An Exploration and Comparison of Internalized Behaviors and Peer Relationships in Dual Enrolled and Non-Dual Enrolled Students

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An exploration and comparison of internalized behaviors and peer relationships in dual enrolled and non-dual enrolled students

By

Mary Bess Woodard Pannel

A Dissertation
Submitted to the Faculty of Mississippi State University in Partial Fulfillment of the Requirements for the Degree of Doctor of Philosophy in School Counseling in the Department of Counseling, Educational Psychology, and Foundations

Mississippi State, Mississippi

May 2016
An exploration and comparison of internalized behaviors and peer relationships in dual enrolled and non-dual enrolled students

By

Mary Bess Woodard Pannel

Approved:

____________________________________
Kimberly Renee Hall
(Director of Dissertation)

____________________________________
Katherine Dooley
(Committee Member)

____________________________________
Benjamin Harvey
(Committee Member)

____________________________________
Cheryl A. Justice
(Committee Member)

____________________________________
Charles D. Palmer
(Graduate Coordinator)

____________________________________
Richard Blackbourn
Dean
College of Education
While the importance of dual enrollment programs has been clearly demonstrated, the potential impact of completing college level courses during high school has on the emotional and mental well-being of adolescents has not been explored. School counselors are in a unique position to foster an academic environment that also enhances their emotional and mental wellness. Discovering factors that contribute to internalized behaviors, peer relationships, and academic performance, may provide school counselors a better understanding of personal, social, and academic development of adolescents. The present study used a nonexperimental, comparative, research design to explore whether or not participation in dual-enrollment courses has any influence on internalized behaviors (locus of control, self-esteem, self-reliance, and sense of inadequacy) and peer relationships (social stress and interpersonal relationships) of 12th grade students. Data were collected through a demographic survey and the Self-Report of Personality, Adolescent version (SRP-A) of the Behavior Assessment System for Children, 2nd edition (BASC-2) instruments. Two multivariate analyses of variance found no statistically significant results for the overall models. However, individually, the variable of self-
esteem was statistically significant between dual enrolled and non-dual enrolled students. Based on the results of this research, school counselors can be better prepared to address and promote academic, career, and social competencies as it specifically relates to measures of self-esteem.
DEDICATION

To my family, whose unconditional love and unwavering support have been my driving force in completing this insurmountable goal. It is unquestionable that the culmination of this long journey is dedicated to you. There is no doubt that I am extremely loved as a mother, a daughter, a wife, a sister, and a friend. To Luther and Nelda, you are the exemplars of dedication and hard work. If not for your presence in my life and in this pursuit, none of this would have been possible. You both have a way of making me feel as if I can conquer anything, from learning to my shoes to completing a doctorate degree. To my sister, Susan and her husband, Daniel, for continuously providing me with creative inspiration and for developing my coffee addiction. To my husband, JJ, thank you for your support and never doubting me in this crazy adventure. To my incredible and amazing parents, Tommy and Wanda, from elementary school plays, high school pep rallies, and now endless babysitting duties, I cannot think of any part of my life that you have not shown your constant love and support. Finally, my children, my biggest inspiration, Tucker, Caroline, and Nora, you will never know how much you inspire me to be a better person and to never take one day for granted. God has truly blessed me above and beyond my wildest imagination.
ACKNOWLEDGEMENTS

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CHAPTER I
INTRODUCTION

Across the nation, dual enrollment programs have become an increasingly popular option for high school students to obtain a “jump start” on their college academic careers, while simultaneously completing the requirements for a high school diploma (Flowers, Milner, & Moore, 2003; Hugo, 2001; Karp & Hughes, 2008). Previous research studies focused on the stresses that adolescents face, as well as the negative effects of pressure to succeed academically (Kim, Kirby, & Bragg, 2004; Mokher & McLendon, 2009). However, very little research has examined the influence of dual enrollment courses on the mental well-being of adolescents. Despite the demand and popularity of dual enrollment programs, little research data supports the needs of students and school counselors’ understanding of the positive or negative influence that dual enrollment courses play in a student’s overall mental health.

Previous research indicated the rigor of a student's academic curriculum significantly correlated to postsecondary planning and success (Akos, Lambie, Milsom, & Gilbert, 2007; Karp & Hughes, 2008; Ohrt, Lambie, & Ieva, 2009). Furthermore, Akos et al., (2007) found that academic tracking not only influenced students' academic success, but their career or vocational aspirations. Students in dual-enrollment courses gain access to college-level curricula and have an opportunity to earn college credits before beginning their postsecondary education. According to previous research, dual-
enrollment students tend to have higher vocational and academic aspirations and increased postsecondary success (Flowers et al., 2003; Ohrt et al., 2009).

