treatment technique, when there were special or unusual problems requiring individual attention and handling, or in order to clear the case for official closing by the agency for whatever reason. In the course of the project, 72 cases were so referred.

The subsequent handling of these cases by the casework department resulted in effective contact being made with one-half of the referred clients. The 36 cases in which no response could be elicited were closed for a variety of reasons, including inability to see the client at all, removal of the client from the school or from the city, extreme resistance on the part of the girl, or a clinical decision that the girl was not suitable for casework treatment in any event. In two instances, the records were insufficient to make a judgment as to what if anything had been done with the case after it was referred.

Of the 36 cases with whom some meaningful contact was made, six were successfully referred to other agencies, clinics, or hospitals where the girls' particular problems could receive the specialized services indicated. Nine of the cases were judged upon workup not to require casework treatment. Of these, six were returned to groups as the treatment of choice and three were successfully closed as requiring no further services from the agency at this time. In the remaining 21 cases, the casework goals were

judged to have been successfully met within the limitations of the clients' abilities and the agency's capacities. Marked improvement was reported for all of these cases and the clients were judged to be functioning as well or better than would be expected. Several of these were still active in the agency at the time this report was prepared.

GROUP TREATMENT[3]

As indicated earlier, the decision to try large unselected observation groups as a referral technique was made in the spring of 1957 when one group was activated. Four others were activated early in the next fall term and continued through the school year. With a change in group therapy consultants, the entire group treatment program was reevaluated the following year and the decision was made to continue working with general discussion groups which, however, should be smaller in size—composed of seven or eight members instead of 13 as in earlier groups. The girls already in the program and the new referrals coming from the short-term orientation groups were reassigned to one or another of the specialized treatment groups designed to meet their particular needs.

Group Referral

In group therapy as conceived by the agency, as in individual contact, the levels and goals of treatment should be based upon a psychosocial evaluation of the client. The groups in this project had to proceed without the benefit of what was considered significant diagnostic material since only the more general facts were known. However, the girls were adolescents of the same age range and thus could be assumed to be subject to conflicts characteristic of their age group, such as ambivalence about dependency needs, conflicts about sexual identification, and so forth. All of the girls experienced adolescence in settings that had much in common. They lived in the same cosmopolitan city with rapidly changing neighborhoods. Also, many of them lived in slum areas characterized by such problems as overcrowding, family disorganization, gangs, dope addiction, and the like. Attendance at

the same coeducational, vocational high school was another experience common to all the girls.

Clearance of all cases through the Social Service Exchange showed that with a very few exceptions none of the girls had previously been brought to the attention of a private social agency. However, many of their families were known to hospitals, the Welfare Department, and to the courts, particularly with regard to delinquent siblings. The data on their school records, which were used as the basis for including them in the research sample, did not always indicate whether the difficulties were isolated instances due to a specific set of circumstances or were chronic conditions that marked the girls as present or potential behavior problems. The specific nature and etiology of their problems were not known at the time of selection and referral. There was no indication of how the girls felt about their problems or whether they were willing or able to attempt to find new and more constructive ways of coping with them.

In the absence of more specific information, the group therapist proceeded in the same way an intake worker might start with a new client. First, an effort was made to get the girls to feel free to bring their problems to the group for discussion and to express their feelings about important events in their lives. To reach this goal, the worker tried to communicate to the girls that she "understood" adolescent girls, that she liked and respected them, and that each of them was important to her. She was accepting of their feelings and showed by her nonjudgmental, permissive attitude that she was not like the adults they had known outside the group.

As frequently reported in treatment situations, the group members tested the worker's reliability and the limits of her trustworthiness. In the groups, this process of testing was facilitated, in contrast with individual contact, especially in working with adolescents, where it is often said to present a bottleneck to the treatment process. The group therapists found that the girls in the project groups made full use, at times in trying ways, of the group's possibilities to test the worker. However, they were said to come rather quickly to feel that it was safe to trust the worker

in spite of a lingering feeling that there might be a concealed line of communication between the group leader and the school, which was understandable in view of the special setting in which these groups operated.

UNSELECTED GROUPS

Work with the first experimental group of 13 members was begun in April, 1957. These girls, randomly selected from the potential problem research pool, were assembled in a lounge at the school. Eleven of them met with the senior group therapist and the two who were absent joined the group for the first meeting at the YCS headquarters. After a brief discussion of the agency's program for adolescent girls, their interest was readily observable in their relaxation and eagerness to ask pertinent questions about the program and their participation in it. Their questions included: "Why were we singled out?" "How many will be in the group?" "How long will the meetings be held?" They seemed to the therapist to be reassured by the answers and all of them indicated an interest in continuing.

This initial group met five times prior to the close of the school term and the beginning of the summer vacation period. The leader reported that from the very first session the girls responded well to the meetings and there were only eight absences at the five meetings of the group held before the summer recess. A sixth meeting was scheduled but it conflicted with the final examination period at the school and was not held. In reviewing the first five meetings, the staff found that considerable aggression had been expressed by the members and that their impulsive remarks had probably created feelings of anxiety. The therapist therefore planned to increase her efforts toward channelizing the group's expressions of aggression.

From the beginning, the meetings seemed stimulating to the girls and the worker was impressed with the response from the group as a whole. She reported that most of the girls had no difficulty in talking freely and openly. At times they seemed somewhat critical of each other, but were able to draw out the less active members and involve them in the discussions. The

topics of conversation reflected the whole gamut of adolescent preoccupation. Central themes in this and later groups were: boys (correct behavior on dates), school (reaction to authority), and parents (conflicts between independency-dependency needs). Problems of life in the community were frequently discussed with fear and hostility. These conversations reflected the hardships of living in slums and rapidly declining neighborhoods. However, there was also much discussion of their hopes for the future. Interest was expressed in vocational planning, in gaining employment, and in becoming responsible citizens. In all of these discussions, the worker recognized the girls' intense need for direction and the seriousness with which they were struggling in their desire to be heard, their need to be understood, and their wish to be mature.

The initial impression of the therapist was that the girls saw this experience as different from a student-teacher relationship. This was shown most clearly in their open discussions of topics not generally shared with adults. This freedom of expression was believed to develop as a result of the worker's permissiveness, acceptance, and understanding of the girls as individuals. It was immediately apparent to the worker that they were deeply concerned about their personal inadequacy, their lack of adjustment, and their inability to cope with tensions and problems of their daily lives. According to the therapist, once the group members came to feel that there would be no retaliation for whatever they would say in the group, they freely discussed their more intimate problems. They ventured to express fears, wishes, and fantasies that they had learned, at times the hard way, to suppress on the outside, especially in the presence of adults. However, as the girls frequently admitted, even in the exclusive presence of peers they had retained a social mask more than they did within the group.

Types of Girls Referred

None of the girls referred to the unselective groups had had previous casework or group counseling experience. The groups were all racially mixed, including Negro, white, and Puerto Rican girls. The first group was composed, as the group therap-

pist appraised them, primarily of immature, impulsive, and "acting-out" girls. Their average age was sixteen years and they were tenth-year students. All had low-average intelligence test scores in their school records, except two who were of superior intelligence and planned to attend college. In the four unselective groups that were started in the second year, the average age was fourteen years and most of the girls were in the ninth grade. In these groups, the IQ scores were higher and a greater number of the girls were preparing for entrance into college. At the time of referral, they appeared to the worker to be much the same as girls in the first group, but the manifestations of their problems and the use they made of the groups differed widely. The following is a cursory outline of the types of girls referred to the unselective groups as the leader saw them. There is overlapping in the types mentioned.

(1) *Girls Whose Behavior Was Normal.* These girls were seen as showing good ego strength and they functioned well in school. Although they came from families with varying degrees of apparent disorganization and pathology, they seemed equipped to deal with their problems. They were an asset to the groups, furnishing acceptable peer models for the more disturbed girls and exercising a stabilizing, reality-oriented influence in the discussions.

(2) *Girls Exhibiting Neurotic Symptoms.* The neurotic anxiety of these girls was, in the view of the therapist, reflected in their inability to work up to their intellectual capacity in school and their distortions of themselves, their parents, and peers. Some of these girls suffered from psychosomatic symptoms, such as headaches, allergies, and asthma. For the girls who somatized their problems, the group was not believed by the worker to be of real help in their underlying pathology, but she believed that a few of the neurotic girls used the group to work through some of their reality problems. The nature of the groups and the time limitations under which they operated during school hours precluded the structuring of a therapy group that the worker believed would be of sufficient intensity to answer the needs of neurotic girls. In spite of this shortcoming, however, the workers noted that girls

with problems of a psychosomatic nature showed signs of improvement. Wherever possible, these girls and their families were encouraged to accept referral for treatment in a more appropriate setting, such as a hospital, clinic, or private therapy.

> Doris Dailey is an example of a neurotic, nonverbal girl who was reported to make a positive use of the group. She was of average intelligence, but was not working up to capacity in school and was frequently tardy. Doris never missed a session of the group and her attendance in school improved. Initially, she was shy and appeared self-conscious. It took her a long time to verbalize any problems to the group. When she did, it concerned going on a trip; and her interest in the group was shown by helping with the refreshments and planning a Christmas party. Doris is the third oldest in a family of six children. The last two children in the family were born out of wedlock. Doris' father was killed following an argument at a card game. An older brother was known to the courts for possession of marijuana. The mother worked full-time in domestic service. The worker felt that Doris had no real ties at home and was completely uninterested in her family. The group seemed to be one of her few positive experiences. When Doris finally did discuss her problems, she felt this to be a great achievement for her and acknowledged it openly. She later expressed quite well the positive effects that the group had in helping her develop self-confidence. This improvement was also reflected in her better school adjustment. While the worker recognized that the underlying pathology of this depressed, phobic girl was not worked with, it was concluded that the group experience did sustain Doris and enable her to function better in her immediate situation.

(3) *Girls Suffering from Poor Ego Strength.* These girls tended to come from families beset by severe social pathology. The intelligence level of many of them was interpreted to be dull normal and a few were considered even lower. The group leader saw them as immature, restless, depressed, nonverbal, belligerent, and without conscious awareness of their problems or any motivation to seek help. In the early meetings, the immature girls were preoccupied with food and brought candy and potato chips to eat throughout the sessions. For the most part they showed no ability to verbalize or even to recognize their problems. Their families were deemed generally inadequate and openly rejecting. Their

homes tended to be primarily matriarchal, with several siblings. The girls usually had heavy household responsibilities which made their continuation in school quite unlikely. Within this classification, two groups of girls could be differentiated by the therapist, one tending to act out problems, whereas the other seemed, on the surface at least, to function surprisingly well.

Agnes Alanza, a fifteen-year-old Puerto Rican girl in the first group, was chosen by the group leader as representative of this type. In elementary school, Agnes was described as overtalkative, but a willing worker and liked by her peer group. Her grades throughout her school career were borderline and there were notations on her record that indicated she was unhappy at home. Before entering the group, she was described by her junior high school teacher as "downright nasty." She was frequently absent and late for school. In the group, she was a compulsive talker who tended to dominate the sessions. In the beginning, there was some question as to whether she could be tolerated, but she remained in the group for more than a year. She was always a stimulus for the group, although at times it seemed to have a negative effect. She impressed the worker as one of the sickest girls in the group. Agnes presented herself as a highly competitive girl, with very little feeling for or interest in other members. She tended to provoke arguments, attack new members in subtle ways, and consistently to generate tension. She was markedly preoccupied with gory stories. The psychiatric consultant reviewing her case noted that these gory stories indicated how she libidinized everything. She was obsessed with sex in early meetings but, as she continued as a member of the group, this tendency diminished and at the time the cases were reviewed by the supervisor for this report Agnes appeared much less obsessed with sexuality. Overt anxiety was detected by the therapist in her later stories and her fantasy material was considered less bizarre. In this respect, the therapist thought Agnes had shown some improvement as a result of her group participation. Her functioning in school had also become noticeably better. Teachers commented, for example, that whereas previously she had been very disagreeable, she was now pleasanter and responded quickly when asked to help. She could come to her teacher and tell her when things went wrong. By the end of the year, Agnes was coming to school regularly and her tardiness was no longer a problem.

(4) *Girls Showing Psychotic-like Behavior.* These girls were characterized by the group therapist as showing marked depression,

extreme anxiety, and almost total disorganization in their lives. Mental illness and delinquency were frequently noted in their family histories. In groups they responded by being overtalkative and monopolizing the discussions, or by extreme withdrawal and suspicious unrelatedness or self-preoccupation. Some of these girls could not be kept in the groups as constituted and had to be referred to other sources of help.

Caroline Petty is an example of a sixteen-year-old girl whose psychotic-like behavior necessitated her later referral for casework consideration. When referred to the group, her grades were borderline and she was very frequently absent and late for school. On her permanent school record, her ratings on dependability and cooperation were extremely poor and there was a drop in her IQ scores from 91 to 64 during the last four years, which indicated, the therapist believed, a marked depression. The worker described her as an attractive, slender girl with clean features. During the early sessions of the group, Caroline appeared sullen, dejected, and never smiled. She gave the impression of being unduly critical of the other girls and usually spoke only after there had been considerable interaction among the other group members. In the first meeting, when one of the girls talked about marriage, it was Caroline who hoped that she would consider this seriously, pointing to the heavy household responsibilities. The meaning of this remark became clear in a later session when Caroline discussed her own family situation. She had to cook, clean house, and watch the younger siblings. She complained about her father, who never gave her permission to go out but she went out anyway. She did not give the impression of one who openly defied her family without cause. At school, Caroline seemed to see herself as victimized by her teachers. She was failing for no apparent reason. During the refreshment periods, Caroline seldom socialized with the other members, but directed her conversation to the worker. Through the Social Service Exchange, the worker learned that Caroline's mother had been committed to a state mental hospital since Caroline was six years old, following a suicidal attempt after the birth of the youngest brother. Later, Caroline confided to the group that her mother was in a mental hospital. The father was described as hostile with paranoic trends. The worker felt that Caroline needed relief from her inner pressures and, in view of the positive relationship she had developed with the worker, the subject of referral to the casework department was discussed with her. The experience in the group was believed to have helped her recognize that she could talk to an adult, that at least some adults would listen to her

without judgment or reproach, and that such interaction was helpful and meaningful. The worker felt that without the reassurance she received from the other group members it was doubtful that Caroline would ever have been able to take this step toward treatment.

Content of the Group Discussions

In contrast with similar girls in individual casework, the girls in these groups were seen by the social workers as less tense and apprehensive and better able to ventilate their feelings, whether hostile or not, about unhappy and depressing facts in their lives. Whenever they did so, they seemed to gain reassurance by noting that others had similar problems. Each week a different girl emerged, presenting her own particular problems, and most of the girls in the group could relate to the material.

The following are illustrations reported by the group therapist of the ways in which the girls began to bring out their problems and how they helped each other view these problems more constructively.

At the first meeting, Mariann Rubio, a petite, fifteen-year-old Puerto Rican girl, became the center of attention when she announced her plans to marry soon. She presented the details of her plan in logical sequence. To the worker the forthcoming marriage seemed a means of escape from a poor mother-daughter relationship. The girls were forceful in their criticism of her early marriage, giving sound and rational reasons why she should think carefully before acting. They questioned her boy friend's maturity and her own readiness for marriage, and stressed the need for her to complete her high school education so as to be prepared for life. Mariann listened intently and responded by saying how "fed up" she was with school and with her past life, which was beset by frustrations and deprivation and a feeling of being unloved. The girls immediately picked up her tendency to act out and, through their discussion, helped her think what she was getting herself into. This kind of discussion became the stimulus for other girls to bring up their problems with boy friends and their aspirations for the future.

At the fourth meeting of one group, Nola Sanborn said, "Don't let's talk about fighting, let's talk about mean mothers." Beatrice King thought that mothers were not mean; Daphne Rappo said hers was. Beatrice answered by saying that mothers have to do certain things that girls don't agree with. "Mine isn't mean except when she

beats me with a strap, but she doesn't do that much anymore." Daphne recalled that boys wear belts with wide buckles and sometimes parents take these belts and use them to punish children. When the worker asked what caused disagreement between their mothers and themselves, Beatrice explained that her mother was broad-minded about sex and boys. Nina Quintero picked this up by saying that her mother would let her boy friends come to the house if her sister or brother was there. Following this, there was discussion about mothers' fears of leaving girls alone with their boy friends. Thus even in the earliest sessions, the girls revealed themselves, complained, and defined their problems in the group setting.

In order to get a more complete picture of each girl's total environment, the agency decided to employ a skilled caseworker to explore individual family situations through collateral contacts, Social Service Exchange clearances, and visits with parents wherever possible, to consult teachers and school guidance counselors, and to arrange for psychological testing whenever necessary. This effort to gain as clear a picture as possible of each girl in her total environment—community, home, school, and therapy group—was limited by the personnel and funds available to the agency. Within these limitations, however, considerable information was collected, especially from interviews with parents and teachers.

Contact with Parents

The caseworker assigned to the project for this purpose saw the parents of girls in three of the first five groups. Six parents of girls in the first group were seen; none of these families was intact. In each case the father was missing through divorce, death, or desertion, usually when the client was quite young. The fathers, where known, tended to be delinquent, known to the courts on charges of rape, dope addiction, or gambling. One girl had lived with a maternal aunt since infancy and knew very little of her natural family. Three of the families were self-sufficient and the others received assistance from the department of welfare.

Of the twelve parents of girls in the later groups who were seen, seven were separated and nine were self-sustaining. In all the groups, families tended to be quite large, ranging from one to

eleven siblings with an average of about three. In every case the parent seen was the mother, except in the one instance when the father responded to the invitation to meet the caseworker. Social and environmental pathology was found by the caseworker to permeate all the families seen, and was supposed to be even more pronounced in those that could not be seen directly.

The caseworker felt that one contact was insufficient for gaining an adequate and reliable picture of the family situation. She reported, however, that the parents seemed to be relieved that someone else was handling their adolescent daughters. In general, they seemed to find it hard to cope with the problems that arose; the caseworker believed this to be due to their own rejection or overburdened feelings as parents. They were positive in their attitudes toward the groups.

> The mother of Julia Harris reported that her daughter was taking more interest in reading the newspapers and in talking about and judging people and events. She was much more alert to what was going on around her. Julia's mother was not sure whether this was part of the process of growing up or whether it was the influence of the group. Joanna Light was an anxious, conflicted girl, preoccupied with parental restrictions. Her mother noticed that she was less impetuous and fought less with her sister, which the mother attributed to the group experience. Ann Tomas was frequently absent from school and became increasingly depressed. She revealed to the group that she shared a bed with her younger brother and was afraid to go to sleep. Her mother was interviewed and the sleeping arrangement was changed. Ann's depression was no longer apparent. In only one instance did a mother actively interfere with the group treatment of her daughter. The therapist reported that Beatrice King became able with the group's help to stand up at times to her mother and that, in retaliation, Mrs. King removed Beatrice from the group. The worker thought this step might have been prevented if she had had the opportunity to work with the mother in a parents' group.

The workers felt that, in general, most of the parents would have responded to some form of group participation. For the most part, they were not deemed ready for intensive individual contact. Viewing their feelings of inadequacy as parents, the workers felt that a mothers' guidance group would have been of immeasurable help if the agency had had facilities for such a program. In fact, one parent with serious problems was seen by

a YCS caseworker over a period of several months. Another parent, who expressed positive feelings for the agency, was later involved in treatment when her daughter became pregnant out of wedlock.

Contact with the School

The high school emphasized the importance of preparing for work after graduation. Its guidance department tried to be sensitive to the students' incipient problems, taking the initiative in helping them, and following through with appropriate plans and decisions. In the agency's contacts with the school, consultations were held with grade counselors and trade and academic teachers. Generally, the girls involved in the group program were believed to show progress in school. Improvements were especially noted in attendance and grades. In reporting on effects, the senior group therapist selected a few representative cases to show these apparent trends.