This research study attempted to identify the potential dynamics of internalized behaviors and peer relationships among dual enrolled and non-dual enrolled students in the 12th grade. The variables (a) locus of control, (b) self-esteem, (c) self-reliance, and (d) sense of inadequacy of internalized behaviors and the variables (e) social stress and (f) interpersonal relationships of peer relationships were examined. The goal of this study was to determine whether statistically significant differences existed among these variables in 12th grade students enrolled and not enrolled in dual enrollment courses. In order to prepare the reader, a review of literature examining dual enrollment, locus of control, self-esteem, self-reliance, sense of inadequacy, social stress, and interpersonal relationships were included in the manuscript. A statement of the problem, the purpose of the study, research questions, and brief descriptions of operational definitions of related terms were also presented. Finally, implications and limitations to this study were provided at the conclusion.

**Developmental Challenges of Adolescence**

Adolescence is an instrumental period in human development in which developmentally sensitive social, psychological, and academic pathways are being established (Corsano, Majorano, & Champretavy, 2006; Plaistow et al., 2014). Although adolescents are least likely to seek help from mental health services, at this time they are at a potential highest risk for the development of mental illness (Plaistow et al., 2014). According to Plaistow et al., adolescents have consistent views of the positive and negative aspects of mental health services, which could be incorporated into the design of
school counseling services. Plaistow et al., (2014) provide specific examples of positive experiences in counseling that specifically identified ‘talking and listening’ as the most dominant theme. Having someone to talk to and to listen were considered important features for a young person’s experience of early intervention mental health services. These authors also provide specific negative experiences in counseling that identified the stigma of mental illness as a common theme, and a main barrier to accessing services, along with lack of information or access to counseling services (Plaistow et al., 2014).

Approximately one in every five adolescents develops a depressive episode by the age of 18 (Cairns, Yap, Pilkington, & Jorm, 2014). With respect to physical, social, emotional, educational, and vocational development, the onset of a mood disorder could potentially disrupt healthy development across one or more of these domains during adolescence (Cairns et al., 2014; Watson & Gable, 2013). Adolescence constitutes a time of transition for the adolescent from issues of childhood to the more complex problems of adulthood. Physical and neurological changes redefine the manner in which an individual responds cognitively (Watson & Gable, 2013).

Despite experiencing emotional and academic problems, adolescents report that they value school and acknowledge the importance of their academic responsibilities. Even adolescents with learning disabilities highly regard academic competence and consider hard work and effort to be significant factors for academic success. According to Martínez and Semrud-Clikeman (2004), “adolescents’ perceptions of their academic competence were positively correlated to grade point average (GPA), whereas emotional distress was negatively correlated to GPA” (p. 411). Thus, emotional distress in adolescents may be reduced by positive academic variables such as “feeling competent,
valuing school, and earning good grades” (p.411). Even though adolescents continuously face academic and emotional issues, research is limited that investigates the co-occurrence of academic and emotional issues among adolescents (Watson & Gable, 2013).

Various challenges associated with increasing academic demands are posed at the secondary level for a majority of students (Watson & Gable, 2013). Being sensitive to the unique academic and emotional needs of adolescents, professional school counselors have the opportunity to provide counseling services that present positive aspects of mental health services. As educational leaders, school counselors are in a unique position to advocate for counseling services that identify potential barriers and enhance students' holistic development. School counselors can aggressively work to remove potential school-related barriers in order for students to achieve social, psychological, and academic successes (Lanteigne, Flynn, Eastabrook, & Hollenstein, 2014; Ohrt et al., 2009; Watson & Gable, 2013).

**Purpose of the Study**

Although school counselors are in a position to offer interventions that focus on personal, social, and academic growth, little literature examines the influence of the additional academic rigor of dual-enrollment courses and the potential influence on personal, social, and academic development of adolescents (Sekowski & Siekanska, 2008). Additionally, there is very little research demonstrating effective, intervention strategies for counseling adolescents enrolled in dual-enrollment courses. School counselors are in a unique position to provide an appropriate environment for developing prevention and intervention services for adolescents who are enrolled in dual-enrollment
courses. Discovering what contributes to internalized behaviors, peer relationships, and academic performance, may provide school counselors with a better understanding of personal, social, and academic development of adolescents (Corsano et al., 2006; D'Esposito & Jamilia Riccio, 2011; Flowers et al., 2003; Seifert & O'Keefe, 2001).

Across high schools in the United States, dual enrollment programs are increasing in popularity due to accessibility and affordability. Researchers have highlighted the important role that dual enrollment programs play with bridging the gap between secondary and post-secondary education (Flowers et al., 2003; Ganzert, 2014; Hugo, 2001; Karp & Hughes, 2008; Kim et al., 2004; Mokher & McLendon, 2009). However, it appears that research is unclear on the relationship between additional academic load and the overall mental well-being of adolescents or whether such a relationship exists. Therefore, the problem is that while we know the potential importance of dual enrollment programs, we do not know the potential influence of completing college level courses during high school on the emotional and mental well-being of adolescents.

Justification of the Study

According to Ganzert (2014), dual enrollment programs serve an integral role in academia by accelerating learning in secondary education so that students are prepared for the future, whether in skills for the modern workforce or enhancing abilities at the post-secondary level. Dual enrollment programs offer students an opportunity to obtain academic credits to prepare them for further educational attainment after leaving high school. As evidenced by Ganzert’s research study, dual enrollment programs show effectiveness in doing so. Dual enrollment courses also reduce the semester by semester course load for college students, enabling them to complete their degrees in a timely
manner. According to Ganzert (2014), dual enrollment programs should be maintained as a vital link in promoting student success in ongoing learning. Dual enrollment programs continue to show effectiveness in promoting higher student GPA and graduation rates, and therefore, it should be not only be supported but promoted as a pathway to student success (Ganzert, 2014).

Academic and emotional functioning affect each other equally; however, there is limited research exploring the co-occurrence of dual-enrollment courses, internalized behaviors and peer relationships among adolescents (Watson & Gable, 2013). Therefore, the overall objective of this research study was to explore the occurrence of emotional functioning and mental well-being with academic rigor reported by 12th grade students. Gaining a more in-depth understanding of dual enrollment programs and their potential impact on adolescents’ internalized behaviors and peer relationships will help to promote overall student success.

**Statement of the Problem**

The purpose of this research study was to explore whether or not participation in dual-enrollment courses influenced internalized behaviors (a) locus of control, (b) self-esteem, (c) self-reliance, and (d) sense of inadequacy and peer relationships (e) social stress and (f) interpersonal relationships of 12th grade students as defined by scores on the Self-Report of Personality, Adolescent version (SRP-A) of the Behavior Assessment System for Children, second edition (BASC-2; Reynolds & Kamphaus, 2004).
Research Questions

This study examines the similarities and differences between high school 12th graders registered in a dual-enrollment course and those not registered in a dual-enrollment course on the variables of (a) locus of control, (b) self-esteem, (c) self-reliance, (d) sense of inadequacy, (e) social stress, and (f) interpersonal relations.

Although previous research has examined these variables in relation to the age of adolescence (Bosson, Brown, Zeigler-Hill, & Swann, 2003; Kang, Chang, Chen, & Greenberger, 2013; Lanteigne et al., 2014; Martínez & Semrud-Clikeman, 2004; Myers, Willse, & Villalba, 2011; Plaistow et al., 2014), there have been few research studies specifically investigating the potential impact of dual-enrollment courses in relation to these variables during adolescence.

These research questions were examined:

1. Was there a statistically significant difference between 12th grade students taking dual enrollment courses and students who were not taking dual enrollment courses on levels of internalized behaviors (a) locus of control, (b) self-esteem, (c) self-reliance, and (d) sense of inadequacy as measured by the SRP-A?

2. Was there a statistically significant difference between 12th grade students taking dual enrollment courses and students who were not taking dual enrollment courses on levels of peer relationships (e) social stress and (f) interpersonal relationship as measured by the SRP-A?
Variables

Independent Variable

The independent variable in this research study was whether or not a high school 12th grader was registered in a dual-enrollment course.

Dependent Variables

The dependent variables for this research study were the scores on the SRP-A for internalized behaviors (a) locus of control, (b) self-esteem, (c) self-reliance, and (d) sense of inadequacy and the scores on the SRP-A for peer relationships (e) social stress and (f) interpersonal relations on the BASC-2.

Definition of Terms

Dual enrollment: Ganzert (2014) defined dual enrollment as a student who is enrolled in credit courses at a secondary institution and at a postsecondary institution during the same academic term.

Locus of control: This is the belief that rewards and punishments are controlled by external events or people and whether or not an individual perceives that he or she has any level of control over these external events as they relate to their life (Reynolds & Kamphaus, 2004). According to Kang et al., (2013) locus of control is associated with social relationships.

Self-esteem: Self-esteem is the positive or negative internal emotion that an individual may feel about him/herself and was measured using the BASC-2 self-esteem scale (Reynolds & Kamphaus, 2004).
Self-reliance: Self-reliance can be regarded as a person’s feelings and beliefs of self-confidence and assurance in one’s ability to make decisions in relation to their personal dependability (Reynolds & Kamphaus, 2004).

Sense of Inadequacy: Sense of inadequacy describes personal feelings with relation to one’s perceptions expectations of low achievement, along with a tendency not to persevere (Martínez & Semrud-Clikeman, 2004; Reynolds & Kamphaus, 2004).