> Betty Randolph, a compliant, immature girl of average intelligence, seemed to have greater potential than she exhibited, and in the course of the year while in the group she became a leader in school and assumed responsibility with increasing assurance. Birdie Ann Rhea showed improvement in her grades but was still considered a problem in regard to tardiness. Sally Shell's marks improved from C to B in her trade courses and in conduct. There was decided improvement in Gertrude Cresco, who was admittedly very shy and never spoke up. A teacher reported that she "now smiles and even gets up enough nerve to speak in class." She participated more actively and got on the honor roll. There were contradictory reports from the school regarding Doris Dailey. Some teachers found her less shy and making progress in her work habits. However, in other classes no improvement was reported. Caroline Petty had improved, particularly in her response to male teachers. Julia Harris' performance in school was uneven, but she had won a special award in her trade course. Aline Herrero, an ardent Jehovah's Witness from a Catholic background, developed from an anxious, frightened girl into a confident, secure member of the group. She volunteered that the group had helped her greatly. Her appearance was considered better and she seemed to place her religious interests in perspective. Two very depressed and withdrawn girls showed no improvement, either in the group or in their school performance, and they were referred for individual casework treatment.

In general, the teachers and guidance counselors were enthusiastic about the effects of the groups and, in the therapists' view, tended, if anything, to exaggerate the overall effectiveness and impact on the girls' behavior and progress in school. The program seemed to have an effect on the teachers themselves and to orient them toward a new appreciation of the guidance department and the work it was trying to do.

In reviewing the experience after the first year, the staff commented on the girls' attempts to understand themselves and to overcome their inadequacies and low self-esteem. The staff believed that as a result, some potentials were revealed. The girls ventilated their feelings in the group and gained some understanding of how to handle specific situations, whether at home or at school. As these girls felt more confident, they increasingly revealed more about themselves. At times the worker gave individual attention to a girl or her family when a problem indicated the need, such as referral to a clinic, intervention with the housing authority, and the like. That the groups had reached these girls to some degree was evidenced by their regular attendance at meetings, their participation whether active or passive, and the progress they seemed to make, particularly in the area of school achievement.

Observations

In evaluating the experience with the first five, unselective groups, the agency staff felt that the workers had definitely made contact with these girls, although not in great depth or at a sustained level. The staff believed, however, that such girls would not have been referred to an agency if it had not been for the project. The staff felt that the general bases for referral—occasional truancy, not working up to capacity, unreliability, shy withdrawal, immature behavior, and so on—did not indicate the degree of disturbance later observed by the workers. Although the needs of these girls were less apparent and most of them had not been in serious trouble in the community, the workers found the girls just as much in need of help as those who usually come to the attention of social agencies. At the same time, these clients

seemed less resistant than adolescents whom the workers had seen in individual treatment; they were more willing to tell how they viewed their problems, both through nonverbal communications and through earlier verbalizations.

Although these first groups were large and unselective, the staff felt that a certain kind of constructive change occurred among the girls. For the most part, the improvements seemed temporary and the workers questioned whether they would be lasting. The clients were viewed as having limited psychological involvement in therapy and as lacking conscious motivation to change. The workers felt that a longer time was needed for gains to be integrated. Nevertheless, they felt that attention given to acute social and psychological problems helped to alleviate anxiety when it did occur. Extreme behavior was readily apparent in the groups and was attended to quickly. The staff felt, however, that the fact that the girls were accepted for referral without the benefit of a diagnostic workup limited what could be accomplished by the staff, and they considered the data obtainable through group observation inadequate to give an accurate picture of intrapsychic problems. The staff concluded that in unstructured groups of that size, many girls who might benefit from more deliberately structured group therapy could not be reached in a meaningful way.

An attempt was made to meet this situation by developing new principles for the formation of groups. The new groups consisted of fewer members and an attempt was made to be selective about their composition. The underlying assumption was that, if the members were better able to identify with each other, the leader of the group would be in a position to give them more constructive help. The basis for the composition of these smaller, selective groups has been discussed in the previous chapter.

SELECTIVE GROUPS

The new series of small, selective groups was introduced by reassigning girls from the earlier unselective groups and adding new members from the current orientation screening groups that were subsequently formed for all new referrals. During the remaining

part of the project, 13 selective groups, averaging 7 members each, were formed. These consisted of 5 Observation Groups, 2 Family Life Education Groups, 3 Interview Treatment Groups, 2 Protective Groups, and 1 Activity Group. All of these were not in existence at one time and many of the girls were in more than one group. Generally, girls who were placed first in the Activity Group were later put in other groups or referred for individual treatment.

The group leaders reported that when each group was activated, the girls sought direction as to the topics they might discuss. They did not see how just talking about their problems would solve anything. This led to a discussion between the workers and the girls about the understandings that can come from talking. The workers saw in the discussion a release of suppressed material that was a major ego strengthening device and the group members soon experienced this as helpful. However, the group therapists believed that treatment gains could be sustained only through appropriate handling ("working through") of the material. Much of the "working through" was done by the group members themselves, with the workers shifting discussion only in minor ways, as when it seemed indicated to protect a member against an attack for which she was not ready or to pick up a topic that the members had dropped because it seemed to be too threatening. The attitude of the worker, her manner of "mulling over" problems, her consistent willingness to accept expressions of feelings were believed to influence the members to work with each other in an atmosphere that was characterized by mutual respect and trust. This is in contrast to the larger, unselective groups in which some members, operating on different levels, had interfered with the smooth flow of this process. In the selective groups, the workers observed that the girls were able to focus on problems with more sustained interest and showed more understanding of each other's difficulties. They provided each other with an opportunity to view their common problems in perspectives different from those to which they were accustomed. Often a member was led to reduce her feelings of guilt over "forbidden thoughts" once she realized that "others were in the same boat."

The girls were usually more receptive to suggestions from peers than to those coming from the adult leader. They readily accepted interpretations from each other which, had the worker made them, might have increased their anxiety and caused them to become defensive.

In working with the groups, the therapist's view of the nature of the client's problems was frequently challenged. As the group therapists saw it, they had to acknowledge the full impact of the reality situation upon the client's distress, whereas the worker in individual contact was more likely to assume that the client was magnifying or otherwise distorting the problem. In group experiences, the clients had a greater opportunity to "bring in their world." When all or a majority of the members of the group, in spite of differences in their psychological makeup, almost simultaneously described situations of external stress in similar ways, the worker herself came to view the problem differently.

In work with the selective as well as the unselective groups, the group leaders felt they had an unusual opportunity to gain a new understanding of "the world of the adolescent." This was because the numbers of girls referred were much larger than those usually found in an agency's normal caseload. More unusual than this, however, was the fact that these girls had not yet met failure. Hence the worker was not obligated to focus on problematic areas, and could "listen" before "acting."

Content of Discussion

As the senior group therapist and consultant reviewed the group records, the same central themes recurred in the group discussions. A major theme was the girls' distress over sexual problems: menstruation, intercourse, pregnancy, and childbirth. In general, the workers found that the girls lacked adequate information about sex. Menstruation was viewed as a punishment because Adam and Eve had sinned. The ideas of pregnancy and childbirth were beset by fears. However, this provided the worker with an opportunity to clarify their misconceptions. The decision was made to use the worker as a major source of "information" instead of encouraging the girls to find solutions on their own, as

is often the approach in individual casework. The more didactic approach, viewed by the group therapists as essentially mental hygiene education, dictated the formation of the Family Life Education Groups for girls who were particularly in need of information and direction in this area.

Discussions of violent acts—suicide, gang warfare—occurred frequently in the group sessions. However, in the group setting it seemed clear to the leaders that talk about such things was more related to actual happenings than to the girls' inner preoccupations with such events. As far as the workers were able to determine, none of the group members was actually involved in gang activities, although some had marginal connections with the male gangs in their neighborhoods. Some, however, had friends who were active gang members and dope addicts. Once a group member, Sarah Jones, was accused of active involvement in a gang fight. However, detailed exploration of the happenings by the group enabled the worker to discover that Sarah was only marginally involved in it. She was not suspended from school as had been planned because YCS promised to continue working with her in the group.

Another main theme of the discussions in the meetings of each type of group reflected the girls' eager search for a reliable set of values that would be helpful in making the many decisions required of them in this particular period of their lives. "Is it right to date a boy who is five years older?" "Is it right to accept a gift after only one date?" "Is it right to date a boy of another religion, of another race?" "Is it right to have intercourse before marriage?" The girls helped each other explore these problems and gave each other advice. Rebellious attitudes toward parents and their own neurotic drives were seen to play some part in thwarting development of comfortable standards for behavior and the worker handled difficulties in such a light. What impressed the caseworkers who were group leaders was that the girls' individual disturbances were less responsible for their distress than their lack of a workable set of values. They seemed to be searching for an "anchorage of mind," as Suzanne Langer has termed it, which they found at least in part in the group. The group seemed to be a haven that allowed

them to find a frame of reference they had not found in the restless world outside. The dynamics of the therapy situation were considered to be particularly helpful in this process. In the group, as indicated earlier, each girl was assured of the worker's acceptance; the worker gave careful attention to details; she was always patient no matter what a girl might do or say; the worker liked and respected the girls and made them feel that they were important to her. They also got support from their peers. A member of the group who became anxious when forced to cope with a problem on the outside felt strengthened by the thought that she could bring it up for discussion in the group. Discussion could flow evenly in the group, where the train of thought was not drowned out by jazz records, where newly born, fragile feelings were nursed instead of becoming a victim to loud television noises. There was no pressure to achieve; one was allowed "to be as you are"; here one was important, one counted. Girls who had the opportunity to note repeatedly that a "nice girl" may also get into trouble, who were exposed to the painful birth of new attitudes, who had the opportunity to come close to persons with whom she had no personal or social ties could be gradually sensitized to the inner world of human beings. There was little room in their culture for this kind of emotional experience, which is vital for the growth of mature attitudes. This type of experience formed the core of the helping process of the group therapy program.

In spite of their best efforts, the girls' search for sound solutions to their problems frequently ended in failure. It seemed obvious to the therapists that the girls were inadequately equipped for the adolescent tasks required of them. What did they see as the cause of these inadequacies? Neurotic symptoms and behavior disorders due to neglect were thought to account for many of their weaknesses. However, the workers were impressed by the fact that almost all of the girls seemed to lack the emotional resources needed for handling the problems that confronted them at this period of their lives. This lack of emotional maturity was found in similar degrees among the "normal," "neurotic," and the "neglected" girls. The exception was a

small group of severely disturbed girls whose lack of maturity was "covered" by their more overt illness. The workers were inclined to assume that these deficiencies did not stem only from internalized problems or from stress due to social pathology, rather that they were caused by the inadequate guidance these girls had received from their parents, from the school, and from the community in their earlier years, and were receiving at the present time.

Even so, the workers observed that the emotional experiences in the group enabled the girls to become more mature and that they seemed, in turn, to be able to handle their problems more effectively. The staff were agreed that as social workers they needed to understand these phenomena better and to try to analyze them more scientifically.

It is difficult to probe this type of emotional experience and to test in systematic ways its role in the helping process. In the absence of more objective measures to substantiate or challenge the workers' observations and conclusions, these evaluations represent only abstractions made with a variety of purposes in mind, usually in order to prepare for supervisory conferences or for staff seminars. Often the conclusions are based on hunches alone although, occasionally, supporting data were found in psychological tests and family histories. Even without the benefit of further data, the workers and consultants felt encouraged and entitled to use some of their experiences in their later practical work. Social workers often have to perform a job in an area where theory is still vague or missing. In such instances, they venture to work with hypotheses based on experience, or "practice wisdom," to use Werner Boehm's term. To a certain extent, in the absence of more scientific data, the interpretation of the group therapy program and its consequences for the girls also had to depend on "practice wisdom."

Family Life Education Groups

As indicated earlier, the Family Life Education Groups were modeled after mental hygiene education groups that had seemed to be successful in other settings.

The workers were surprised to learn the extent to which these girls were in need of sexual information. They had assumed that many parents had given their daughters such information, and this was indeed often confirmed during group discussion. Also, New York City schools provide some pertinent instruction relating to sex and reproduction. Many girls had heard rather uninhibited talk about sex in their neighborhoods. Some girls were avid readers of the *True Confession* type of magazine in which there is much discussion of sex. Yet the information the girls had received outside the group did not seem to have been integrated by them either intellectually or emotionally. When the workers gave group instruction on sexual matters, the girls expressed great relief. Frequently they said or implied that the opportunity to get this kind of information as members of a group was perhaps the main reason they valued the experience.

The group leaders knew that at times the information given by the workers might not have been really new to the girls. They also recognized that information which parents give to their children on sexual matters is often coupled with the strongly implied expectation that the daughter will use the information "the right way." In school the instructor "teaches" matters that should be memorized for tests. Such a procedure is not conducive to the assimilation of emotionally charged material.

In contrast with these approaches, the workers gave this information with no accompaniment of expectations or demands. The girls were free "to take it or leave it." Moreover, the worker became for some girls an ego ideal and they genuinely trusted her. "I believe her," a girl exclaimed upon learning from the worker what happens during the "wedding night."

In reporting their experience with Family Life Education Groups, the social workers also included topics about family living other than sex, although the girls themselves were said to make this a central theme. Woven around this theme, other problems, such as getting along with brothers and sisters and with older persons in the household, and realistic problems of marital conflict, were also discussed. What characterized these

groups was their tolerance for and encouragement of direct, matter-of-fact discussion of things the girls felt to be important but could not discuss elsewhere without feeling guilty.

Although there were frequent setbacks in helping these girls toward more mature family life experience, the workers felt encouraged by the overall results and considered this type of group extremely effective. They believed that this level of group treatment could have preventive and therapeutic effects with some neurotic girls, even though it omits direct work with the neurotic core. They noted that girls who had resisted earlier approaches became enthusiastic about their group experience, which enabled some of them to become ready for more intensive individual or group therapy in the future.

Special Groups

In contrast with the Family Life Education Groups, the organization and structure of the "special groups"—Interview, Protective, and Activity Groups—were more like such groups in group therapy programs in social work agencies. In these groups, many problems arose, requiring environmental manipulation, that were handled as in regular group work, or by the group therapist herself, or by the individual casework department of YCS. The staff saw some groups as effective in reaching nonverbal, passive, withdrawn girls who, on account of being insecure and suspicious, might not have been accessible to individual casework. In a group, such girls were allowed to "take in by listening" which at times helped them without requiring their active participation. Some of these girls were considered by the workers to be seriously emotionally disturbed, yet their smooth facade prevented parents and teachers from detecting that they were in trouble. This group experience made possible by their chance selection for the project seemed to the workers an exceptional opportunity for them to become involved in a helping process that they very much needed.

As an example of such a case, the senior group therapist named Kate Shriver, a fifteen-year-old girl who was intelligent but seemed

to have great fears about sex. She was assigned to an Interview Treatment Group composed of girls of relatively high intelligence with ego strength and who showed some motivation. From the school records, it was believed that she needed encouragement, was easily led and rather shy, and was not working up to capacity in her school work. Kate sat quietly for several weeks, although she seemed aware of what was going on. When another member expressed resentment of her stepfather, this was the impetus for Kate to speak up. With considerable feeling, she told how she also hated her stepfather, who was a strict disciplinarian. Although the girls discussed other problems in the succeeding weeks, Kate invariably returned to the same theme. The members began to ask her direct questions about her home life. They noted that she was permitted to date weekends and that the attention given to doing her homework at a specific time showed interest on her stepfather's part. The worker helped Kate discuss the evolution of this problem. Kate began to describe her past life, how she had been placed in a foster home at an early age because of marital difficulties. She had felt rejected and punitively treated by her foster parents. She looked forward to the day when she would return home to her mother. When this finally occurred at the age of eight, Kate learned that her mother had remarried. She spoke of her resentment toward this "stranger." The other members were sympathetic about Kate's early deprivation, but indicated that her mother needed companionship, too. In many meetings that took place over a one-year period, the members helped Kate view her stepfather in a more realistic light and this seemed to allow her to function with greater ease and effectiveness.

In school, Kate kept to herself and did not cause disciplinary problems; other girls like Kate who are suffering from difficulties are not as likely to be detected as are aggressive girls who are always causing trouble. In the group, such girls were allowed to remain passive, sometimes for many months. No one pushed them into an activity that for them was equated with danger. Even without active participation, however, the girls had an opportunity to be exposed to discussions among group members who freely shared feelings of anger and hate, and to the worker's emotionally neutral response. Gradually these experiences helped them get out of the shell in which they had been hiding. They ventured to speak out once they had learned that showing weakness does not provoke attack, that expressing hate and

anger is not the same as committing an act of violence. When at times the discussion focused on a nuclear core of a girl's neurotic problem, the therapeutic effect of the group experience seemed vivid to the therapist and could lead to a dramatic change, a "spontaneous recovery."

The group therapists pointed out that sometimes it took a long time for a situation to arise in which the members could start to help a rather withdrawn member of the group. The experience of Anna Troy, a shy, depressed girl of fifteen who is the oldest of eleven children, is a good example.

> While Anna was attending the Observation Group, she mentioned frequently that she would no longer attend meetings. This seemed to be her way of testing the worker's acceptance of her. In an Interview Treatment Group, for a long time Anna remained withdrawn and mute, although it seemed to the worker that she was quite aware of what was going on in the group. Finally, one day when some of the girls were discussing their difficulties with alcoholic fathers, Anna related to this. Apparently this was one of her greatest problems (at one point she had to take her father to court for a drunken assault upon herself), but she had not dared to bring it out on her own. In a group of girls who also suffered from deprivation, but who were better able than Anna to talk about their situations, the worker could protect her from attacks and encourage her potentialities. Anna was reported as still giving the impression of suffering from severe limitations in certain areas. Although her school marks remained low, she was determined to graduate and expressed the desire to continue, a goal which for many reasons may be beyond her reach, but which expressed her determination to better herself and her life.

A number of these special groups ran concurrently and operated on different levels. One of the Interview Treatment Groups, for example, was composed of six members who met weekly during a full school year for a total of thirty-three sessions. All of the girls selected for this group had been screened in orientation groups and were similar in having average intelligence and some ego strength. They were all juniors in high school, either sixteen or seventeen years old. They all showed some motivation to accomplish in school and none of them presented gross behavior problems that interfered significantly

with their school adjustment. The attendance in the group was excellent and this provided a stable membership that seemed to facilitate movement.

The group therapists noted great differences among the girls in this group on every level. Some were emotionally and socially more mature than others; some more aware of their own anxieties and problems; some experienced great difficulty in expressing themselves verbally, while others could communicate readily. There was also a mixture of neurotic and characterological disturbances that naturally resulted in different preoccupations and concerns. The group as a whole discussed the usual adolescent concerns relating to school, social life, curiosity about sexual matters, and ambivalent feelings about growing up. In addition, three of the members used the group to discuss very personal problems centering around traumatic childhood experiences and intense sibling rivalry situations. Sexual guilt and anxiety, related to restrictive parental attitudes at home, were also brought up for consideration. As the group progressed, the discussions of general areas became more personalized and therefore more amenable to clarification and help. There was no monopolization of leadership in the group, although two members tended to alternate in leading the discussions. The rest of the group accepted this, however, and when these girls were absent others who were usually more passive were able to assume responsibility. The group offered different degrees of helpfulness to its members, depending upon the type of problem each brought up and her degree of involvement in the group. The girls who could be most motivated by the worker's direction and were most mature and verbal in the group were the ones who became more involved and therefore seemed to the leader to make the greatest progress.

Throughout the year there was a high degree of interaction among the members and a real feeling of loss was expressed when one member left the group at the end of the year because of being discharged from school. Although the girls were unable to verbalize clearly the meaning of the group for them, they indicated a definite desire to continue the next year. In the last

session, they brought up very significant material which was indicative to the therapist of their need for continuing help. In the view of the social work staff, none of these girls could have been reached consistently in an individual casework contact, whereas all of them were particularly accessible in the group counseling situation.

Anita Warren was a member of this group for a year and was selected by the group leader as an example of a girl who seemed to use the experience constructively. She was a fairly attractive Negro girl of medium height who wore her skirts very short and looked as if she were wearing a costume. In school, Anita was described as sullen, hostile, frequently absent, resentful of correction, disagreeable, and lacking self-control. She was known to the Youth Board because her mother had complained that she stayed out all night with a boy and might be pregnant. She had seen a social worker at another agency for a short time, but this contact had apparently not been used constructively.