Social Stress: Social stress is defined as feelings of stress and tension in personal relationships as well as feelings of pressure, and poor coping abilities as experienced by individuals when associating with peers and/or interacting with others; a feeling of exclusion from social interactions (Lanteigne et al., 2014; Reynolds & Kamphaus, 2004).

Interpersonal Relations: Interpersonal relationship was defined as any positive or negative meaningful relationship that results in significant emotions and experiences (Reynolds & Kamphaus, 2004).

**Summary**

Dual enrollment programs continue to gain popularity throughout the United States, which in turn, could potentially impact student personal, career, and social/personal development (Lanteigne et al., 2014; Watson & Gable, 2013). School counselors are in a primary position to assist children struggling with issues related to the added demands of these dual-enrollment courses; therefore, it is critical that the impact of dual enrollment courses be examined. Though some studies have taken a quantitative approach to the overall effectiveness of dual enrollment programs (Karp & Hughes,
2008; Kim et al., 2004), there is still a very limited body of quantitative research in relation to student’s participation in dual enrollment courses and their overall mental well-being. The purpose of this study was to add to the body of research on dual enrollment programs and offer a specific look at dual enrollment within the context of the co-occurrence of academic and emotional issues among adolescents.

The researcher investigated the relationship between dual enrollment courses and adolescent behaviors, which could influence more applicable and valuable counseling practices as well as expanding the overall scientific knowledge base within the counseling profession. Research has been limited and unclear about the relationship between participation in dual enrollment courses and the mental well-being of high school students. Further assessment is necessary to provide direction for school counseling programs through the recognition of strengths and challenges facing adolescents. It is crucial that school counselors recognize the potential positive or negative impact of the added demands that dual enrollment courses can have on a student’s academic, career, and personal/social endeavors.
CHAPTER II
REVIEW OF LITERATURE

This research study attempts to identify potential dynamics of internalized behaviors and peer relationships among dual enrolled and non-dual enrolled students. The variables (a) locus of control, (b) self-esteem, (c) self-reliance, and (d) sense of inadequacy of internalized behaviors and the variables (e) social stress and (f) interpersonal relationships of peer relationships were examined. The researcher will assess and compare the internalized behaviors of locus of control, self-esteem, self-reliance, and sense of inadequacy, along with the peer relationship dynamics of social stress and interpersonal relationships between students who are enrolled in dual enrolled courses versus students who are not. Beginning with a definition, history, and various concepts regarding dual enrollment, this chapter will provide (a) insight and explanation of dual enrollment related to internalized behaviors and peer relationships relevant to adolescents and the vital role school counselors play in assisting them, (b) review the role of professional school counselors serving this particular student population, and (c) introduce school counseling interventions to support these students and their families.

Definition of Dual Enrollment

Dual enrollment is a general term describing a program originally intended to offer challenging postsecondary curricula to academically prepared secondary level students (Ganzert, 2014; Kim et al., 2004). Also referred to as concurrent enrollment,
joint enrollment or dual credit, dual enrollment students are typically rising high school
juniors or seniors between 16 and 17 years old (Ganzert, 2014). The approach of dual
enrollment, by which students receive both high school and college credit for the same
course, has been given a growing amount of attention in recent years (Ganzert, 2014).
Dual enrollment programs can be located on college campuses or in high schools and are
taught by qualified high school teachers or college faculty. Students simultaneously earn
high school and college credit by fulfilling course requirements (Klopfenstein & Lively,
2012). A collaborative effort between the high schools and colleges, these programs
offer students a challenging academic experience and the opportunity to earn college
credit prior to high school graduation. A majority of dual enrollment students are
college-bound students pursuing college-level credits through state articulation
agreements that allow equal transfer of community college credits in core courses
(English, math, and science) to four-year universities (Ganzert, 2014; Karp & Hughes,
2008; Kim et al., 2004; Mokher & McLendon, 2009).

Programs that are similar to dual enrollment include exam-based programs, such
as the College Board Advanced Placement (AP) and International Baccalaureate (IB)
programs that date back to the mid-1950s. One major difference from AP and IB
programs is that students in dual enrollment programs are not required to take a test
administered by an external source to qualify for college credit; rather, academic credit is
given based on the entire course and not specifically on test score results (Karp &
Hughes, 2008). More importantly, students who did not typically consider themselves
“AP-eligible” are eligible to enroll in dual enrollment courses, which emphasize the value
of “building an infrastructure of access and capacity” (Hugo, 2001, p. 68). The dual
enrollment program is highly appealing to those students who are often “just below” the admission requirements of enrolling in an advanced placement class (Hugo, 2001). Hugo also noted that students in dual enrollment programs have the opportunity to preview college level classes in their high school classrooms before they actually attend college.

The academic credit for the dual enrollment course is recognized for credit toward high school graduation as well as credit toward a college degree. With dual enrollment, the credit is automatically transcripted once students successfully complete a course, whether or not they end up attending the associated college (Karp & Hughes, 2008). Other differences between dual enrollment courses and AP courses are that dual enrollment students take college courses with college syllabi. Eligibility requirements for dual enrollment programs vary, however most programs include the requirements of specific scores on the American College Testing (ACT) in English and mathematics, high school grade point average, and teacher/counselor recommendations. A majority of dual enrollment courses continue to be taught at high schools by high school teachers appointed as college adjunct faculty members. In this case, the college usually supervises the outline of the course, along with the accompanying course syllabus and other factors such as attendance and grades, to help ensure that students receive the same course content and are held to the same standards as students taking the course on a college campus. However, several colleges offer sections of college-credit courses to students on their campus as well as online (Karp & Hughes, 2008; Kim et al., 2004).

**History of Dual Enrollment**

Secondary and postsecondary educational systems in the United States historically have functioned under different organizational structure and policies, which
have been consistently disconnected from each other. In the past decade, however, concerns over decreasing college completion rates, rising criticism of the lack of academic rigor in the senior year of high school, and growing demand for remedial postsecondary courses have led states to consider new ways to smooth the progression between K – 12 and higher education. One popular policy endeavor to unify the two educational systems is dual enrollment (Mokher & McLendon, 2009; O’Neill, 2010). Examining the history of dual credit programs shows that early program initiatives were mostly implemented at the local level, especially piloted by community colleges (Ganzert, 2014; Kim et al., 2004).

Dual enrollment programs have expanded considerably over the past three decades, emerging in a decentralized way over the 1970s and 1980s to keep talented 11th and 12th grade students challenged, ease the transition between high school and college, promote professional readiness, as well as provide students the momentum toward earning a college degree. Today, dual enrollment programs are as varied as the state laws and individual collaborations between colleges and high schools governing the partnerships (Klopfenstein & Lively, 2012; Mokher & McLendon, 2009).

The pace of establishing the dual enrollment programs within high schools across the United States has been uneven. Over the 14-year period between 1976 and 1990, only 17 states adopted policies relating to dual enrollment programs. However, in the 14 subsequent years, growth of dual enrollment has been described as “explosive,” with an additional 23 states establishing programs – a 35% increase over the previous period (Ganzert, 2014; Kim et al., 2004; Mokher & McLendon, 2009). Presently, dual
enrollment programs are now implemented in all 50 states, and 40 states have state-level policies that focus on state-wide, dual enrollment programs (An, 2013).

**Benefits of Dual Enrollment**

Advocates of dual enrollment policies contend these programs yield a number of advantages for students, families, postsecondary institutions, and policy makers. They maintain that dual enrollment programs help students adjust to the academic and social demands of college, which in turn, enables them to make better choices concerning whether or not to pursue a postsecondary education (Kim et al., 2004). Preparation for college coursework and degree attainment are two important aspects of dual enrollment programs while increasing and elevating the academic rigor of the educational curriculum at the high school level (An, 2013). Furthermore, students participating in dual enrollment programs who choose to attend college may be better prepared to succeed academically. Students in dual enrollments programs are more likely to graduate from high school, assist in adapting and adjusting to college life and in return earn higher grades in college than compared to non-dual enrolled students (An, 2013; Kim et al., 2004).

Another factor influencing the adjustment between secondary and postsecondary education is the impact of class size. The majority of dual enrollment courses have a typical enrollment of 25 or fewer students—a formula that has proven successful, as small class size fosters student-faculty communication. Dual enrollment programs offer the opportunity for high school students to experience college-level coursework in a smaller group setting than may be traditionally offered in their schools (Ganzert, 2014; Hugo, 2001; Karp & Hughes, 2008).
Additionally, the more rapidly students obtain access to challenging, college-level courses, the more likely they are to finish the requirements for their high school diploma as well as a postsecondary degree (An, 2013; Kim et al., 2004; Mokher & McLendon, 2009). Thus, dual enrollment programs may also decrease the time required to complete a college degree by allowing students to begin earning college credits in high school as well as reducing the amount of time and effort spent in lower-level college courses. Participation in dual enrollment courses could encourage more students to pursue postsecondary education and this in turn could positively influence the overall economy in reaping long-term benefits through the development of a better educated workforce (Kim et al., 2004; Mokher & McLendon, 2009).

Dual enrollment programs will continue to be publicized and promoted as tuition savers and more accessible to larger segments of the secondary school population (Hugo, 2001; Karp & Hughes, 2008; Kim et al., 2004), which will likely lead to an increase in the number and diversity of students who take them. Advocates claim that this results in savings of time and money for students and their families as well as benefiting policy makers by increasing the efficiency of the state’s educational system (Kim et al., 2004). In some high schools, except for books and supplies, students are able to take college-level courses at no cost, therefore, directly reducing the cost of college tuition (Ganzert, 2014; Hugo, 2001; Karp & Hughes, 2008).