In the beginning group sessions, Anita behaved as she did on the outside with authority figures and with her peers. She was uncommunicative and detached. She also seemed to make the other girls feel uncomfortable by separating herself from the larger group and talking with two girls on the side. Fairly early in the first meeting, she made comments about having been in trouble and having seen a social worker, but it was difficult to follow her and she did not wish to elaborate. Gradually, Anita began to discuss problems in school and fights in which she had been involved. She expressed a fair amount of hostility toward teachers, but was unwilling to admit that she had done anything to provoke the difficulty. She showed positive feeling toward school, however, and expressed ambivalence about transferring to another school, which had been her initial threat. She was very protective of her parents or her troubles at home. When the other girls were expressing hostility toward parents and describing ways in which their parents punished them, Anita indicated that her mother was attentive to her and did not use physical punishment.

At the end of three months in evaluating Anita, the worker felt that Anita vented hostility in school about situations that initially arose at home, where she felt unable to express herself. She appeared to be afraid of her parents and one got the impression that her mother was quite suspicious and controlling. Occasionally Anita would spend a night away from home and bitterly resented her mother's checking up on her.

As Anita continued in the group, she became more communicative. One interesting difference occurred in her use of verbalizations. In the beginning she would talk in "bop" language, which made it difficult to understand her. Later, she communicated a good deal more about herself and used more appropriate language. She was the most active member of the group, but she did not try to monopolize the sessions or prevent other girls from speaking.

A decided improvement was noted by the worker in Anita's school functioning. Her attendance was good and she passed all of her major subjects at the end of the year. She showed interest in her school work and asked the worker to see her individually a number of times to help her with some school work she had been deficient in. The worker felt that the group had served to channel some of Anita's aggressiveness into learning pursuits. She frequently used characters from stories she had read or movies she had seen as a vehicle for communicating theories about herself. From her discussion of herself in the group, the group therapist sensed that Anita had problems about her sexual identification, seeing herself as quite inadequate and physically unattractive. The therapist attributed this feeling in part to a view that women generally are somewhat provocative, sexually promiscuous, and therefore undesirable. Anita was very active in the group when any subjects relating to this topic came up, such as how girls dress and behave with boys, parents' attitudes toward dating, and so forth.

At a later integration conference assessing group members, the worker reported that Anita had continued to improve. She was performing better in school and acted out less. However, the less she acted out, the more noticeable her neurotic anxiety became. At this point, it was judged appropriate for the worker to contact the family in order to explore the source of her apparent neurosis. At the final session of the year, Anita seemed deeply moved, thanked the worker for her help, and added, "Now I can even like my mother again."

The staff felt that the group control seemed generally to be effective with "acting out" clients, such as Anita. However, they were uncertain as to the long-range effects of such an interview group program with girls of this type.

Activity groups were created by the group therapy staff for those girls who suffered from extreme deprivation, who were nonverbal and seemed grossly immature. At first, casual games were used in such a group as a means of helping the girls relate to each other and to the worker. The girls soon dropped the use

of games and relaxed sufficiently in this permissive atmosphere to gain confidence in the worker, who led them in a discussion of problems on a superficial level. They could then be prepared for transfer to a more intensive, interview type of group or to individual contact with a caseworker at the agency. This individual attention was often necessary in view of the need to help the girls and their families with environmental problems.

Some girls, suffering severe social deprivation and psychological consequences, were referred to individual casework. Most of such girls received concurrent individual and group treatment. Several girls became too anxious when in a group, but were able to use individual casework. However, the staff felt that without previous group experience, these clients would not have been able to do so; the group had given them a positive attitude toward the agency and reassured them concerning its policies. Generally, referrals to casework occurred when acute situations came to the attention of the group worker.

A few of the clients were found by the staff to be out of reach of either group therapy or casework treatment because of severe pathology and psychosis, narcissistic personalities, psychopathic behavior, or marked depression. The inaccessibility of such cases was in keeping with the previous experience of the staff. These girls were viewed as having been referred too late. Their home troubles were severe and it was hard to understand why neither the girls nor their families had previously come to the attention of authorities.

> Jane Alfonso was such a girl. For years she had been exposed to cruel handling by her sadistic mother and to abuses from her unscrupulous stepfather. She talked readily in the group about her plight and felt gratified by the members' interest in her. The worker learned in an interview with the mother that the girl's descriptions were not exaggerated. She tried to initiate court action but the situation was already out of hand. During a brief vacation period Jane was again beaten unmercifully and ran away from home, reportedly with a sailor on leave. The worker was unable to discover her whereabouts. Still many months later, the girls in the group frequently asked the worker if she had heard from Jane. They had been deeply moved by the girl's misfortunes.

General Appraisal of the Group Therapy Program

At the conclusion of the project, the group therapy consultant made a general summary that embodies both the rationale for the approach taken and the sense of accomplishment.[4] This summary is a fitting conclusion to the presentation of observations by the staff of their work in the group therapy program.

Adolescence is a critical phase in the growth of every human being. Many important changes occur; bodily changes (pubescence) take place; sex drives emerge. The adolescent is expected to control these drives according to modes determined by the culture in which he lives. Also, the adolescent has to change his social role. He "loses the protection of childhood but does not yet have the strengths and the privileges of the adult."[5] His insecurity is heightened by financial hardships, poor housing, by problems of discrimination, and by the shadow of a possible nuclear war. These difficulties expose the adolescent to conflicts on all levels of emotional experience. Traditional patterns of social work usually try to deal with the personal and social consequences of such conflicts.

In this program, the emphasis began to shift, however, from the correction of unhealthy consequences to a stress upon the need to help adolescents in their healthy but inadequate strivings. As a direct result of this experience with adolescents who were more representative of the "normal" population than clients usually seen in a social agency, the workers began to choose methods conducive to "substitute" experiences in preference to those of a "corrective" nature. Despite the multitude of pressures described above, the workers were impressed with the fact that these girls had a strong desire to "act the right way." This was shown most clearly by their eagerness to find the most appropriate answers to their many questions. However, their resources for such an undertaking were insufficient, probably because of the lack of healthy emotional experiences in human relationships that are so vitally necessary for normal growth. When, through this program, an effort was made to make up for some of these deficiencies, it brought forth an impressively favorable response from the girls. They eagerly absorbed the

"emotional vitamins" they must have missed so much in their earlier years.

The workers continually received comments from the girls regarding their attitudes toward the groups. Aldena Wray, after being in a group for six months, credited her new-found confidence directly to the group experience. Other girls were amazed that they were able to talk about their problems in a group and frequently expressed it. After their group experience, several girls mentioned the meaning it had for them. One girl, Edith Casper, had nothing to say while a member of the group, but when she was seen individually much later by a caseworker she gave an unusually good report of many things that had happened in the group and reported on various areas in which she had been helped by the group discussion. Frequently, the girls reported that because of the group experience they had dropped a previously conceived plan that might have had unfortunate consequences. Such reconsideration of unsound decisions is certainly indicative of the possibilities of preventive work.

Even some girls whom the workers thought they had failed to reach later returned to the agency asking for help with concrete problems, such as employment. Lydia Kinney, a schizoid-type girl, came back to the agency on her own a year after she had transferred to another school. She wondered whether groups were still in existence and said that she had found her group very helpful. For a number of girls, Youth Consultation Service remains a possible resource that they will be able to use if the occasion should arise in the future. If they do return, they will be better motivated and will have some understanding of how to cope with problems through discussion with a caseworker.

Needless to say, there were many girls who did not report such successful applications of their group experience. Yet their growing ability to handle in a more mature way the problems that were tossed back and forth during the group sessions supports the assumption that when conflicts do arise they will be better equipped to handle them. One of the benefits the girls gained from the group was learning to mull things over

before acting, which, in turn, protected them from unfortunate consequences. This can be considered the core of the program's preventive help, which was supplemented by special attention geared to answer needs emanating from specific problems of an individual nature.

In the most general terms, the program tried to help adolescent girls who face crises "to add significantly to their repertoire of reality-based problem-solving techniques and thus improve their crisis-coping capacity for the future."[6] It is hoped that this intervention helped them emerge relatively undamaged from the critical period of adolescence.

NOTES TO CHAPTER V

1. Hunt, J. McVicker, and Leonard S. Kogan, *Measuring Results in Social Casework: A Manual for Judging Movement*, Family Service Association of America, New York; Hunt, J. McVicker, Margaret Blenkner, and Leonard S. Kogan, *Testing Results in Social Casework: A Field Test of the Movement Scale*, Family Service Association of America, New York, 1950; Ripple, Lillian, "Motivation, Capacity and Opportunity as Related to the Use of Casework Service: Theoretical Base and Plan of Study," *Social Service Review*, vol. 29, June, 1955, pp. 172–193; Shyne, Ann W., editor, *Use of Judgments as Data in Social Work Research*, National Association of Social Workers, New York, 1959.

2. Discussion of individual treatment efforts is based on the report written by Elizabeth P. Anderson, director of casework.

3. Discussion of group treatment is based on a report prepared by Dorothy Headley, senior group therapist, and an additional analysis of the group program made by Hanna Grunwald, group therapy consultant.

4. This summary was written by Dr. Grunwald.

5. Ackerman, Nathan W., *The Psychodynamics of Family Life*. Basic Books, New York, 1958, p. 209.

6. Caplan, Gerald, *Prevention of Mental Disorders in Children: Initial Explorations*. Basic Books, New York, 1961, p. 12.

VI. Staff Ratings of Clients in Individual and Group Treatment

THE TWO PRECEDING CHAPTERS presented the views of those who directed the individual and group treatment programs provided for the girls at Vocational High who were referred to Youth Consultation Service. The judgments expressed, although based on the records as well as on personal participation, represent generalized statements formulated in reference to categories of clients and types of treatment effort. The perspective of the total treatment program, rather than the observation of each treated case, is necessarily adopted. Documentation of observations and evaluations is illustrative rather than quantitative.

To obtain a case-by-case assessment of the sense of accomplishment as seen by the social workers who worked directly with the girls, a rating form was developed for the social worker primarily responsible for casework or group therapy to use for each client. This rating form was completed at the conclusion of the project and is therefore subject to errors of recall and afterthought by the raters, although they referred to case records for information on which to base their judgments. It is also subject to limitations of reliability since, except for explanations to the staff of the meanings of items to be rated, no special training in the use of the rating form was provided. Therefore, unknown variability between social workers in interpretation of what was rated limits conclusions to be drawn from the data provided. However, all the raters were professionally trained social workers who had many months of association with one another at the agency and were directed by the same supervisors and consultants. Hence some common bases for judgments may be assumed.

In this chapter the ratings by social workers of the clients served in individual casework will be compared with those in the group therapy program. Then, ratings for the entire population of experimental cases will be considered.

COMPARISON OF CLIENTS IN INDIVIDUAL AND GROUP PROGRAMS

Involvement in Treatment

The analyses in the preceding chapters strongly suggest that the group approach was considered more successful by the agency staff than the approach to clients through individual casework methods. Such a conclusion is also borne out by the almost exclusive use of group approaches after the first phase of the project. Individual casework was then used only as an adjunct to group therapy where the main thrust of the treatment effort was concentrated. Certain judgments were noted in Chapter IV which indicate that workers rated girls more involved in treatment in the group program than in individual casework, although girls seen individually or in groups were deemed equally in need of treatment. Evidence for this conclusion is presented in Tables 11 and 12. Social workers judged almost half (47 per cent) of the girls in individual casework

TABLE 11. SOCIAL WORKERS' RATINGS ON THE QUESTION: "HOW INVOLVED DID THIS CLIENT BECOME IN A TREATMENT RELATIONSHIP?"

Rating Category	Individual Treatment	Group Treatment	All Cases
		(Per cent)	
Very much or quite a bit	*27*	*40*	*36*
Some or a little	*26*	*41*	*37*
Hardly or not at all	*47*	*19*	*27*
Total	*100*	*100*	*100*
Number of cases[a]	47	127	174

[a] In this and subsequent tables based on social worker ratings, the numbers reported represent cases for which ratings were available. The total sample consisted of 189 cases of which 50 had been referred to Individual Treatment and 139 to Group Treatment. Subsequent to initial referral, 3 (6 per cent) of the individual cases attended some group sessions, and 45 (32 per cent) of the group cases had at least one casework interview.

treatment to have become "hardly" or "not at all" involved in a treatment relationship, whereas only one-fifth (19 per cent) of girls in group treatment were so rated. (See Table 11.) Ratings of involvement in treatment do not seem to reflect differences between individual and group cases in terms of need of treatment as judged by the social workers. Negligible differences between the two groups in this respect are shown in Table 12.

TABLE 12. SOCIAL WORKERS' RATINGS ON THE QUESTION: "DO YOU FEEL THIS CLIENT WAS REALLY IN NEED OF TREATMENT WHEN SHE WAS REFERRED?"

Rating Category	Individual Treatment	Group Treatment	All Cases
		(Per cent)	
Not at all or slightly	*4*	*6*	*6*
Somewhat or quite a bit	*32*	*38*	*36*
To considerable extent or very much	*64*	*56*	*58*
Total	*100*	*100*	*100*
Number of cases	47	132	179

TABLE 13. SOCIAL WORKERS' RATINGS ON THE QUESTION: "WHICH OF THE FOLLOWING BEST DESCRIBES CLIENT'S INITIAL RELATIONSHIP WITH CASEWORKER OR GROUP THERAPIST?"

Rating Category	Individual Treatment	Group Treatment	All Cases
		(Per cent)	
Warm acceptance	*4*	*18*	*14*
Acceptance but guarded	*47*	*37*	*40*
Tolerant but little more, or indifferent	*11*	*28*	*23*
Rather negative, or quite, or very negative, hostile	*38*	*17*	*23*
Total	*100*	*100*	*100*
Number of cases	47	130	177

Girls referred to group treatment were seen as less negative or hostile than those referred to individual treatment in their initial relationship with their social workers. (See Table 13.) Although about one-half of each type of case was judged to show at least some acceptance of the workers, more than one-third of the indi-

vidual cases, compared to 17 per cent of the group cases, were seen as negative or hostile in their initial relationship.

Such ratings must be accepted in the limited sense that they are expressions of caseworkers' and group leaders' perceptions of their clients. It is possible, of course, that the social workers who were group leaders expected less of their clients in order to consider them involved in treatment. Or the group leaders may simply have been more enthusiastic about their form of treatment than the caseworkers were. We have no way of excluding such explanations of the data based on ratings of the social workers. However, all the group leaders were trained as caseworkers and several actually carried individual cases concurrently with their groups. Moreover, there were in all ten different group leaders over the course of the project and at least six caseworkers who carried project cases on an individual basis. It is plausible that the ratings represent differences, as the workers saw them, in their clients' responses to the two approaches. Nevertheless, these cautions should be kept in mind as the ratings are interpreted.

Assessment by Workers of Effects of Treatment

The social workers were asked to make a number of ratings to express their assessment of changes they perceived in their cases. One of these ratings asked for a general judgment of how much change was felt to have been produced in the course of contact. Table 14 shows that substantially more of the clients in individual treatment than of those in group treatment were felt to have changed "hardly any" or "not at all."

TABLE 14. SOCIAL WORKERS' RATINGS ON THE QUESTION: "HOW MUCH CHANGE DO YOU FEEL THE CASEWORK OR GROUP EXPERIENCE PRODUCED IN THIS CLIENT?"

Rating Category	Individual Treatment	Group Treatment	All Cases
		(Per cent)	
Very great deal or quite a bit	*10*	*19*	*17*
Some or a little	*30*	*49*	*44*
Hardly any or not at all	*60*	*32*	*39*
Total	*100*	*100*	*100*
Number of cases	47	126	173

It must be remembered that the group approach was used over a period of three and one-half years, whereas an exclusively individual approach was used only for about a year and a half. It is therefore possible that longer experience with the group approach colors in part the ratings of the workers. Neither the data nor the impressions of the workers encourage this interpretation, however. Girls referred to groups seemed to the workers from the first to respond more to treatment efforts than girls referred to individual casework.

In an attempt to differentiate the meaning of change during contact with the agency, the social workers were asked to rate their clients on the components of the Hunt-Kogan Movement Scale.[1] The workers were given the following definitions of each of these components:

Adaptive Efficiency. Changes in the effectiveness of functioning in any area, e.g., school habits, family relationships, peer relationships, etc.

Disabling Habits and Conditions. Changes in the direction of eliminating inadequate mechanisms (and thus the converse of changes in adaptive efficiency). Changes in attitudes, behavior, etc., inimical to good social relations; improvement in habits which formerly limited her adjustment, etc.

Verbalized Attitudes and Understanding. Changes indicated by what client says about her understanding of herself, other people or her situation, including understanding and accepting counsel on some specific point; development of insight, etc.

Environmental Circumstances. Changes indicated in the manner in which people close to client behave toward her, in her physical environment, in her economic circumstances, or changes in these areas for other members of her family which affect her directly or indirectly.

The ratings obtained for girls in individual and in group treatment are given in Table 15.

In each component of the Movement Scale substantially more of the girls in group treatment than in individual treatment were judged to have shown positive movement, although it should be

noted that the caseworkers did not (except with respect to Environmental Circumstances) rate any individual client as getting worse during treatment whereas a few clients in group treatment were so rated.

TABLE 15. SOCIAL WORKERS' RATINGS ON COMPONENTS OF HUNT-KOGAN MOVEMENT SCALE

Rating Category	Individual Treatment	Group Treatment	All Cases
		(Per cent)	
A. *Adaptive Efficiency*			
Great or considerable improvement	*11*	*20*	*17*
Distinct or visible but minor	*37*	*49*	*45*
No movement	*52*	*25*	*33*
Somewhat or distinctly worse	..	*6*	*5*
Total	*100*	*100*	*100*
Number of cases	47	124	171
B. *Disabling Habits and Conditions*			
Great or considerable improvement	*6*	*11*	*10*
Distinct or visible but minor	*27*	*55*	*47*
No movement	*67*	*30*	*39*
Somewhat or distinctly worse	..	*4*	*4*
Total	*100*	*100*	*100*
Number of cases	47	125	172
C. *Verbalized Attitudes and Understanding*			
Great or considerable improvement	*6*	*19*	*15*
Distinct or visible but minor	*34*	*52*	*47*
No movement	*60*	*25*	*35*
Somewhat or distinctly worse	..	*4*	*3*
Total	*100*	*100*	*100*
Number of cases	47	126	173
D. *Environmental Circumstances*			
Great or considerable improvement	*6*	*9*	*9*
Distinct or visible but minor	*28*	*48*	*43*
No movement	*56*	*39*	*42*
Somewhat or distinctly worse	*10*	*4*	*6*
Total	*100*	*100*	*100*
Number of cases	47	125	172

The workers were also asked to make prognoses for their clients, differentiated with respect to salient future roles anticipated for high school girls: relationships to men, marriage, and motherhood, on the one hand, and to work careers, on the other hand. The results of these ratings are given in Table 16.

TABLE 16. SOCIAL WORKERS' RATINGS ON CLIENT'S FUTURE ADJUSTMENTS

Rating Category	Individual Treatment	Group Treatment	All Cases
		(Per cent)	
A. *"What sort of relationship with men would you say this client is likely to have—when 20–22 years old?"*			
Average, normal, or better relationship	*18*	*38*	*33*
Fairly or very difficult relationship	*82*	*62*	*67*
Total	*100*	*100*	*100*
Number of cases	44	126	170
B. *"Do you think client is likely to get married by time she is, say, 25 years old?"*			
Very likely or quite likely	*48*	*65*	*61*
About 50–50 chance	*38*	*29*	*32*
Quite or very unlikely	*14*	*6*	*7*
Total	*100*	*100*	*100*
Number of cases	44	125	169
C. *"How would you estimate client's behavior as a mother?"*			
Very good or pretty good mother	*5*	*19*	*15*
About average mother	*38*	*48*	*46*
Pretty poor or very poor mother	*57*	*33*	*39*
Total	*100*	*100*	*100*
Number of cases	42	125	167
D. *"How would you estimate this client's future work career?"*			
Very or quite successful	*16*	*23*	*22*
About average	*45*	*53*	*50*
Rather or very unsuccessful	*39*	*24*	*28*
Total	*100*	*100*	*100*
Number of cases	44	125	169

The three sets of ratings having to do with relationships to men, marriage, and motherhood show that girls in individual treatment were less favorably rated than those in group treatment. (Sections A, B, and C of Table 16.) There is less difference between these two groups of cases with respect to estimates of future work careers but the difference still favors the group clients. (See Section D of Table 16.)