Dual enrollment courses are often seen as appropriate for many students, including those who have not performed well in the traditional academic setting. Dual enrollment programs have led to a wider range of positive outcomes including assisting low-achieving students in meeting high school standards and therefore decreasing the
high school dropout rate and increasing student goals and ambitions. Whereas in the past, dual enrollment programs were once restricted due to academic eligibility requirements and limited to students in college-prep tracks. Today, students at varying degrees of academic ability, including average and under-achieving students, now have the option of registering for dual enrollment courses, depending on specific state laws and regulations. As a result, many dual enrollment programs are opening their doors to a wider group of students than ever before (Ganzert, 2014; Hugo, 2001; Karp & Hughes, 2008; O’Neill, 2010).

Within the last 20 to 30 years, state policies have made dual enrollment programs easier for more students to take advantage of, especially within the community college system (Ganzert, 2014). According to Karp and Hughes (2008), high school students in career and technical education (CTE) programs can be positively influenced through dual enrollment programs. The study revealed that CTE students who participated in dual enrollment courses demonstrated greater improvement in academic outcomes than their classmates who did not participate. This study also provided evidence that CTE students can benefit from participating in programs to prepare them for careers as well as college. Karp and Hughes (2008) also stated that dual enrollment courses benefit the teachers as well by improving and upgrading the overall academic curriculum by not only preparing students to enter the workforce immediately after high school but also providing students with exposure to more rigorous college course content (Karp & Hughes, 2008).

Hugo (2001) reported that surveys organized and administered by the National Association for College Admission Counseling (1999) acknowledge the significance of the student’s academic record. Therefore, the student’s academic program in college
preparatory courses is a crucial and valuable factor in the college admissions process. Dual enrollment programs also provide a curricular means for disadvantaged students to strengthen their academic portfolio. For students in schools where elective and supplemental academic opportunities are limited to non-existent, such as inner-city and rural area schools, the dual enrollment programs provide the opportunity of pursuing a postsecondary degree, while at the same time improving the students’ academic profile, which they can present for college admission requirements (Ganzert, 2014; Hugo, 2001; Karp & Hughes, 2008).

Dual enrollment programs offer a long-term strategy to enhance and improve the preparation of students so that they will not only prepared for college admission but competitive in life as well (Ganzert, 2014; Hugo, 2001; Karp & Hughes, 2008). In order for dual enrollment to serve its mission of increasing success at the college level, it is more fundamental than ever to investigate and explore how dual enrollment programs affect students and what goals dual enrollment programs meet for these students (Ganzert, 2014). Numerous researchers agree the number of dual enrollment programs will continue to increase as the demand for more college-ready students grows (Ganzert, 2014; Karp & Hughes, 2008; Krueger, 2006). As this student population increases, it is imperative that school personnel, in particular school counselors, understand the dynamics of the internalized behaviors and peer relationships of adolescents. Being highly sensitive to these behavioral variables can only increase and benefit overall student success.
**Limitations of Dual Enrollment**

Although there is evidence that dual enrollment eases the transition between high school and college and raises student achievement, the unknowns still offset the known when it comes to dual enrollment (Krueger, 2006). Although many welcome and support the initiative of expanding dual enrollment programs to include a wide range of students, some educators and policymakers are hesitant of such a change. One concern is that students who have not performed well in their previous high school courses will be unsuccessful in college courses, thereby beginning college with failure already on their transcripts. Researchers have questioned the standards of dual enrollment programs, specifically faculty selection, student competency, and the legitimacy of courses not offered on a college campus as part of a postsecondary curriculum (Ganzert, 2014; Krueger, 2006). In other words, the concern is that the quality or content of the college course will be diminished in order to enable more students to be successful and therefore, giving these students a false sense of success (Ganzert, 2014; Karp & Hughes, 2008). Therefore, a disadvantage of dual enrollment programs is that there is not a significant amount of verifiable, quantitative data analyzing the questions highlighted by previous researchers, such as Ganzert (2014), Karp and Hughes (2008), and Krueger (2006).

Because dual enrollment is predicted to grow even further, it is imperative that school personnel be familiar with the dual enrollment option as well as student readiness for the program. Although research has been conducted on the benefits of dual enrollment, there are currently no studies that examine how dual enrollment influences the students’ peer relationships and their own internalized thoughts and behaviors. As this specific student population increases, school personnel, in particular school
counselors, should have a more thorough understanding of these dynamics to help insure overall student success.