Finally, workers were asked to make a global prognosis of their clients' chances of achieving a good adjustment in about five years. As Table 17 shows, less than one-third of the group cases compared to more than half of the individual cases were given a poor chance of achieving a good adjustment.

TABLE 17. SOCIAL WORKERS' RATINGS ON THE QUESTION: "WHAT DO YOU FEEL THE CHANCES ARE THAT THIS CLIENT WILL ACHIEVE A GOOD ADJUSTMENT, SAY, ABOUT FIVE YEARS FROM NOW?"

Rating Category	Individual Treatment	Group Treatment	All Cases
		(Per cent)	
Very good or quite good	*5*	*8*	*7*
Pretty good	*16*	*18*	*18*
About 50–50	*24*	*45*	*39*
Pretty poor	*23*	*21*	*22*
Quite poor or very poor	*32*	*8*	*14*
Total	*100*	*100*	*100*
Number of cases	44	126	170

Individual vs. Group Treatment

In summary, the data based on ratings of social workers leave little doubt that the group approach adopted by the staff after its experience with the usual individual casework approach was seen as more appropriate and more successful with the kind of clients served in this project. There is no evidence that different kinds of problems or girls of different characteristics were presented for the two approaches. It must be concluded that the shift from individual to group methods was, at least in the views of the staff, desirable. The rationale for using group methods has been presented in previous chapters and it gains support from the judgments of the social workers who carried the responsibility for treatment in the project.

STAFF ASSESSMENTS OF TOTAL EXPERIMENTAL SAMPLE

When the ratings of the social workers for the total sample of girls seen at the agency in the treatment effort of the project are examined, several observations are noteworthy. In the experimental design of the research, it will be a comparison of the total sample of treated cases with the control cases that interests us.

We note, first, that slightly more than one-fourth (27 per cent; see Table 11) of all the girls were considered by their workers to have become minimally involved in treatment. We note further that approximately one-fifth (see Tables 14 and 15) of all the girls were judged to have changed or moved positively during treatment. In addition, an even greater proportion were given no

more than an equal chance of satisfactory future adjustments in their own family and work roles. (See Table 16.) It should be noted that these were clients whose median number of treatment contacts was 17 casework interviews or group therapy sessions attended. This is considerably more than the short-term contact characteristic of so many cases that come to social agencies.

It is evident that the social workers did not allow themselves to express indiscriminate enthusiasm in the appraisal of their own success. Rather, they seem highly sensitive to the shortcomings of their efforts. Or, if their ratings reflect observations of change in their clients that might have occurred without benefit of treatment at all, they have shown a distinct capacity to differentiate among clients who change positively and those who do not.

Critics of the subjective evaluations of success made by those in the helping—or therapeutic—professions often assert that enthusiasm for conscientious effort causes exaggerated beliefs in the efficacy of treatment. To be sure, the apparently restrained estimate of social workers in this project that one-third of their clients were unchanged by their efforts may itself be an unrealistic exaggeration. This can be determined only by comparing the clients with nonclients who were initially similar to them. But it can hardly be asserted that these social workers lack awareness of their failures as well as their successes.

How can one account, therefore, for the strong sense of success of the efforts of the treatment program conveyed in Chapters IV and V when the director of casework services and the senior group therapist and group therapy consultant report their observations? It is unlikely that these experienced professional persons deceive themselves to a greater extent than the casework staff itself. In fact, for approximately 30 cases rated on the same rating form both by supervisors and by individual social workers, agreement on the ratings was quite high. It is more plausible to interpret differences in appraisal as a result of differences in the context of evaluation.

When *each case* is evaluated, its success or lack of success is judged in terms of what has happened to the individual client in all the complexity of her realistic situation. When the *treatment program* is evaluated, the achievement of the purpose of the pro-

gram becomes the frame of reference and the procedures, techniques, responses of clients, and theoretical plausibility of the program are considered. The sense that the therapeutic intent could be carried out becomes the basis for judging success rather than the outcomes for individual clients. The analogy is to the quip: "The operation was a success but the patient died." This may indeed be true when the criterion is therapeutic performance rather than therapeutic outcome.

It would not be argued that such a position can be maintained indefinitely if therapeutic performance and therapeutic outcome do not finally coincide. The implication is, however, that the therapeutic effort *can* succeed in achieving the therapeutic outcome and the evaluation becomes a statement of conviction, a hypothesis. Thus the professional staff of Youth Consultation Service were convinced that their approach to preventive intervention with potential problem high school girls was a beneficial one even though it might not succeed with many clients. Such a conviction encourages further efforts, more deliberate attempts to specify those clients for whom the treatment is appropriate, and more consideration of refinements in the approach that might improve its therapeutic focus.

The value of a rigorous assessment of effectiveness in terms of criteria of outcome is undeniable and the results of such an evaluation are not to be taken lightly. However, it would seem that progress in developing effective treatment programs and techniques would require reconciliation between these two contexts of evaluation. A theory of practice is not destroyed by its outcome; it is only tested. Discrepancies between a theory of intervention or prevention and its empirical effects should be a challenge both to revise the theory and to perfect the measurement of effects.

It is with such a perspective that we turn in succeeding chapters to the evidence of effectiveness of social work services for interrupting deviant careers of the high school girls served in this project.

NOTE TO CHAPTER VI

1. Hunt, J. McVicker, and Leonard S. Kogan, *Measuring Results in Social Casework: A Manual for Judging Movement.* Family Source Association, New York, 1950.

VII. Effects of Social Work Service: Objective Criteria

IN THE DIRECTLY PRECEDING CHAPTERS we have described the girls who participated in the individual and group treatment programs as seen through the eyes of the social workers who served them and in terms of the treatment program as it developed and was applied. In this chapter and the one following we will compare these experimental cases with their counterpart control cases.

It has been demonstrated in Chapter III that experimental and control cases were, as intended, essentially alike at the beginning of the experimental project. This was to be expected from the random procedure of assigning potential problem cases to experimental and control groups. It was also shown that the potential problem group itself (including both experimental and control cases) differed from the remaining girls in their school classes (residual cases) in the "negative" ways one would expect from the deliberate selection of potential problem girls to constitute the pool from which experimental and control cases were chosen. For example, a significantly smaller proportion of potential problem than of residual cases remained throughout the three high school years. We may be reasonably confident therefore, that the therapeutic program for experimental cases among the potential problem group was offered to girls who were less promising, girls who were, for the most part, "in need of treatment," as the social workers saw them. We have shown (in Chapters II and IV) that almost all of the girls (95 per cent) received some treatment services, and that half of these had 17 or more treatment contacts with social workers. Indeed, only 16 per cent of the 189 girls in the experimental

group had fewer than five such contacts, whereas 44 per cent of them had more than 20 treatment contacts. Therefore, the experimental cases as a group were clearly well-exposed to the therapeutic program. In short, the experimental cases consisted of high school girls more likely to get into trouble, recognized by social workers as needing treatment, and actually receiving treatment.

On the other hand, however, we have seen (in Chapters IV and V) that the overall success of the therapeutic effort—as assessed by those responsible for its direction—was cautiously asserted, recognizing that it was necessary to learn as the program proceeded and to adapt the program as experience dictated. Furthermore, the social workers who conducted the program reached an even more cautious conclusion when they assessed change in their clients on a case-by-case basis. They judged that almost three-fifths (59 per cent) of the girls had changed "a little" or less, and more than one-third (39 per cent) had changed "hardly any" or "not at all." We should not, therefore, anticipate dramatic results when we compare experimental cases and control cases on the spectrum of criteria that have been used to detect the effects of the program.

Recognizing the untried nature of the experiment in preventive services, recognizing as well the variety and unspecified nature of the problems presented by a random sample of high school girls for whom a wide range of difficulties was foreseen, we have (as pointed out in Chapter II) sought to observe a great variety of effects. The range includes objective measures related to school success, personality test measures, judgmental ratings and self-assessments on the part of the girls involved as well as their social workers. In this chapter we shall examine the effects of the treatment program on the more objective criteria.

Measures of effect are provided by the periodic testing procedures at the end of each school year and by the collection of terminal data about each potential problem case three years after entrance into high school or as of a cut-off date in the summer of 1960. Four cohorts were subject to the experimental program, beginning with the cohort entering in September, 1955.

Therefore, the normal three-year period of the high school had elapsed for the first three of the cohorts by the terminal date in 1960. For the fourth cohort, only two years had elapsed. In the analysis of effects, where criteria are appropriately applied only to cases with the longer time span (for example, graduation from high school), the first three cohorts taken together will be examined. This group of cases had the longest exposure to the therapeutic program. Where lapse of time is less relevant (school grades or behavior ratings), the fourth cohort will be included and the total potential problem sample examined. For all cohorts the random selection procedure resulted in equivalent duration of time for experimental and control cases when measures of effect were taken.

The samples used in the analysis may be summarized as follows:

Elapsed time from school entrance to terminal date:	*Experimental cases*	*Control cases*	*Total cases*
Cohorts with three years elapsed time	129	132	261
Cohort with two years elapsed time	60	60	120
All cohorts	189	192	381

COMPLETION OF SCHOOL

The most obvious question to ask about a program intended to interrupt careers leading to potential problems for high school girls is whether it succeeded in increasing the likelihood of their staying in school. Although neither a negative nor a positive answer to this question necessarily satisfies all pertinent questions about effects of the therapeutic program, few will deny its relevance. We shall compare experimental and control cases on a number of related, but conceptually distinguishable, measures of staying in school.

School Status at the End of the Project

Identical proportions of all experimental and control cases had graduated from high school by the termination of the project: 29 per cent of each. Equal proportions had left school without graduation or were in school, either in their normal grades or below normal grade. Success in the sense of gradua-

tion or achieving normally expected grade was the school status of 53 per cent of both experimental and control cases and lack of success in the sense of dropping out of school or being behind normal grade in school was the school status of 47 per cent. Table 18 shows these findings.

TABLE 18. FINAL SCHOOL STATUS OF ALL EXPERIMENTAL AND CONTROL CASES

Final School Status	Experimental Cases	Control Cases
	(Per cent)	
Graduated from high school	*29*	*29*
Not graduated, but in normal grade	*24*	*24*
In school, but behind normal grade	*8*	*7*
Out of school, but not graduated	*39*	*40*
Total	*100*	*100*
Number of cases	189	191[a]

[a] Excludes one case for whom information was not available.

When only those girls are considered who could be observed over three full school years, 48 per cent of both the experimental and the control cases had graduated or were in normal grade. By way of contrast, 65 per cent of the residual cases who could have graduated actually did finish high school. This comparison is presented in Table 19.

TABLE 19. FINAL SCHOOL STATUS OF EXPERIMENTAL, CONTROL, AND RESIDUAL CASES WITH THREE YEARS ELAPSED TIME IN PROJECT

Final School Status	Experimental Cases	Control Cases	Residual Cases
		(Per cent)	
Graduated from high school	*43*	*42*	*65*
In school, but in normal grade[a]	*5*	*6*	..
In school, but behind normal grade	*5*	*4*	*7*
Out of school, but not graduated	*47*	*48*	*28*
Total	*100*	*100*	*100*
Number of cases	129	132	536[b]

[a] These represent cases that entered in the ninth grade and hence would be in the twelfth (or senior) grade after three years.

[b] Excludes 10 cases for whom information was not available.

Clearly the treatment program had no discernible impact with respect to the criterion of graduation from high school.

Highest School Grade Completed

Graduation is the formal symbol of completion of high school. Nevertheless, girls who complete their senior year of high school, whether they formally graduate or not, represent a higher level of success when compared to those who do not remain in school as long. Each successive grade completed is that much more education. As Table 20 shows, proportionately more of the experimental cases than of the control cases completed higher

TABLE 20. HIGHEST GRADE IN HIGH SCHOOL COMPLETED BY EXPERIMENTAL, CONTROL, AND RESIDUAL CASES WITH THREE YEARS ELAPSED TIME IN PROJECT

High School Grade Completed	Experimental Cases	Control Cases	Residual Cases
		(Per cent)	
Senior	*49*	*42*	*70*
Junior	*24*	*22*	*13*
Sophomore	*24*	*29*	*10*
Freshman	*3*	*3*	*4*
Did not complete freshman grade	..	*4*	*3*
Total	*100*	*100*	*100*
Number of cases	128[a]	132	539[b]

[a] Excludes one case for whom information was not available.

[b] Excludes seven cases for whom information was not available.

grades of school, although the differences between the two groups are not statistically significant. Among experimental cases, 49 per cent compared to 42 per cent among control cases completed the senior year whether they graduated or not. Completing at least the junior year were 73 per cent of the experimental cases and 64 per cent of the control cases. None of the experimental cases compared to 4 per cent of the control cases failed to complete at least the freshman year of high school. This is evidence that the treatment program had a slight effect on retention of the experimental cases in school and this suggestion is further strengthened by the evidence of Tables 21 and 22.

Table 21 shows the number of years attended by those girls who might have attended any high school at least four years by the terminal date of the project. We see that 56 per cent of the experimental cases and 49 per cent of the control cases attended four or more years of high school, and 83 per cent compared to 75 per cent attended at least three years. The distribution for residual cases, presented for comparison, shows that significantly more of them than either experimental or control cases attended high school four or more years.

TABLE 21. NUMBER OF YEARS ATTENDED ANY HIGH SCHOOL BY EXPERIMENTAL, CONTROL, AND RESIDUAL CASES WITH THREE YEARS ELAPSED TIME IN PROJECT

Years Attended Any High School	Experimental Cases	Control Cases	Residual Cases
		(Per cent)	
Four years or more	*56*	*49*	*73*
Three years	*27*	*27*	*11*
Two years	*15*	*18*	*15*
One year or less	*2*	*6*	*1*
Total	*100*	*100*	*100*
Number of cases	128[a]	132	531[b]

[a] Excludes one case for whom information was not available.

[b] Excludes 15 cases for whom information was not available.

A smaller percentage of experimental cases (52 per cent) than of control cases (56 per cent) were suspended or discharged from school during the period of the project but, again, the difference is not statistically significant. As Table 22 shows, when the reasons for suspension and discharge are classified into nonpunitive and punitive, slightly more of the control than the experimental cases were removed from school for nonpunitive reasons, such as poor health, employment, transfer, or other circumstances not reflecting misbehavior or poor academic performance. This difference hints at the possibility that the services given to girls by the social agency helped those with circumstantial problems somewhat more than it helped those with behavior problems. This is only the barest

of speculations, of course, in view of the minimal difference observed but it may be worth noting when considering benefits of service programs to high school girls with potential problems.

TABLE 22. SUSPENSION OR DISCHARGE FROM HIGH SCHOOL OF EXPERIMENTAL, CONTROL, AND RESIDUAL CASES WITH THREE YEARS ELAPSED TIME IN PROJECT

Ever Suspended or Discharged?	Experimental Cases	Control Cases	Residual Cases
		(Per cent)	
No	*48*	*44*	*65*
Yes, for nonpunitive reasons	*18*	*20*	*16*
Yes, for punitive reasons	*34*	*36*	*19*
Total	*100*	*100*	*100*
Number of cases	128[a]	132	536[b]

[a] Excludes one case for whom information was not available.

[b] Excludes 10 cases for whom information was not available.

Taken together, the findings with respect to completion of school can be said to support only an extremely cautious suggestion that the treatment program had any effect. At most, it can be said that extremely small differences in staying in school favor the experimental cases. Since the differences are not statistically significant, only their consistency permits even this cautious conclusion.

ACADEMIC PERFORMANCE

Beginning with grades earned in their vocational and academic subjects, a number of measures of academic performance of experimental and control cases can be used. It would surely be a desired effect—indirect, perhaps—of the provision of a therapeutic program to potential problem high school girls if they were found to perform better in their school subjects. Other indicators reflecting success both in subject matter courses and in other aspects of the school program, such as honors and awards, service ratings, and normal assignment to the work-study cooperative program, will also be examined.

Grades Earned in Vocational and Academic Subjects

The number of failures can be taken as one indication of academic performance. Table 23 presents data that compare experimental and control cases during their first year and each of the two succeeding years. If the treatment program had any effect, it should be most evident after it had been in operation some time, either because of cumulative influences or because selectively students who perform better stay in school. We know that similar proportions of experimental and control cases drop out. Therefore, unless some factor is operating to differentiate them, similar proportions ought to show failures.

Table 23 shows the trend of failures for both vocational and academic subjects, and they are essentially similar. Decreasing proportions of both experimental and control cases are found to have failures between their first and third years, but the

TABLE 23. NUMBER OF FAILURES IN VOCATIONAL AND ACADEMIC SUBJECTS FOR ALL EXPERIMENTAL AND CONTROL CASES BY YEAR IN HIGH SCHOOL

Number of Failures	Year of Cohort Entry		First Year After Cohort Entry		Second Year After Cohort Entry	
	Experimental	Control	Experimental	Control	Experimental	Control
	(Per cent)		(Per cent)		(Per cent)	
A. *Vocational Subjects*						
None	*60*	*69*	*68*	*73*	*84*	*80*
One or two	*23*	*22*	*19*	*18*	*16*	*9*
Three or more	*17*	*9*	*13*	*9*	..	*11*
Total	*100*	*100*	*100*	*100*	*100*	*100*
Number, grades available	189	192	151	157	77	74
Number, grades not available[a]	..	..	38	35	112	118
B. *Academic Subjects*						
None	*61*	*67*	*67*	*65*	*76*	*76*
One or two	*22*	*24*	*21*	*24*	*18*	*13*
Three or more	*17*	*9*	*12*	*11*	*6*	*11*
Total	*100*	*100*	*100*	*100*	*100*	*100*
Number, grades available	189	192	151	160	78	76
Number, grades not available[a]	..	..	38	32	111	116

[a] Includes cases not in school and cases for whom information was not available.

decrease is greater for experimental cases. Thus for vocational subjects 40 per cent of the experimental cases had one or more failures their first year but only 16 per cent their third year, and this difference is statistically significant. On the other hand, for control cases there were 31 per cent with one or more failures the first year and 20 per cent the third year, a substantial decrease to be sure but the difference does not reach statistical significance. The corresponding trend for academic subjects is to be noted: a statistically significant decrease from 39 per per cent to 24 per cent for experimental cases compared to a smaller decrease, not statistically significant, from 31 per cent to 20 per cent for control cases. It is further to be noted that the record of experimental cases is not as good as that of control cases in the initial year (although the difference is not statistically significant), whereas it is better or equal to that of the control cases in the third year.

The finding is not so clear when academic performance is measured by the number of A and B grades recorded, as in Table 24. Such high grades are about equally found for experimental and control cases at each year with slight tendencies for proportionately fewer A's and B's in the later years, except for a minor counter trend among experimental cases in vocational subjects. None of the differences is statistically significant.

If one is to interpret these findings as evidence of an effect of the treatment program, it must be seen as an effect mediated through the selection process. Rather than conclude that academic performance as reflected in grades is directly improved by the program available to experimental cases, it is more exact to say that girls who would earn better grades (especially fail fewer subjects) were helped to remain in school. Such a positive selective effect is nevertheless a constructive, if modest, achievement to be attributed to the treatment program.