**Adolescent Psychosocial Development**

The converging identity elements at the final stages of childhood and the relinquishment of the conflicting ones then progresses to the daunting task of the beginning stages of adolescence. Erikson (1980) asks the crucial question of “How can a stage as “abnormal” as adolescence be trusted to accomplish it?” To which he answers, “Adolescence is not an affliction but a normative crisis, i.e., a normal phase of increased conflict characterized by a seeming fluctuation in ego strength, and yet also by a high growth potential” (p. 125).

Erikson (1980) provides a description of young adulthood as “the establishment of a good relationship to the world of skills and to those who teach and share the new skills, childhood proper comes to an end” (p. 94). During the final phases of adolescence, identity formation, is apt to profoundly suffer than ever before (or ever will again) from a “diffusion of roles; and it is also true that such diffusion renders many an adolescent defenseless against the sudden impact of previously latent malignant disturbances” (Erikson, 1980, p. 126). In adolescence all permanencies relied on previously are questioned again because of a rapidity of body growth, due to puberty, which equals that of early childhood. The emerging adolescent is faced with a “physiological revolution” and are now primarily concerned with attempts at establishing social roles within their environment (p. 94).

They are sometimes morbidly, often curiously, preoccupied with what they appear to be in the eyes of others as compared with what they feel they are, and with the
question of how to connect the earlier cultivated roles and skills with the ideal prototypes of the day. In their search for a new sense of continuity and sameness, some adolescents have to refight many of the crises of earlier years, and they are never ready to install lasting idols and ideals as guardians of a final identity (Erikson, 1980, p. 94).

Education has transformed considerably since Erikson published his theory in 1950 when high school graduation rates in the U.S. were below 60% nationwide and less than 10% of the population obtained a 4-year college degree (Jones, Vaterlaus, Jackson, & Morrill, 2014). Currently, more high schools are now offering an assortment of student services, counseling, health and wellness support, and nutrition programs—supplemental to traditional services. Through these invaluable services, school counselors are able to identify particular elements, such as identity development, that continue into young adulthood. During young adulthood, peer acceptance is highlighted as being vital to young adults’ social networks. Jones et al. (2014) emphasize that while parental relationships remain significant attachment figures in young adults’ lives, attachment related purposes are shifted from parents to peers.

Had Erikson performed his observations in recent times, he may have recognized and accepted the function that same-aged peers, extended family, and unrelated adults play in influencing the means of early psychosocial development. Present trends, unavailable to Erikson at the time, suggest that young adults (18- to 25-year-olds), in general, are delaying marriage and parenthood when compared to previous generations (Jones et al., 2014). Technology has also altered the manner in which many young adults interact with their parents and peers. Since the mid-1950s, technological advances have
become necessities, and “these innovations affect interpersonal relations by reducing the quantity and quality of face-to-face interactions with parents and siblings” (Jones et al., 2014, p. 53).

According to Erikson (1980), the final phases of adolescence are typically highlighted by an “overt identity crisis,” in which he recognizes that “identity formation neither begins nor ends with adolescence: it is a lifelong development largely unconscious to the individual and to his society” (p. 122). Established at the final phases of each major crisis, Erikson (1980) specifically addresses the internalized behavior, self-esteem, to which he distinguishes “to be a conviction that one is learning effective steps toward a tangible future, that one is developing a defined personality within a social reality to which one understands” (p. 94-95). The foundations of adolescence are traced back to the first self-recognition: to an infant’s earliest communication of social smiles, there is something of a self-realization associated to mutual recognition (Erikson, 1980).

**Internalized Behaviors**

This study examined the internalized behaviors of adolescents related to locus of control, self-esteem, self-reliance, and sense of inadequacy, the following sections will focus on these behaviors. These four internalized behaviors were of particular interest because of their powerful impact on the psychological, physiological, and emotional well-being of adolescents’ developmental success.

**Locus of Control**

Locus of control, a concept established by Rotter (1954), emphasizes the degree to which individuals believe that they, other people, or uncontrollable factors, are
responsible for the outcomes of events in their lives (Kang et al., 2013). Locus of control can be categorized as either internal or external. Internal locus of control is the belief that outcomes in one’s life are under his or her own control, whereas, external locus of control is the belief that events in their lives are influenced by external forces which they have no control (Rotter, 1954). Reynolds and Kamphaus (2004) describe the concept of locus of control as the perception an individual has towards the level of control over external events in their life. On one end of the spectrum of a person’s range of emotions, locus of control indicates the person feels he or she has their own internal control over his or her feelings and behaviors (Kang et al., 2013; Reynolds & Kamphaus, 2004; Wallace et al., 2012).

According to past research, locus of control plays a significant role in various behaviors, such as academic achievement and positive social behaviors. Adolescents with increased levels of internal locus of control are more engaged in their classrooms, are less shy, and display greater social maturity (Kang et al., 2013). Flowers et al., (2003) investigated the impact of locus of control on African American high school seniors' educational aspirations. The results suggested that African American high school seniors who reported higher levels of internal locus of control were more likely to have higher educational aspirations.