Advancement with Class and Assignment to Cooperative Work-Study Program

Associated with performance in subjects but dependent as well on additional evaluations by the teachers, the promotion or de-

TABLE 24. NUMBER OF A AND B GRADES IN VOCATIONAL AND ACADEMIC SUBJECTS FOR ALL EXPERIMENTAL AND CONTROL CASES BY YEAR IN HIGH SCHOOL

A and B Grades	Year of Cohort Entry		First Year After Cohort Entry		Second Year After Cohort Entry	
	Experimental	Control	Experimental	Control	Experimental	Control
	(Per cent)		(Per cent)		(Per cent)	
A. *Vocational Subjects*						
None	*26*	*24*	*25*	*24*	*20*	*28*
One to three	*46*	*42*	*47*	*48*	*56*	*40*
Four or more	*28*	*34*	*28*	*28*	*24*	*32*
Total	*100*	*100*	*100*	*100*	*100*	*100*
Number, grades available	189	192	152	159	79	75
Number, grades not available[a]	..	..	37	33	110	117
B. *Academic Subjects*						
None	*14*	*11*	*17*	*13*	*19*	*21*
One to three	*52*	*49*	*44*	*40*	*44*	*33*
Four or more	*34*	*40*	*39*	*47*	*37*	*46*
Total	*100*	*100*	*100*	*100*	*100*	*100*
Number, grades available	189	192	151	159	78	76
Number, grades not available[a]	..	..	38	33	111	116

[a] Includes cases not in school and cases for whom information was not available.

tention of a student at the end of each school year and the decision to assign at the normal time to the cooperative work-study program are further indications of general academic performance.

A slightly greater proportion of experimental cases than of control cases advanced normally with their classes. Thus 74 per cent of all the experimental compared to 70 per cent of the control cases remained in their normal class, whereas 24 per cent of the former and 28 per cent of the latter were held back or reclassified to lower standing vocational programs and the same proportion of both groups (2 per cent) were advanced above the normal levels for their classes. None of these differences is statistically significant and can only be taken as a possible suggestion of better performance by experimental cases.

At this high school, students are placed in work-study jobs in the industry for which they are trained when their work is adequate and they are deemed responsible by teachers of vocational subjects and by the guidance counselors. This is a prized assignment since it provides on-the-job experience, apprentice wages, and potential access to the job market after graduation. Assignments are normally made for the second semester of the junior year and continued throughout the last year of high school. Occasionally, students will be assigned for the first time at the beginning of their senior year if they have shown improvement deemed to warrant it, and occasionally they will be dropped from the work-study program if they do not perform adequately in it.

No differences of significance are found between experimental and control cases in the pattern of assignment. For both groups, 48 per cent were never selected. Slightly more of the control than the experimental cases (48 per cent and 45 per cent, respectively) were assigned in their junior year but a few more of the latter were assigned later, so that altogether half of each group (51 per cent of the experimental and 49 per cent of the control cases) participated in the "co-op" training program.

Honors and Awards, and Service Ratings

Recognition of outstanding performance and of "school citizenship" are given by the school in the form of honors and awards and of service ratings which are recorded in the student's record. The latter are used somewhat liberally as assignments to service jobs such as hall and door duty, monitoring, and other types of nonacademic responsibility. There appears to be a mixed attitude on the part of the school as to whether such service duties are assigned as rewards for evidence of responsibility or encouragements to be more responsible but, in any event, they constitute a type of special recognition generally considered favorable.

Slightly greater percentages of control cases than experimental cases had entries in their records of awards and honors,

but in both groups the numbers were few. Only 14 per cent of the former and 9 per cent of the latter were so recognized. Similarly, more of the control cases (65 per cent) than the experimental cases (59 per cent) had at least one service rating, but this difference also is not statistically significant.

Such minor differences hardly bear interpretation, but it is worth noting that service ratings—and to a lesser extent honors and awards and assignment to the "co-op" work-study program —may reflect attitudes of school staff toward girls known to be involved in the treatment program. Based on our observations, we concluded that only a small part of the staff knew which individual girls were involved, although many teachers knew one or two who were and almost all of the staff knew of the existence of the experimental project. Attitudes that were expressed were by no means uniform as to whether involvement in the project was to be considered a positive or negative mark for the students selected. Our impression is that the guidance and counseling staff and most of the administrative staff might be favorably biased toward such girls, whereas indifference or negative orientations might characterize the teaching faculty. In any event, the slightly lower recognition of experimental cases than of control cases encourages the conclusion that other findings which might favor the former are not likely to be the result of special favorable consideration.

In recapitulation of the findings with respect to the several measures of academic performance, we note the positive selective effect of the treatment program in reducing failing grades in academic subjects.

SCHOOL-RELATED BEHAVIOR

A number of aspects of behavior are related to school but not so directly to academic performance as the aspects previously considered. In this section we examine such measures of effect as attendance and truancy, conduct marks and officially noted teacher ratings for "character traits," as well as special ratings obtained from those responsible for guidance and discipline.

Attendance

No consistent or significant differences were found between the attendance records of experimental and control cases. Calculation of the unexcused absence rate shows that slightly more than one-third of both groups were absent on the average one day a month or less in their initial year; nearly half the cases in school three years later had this low rate of absences. Experimental cases show a slightly better rate for the latter year (49 per cent compared to 43 per cent with less than ten days, not a statistically significant difference). The decrease in unexcused absences in excess of this rate was more substantial for experimental cases than for control cases, falling from 40 per cent in the first year to 23 per cent in the third year, a statistically significant difference for those with 18 or more days of unexcused absences. As may be noted in Table 25, which presents data on absences, this decrease occurs primarily between the second and third years when a lesser decrease for control cases is also apparent.

As pointed out in the discussion of academic performance, differences through time for such measures as attendance may be taken as a positive selective effect of the treatment program

TABLE 25. UNEXCUSED ABSENCE RATE FOR ALL EXPERIMENTAL AND CONTROL CASES BY YEAR IN HIGH SCHOOL

Absence Rate per School Year	Year of Cohort Entry		First Year After Cohort Entry		Second Year After Cohort Entry	
	Experimental	Control	Experimental	Control	Experimental	Control
	(Per cent)		(Per cent)		(Per cent)	
Less than 10 days	*37*	*37*	*36*	*36*	*49*	*43*
Eleven to seventeen days	*23*	*22*	*23*	*22*	*28*	*23*
Eighteen or more days	*40*	*41*	*41*	*42*	*23*	*34*
Total	*100*	*100*	*100*	*100*	*100*	*100*
Number, absence rate available	189	192	154	158	78	79
Number, absence rate not available[a]	..	..	35	34	111	113

[a] Includes cases not in school and cases for whom information was not available.

provided for experimental cases, but since these cases do not differ significantly from the control cases on these measures one must make no claim for direct effects.

Truancy

There were 107 problem-potential cases who were "truant" during the project; 62, or 58 per cent of these cases, were control cases and 45, or 42 per cent, were experimental cases. The difference between experimental and control cases, as presented in Table 26 shows the former to have the better record and is substantial enough to take note of, although it does not quite reach the criterion of statistical significance adopted in this analysis. Instances of truancy occur for ex-

TABLE 26. TRUANCY FROM SCHOOL OF ALL EXPERIMENTAL AND CONTROL CASES

Reported Truancy	Experimental Cases	Control Cases
	(Per cent)	
No truancy reported	*76*	*68*
Truancy ever reported	*24*	*32*
Total	*100*	*100*
Number of cases	189	192

perimental cases disproportionately in the year of cohort entry when 42 per cent of them are reported. Truancies in later years are disproportionately greater for control cases, being 74 per cent compared to 58 per cent for experimental cases, but with such small numbers of truancies reported this noticeable difference is not quite statistically significant.

We are probably justified in a cautious conclusion that experimental cases were less truant than control cases as an effect of the social work program. This is an effect that might be expected in view of the weekly schedule of interviews or group sessions, attendance at which was of immediate and constant concern to the social workers. Since these scheduled contacts with the social workers took place during the school day, encouragement to meet the appointment with the caseworker or

group leader was tantamount to encouragement to come to school. It is perhaps surprising that more favorable truancy and school attendance records were not found for the experimental cases. Nevertheless, the effect that does appear must be accepted as a positive achievement of the treatment program.

Conduct Marks

Each student's official school record includes for each term a teacher's rating on "conduct," that is, on appropriate behavior or misbehavior that may or may not subject the student to some form of discipline. We might expect such behavior to be affected favorably as a result of the therapeutic attention to which the experimental cases were subjected. Table 27 compares experimental and control cases on the basis of the lowest conduct mark entered for each of the years observed.

TABLE 27. LOWEST SCHOOL CONDUCT MARKS FOR ALL EXPERIMENTAL AND CONTROL CASES BY YEAR IN HIGH SCHOOL

Conduct Marks	Year of Cohort Entry		First Year After Cohort Entry		Second Year After Cohort Entry	
	Experimental	Control	Experimental	Control	Experimental	Control
	(Per cent)		(Per cent)		(Per cent)	
Unsatisfactory (F, D, or U)	*29*	*28*	*18*	*22*	*16*	*10*
Satisfactory (C, B, or S)	*67*	*68*	*75*	*68*	*77*	*86*
Outstanding (A or O)	*4*	*4*	*7*	*10*	*7*	*4*
Total	*100*	*100*	*100*	*100*	*100*	*100*
Number, conduct marks available	188	191	148	153	77	73
Number, conduct marks not available	1[a]	1[a]	41[b]	39[b]	112[b]	119[b]

[a] Case in school but conduct marks not available.

[b] Includes cases not in school and cases for whom information was not available.

In each year, the difference between experimental and control cases was minimal and there were no consistent trends that change the relationship between the distributions of conduct marks for the two groups of cases. Significant decreases

occurred between the first and third years in the proportions of both experimental and control cases that received unsatisfactory marks for conduct. The selective process apparently operated with equal effect whether the girls did or did not participate in the therapeutic program. It is to be noted, however, that the major decrease for experimental cases with unsatisfactory conduct marks occurred between the initial and the second years, whereas for the control cases the decrease between each year was more even.

Using conduct marks as a criterion, no interpretable effect from the treatment program was found for the experimental cases.

Teacher Ratings for Character Traits and Work Traits

For each term the student's homeroom teacher, on the basis of reports from all the student's teachers, rated the student on a number of "character traits" and "work traits" and these ratings became part of the official record of the student. Ratings were on a scale from 1 (very poor) to 5 (excellent). The "character traits" rated were: interest, industry, initiative, courtesy, cooperation, self-control, appearance, dependability, and health habits. The "work traits" were: care of tools and equipment, "follows instructions," neatness, speed, attitude, use of English, safety, and workmanship. The records were not entirely consistent in the extent to which all traits were rated but there were usually four or five of each list that were rated. So far as we were able to determine from discussing the ratings with school staff, the teachers varied not only in the meanings and standards they applied but also in the extent to which students were known well enough for judgments to be made. This accounts in part for incomplete ratings for some students and full ratings for others. It is likely that behavior that was noticeably deviant—either negatively or positively—would call the student sufficiently to the teacher's attention so that traits would be rated for her.

With these reservations, the utility of such ratings is obviously limited. Nevertheless, one may assume that students who made

up the experimental and control cases had equal opportunities to be rated in the same manner and hence any differences that they exhibited had equal chances of being reflected in the ratings. We have averaged the ratings for each year and the comparison of experimental and control cases may be examined in Table 28.

TABLE 28. TEACHER RATINGS FROM SCHOOL RECORDS ON "CHARACTER TRAITS" AND "WORK TRAITS" FOR ALL EXPERIMENTAL AND CONTROL CASES BY YEAR IN HIGH SCHOOL

Average of Ratings per Year	Year of Cohort Entry		First Year After Cohort Entry		Second Year After Cohort Entry	
	Experimental	Control	Experimental	Control	Experimental	Control
	(Per cent)		(Per cent)		(Per cent)	
1.0 to 1.9 (Very poor)	*37*	*31*	*26*	*22*	*18*	*17*
2.0 to 2.9 (Poor)	*28*	*28*	*21*	*23*	*21*	*14*
3.0 to 3.9 (Fair)	*27*	*35*	*31*	*32*	*50*	*49*
4.0 to 4.9 (Good)	*7*	*4*	*16*	*19*	*10*	*12*
5.0 (Excellent)	*1*	*2*	*6*	*4*	*1*	*8*
Total	*100*	*100*	*100*	*100*	*100*	*100*
Number, ratings available	175	181	140	145	71	65
Number, ratings not available	14[a]	11[a]	49[b]	47[b]	118[b]	127[b]

[a] Cases in school but teacher ratings not available.

[b] Includes cases not in school and cases for whom information was not available.

Essentially, the findings for teacher ratings parallel those for conduct marks: no significant differences appear between experimental and control cases, but the latter tend to have slightly higher ratings. Average ratings for both experimental and control cases shift significantly upward between the first and third years, but the shift is approximately the same for both groups of cases. There is no evidence, therefore, of an effect of the treatment program so far as this measure is concerned.

General Behavior Ratings by Guidance and Counseling Staff

Within the last few weeks of each school year, a list of all the girls in the school cohorts involved in the research was presented to each of the teachers who served as guidance and counseling

staff, as well as to the head of this department, and to the administrative officer responsible for discipline. They were asked to indicate whether the particular girl was "outstanding" as they knew her general behavior in the school, whether she constituted a "moderate problem" or a "serious problem," or whether there was no particular reason for distinguishing the girl from the others. Such general ratings are admittedly crude, probably unreliable (except that we noted considerable agreement among the raters at the extremes), and subject to possible bias because these raters, of all school personnel, were most likely to know which girls on the lists had been referred to the social agency. They did not know which girls constituted the sample of control cases. How much this differential knowledge would bias the ratings—or whether it would at all—was unknown. We did not systematically inquire into the attitudes toward the experimental program held by these school staff members; we did not wish to magnify the sense of differential treatment of the experimental cases who were represented merely as girls selected at random from a large group in the school that might be thought to benefit from help by social workers and referred to the agency when they could be accommodated there. Knowledge of the identity of experimental cases might lead these school staff members to think of them as somewhat serious problems at first but decreasingly so over the years because of a general sense that the "special project" was beneficial.

Whatever the factors that affected the ratings by the guidance and counseling staff, there were relatively small differences found between experimental and control cases, as may be seen in Table 29.

Although not quite statistically significant, most noticeable is the difference in the year of cohort entry between the proportions of experimental and control cases designated "indifferent," that is, not sufficiently deviant in either positive or negative ways to call forth any special reaction from the raters. Fewer of the experimental cases than the control cases (44 per cent and 53 per cent, respectively) are in this category. Proportionately more of the experimental cases were seen as representing moderate or

TABLE 29. RATINGS BY GUIDANCE AND COUNSELING STAFF OF ALL EXPERIMENTAL AND CONTROL CASES BY YEAR IN HIGH SCHOOL

Rating	Year of Cohort Entry		First Year After Cohort Entry		Second Year After Cohort Entry	
	Experimental	Control	Experimental	Control	Experimental	Control
	(Per cent)		(Per cent)		(Per cent)	
Outstanding	*4*	*4*	*5*	*6*	*4*	*8*
Indifferent	*44*	*53*	*39*	*44*	*63*	*67*
Moderate problem	*21*	*16*	*21*	*18*	*11*	*11*
Serious problem	*31*	*27*	*35*	*32*	*22*	*14*
Total	*100*	*100*	*100*	*100*	*100*	*100*
Number, ratings available	189	192	171	181	93	92
Number, ratings not available[a]	..	..	18	11	96	100

[a] Includes cases not in school and cases for whom no information was available.

serious problems. The difference is, moreover, approximately maintained for the two groups of cases in the subsequent years. Although there is, on the whole, a decreasing trend among the cases identified as problems through the years, it is not marked enough to achieve statistical significance for either experimental or control cases.

One may suppose that the biases in these ratings operated consistently against the experimental cases but not sufficiently to mark them as very different from the control cases. In any event, the findings on this measure cannot support a conclusion that either the treatment program or selective dropout of school had an appreciable effect.

We may summarize the findings on all the measures that have been grouped together as school-related behavior by noting that none of them supplies conclusive evidence of an effect by the therapeutic program. However, the relatively better showing of experimental cases with respect to truancy suggests that the surveillance that accompanies the rendering of treatment services tends to have some effect, and this possibility is by no means a trivial achievement if further research were to show that it does indeed occur. Other deviant forms of behavior have often been observed to be concomitants of truancy. An additional conclusion

is suggested by the findings with respect to trends on the measures here examined through the three years observed: that there is some tendency for a favorable differential to develop for experimental cases through the selective process. It would appear that if girls remain in school, those with the benefit of the treatment program exhibit somewhat less negative school-related behavior. From the point of view of the school a less deviant population remains and, possibly, educational objectives might more readily be achieved for them. Likewise, a student body resulting from such favorable selective processes might constitute a more favorable context for students who are not deviant in the ways exhibited by the problem-potential segment of the school population.

OUT-OF-SCHOOL BEHAVIOR

In the design of the research, no interviews out of the school setting with potential problem cases were planned, since we did not wish to vitiate the experiment by giving special attention to the control cases. School behavior and performance were considered appropriate criteria within the scope of the research. Some information could be obtained, however, that bears on out-of-school behavior.

Entries on Health Record

Matters of health arising from acute circumstances, as well as the results of periodic health examinations by the school nurse and physicians serving the school, are recorded for each student on a health record. Such information covers a broad range of observations, including overweight and underweight, allergies, psychosomatic complaints, and emotional or psychological difficulties. It was considered possible that a treatment program addressed in major part to more positive mental health attitudes and self-understanding might be reflected in such school health records. Believing that the records were not sufficiently detailed for refined diagnostic categories, we have taken the frequency of all entries as a rough index of health status. Experimental and control cases are compared on this basis in Table 30.

TABLE 30. ENTRIES ON HEALTH RECORDS FOR ALL EXPERIMENTAL AND CONTROL CASES BY YEAR IN HIGH SCHOOL

Number of Entries	Year of Cohort Entry		First Year After Cohort Entry		Second Year After Cohort Entry	
	Experimental	Control	Experimental	Control	Experimental	Control
	(Per cent)		(Per cent)		(Per cent)	
None or one	*27*	*19*	*24*	*21*	*36*	*34*
Two to five	*50*	*49*	*55*	*59*	*56*	*57*
Six or more	*23*	*32*	*21*	*20*	*8*	*9*
Total	*100*	*100*	*100*	*100*	*100*	*100*
Number, data available	188	188	148	157	75	74
Number, data not available	1[a]	4[a]	41[b]	35[b]	114	118

[a] Cases in school but information was not available.

[b] Includes cases not in school and cases for whom information was not available.

Somewhat fewer entries on the health records are found to be made for experimental cases but the difference from control cases is not statistically significant. There are significant decreases for both groups of cases between the year of cohort entry and the last year observed. It is likely that, in addition to the effects of selection, the older ages of the girls constituting the latter cases would affect this measure. The school health personnel might be less likely to make note of minor health problems for sixteen- to eighteen-year-old than for thirteen- to fifteen-year-old girls, and the girls themselves might be less likely to bring such problems to the attention of school personnel.

Attention of Authorities and Agencies

To see whether experimental and control cases might differ in the extent to which they had come to the attention of the police, courts, and other agencies of community control, the potential problem cases were cleared through the Social Service Exchange at the terminal date of the project. However, the appearance of any entries, especially those with explicit reference to the girls themselves, was so infrequent that it is meaningless to compare experimental and control cases on this measure.

When a girl became involved in court proceedings for some offense, and it was known to the school, a notation was kept and this was taken as a further indication of deviant out-of-school behavior. We cannot accept the information as accurate under the more or less informal manner it was recorded, but the data available do not differentiate experimental and control cases in any event. Thirteen of the former (7 per cent) and nine of the latter (5 per cent) were noted to have been involved in court cases.

Out-of-Wedlock Pregnancy

Because premarital pregnancy is cause for suspension from school, and a rule made it mandatory that resumption of schooling for unmarried mothers must be in a different school, somewhat more reliable information was available about out-of-wedlock pregnancy than other forms of nonschool deviant behavior. To be sure, some such pregnancies were probably undetected, especially those that occurred so late in the school year that they did not become obvious, and it is quite likely that some girls who did not return after the summer recess dropped out of school for this reason. Some pregnancies probably remained undetected because of abortions. It is also likely that some girls gave birth during the summer and returned to school without the pregnancy ever coming to the school's attention. On the other hand, sex and pregnancy, being sensitive areas of concern for adolescents of high school age, and symptoms of pregnancy, being fairly obvious, the school's effort to identify instances of out-of-wedlock pregnancy was persistent. For all the potential problem cases (except five where data were not available), out-of-wedlock pregnancy was reported for 40 girls, or 11 per cent. Of these 41 girls, 23 (56 per cent) were control cases and 18 (44 per cent) were experimental cases, a difference that favors the latter but is not statistically significant.

On the very limited measures of out-of-school behavior available, we may note, in summary, that only the slightest advantage was found for experimental cases. We find very little evidence, therefore, of effect on these measures of the therapeutic program.

CONCLUSION

The measures of effect that have been examined in this chapter are objective, in the sense that they are observations external to the girls we studied in contrast to self-reports or responses. Such measures constitute, therefore, fairly severe tests of an experimental effect of the treatment program. On these tests no strong indications of effect are found and the conclusion must be stated in the negative when it is asked whether social work intervention with potential problem high school girls was in this instance effective.

However, the evidence is not wholly negative. With due recognition of the very low magnitude of any relationship between experimental or control status of the cases and any of these criteria measures, it may be noted that the direction of many of them tends to favor girls who had the benefit of the treatment program. This may be little basis for enthusiasm in view of the tireless efforts of able social workers and the splendid cooperation of school personnel in an attempt to help the girls with potential problems, but it is not entirely discouraging. It testifies to the difficulty of changing deviant careers, a difficulty that is apparent whenever serious evaluative assessments have been undertaken. This is certainly not surprising to social workers who have struggled to find ways to be helpful. And it should caution those who like to believe that ways are already known, if but tried, to meet the serious problems of adolescents in their high school years.

VIII. Effects of Social Work Service: Self-Reports and Responses

THE OBJECTIVE CRITERIA of effects considered in the preceding chapter are unquestionably among the types of outcomes that the therapeutic program hoped to achieve. Using these criteria, the effects were very limited, being represented by tendencies and consistencies in the data rather than by clear experimental conclusions. Such effects, whatever their magnitude, may be considered secondary, in the sense that the treatment program was only indirectly focused upon them; the caseworkers and group therapists did not define their treatment goals directly in such terms as: "to reduce truancy," "to improve school grades and conduct," "to prevent out-of-wedlock pregnancy," and so on. Rather, in keeping with the ideology of casework practice in which the social workers were trained, more proximate objectives of treatment are described in such terms as: to increase self-understanding, to develop more adequate psychological and social functioning, to facilitate maturation, to supplement emotional resources inadequate for the ordinary and extraordinary stresses of adolescence. If such proximate treatment goals are achieved, it is believed, they will lead to the indirect objectives. Hence we must attempt to observe effects of more subtle character in order to assess the treatment program and to explore the hypothesis that changes at the psychosocial level are related to changes at the more external social-behavioral level. Although the relationship between these levels is commonly assumed in the practice theory of casework and other psychotherapeutic approaches, its general validity is not established and we do not have any detailed understanding of how the levels are related.

It is difficult to observe and measure these more subtle effects, particularly when the requirements of an experimental design demand identical measures for both experimental and control cases. Because it is difficult to develop objective measures, some researchers have preferred to depend on judgments by professional caseworkers, as in the Hunt-Kogan Movement Scale.[1] In the present study such judgments could be made for experimental cases but the requirements of the experimental design demand identical measures for control cases as well. Less "professional" judgments by school staff, we have seen, reveal little distinction between experimental and control cases. There are limitations, in any event, in the use of judgments, as has been well recognized.[2] Alternative to the use of judgments, and in some ways more adequate, is the use of direct expressions and responses of the subjects whose changes are to be observed. This, too, is difficult at the present stage of technical development in the science of personality and attitude assessment.[3] We have, however, tried a number of such measures and will report findings from their use in this chapter.

All our measures share the characteristic of being self-reports and responses of the girls who constitute both the experimental and the control cases. The measures include general and specific attitudes expressed in response to questionnaires, scores on standardized personality tests, and reports on certain sociometric relations.

ATTITUDE RESPONSES

Three attitude questionnaires were administered: (1) a brief, five-item questionnaire asking general questions about how the girl felt and about related self-orientations; (2) a general questionnaire intended to detect insight into deviant behavior and how it might be affected by help from sympathetic others; and (3) a questionnaire administered to senior students asking them to reflect on their present and future situations.

General Feelings

In Chapter IV we noted that potential problem and residual cases were similar in their initial responses to this questionnaire,

except that the potential problem cases tended to give somewhat more negative responses. We also noted that experimental and control cases responded in similar ways initially and that little differentiation occurred between the first-test distributions of students who remained in school and those who dropped out. We may now examine the data to compare experimental and control cases as they are observed in successive testings through the high school years in which the former have participated in the agency's therapeutic program.

In the analysis of this questionnaire, we have examined distributions of all the experimental and control cases who were present to respond at each of the four testing periods, a successively smaller number as the girls dropped out of school. We have also examined separately the changes through time for those cases that remained in school through all four test periods, the cases therefore that can be expected to have the greatest exposure to the treatment program.

TABLE 31. RESPONSES OF EXPERIMENTAL AND CONTROL CASES AT EACH TESTING PERIOD TO THE QUESTION: "GENERALLY SPEAKING, HOW DO YOU FEEL?"

Response Category	First Test		Second Test		Third Test		Fourth Test	
	Experimental	Control	Experimental	Control	Experimental	Control	Experimental	Control
A. *All Cases*	(Per cent)		(Per cent)		(Per cent)		(Per cent)	
Excellent or very well	*50*	*50*	*48*	*39*	*37*	*47*	*43*	*44*
Quite well or satisfactory	*39*	*37*	*42*	*53*	*51*	*39*	*42*	*41*
Not too well or not well at all	*11*	*13*	*10*	*8*	*12*	*14*	*15*	*15*
Total	*100*	*100*	*100*	*100*	*100*	*100*	*100*	*100*
Number of cases	129	132	114	112	77	82	67	59[a]
B. *Only Cases Remaining for Four Tests*								
Excellent or very well	*43*	*46*					*43*	*44*
Quite well or satisfactory	*43*	*45*					*42*	*41*
Not too well or not well at all	*14*	*9*					*15*	*15*
Total	*100*	*100*					*100*	*100*
Number of cases	67	60					67	59[a]

[a] Information not available for one case.

No statistically significant trends are found that differentiate experimental and control cases in their responses to the question: "Generally speaking, how do you feel?" as may be noted in Table 31. There are also few interpretable differences for the related question: "Do you feel better than you did about two months ago?" as presented in Table 32.

TABLE 32. RESPONSES OF EXPERIMENTAL AND CONTROL CASES AT EACH TESTING PERIOD TO THE QUESTION: "DO YOU FEEL BETTER THAN YOU DID ABOUT TWO MONTHS AGO?"

Response Category	First Test		Second Test		Third Test		Fourth Test	
	Experimental	Control	Experimental	Control	Experimental	Control	Experimental	Control
A. *All Cases*	(Per cent)		(Per cent)		(Per cent)		(Per cent)	
Much better	*40*	*41*	*38*	*36*	*35*	*33*	*34*	*34*
Better or a little bit better	*44*	*45*	*51*	*54*	*52*	*47*	*55*	*39*
A little bit worse, worse, or much worse	*16*	*14*	*11*	*10*	*13*	*20*	*11*	*27*
Total	*100*	*100*	*100*	*100*	*100*	*100*	*100*	*100*
Number of cases	129	132	114	112	77	82	67	59[a]
B. *Only Cases Remaining for Four Tests*								
Much better	*42*	*40*					*34*	*34*
Better or a little bit better	*44*	*50*					*55*	*39*
A little bit worse, worse, or much worse	*14*	*10*					*11*	*27*
Total	*100*	*100*					*100*	*100*
Number of cases	67	60					67	59[a]

[a] Information not available for one case.

For the first of these questions, the stability of the distributions for both experimental and control samples is evident and a similar finding can be reported when only those cases that remained for four tests are examined. For the question concerning change in feeling over the past two months (see Table 32), one important difference is noticeable that does not quite attain statistical significance: control cases are more likely than experimental cases to say that they feel worse at the fourth testing period (27 per cent compared to 11 per cent). The trend

through time is clearly different for the two groups of cases, whether all cases or only those remaining through four tests are examined (Table 32, part B). Those who participated in the treatment program remained about the same as a group, whereas the control cases disproportionately reported a less positive outlook. Insofar as the question reflects the girls' sense of well-being, a less negative outlook may be attributed to the treatment program.

TABLE 33. RESPONSES OF ALL EXPERIMENTAL AND CONTROL CASES AT EACH TESTING PERIOD TO THE QUESTION: "HOW WELL ARE YOU GETTING ALONG WITH YOUR FRIENDS, PEOPLE YOU WORK OR GO TO SCHOOL WITH, AND YOUR OTHER ACQUAINTANCES?"

Response Category	First Test		Second Test		Third Test		Fourth Test	
	Experimental	Control	Experimental	Control	Experimental	Control	Experimental	Control
A. *All Cases*	(Per cent)		(Per cent)		(Per cent)		(Per cent)	
Very well	*67*	*68*	*60*	*62*	*60*	*57*	*49*	*66*
Satisfactory	*28*	*26*	*34*	*33*	*37*	*38*	*45*	*32*
Not too well or not well at all	*5*	*6*	*6*	*5*	*3*	*5*	*6*	*2*
Total	*100*	*100*	*100*	*100*	*100*	*100*	*100*	*100*
Number of cases	129	132	114	112	77	82	67	59[a]
B. *Only Cases Remaining for Four Tests*								
Very well	*72*	*65*					*49*	*66*
Satisfactory	*24*	*32*					*45*	*32*
Not too well or not well at all	*4*	*3*					*6*	*2*
Total	*100*	*100*					*100*	*100*
Number of cases	67	60					67	59[a]

[a] Information not available for one case.

On two questions concerned with reports on getting along with friends and with family, the findings are similar to those just reported. Table 33 presents data in response to the question: "How well are you getting along with your friends, people you work or go to school with, and your other acquaintances?" Table 34 presents data for the question: "How well are you getting along with your family?"

TABLE 34. RESPONSES OF EXPERIMENTAL AND CONTROL CASES AT EACH TESTING PERIOD TO THE QUESTION: "How Well Are You Getting Along with Your Family?"

Response Category	First Test		Second Test		Third Test		Fourth Test	
	Experimental	Control	Experimental	Control	Experimental	Control	Experimental	Control
A. *All Cases*	(Per cent)		(Per cent)		(Per cent)		(Per cent)	
Very well	*60*	*65*	*58*	*51*	*55*	*49*	*45*	*51*
Satisfactory	*32*	*26*	*29*	*36*	*27*	*38*	*45*	*29*
Not too well or not well at all	*8*	*9*	*13*	*13*	*18*	*13*	*10*	*20*
Total	*100*	*100*	*100*	*100*	*100*	*100*	*100*	*100*
Number of cases	129	132	114	112	77	82	67	59[a]
B. *Only Cases Remaining for Four Tests*								
Very well	*63*	*70*					*45*	*51*
Satisfactory	*31*	*23*					*45*	*29*
Not too well or not well at all	*6*	*7*					*10*	*20*
Total	*100*	*100*					*100*	*100*
Number of cases	67	60					67	59[a]

[a] Information not available for one case.

With respect to the first question (see Table 33), one may note a substantial decrease in the percentage of experimental cases reporting that they are getting along "very well" with their friends, a decrease not apparent for control cases. At the fourth test period, 49 per cent of the experimental cases and 66 per cent of the control cases gave this response. Neither the trend nor the latter difference quite achieves statistical significance. If these findings are taken as true reflections of actual differences, they would be contrary to the expected effect of the treatment program. The trend on prior tests for this response category is similar, however, for experimental and control cases: a gradual decrease in the proportions responding "very well" and an increase in responses to the category "satisfactory." Therefore, we must be cautious when interpreting the differential between experimental and control cases that appears at the fourth testing period.

This caution is especially necessary in view of the data for responses to the question which asks how the girls are getting along with their families. (See Table 34.) The control cases show

a somewhat more negative trend in their distributions than the experimental cases although, again, such an interpretation must be most tentative. Approximately the same proportions are maintained for the most positive response category but control cases show a disproportionate increase in the most negative category. At the fourth testing period, 20 per cent of the control cases, compared to 10 per cent of the experimental cases, indicate that they are getting along with their families "not too well," or "not well at all," but this difference is not statistically significant. As was the case for the previous question, however, the trend is not consistent and we must consider both these questions as reflecting little effect of the therapeutic program.

It is of some interest to note that on these questions the proportions decrease for both groups of cases selecting the most favorable category, "very well." This suggests a possible change in inclination of students as they proceed through high school, or as they grow older, to express attitudes on such matters strongly. Or high school girls with potential problems—whether or not participants in a treatment program—may, indeed, get along less well with their friends and families. Perhaps increasing autonomy of later adolescence is reflected in such an inclination.

We have noted earlier that problem-potential and residual cases differed most in response to the question: "Do you have a lot of problems that are bothering you?" When experimental and control cases are compared, however, no meaningful differences between them or important time trends are to be found. Similarly, no differential findings can be reported for the companion question, "Do you feel you are going to be able to take care of your problems all right in the future?"

The limited findings on this instrument may be said, in summary, to suggest modest effects of the treatment program. These are expressed in the indication that those girls who had the benefit of the program respond to a slight degree less negatively to several questions intended to reflect general self-assessments of their personal situations.

Psychological Insight and Reactions to Help

Increased sensitivity to emotional and other causal factors in misbehavior and acceptance of help as desirable were important aspects of the learning experience offered to the girls in the therapeutic program. We sought to examine effects on these aspects by a general questionnaire administered (in the spring of 1959) when the school population would contain the largest number of experimental cases. The questionnaire was answered by girls at all school-grade levels and a total of 813 students responded. Identified by cohert entry year and by status as experimental, control, or residual cases, the respondents were distributed as follows:

Cohort Entry Year	*Experimentals*	*Controls*	*Residuals*	*Total*
1955 to 1956	..	1	28	29
1956 to 1957	19	12	181	212
1957 to 1958	36	43	197	276
1958 to 1959	53	55	188	296
Total	108	111	594	813

With this pattern of respondents it has been possible to analyze the questionnaire data to compare experimental cases with varying amounts of exposure to the treatment program to their control counterparts. No trends in this respect appeared, however, in the data. The basic comparison between experimental and control cases will be made, therefore, for the two central cohorts—those for 1956–1957 and 1957–1958. Experimental cases in these cohorts had opportunity for at least two years' exposure to the treatment program.

The questionnaire was in two parts, the first asking questions indicating insight into the behavior of a fictional girl whose behavior was described in a vignette, and the second part asking questions pertaining to the student herself.

The vignette was as follows:

> Mary is an imaginary person, but you probably know some girl like her.
>
> Mary is a high school student about your age. She is often a little late getting to school. Although she is really pretty smart, she

doesn't work very hard and the teacher usually calls her down in class for some reason or other. Mary is always picking arguments and when you try to be friends you soon find out that she talks about you behind your back. Sometimes she loses her temper and once she had a bad fight with another girl over really nothing at all—just some chair that Mary wanted to sit in.

A series of questions about Mary followed, the first of which was intended as a screening question and as a lead to more indirect analytical responses. Question 1 asked: "Is it important for Mary to change the way she acts or is there no particular reason for her to change?" Almost all the girls—whether experimental, control, or residual cases—said that it was "very important for Mary to change."

The next question sought to tap a sense that some factors other than willful action determined Mary's behavior: "Do you think Mary could really stop acting this way if she just tried?" The responses of experimental and control cases from the two central cohorts (the number for each group was 55) are given in Table 35, part A, together with the distribution for residual cases (378) from the same cohorts. No significant

TABLE 35. RESPONSES OF EXPERIMENTAL, CONTROL, AND RESIDUAL CASES TO THE QUESTION: "DO YOU THINK MARY COULD REALLY STOP ACTING THIS WAY IF SHE JUST TRIED?"

Response Category	Experimental	Control	Residual
A. *Two Central Cohorts*		(Per cent)	
Very sure she could stop	*36*	*44*	*51*
Pretty sure she could stop	*55*	*54*	*45*
Not likely she could, or pretty sure she couldn't stop	*9*	*2*	*4*
Total	*100*	*100*	*100*
Number of cases	55	55	378
B. *Most Recent Cohort*			
Very sure she could stop	*57*	*58*	*51*
Pretty sure she could stop	*36*	*38*	*43*
Not likely she could, or pretty sure she couldn't stop	*7*	*4*	*6*
Total	*100*	*100*	*100*
Number of cases	53	55	188

differences are found between experimental and control cases; the direction of difference shows, however, the experimental less likely than the control cases to be sure that Mary's behavior is a matter of "just trying."

A statistically significant difference does appear when experimental and residual cases are compared; 36 per cent of the former compared to 51 per cent of the latter say they are "very sure she could stop." Control cases differ in the same direction but the percentage giving this reply (44 per cent) is intermediate between the experimental and residual groups. This finding suggests an interesting interpretation, namely, that girls who have problems themselves are less confident that simple advice to "control themselves," "make up their minds to behave," and similar injunctions can be followed. Furthermore, when such girls are exposed to casework orientations toward behavior as exemplified in the vignette, they become increasingly skeptical of such approaches. Put in the context of deterministic theories of behavior generally held by caseworkers, the girls involved in treatment become more sophisticated in psychological diagnosis.

Of course, an alternative interpretation might suggest that girls are likely to get into trouble if they do not believe that behavior such as that described in the vignette can be stopped by "just trying." With our data we cannot compare potential problem and residual cases prior to any exposure of experimental cases to the treatment program. But the most recent cohort at the time when the questionnaire was administered could only have had minimal treatment experience of less than one year. If this interpretation is valid, potential problem cases should show a smaller percentage than residuals on this response. As a matter of fact they do not; no important differences appear for this cohort between experimental, control, and residual cases as may be seen in Table 35, part B. To explain the differences that are found for the later cohort, one must assume some differential experience or differential selective factor. It is reasonable to believe that the treatment experience of the experimental cases was a factor in their response pattern.

In the additional questions about Mary the magnitudes of differences between experimental and control cases vary but in no instance enough, with the small number of cases, to be statistically significant. We will not present tables for each item but, instead, will report the direction of the findings that occur.

Several questions offered further opportunity to see if girls who had participated in discussions with social workers would choose responses indicating somewhat more psychological insight in contrast to "common sense" or stereotyped, explanations based on noncausal assumptions. More experimental cases (38 per cent) than control cases (31 per cent) did not think that Mary "will just outgrow this kind of thing." Slightly more experimental cases (85 per cent) than control cases (80 per cent) are sure "Mary acts this way because something is bothering her." But almost equal proportions of experimental and control cases (40 per cent and 42 per cent, respectively) wonder "fairly often" or "a lot" "why girls like Mary act the way they do." Experimental cases are more likely (65 per cent) than control cases (51 per cent) to agree that "Mary acts this way because she goes with the wrong kind of people." And more experimental cases (66 per cent) than control cases (51 per cent) say that Mary "never" or only "sometimes" "feels ashamed of herself for acting this way."

Taken together, with due respect for the fact that differences are minimal, the responses to the questions about Mary make an interpretable pattern. Experimental cases are more inclined than control cases to say that something is bothering Mary, that she will not just grow out of it and cannot change her behavior by just trying, that she goes with the wrong kind of people and does not feel very much ashamed of how she acts. This psychologically plausible pattern is consistent with the diagnostic approach of casework practice and may be considered at least minimal evidence of somewhat greater psychological insight on the part of the experimental cases. It is to be emphasized again, however, that the differences are small and that our interpretations must be taken only as cautious speculation hinted by the data.

One final question about Mary led the respondents into the second part of the questionnaire concerned with getting help with problems from others. The question was asked: "Do you think talking with a friendly adult would help Mary change for the better or don't you think this would make any difference?" The responses to this question are shown in Table 36.

TABLE 36. RESPONSES OF TWO CENTRAL COHORTS OF EXPERIMENTAL, CONTROL AND RESIDUAL CASES TO THE QUESTION: "DO YOU THINK TALKING WITH A FRIENDLY ADULT WOULD HELP MARY CHANGE FOR THE BETTER OR DON'T YOU THINK THIS WOULD MAKE ANY DIFFERENCE?"

Response Category	Experimental	Control	Residual
		(Per cent)	
Very sure it would	*36*	*25*	*32*
Probably would	*44*	*67*	*57*
Not likely to	*20*	*4*	*7*
Don't think it would	..	*4*	*4*
Total	*100*	*100*	*100*
Number of cases	55	55	378

The most apparent differences in this table—but not statistically significant—are the greater proportions of experimental cases responding "very sure it would" and "not likely to" make any difference, with a much smaller proportion giving the ambiguous response, "probably would," and none saying that they "don't think it would." Observing the whole distribution, the control cases to a greater extent than the experimental cases (92 per cent and 80 per cent, respectively) give positive responses. If the pattern of responses is representative of a real relationship, it would suggest greater crystallization of opinion on the part of the experimental cases with respect to the likelihood that "talking with a friendly adult would help Mary change for the better." The data imply that girls exposed to casework orientations tend to have stronger convictions about talking over behavior problems than those who are not so exposed. This suggestion is speculative, of course; the data cannot support the conclusion that experimental cases clearly reflect a sense of benefit from talking over problems.

In fact, there is only the slightest evidence that experimental cases more than control cases value discussing their own problems with an interested adult. This question was asked directly about the girls themselves in the second part of the questionnaire: "When *you* have a problem, is it helpful to discuss it with an interested adult or is it not very helpful?" 40 per cent of the experimental and 35 per cent of the control cases checked the category "very helpful" and 7 per cent of the former compared to 11 per cent of the latter checked "not so helpful." These differences are not statistically significant.

In the matter of talking with adults about things that bother them, however, the experimental cases clearly show that they have had more opportunity to do so and that fewer of them would want more opportunity. This may be seen in the data presented in Tables 37 and 38.

TABLE 37. RESPONSES OF TWO CENTRAL COHORTS OF EXPERIMENTAL, CONTROL AND RESIDUAL CASES TO THE QUESTION: "SINCE YOU GOT OUT OF JUNIOR HIGH, HOW MUCH OPPORTUNITY HAVE YOU HAD TO TALK WITH ADULTS ABOUT THINGS THAT MAY BOTHER YOU?"

Response Category	Experimental	Control	Residual
		(Per cent)	
A great deal	*51*	*38*	*38*
Some	*44*	*36*	*40*
Not much	..	*7*	*12*
Very little	*5*	*19*	*10*
Total	*100*	*100*	*100*
Number of cases	55	55	378

TABLE 38. RESPONSES OF TWO CENTRAL COHORTS OF EXPERIMENTAL, CONTROL AND RESIDUAL CASES TO THE QUESTION: "WOULD YOU WANT TO HAVE MORE OPPORTUNITY THAN YOU HAVE HAD TO TALK OVER THINGS WITH ADULTS OR DON'T YOU CARE TO TALK THINGS OVER WITH ADULTS?"

Response Category	Experimental	Control	Residual
		(Per cent)	
Like a lot more opportunity	*11*	*31*	*23*
Like some more opportunity	*38*	*38*	*39*
Have as much opportunity as want	*40*	*18*	*30*
Don't care to talk with adults	*11*	*13*	*8*
Total	*100*	*100*	*100*
Number of cases	55	55	378

Significantly more experimental than control cases (95 per cent and 74 per cent, respectively) say they have had "a great deal" or "some" opportunity to talk with adults about problems that bother them and a similar difference (also significant) holds when experimental and residual cases are compared. This may with some confidence be attributed to the participation of experimental cases in the treatment program where talking things over with adults was the main preoccupation. Confirming the recognition by experimental cases of greater opportunity to talk over problems, significantly fewer of them said they would like to have more opportunity to do so. (See Table 38.) It is to be noted, however, that more than one-third of the experimental cases nevertheless indicate that they would "like some more opportunity."

On two questions, little difference was found between experimental and control cases with respect to their belief that it is "helpful" or "a good idea" to discuss and talk over problems with friends. Experimental cases are slightly more inclined (the differences are not statistically significant) to favor talking with friends. Residual cases are somewhat (but not significantly) more inclined than either experimental or control cases to look with favor on discussing problems with friends. If the group sessions attended by experimental cases were seen as especially beneficial discussions with friends, they were so seen only to the slightest extent.

On a series of questions asking whether talking about "yourself, your problems, etc." has changed different relationships with others, the differences are again only minor in every instance. To a small extent, experimental cases were more likely than control cases to say that talking about things changed their feelings about themselves and made them want to get along better with their families. On the other hand, control cases were somewhat more likely to say that talking things over helped them get along better with girl friends and boy friends or helped them want to improve their appearance. No interpretable pattern is suggested by these minor differences and one must conclude that the treatment program did not visibly, on the

evidence of the measures used, induce its participants to see themselves as directly affected in such relationships with others by their discussions with social workers.

To a final question asking whether the girls thought they were easier, the same, or harder to get along with now than they used to be, proportionately more of the control than of the experimental cases reported that they were "easier to get along with." If the responses are taken at face value as reports of actual relationships with others, this difference (not statistically significant) would be contrary to expectations. If, on the other hand, the responses are taken as self-perceptions, one might speculate that participation in the treatment program encouraged experimental cases to make more realistic self-appraisals. We do not have direct external evidence of whether the girls were, in fact, easier or harder to get along with than formerly. It is to be noted, however, that in the distribution of responses experimental cases are more like residual cases than control cases. One may cautiously reason that girls who were in the treatment program were more likely to appraise themselves in the same manner as girls who were not potential problems, whereas potential problem cases without benefit of the treatment program tended to make more unrealistic self-estimates. Without additional evidence, this interpretation is, of course, purely speculative but it is in keeping with the suggestion elsewhere in the data that experimental cases might have acquired somewhat more psychological insight than control cases.

Reviewing data from the general questionnaire, we may say that participants in the treatment program clearly recognized the opportunity they had to discuss their problems with an adult and, in contrast to the control cases, did not feel that they had been limited in doing so. Experimental cases did not, however, especially attribute benefits to themselves from this opportunity in proportions significantly greater than the control cases. This finding is not a direct assessment of the treatment program by participating girls, since they were asked only indirect questions that could also be responded to by control

cases. Nevertheless, if the treatment program had been very salient for the experimental cases and they had valued it highly, one might have expected the rather obvious questions about help from interested adults to reflect this appraisal. Control cases reported in proportions about equal to experimental cases that talking with adults had been beneficial. It is possible, of course, that the ambiguous term "interested adults" might have been interpreted differently by the two groups of girls. If this were the case, it would still follow that participation in the treatment program did not produce differential responses.

The data tend to suggest that participation in the treatment program was associated with somewhat greater psychological insight when experimental and control cases are compared. The evidence for such a conclusion is weak, however, although responses to a number of questions point in that direction. It is always possible that a superficial attitude questionnaire would fail to reflect so subtle a difference as heightened insight, so that the barest tendency on the present instrument might be encouragement that the treatment program had some effect in this respect. However, we must conclude that experimental effects are no more evident in the attitude responses of this questionnaire than they were on the more behavioral criteria considered earlier.

Assessments by Seniors of Their Present and Future Situations

When each cohort reached the end of its senior year, girls still in the school were asked to complete what was called the "Senior Questionnaire." Since the project terminated before the final cohort (entering 1958–1959) reached this level, the population responding to this instrument consisted only of the first three cohorts. Of these cohorts, 67 experimental cases and 56 control cases completed questionnaires. This represents all the experimental cases that remained in school for four test periods; senior questionnaires were not obtained for four of the 60 control cases with similar school tenure.

After requesting the seniors to write a few lines about their future plans, the questionnaire asked specific, closed-choice questions about their future, about help outside the school during the high school years, and about "trouble" they might have been in during that time. It was thought that responses to such questions might be answered differently by girls who had participated for three years in the treatment program. Reports of more help received, greater confidence about the future, and reports of being in less trouble might be expected of experimental in greater proportions than of control cases.

One part of the questionnaire gave the girls an opportunity to indicate on a four-point scale (from "a great deal" to "not at all") how much help they got while they were in high school from the following: parents, friends, a doctor, a social worker, an employer, a teacher, a minister or priest or rabbi, somebody at a community center or "Y," and a policeman. Clearly the experimental cases reported more help from social workers than the control cases: 48 per cent of the former compared to 21 per cent of the latter said they had "a great deal" or "some" help from a social worker, and the difference is statistically significant. The distributions for this question are shown in Table 39. This is evidence that the girls who participated in the

TABLE 39. RESPONSES OF EXPERIMENTAL AND CONTROL CASES WHO COMPLETED THE SENIOR QUESTIONNAIRE TO THE QUESTION: "WHILE YOU WERE IN SCHOOL, HOW MUCH HELP DID YOU GET OUTSIDE THE SCHOOL FOR SOME OF THE PROBLEMS YOU HAD—PERSONAL PROBLEMS, SOCIAL PROBLEMS, MONEY, ETC. HOW MUCH DID A SOCIAL WORKER HELP YOU?"

Response Category	Experimental	Control
	(Per cent)	
A great deal	*24*	*7*
Some	*24*	*14*
A little bit	*15*	*5*
Not at all	*37*	*74*
Total	*100*	*100*
Number of cases	67	56[a]

[a] Information not available for 4 cases.

therapeutic program did identify their social workers as helpful, although approximately one-third (37 per cent) answered "not at all" to the question. A substantially greater (but not quite statistically significant) percentage of experimental than control cases also indicated that somebody at a community center or "Y" had helped them: 36 per cent of the former compared to 18 per cent of the latter responded that they were helped "a great deal" or "some." This is not surprising since group sessions were often held in a nearby YMCA building. Thus we may conclude that the efforts of the social workers to help were recognized by their clients.

No other significant differences appear on this set of questions. Somewhat more of the experimental than of the control cases reported that a teacher (33 per cent compared to 25 per cent) helped them "a great deal." Somewhat fewer experimental than control cases reported that their parents had helped them "a great deal" (54 per cent compared to 73 per cent). Responses were essentially similar with respect to the other designated persons who might have helped the girls.

On questions concerned with reported trouble during the past two or three years, similar proportions of experimental and control cases said they had never been in trouble at all (46 per cent compared to 45 per cent). The two groups saw themselves about equally as having been in less trouble than "most of the girls in school" (91 per cent of the experimental and 93 per cent of the control cases). And a somewhat greater percentage of experimental cases than of control cases (37 per cent compared to 27 per cent) reported that at least one of their friends had been in serious trouble during the past two or three years. This is not surprising since the experimental cases were thrown with one another in the treatment groups and hence exposed to deliberate discussions of trouble other girls might have had. From these three questions we must conclude that less self-reported "serious trouble" was not an effect of exposure to the treatment program. It should be remembered, however, that both experimental and control cases responding to these questions were selected populations, excluding girls

who had dropped out of school who might actually have been in more trouble.

The series of questions about the future also failed to differentiate experimental and control cases who completed the Senior Questionnaire. Approximately the same proportions (slightly more than two-thirds) said they were "not at all" or "a little" worried about their future; about half of each group were sure about what they were "going to be doing in the next few years"; and a little more than one-third of each group said they thought they would get along "very well" or "well" in the future. Greater proportions of experimental cases than of control cases (25 per cent compared to 13 per cent) said that they thought there was "a very good chance" that "things will work out the way you want them to in the next five years," and that they had "a very good chance" of "having a happy married life" (47 per cent for experimental and 41 per cent for control cases). These differences are not, however, statistically significant. They are the strongest evidence in the data, nevertheless, that girls who had been in the treatment program were more optimistic about their personal future.

On the whole, we find only a minimal effect of the treatment program on the assessments of their situation and their future among girls who remained in school to the end of their senior year, although those who participated in the program did report that they had been helped by social workers.

Conclusion with Respect to Attitude Responses

The scant differences that appear on the measures of attitude used in this study can, in summary, support only the slightest indication of effect of the treatment program. At best we may cautiously suggest that taken together the patterns of response on the several instruments tend to be somewhat less negative if viewed from the objectives of the treatment program. There is clearly no indication that subjectively felt and reported feelings and attitudes were affected more strongly than the more indirect objective criteria considered in the previous chapter.

PERSONALITY TESTS

The Junior Personality Quiz, which was the personality test used throughout the series of test periods in the research, has been described in detail in Chapter III. It was noted there that on only two factors was there the suggestion that experimental and control cases differed significantly or meaningfully.

Compared to control cases, scores on the factor designated as Will Control vs. Relaxed Casualness change toward the higher pole of the dimension for experimental cases. Thus we may conclude that the treatment program promoted personality test responses indicating greater self-control, orderly and persistent behavior. These traits did not increase for the comparable control cases.

Although not statistically significant, slight numerical trends with respect to the factor, Adventurous Cyclothymia vs. Withdrawn Schizothymia, occur in opposite directions for experimental and control cases. The former increase in boldness, whereas the latter increase in shyness, aloofness, lack of confidence. This is a suggestive difference in keeping with the objectives of the treatment program to which the experimental cases were exposed.

On the other ten factors that make up this personality test no interpretable differences appear between experimental and control cases. We must conclude, therefore, that the treatment program had only the barest effect on personality changes insofar as this instrument detects them.

The Make A Sentence Test—a projective sentence-completion test with standardized scoring developed in part for purposes of this research[4]—has been described in Chapter II where its eleven scoring categories are listed. Examination of the scores for experimental and control cases failed to reveal interpretable differences and therefore the data will not be presented.

Thus with the use of two standardized measures of personality —one "objective" and the other "projective"—only the barest evidence of an experimental effect of the treatment program can be found.

SOCIOMETRIC DATA

In the design of the research it was planned to obtain minimal sociometric data to test the hypothesis that experimental cases would be less likely than control cases to associate with other girls who had trouble in the school. It was also intended to examine the data to discover whether participation in the treatment program resulted in greater or less isolation in the sense of choosing or being chosen by classmates as "friends—students you pal around with." Therefore, sociometric choices were analyzed for those students who remained in school throughout the four testing periods and these data will be considered here.

When the study was initiated, the treatment program was conceived as individualized casework but we have noted that it shifted after the first year to group treatment. As a result, the experimental cases were brought into constant association with one another and hence might be expected to name one another to a greater extent than those not in their groups. Since potential problem cases were more likely than residual cases to be rated as "serious problems," it is not surprising that opposite trends occur with respect to experimental cases when compared to control and residual cases in the number of "serious problem" students named. Thus between the first and fourth test periods, the percentages of control and residual cases naming one or more "serious problem" students decreases, whereas a greater proportion of experimental cases named one or more "serious problem" students. Even so, the differences between the three groups of cases is not large enough to be statistically significant. Table 40 presents the data on "serious problem" students who were named by and who chose girls who constitute the experimental, control, and residual cases.

It is of some interest that despite the greater likelihood of naming "serious problem" students, the experimental cases are not, in turn, chosen disproportionately by such students. Statistically significant differences between first and fourth test-period distributions are found for experimental as well as control and residual cases but no significant differences between the three groups of cases at either the first or the fourth test periods.

TABLE 40. NUMBER OF "SERIOUS PROBLEM" STUDENTS NAMED BY AND CHOOSING EXPERIMENTAL, CONTROL, AND RESIDUAL CASES WHO WERE PRESENT AT BOTH FIRST AND FOURTH TEST PERIODS

"Serious Problem" Students	First Test			Fourth Test		
	Experimental	Control	Residual	Experimental	Control	Residual
	(Per cent)			(Per cent)		
A. *Number of "Serious Problem" Students Named by*						
None	*46*	*31*	*50*	*38*	*42*	*50*
One or more	*54*	*69*	*50*	*62*	*58*	*50*
Total	*100*	*100*	*100*	*100*	*100*	*100*
Number of cases	67	60	334	67	59[a]	334
B. *Number of "Serious Problem" Students Choosing*						
None	*32*	*45*	*51*	*61*	*66*	*67*
One or more	*68*	*55*	*49*	*39*	*34*	*33*
Total	*100*	*100*	*100*	*100*	*100*	*100*
Number of cases	67	60	334	67	59[a]	334

[a] Information not available for one case.

As Table 41 shows, when the sociometric data are considered with respect to "outstanding" students named by and choosing experimental, control, and residual cases, the trends are similar for both of the potential problem samples (experimental and control cases); no significant differences appear between them. Whether naming or chosen by "outstanding" students, increased proportions of such students are found at the fourth test period when compared to the first period, and these differences are statistically significant. This is merely evidence, of course, that all students become better known as they remain in school and this phenomenon does not appear differentially to any meaningful degree for experimental and control cases. The same trend, however, is sufficiently greater for residual cases than for either of the potential problem samples that the differences found between the residual and the experimental and control cases taken together at the fourth test period are statistically significant. Although not differentiated from one another, both the experimental and the

TABLE 41. NUMBER OF "OUTSTANDING" STUDENTS NAMED BY AND CHOOSING EXPERIMENTAL, CONTROL, AND RESIDUAL CASES WHO WERE PRESENT AT BOTH FIRST AND FOURTH TEST PERIODS

"Outstanding" Students	First Test			Fourth Test		
	Experimental	Control	Residual	Experimental	Control	Residual
	(Per cent)			(Per cent)		
A. *Number of "Outstanding" Students Named*						
None	*58*	*56*	*57*	*29*	*22*	*14*
One or more	*42*	*44*	*43*	*71*	*78*	*86*
Total	*100*	*100*	*100*	*100*	*100*	*100*
Number of cases	67	60	334	67	59[a]	334
B. *Number of "Outstanding" Students Choosing*						
None	*52*	*50*	*55*	*34*	*30*	*16*
One or more	*48*	*50*	*45*	*66*	*70*	*84*
Total	*100*	*100*	*100*	*100*	*100*	*100*
Number of cases	67	60	334	67	59[a]	334

[a] Information not available for one case.

control cases are found to be less likely to name or be named by "outstanding" students than the residual cases. Slightly fewer of the experimental than the control cases at the fourth testing period are found to name or be chosen by "outstanding" students, but the differences are small and cannot constitute evidence of a negative result of the treatment program.

With respect to sociometric volume—that is, the total number of students named by or choosing girls in the several samples of the research population—there are no important differences between experimental, control, and residual cases. The trend is for each of the three groups of cases to name more students at the fourth than at the first test period. Likewise, they are chosen by more at the later period, with the residual cases somewhat more likely to be chosen, but not to a statistically significant degree.

The sociometric data do not show evidence of effect from the treatment program. Insofar as the hypothesis that the program would reduce the undesirable associations of the experimental

cases is concerned, there is no evidence to support such a conclusion. Nor has there been an evident effect on the level of general popularity of experimental as compared to control cases.

CONCLUSION

The attitude, personality test, and sociometric data presented in this chapter have failed to detect in any important respect an effect of the experimental treatment program. The findings are not entirely negative, since some of the patterns of responses show slight indications that experimental cases appear somewhat less unfavorable in a number of parallel instances. It is clear, however, that response and self-report measures are not more sensitive criteria of effects of the treatment program than the objective behaviors examined in the previous chapter.

We must conclude that, with respect to all of the measures we have used to examine effects of the treatment program, only a minimal effect can be found.

NOTES TO CHAPTER VIII

1. Shyne, Ann W. editor, *Use of Judgments as Data in Social Work Research.* National Association of Social Workers, New York, 1959, *passim.*
2. *Ibid.*, Hunt, J. McVicker, "On the Judgment of Social Workers as a Source of Information in Social Work Research," pp. 38–54.
3. Borgatta, Edgar F., David Fanshel, and Henry J. Meyer, *Social Workers Perceptions of Clients.* Russell Sage Foundation, New York, 1960, pp. 70–72.
4. Borgatta, Edgar F., in collaboration with Henry J. Meyer, "Make A Sentence Test: An Approach to Objective Scoring of Sentence Completions," *Genetic Psychology Monographs*, vol. 63, 1961, pp. 3–65.

IX. Conclusions and Implications

THE IMPLICATIONS to be drawn from the research and the program of service to high school girls described in the preceding chapters go beyond a summary of findings. It is the purpose of this concluding chapter to comment on the project and its results and also to consider broader issues associated with evaluative research in social welfare.

CONCLUSIONS

Systematic and rigorous evaluative research concerning programs of social welfare is still so uncommon that it is quite appropriate to consider the execution of this project as a demonstration.[1] It has shown that it is possible to carry out a complex research design involving experimental and control cases, requiring the coordinated cooperation of a private social agency and a public school, and calling for sustained and adaptive efforts of professional social workers as well as those of school personnel and researchers. The acceptability of the control-group design, and recognition of its feasibility, should be further encouraged by the experience of this project. A promising trend toward field experiments in social work—a matter of debate and hesitation when the project began—may be accelerated.

Another emerging trend gains support from the experience of casework practitioners over the course of this project. The use of group approaches to treatment emerged clearly as the method of choice in this instance. The caseworkers became convinced that their treatment influences were more strongly conveyed when clients were seen in groups. There is no doubt that *initial contact* was more readily achieved between professional social workers

and high school girls with potential problems when group rather than individual approaches were used. Moreover, *continued access* to such clients was greater when they were seen in groups than as individual cases. Although the social workers were initially uncertain about working with groups of clients, they were stimulated to see both diagnostic and treatment possibilities not evident to them in the more traditional caseworker-client relationship. These conclusions do not minimize the potential utility of individual treatment but suggest the value of group methods and encourage consideration of alternatives adapted to variations in types of clients and types of client problems.

The intent of the service program to reach a clientele for whom future problems could be anticipated was demonstrably realized. Those selected as potential problem cases were markedly less successful in subsequent school performance and in other criteria of social or personal adjustment. The procedures for identifying potential problem girls among the entering students of the high school were efficient. They used school records to identify students who had previous school or personal difficulties. A general observation about social behavior is once more confirmed: prior behavior is a good predictor of subsequent behavior. However, the potential problem cases did not exhibit acute states of crisis considered by these social workers to be beyond the point of helpful intervention. The girls who became clients were seen as appropriate for the help proffered. Lack of success in helping them might raise questions about whether the point of intervention was the most appropriate. Younger girls might have been helped more but this can be determined only by further experimentation. It would seem as important to devise strategies of treatment that proceed from more inclusive theories of social behavior.

Such a direction of attention is suggested by another conclusion that the data of the study support. An unexpected degree of stability on measures of personality and attitude was evident over the three years of adolescence that were observed. Three years may be considered a short span but it represents a substantial part of a most significant period in the lives of these girls. If confidence can be placed in our measures, one must conclude

that only powerful treatment interventions can be effective. Since the intervention utilized in this project gave more intensive personal attention than is usually provided for such girls, we are led to suggest that attention to interpersonal and status systems, rather than personality systems, might be more promising.

The impact of the program provided for the experimental cases must be acknowledged to be small. Few statistically significant differences between experimental and control cases were found. On the wide range of criteria used to detect impact of the treatment program, the most positive evidence is represented by the small, parallel effects found for a number of objective and self-report measures. This encourages no dramatic claims for this type of service program as a major assault on critical school and personal behavior problems of high school girls. The limited demonstration of effectiveness raises important questions of appropriate goals of service programs as well as issues about social work practice and its evaluation.

DISCUSSION

Disappointment with the results of evaluative studies when they fail to show dramatic success has led some researchers in social welfare and social work to conclude that evaluative research should be postponed until "more basic" research has been undertaken. It is our conclusion, however, that evaluative research is itself a potent strategy for promoting clarity of goals of treatment, conceptualizations of treatment modes, and theories of behavior that "basic" research requires. The requisites of the sort of evaluative research reported here force attention to issues not otherwise readily recognized.

This research occurred after prior experience with evaluative research so that attention was given in advance to most problems that such research implicates. The design represented a degree of rigor not often achieved with social data in the field. Experimental and control subjects were carefully specified and the attempt was made to keep the target population in perspective by placing the selection processes within a source population. Experimental and control cases were judged appropriate for treat-

ment and represented a potential for demonstrating change. They could, in turn, be compared to a larger population not deemed in need of treatment that could represent a base-line of normality.

There are some obvious limitations not overcome in this research that warrant emphasis. It was necessary to work with a single agency and a single school. The devotion of the cooperating parties in order to satisfy the rigor of the research was little short of heroic. To obtain the cooperation of many schools and agencies is a possibility for the future but this will require even greater efforts than those represented by the current enterprise. Our study of the change process has been made within a limited setting that is possibly representative of other agencies and schools, but not demonstrably so. How representative the setting, the agency, and the definition of the change task are can be judged by the reader. We have elsewhere concluded that it may be wasteful for single agencies to attempt evaluative research alone.[2] They generally do not have the resources to devote to research or the organizational capacity to undertake the manipulations required to reach conclusions about the effectiveness of programs. Furthermore, the point bears reemphasizing that evaluation studies "would be of greater usefulness if they were part of a systematic program of evaluation studies of alternative services within a community."[3]

In the evaluation of agency services, it is desirable to develop large samples of experimental and control cases and to assure that those selected to receive the services actually do. In this project sample sizes are exceptionally large in comparison to most of the field studies in social work. Furthermore, a very high proportion of experimental cases made contact with the agency and were seen more often than most clients of private casework agencies. One reason such large samples could be obtained was the good operating arrangement between the school and the agency, implemented by conscientious effort of the personnel involved and by watchful encouragement of the research staff. Another reason was the inclusiveness of the clientele, namely, high school girls classified as potentially deviant rather than actually deviant. The target population is broader than one defined by more spe-

cific, limited problems or symptoms. For example, a clientele defined in terms of potential for pregnancy out of wedlock would obviously be more numerous than one defined in terms of actual pregnancy out of wedlock. Approximately one-fifth of the girls who entered this high school were identified as potential problem cases. We estimate that about one-fifteenth of the entering girls would have been selected as clients if they had been identified by taking severe or developed behavior problems as criteria for inclusion.

The breadth of definition that permitted the larger samples made less specific the problems presented by the clients. If it is believed that treatment should be made specific to the expressly diagnosed problem, attempts at early intervention will require diagnostic procedures that can detect specific problems in earlier stages of development. Such diagnostic procedures are not yet available for the types of problems these clients were likely to have. Indeed, it was because early intervention was desired that the experimental cases in this project were drawn from a large pool of "potential problem cases."

The breadth and unspecificity of the definition of clients did not mean that clients were selected who were inappropriate for treatment and not in need of help. Most of them were deemed by the social workers to need professional help even though all might not be viewed as receptive to help or able to profit from contact with the social workers. Almost a fifth of all the girls in school were so judged. What proportion of girls would have been seen at intake as having real and substantial problems if a random sample of the entire class, rather than of a potential problem pool, had been referred to the agency? Is it unfair to suggest that the presumptive bases of the profession for making such an identification might have viewed the vast majority of a randomly selected group as having real and substantial problems? The implication leads to questions about the realism of agencies in thinking that they serve special groups with specific needs for help. It raises doubt about the extent to which social work has developed diagnostic capacities to differentiate clients who need help from those who do not. It suggests that there may be a presumption

of the need for help rather than a diagnostic determination. Furthermore, it raises questions about the kinds of changes that might be expected if so broad a population is viewed as the clientele to be helped or to have future problems prevented.

Ambiguity in the definition of appropriate clients is coupled with uncertainty about the treatment or service that should be attempted and what the goals of such treatment or service should be. The social workers in this project were made well aware of these ambiguities by the demands that evaluation research forced them to face. In the early discussions of plans for this project, one of the social workers was led to remark: "But how can you possibly evaluate what we are trying to do when we don't know ourselves?" This is not cited to imply lack of skill or knowledge, but rather to acknowledge the state of diagnostic and treatment uncertainty characteristic of the social-therapeutic professions. When the goals of treatment or of services are themselves so unclear, how can the criteria of success be specified? What should be considered effective results? How shall we speak of "more" or "less" achievement by professional efforts? Obviously these questions are relevant when we consider the results of this project.

Our response to this situation was to consider as wide a range of explicit and implicit outcomes as we could conceive.[4] Our criteria included objective behaviors and changes of status as well as judgments of behavioral functioning and reflections of psychological states. These criteria are, it should be noted, primarily located *in the client* rather than in the social system within which the client is located. This has implications for the meaning and strategy of evaluative research. Here we wish to consider how much change in such criteria can be expected as a result of various magnitudes of invested effort under such conditions of diagnostic inclusiveness and treatment variability as obtained in this and in most evaluation experiments.

As we have noted, our sample sizes are large in comparison with most control-group evaluative research reported in the literature. How large should effected differences be to be considered statistically significant? We are not raising the question

of when to place confidence in observed differences between the experimental and control sample but rather the question of what should be meant by "success."[5] Generally, about 10 per cent more of the experimental cases than of the control cases would have to show the criterion condition for the shift to be judged statistically significant at the .05 confidence level for sample-sizes in our data. The concept of statistical significance is associated with notions of hypothesis testing in repeated random sampling, and the judgment that a difference is statistically significant is an arbitrary one that the difference is large enough so that it would recur in repeated random sampling by chance only a small proportion of the time, say in 5 per cent of the samples.

Translating this into practical terms, these questions might well be asked in advance of the research: "Suppose that only 50 per cent of students having various types of problems already showing in their school records at entry to high school actually complete their work? What proportion of those 50 per cent expected to drop out could be helped sufficiently so that they would finish school?" Should the expectation be that one-half would be helped? A third? A quarter? A fifth? A tenth? Optimism based on professional confidence or on ignorance of well-known facts might choose the larger proportions. To answer "a half" would mean to expect a change in the dropout rate to 25 per cent, a rate considered very good in many school systems. To answer "a fifth" would be to expect a shift in dropout rate from a high one to a lower one (of 40 per cent) that may still be considered high but might be taken as a reasonable practical objective.

Our data did not show such a shift. This warrants reexamination of the question of the size of shift that it is reasonable to expect. Since there was essentially no difference between experimental and control samples on this criterion (or on most others), the speculation about such shifts is intended to point up the methodological issues involved. The empirical findings in our study show so little difference that, from a statistical viewpoint, the possibility that larger sample sizes would have led to different conclusions is practically precluded. If the observed difference in shift on a criterion were 4 per cent, samples as large as 1,000

would still not be sufficient to achieve the level of statistical significance commonly accepted in sociological research.

Demonstrations of changes in evaluative research studies require assumptions about the magnitudes of the changes that should occur. The presumption of most evaluation research—including the present study—has been that effects will be substantial and that the number of persons involved in desirable changes will not be trivial. If this is not achieved, we do not suggest that the practicing professions can take the position that evaluative research is pointless. On the contrary, emphasis should be placed on a realistic interpretation of what is meant when a profession states that its objective is amelioration of personal or social conditions, or the prevention of deviant behavior or social problems. Perhaps the point can be better made in reverse: Would not the investment of social agencies be important in a preventive undertaking if only 5 per cent of improvement occurred in high school dropout rate? In the whole population of the United States, would not an improvement of even one per cent be impressive? After all, one per cent of the approximately four million children in each age group in school would represent 40,000 persons affected in an important way in a single year.

For such reasons as the above, we have been as cautious about rejecting differences that are not statistically significant as in accepting such differences as evidence of substantial effects. When we have found differences that go in a favorable direction, as has been the case in this study, they may properly be interpreted as palliative. Such effects should be made known to practitioners, policymakers, and researchers conscious of the problem of magnitude in expectations about effects of treatment and service efforts.

From this perspective, consideration of relative costs become important. Whether by deliberate plan or by historical circumstance, resources in the community are directed to one or another objective. Some may go toward vaguely defined objectives, some to those highly specific. For example, much of the professional effort of some agencies may be directed toward helping to achieve a psychological condition for clients deemed desirable, such as "self-realization," "self-actualization," "mental health," or simi-

lar notions of the development of personality or personal values. In contrast, the professional effort of other agencies may be directed toward helping clients change their situations and by achieving different statuses affect their psychological functioning and their personal values. An attitude of self-worth might be instilled in a client, on the one hand, through casework treatment or psychotherapy, or, on the other hand, through assistance and direct help in the accomplishment of some goal or the achievement of some status that might result in a feeling of self-worth. The contrast needs to be made clear: in the former approach something is assumed about the need to work on the psyche of the person; in the latter approach, something is assumed about the need to work for a change in the person's situation. Generally, it would seem that the socialization process favors the latter approach since it appears to reward improved status achievements more than improved feelings about oneself. Obviously cause and effect are not separated here, but it is a reasonable supposition that most people define their self-images through their actual or potential achievement of tangible goals rather than through the direct cultivation of favorable self-images.

It may be true that if a girl's ego strength has been increased, she will at some point in life "come through." However, speculation about this is less convincing than would be a demonstration of immediate changes in behavior. In the present project we are not able to test long-range effects of agency services; it is conceivable that they may not be evident until later when in some way a knowledge of alternatives presented and values discussed with a caseworker or a group therapist might be reflected in broader perspective and greater wisdom. This possibility needs to be balanced against that of producing a more direct change in some immediate, practical situation. For example, assistance in obtaining a job, or help that would lead to a high school diploma, may create a set of situational expectations that can determine many attitudes, including those that bear on the behavior, the aspirations, and the achievements of the girl in the present and the future. We do not ignore the possibility that psychological changes may be necessary before social situational changes can

be achieved. But this cannot be assumed to be the case. It seems to us equally plausible to argue that cause and effect occur in the opposite direction. We do note, however, that the change efforts of most social workers, including those in this project, have been primarily—almost exclusively—guided by the former assumption and therefore little effort has been directed toward immediate situational changes.

The design of the present research unquestionably neglects the possibility of long-range effects. But likewise the service program has relatively neglected the practical aspects of this period of adolescence. Is it not possible that explicit attention to the immediate problems of getting through school and receiving a high school diploma, of learning how to apply for and get a job, of practice in social behaviors relevant to adequate marriages, and other immediate conditions might help to achieve statuses that themselves generate socially desirable expectations and behaviors? Rather than concentrate almost entirely on self-understanding and attitudes and feelings, might not professional efforts be directed to the situations of family, peer-group, school, and workplace which form, or at least sustain, the psychological conditions of these clients? Should we expect weekly interviews with caseworkers, or weekly counseling sessions in groups, to have critical effects when situational conditions were hardly touched?

We do not suggest that procedures for manipulating the social situations of clients are readily available or demonstrably effective. Rather, we suggest that a serious professional task for social work is to develop intervention procedures in such systems. The achievement per unit cost of effort and resources invested in the type of treatment represented by this project does not encourage us to believe that it is the most efficacious. Unless we are to abandon hope that more than the barest results can be achieved by professional effort, we must develop other ways of helping. These, in turn, will require different conceptions of how to achieve the desirable goals we seek.

IMPLICATIONS

This line of argument bears on the nature of attempts to change clients such as this present project included. Impact should be

considered in terms of behavior and status consequences. Indirect efforts through influences on internal psychological states do not seem to have had such consequences. The results of attempts to effect social conditions directly should be put to the test.

Although the analysis of how changes in persons occur is far from established or elaborated in scientific theory, we may make some pragmatic observations that support an approach through attention to immediate, practical situations. Radical changes are infrequent; small and gradual changes are more common than dramatic ones in learning social behavior. Exposure to successful or desirable social forms would seem to precede learning them. Thus changes tend to reflect the proximate and they tend cumulatively to appear gradual rather than episodic and dramatic. What is proximate for the kinds of girls in this project? Their families, their neighborhoods, their friends, their schoolmates and teachers, their jobs and their employers. Is it not through these—in short, the social systems that contain these girls—that we may achieve changes? Should it not be with reference to these that we determine the proximate goals for change? A girl from a social setting of little education may more realistically be helped if she achieves the immediate goal of educational betterment to which she is exposed by being in school. An attempt to help her achieve a psychological orientation exemplified in a middle-class style of life may not be realistic, since she is unlikely to be exposed to the patterns of behavior that support and reflect this orientation. Helping her to get through school by material or other assistance may seem to be a minimal objective, but failure to achieve this may preclude many other desirable goals. In setting priorities of goals, the achievement of proximate, practical advancements may well be considered the most therapeutic.

The argument for a broader social perspective in the attack on potentially deviant careers does not require the abandonment of interventions at the level of individual psychological states. It implies, rather, the recognition of multiple and interrelated levels of possible intervention. We believe that this project has offered a reasonable assessment of effects that can be achieved by conscientious, skilled, professional counseling directed toward psychological changes. To be sure, more intensive psychotherapeutic

treatment procedures are known which have not been tested in our research, but most of them depend on types of relationships for which the high school girls in this project seemed least accessible. Whether individual or group, such treatment procedures do not seem feasible. Although replications of studies to evaluate individual and group treatment approaches are necessary, we are not encouraged to expect very much success for populations of this sort.

We can understand the modest claims for successful treatment made by the caseworkers as an implicit recognition that other levels of intervention are necessary. The more confident assessments of supervisors and consultants may reflect their greater insulation from aspects of client situations not so clearly evident when the therapeutic setting is the primary focus of observation. The minimal effects found in the evaluative data may result from posing multi-level criteria broader than those of either the caseworkers or their supervisors. Although not reported in this study, the caseworkers themselves appear to use objective criteria of successful outcome in their assessments even if these are not explicit in their treatment perspective. Thus clients who were seen to change positively were those whose behavioral statuses—progress through school, good grades, avoiding such difficulties as truancy and pregnancy out of wedlock, and the like—were more positive. It would seem appropriate to point change efforts toward conditions directly affecting situations determining these outcomes as well as toward changes in the clients themselves.

If multi-level attacks are to be utilized, two models of service programs, or some combination of these models, can be suggested. Each social worker might seek to operate at various levels, from psychological influences through manipulations of interpersonal and environmental conditions. Or various agencies might seek to coordinate efforts at various levels on behalf of the clients, constructing a comprehensive plan for achieving change. Neither of these models is foreign to the traditions of social work; indeed they are often espoused. Each of them presents difficulties in execution that require imaginative changes in the present systems of providing services. They implicate conceptions of professional social work practice that include many intervention

points and differentiated change strategies. Such conceptions are implicit in the view of casework as concerned with the total situation of the client and in the view of social work as an attempt to achieve social change in order to enhance the effective functioning of clients.

We cannot assert that comprehensive, multi-level programs will necessarily succeed. They have not been widely tried or rigorously evaluated. The broad-gauged programs of delinquency control and prevention now being attempted and the groping efforts to conceive and execute comprehensive "community mental health programs" are developments that should teach us much if they are carefully assessed.

Evaluation of multi-level programs will present many difficulties. Adaptations of experimental designs as well as development of new measures of influences and outcomes will be necessary. These will challenge social researchers as much as the devising of comprehensive programs of service will challenge practitioners. There will need to be extensive collaboration of social scientists and social workers to develop forms of intervention that are theoretically based and testable through valid research.

The implications we have drawn from the project described in this book are not intended to devalue either the conscientious efforts now made by social workers or the utility of the type of evaluative research here reported. Only by exposing both practitioners and researchers to the painful experience of testing their best efforts can they proceed to new approaches and new methods that may promise more success.

NOTES TO CHAPTER IX

1. See Shyne, Ann W., "Evaluation of Results in Social Work," *Social Work*, vol. 8, October, 1963, pp. 26–33.
2. Meyer, Henry J., and Edgar F. Borgatta, *An Experiment in Mental Patient Rehabilitation*. Russell Sage Foundation, New York, 1959, p. 106.
3. *Ibid.*, pp. 105–106.
4. Hyman, Herbert H., Charles R. Wright, and Terence K. Hopkins in *Applications of Methods of Evaluation* (University of California Press, Berkeley, 1962, pp. 12–17) have developed at length the importance of "conceptualizing unanticipated consequences."
5. The viewpoint developed here is also suggested by Howard E. Freeman in "The Strategy of Social Policy Research." *The Social Welfare Forum, 1963*, Columbia University Press, New York, 1963, pp. 153–154.

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