On the other end of the spectrum of a person’s range of emotions, external locus of control indicates the belief of being controlled by others, by fate, or by some other abstract force. Interestingly, these individuals tend to blame their parents, peers, and teachers for their problems (Reynolds & Kamphaus, 2004). It “appears that having an external locus of control orientation is associated with aggressive tendencies and bullying
behaviors” (Kang et al., 2013, p. 1). The results of Flowers et al., (2003) study also suggested that African American high school seniors who reported higher levels of external locus of control were less likely to have higher educational aspirations.

Higher levels of external control have also been associated with peer relationship struggles. Fredstrom, Adams, and Gilman (2011) identify the importance of distinguishing between school-based and electronic victimization and specific adjustment outcomes as school counselors continue to battle the effects of peer victimization. In particular, these authors’ research results found that victimization in both contexts was associated with several behavioral aspects, including higher levels of external locus of control. Evidence suggests that adolescents who are victimized tend to have more external locus of control (Fredstrom et al., 2011). Victimized adolescents not only have negative social cognitive opinions and beliefs but also feel anxious, lonely, and depressed. For example, victimized adolescents tend to think that life events happen to them due to chance or are out of their control. Specifically, Fredstrom et al., (2011) found that experiences with computer types of victimization, such as emailing, chat room, or online postings, were associated with higher rates of external locus of control and lower levels of self-esteem.

Self-esteem

One of the most widely researched topics in psychology and counseling is self-esteem (Searcy, 2007). Self-esteem involves one’s self-evaluation of feelings of both physical and overall well-being in relation to self-satisfaction (Millings, Buck, & Montgomery, 2012; Reynolds & Kamphaus, 2004; Wallace et al., 2012). Self-esteem is
an important behavior developed and nurtured from perceiving achievement and attainment as valued and evident among one's peers (Kang et al., 2013).

During adolescence, self-esteem is influenced by factors, such as age, race, ethnicity, puberty, body weight, involvement in physical activities, and gender. Self-esteem has been studied as a multidimensional construct, including social and academic components in addition to studies of self-esteem in the context of home and school (Myers et al., 2011). Multiple studies have linked a positive sense of self-esteem to factors such as psychological health, mattering to others, and both body image and physical health (Kang et al. 2013; Millings et al., 2012; Myers et al., 2011; Wallace et al., 2012).

Self-esteem is strengthened through successful experiences when those experiences are valued and accepted by their peers and other adults, such as school counselors, from whom they receive positive feedback and recognition (Kang et al. 2013). High levels of self-esteem are characterized by being warm, open, and self-assured. These individuals are more likely to have a good sense of identity, suitable levels of ego strength, and positive peer relations. High self-esteem has been correlated to positive self-evaluations, characterized by having an accepting attitude towards one’s self, and has been identified as a significant factor in preventing stress and mental health problems such as depression (Millings et al., 2012; Reynolds & Kamphaus, 2004; Wallace et al., 2012).

Adolescents with low levels of self-esteem can be characterized as shy, along with a sense of dissatisfaction, depression, and anxiety, as well as aggressiveness (Myers et al., 2011; Reynolds & Kamphaus, 2004; Wallace et al., 2012). Among adolescents,
disturbances in self-esteem, are believed to influence a high prevalence of psychosomatic symptoms and stress (Millings et al., 2012). Low self-esteem has been found to be correlated with negative self-evaluations, portrayed by self-rejection and self-doubts, which has been shown to predict ill-health and symptoms of stress (Myers et al., 2011; Wallace et al., 2012). Low self-esteem has also been linked to outcomes such as depression, health problems, and antisocial behavior (Kang et al., 2013; Myers et al., 2011).

Gender is another yet another factor that appears to influence self-esteem. In one study, females in Asia, Australia, and the United States reported higher levels of academic self-esteem than did males, whereas males reported higher levels of nonacademic and total self-esteem than did females (Myers et al., 2011). Millings et al. (2012) note that females tended to be more pessimistic and anxious about future success, preventing them from feeling content with themselves and their academic performance. Both males and females experience declines in global self-esteem during adolescence, and in contrast to males' self-esteem, females' self-esteem does not increase until young adulthood. As a result, basing one’s self-esteem merely on success has been shown to have a harmful influence on health and to play a crucial role in the development of chronic stress by increasing the risk of psychological and physiological exhaustion (Millings et al., 2012; Myers et al., 2011).

Lower self-esteem in adolescents is predictive of poor physical health. Research studies, such as Millings et al. (2012) and Myers et al. (2011) underscore the holistic nature of adolescent functioning and the need to better understand the interaction of factors that affect positive development and well-being. Self-esteem, as it relates to
school achievement, linked with identity development in adolescence requires continuous
and meaningful environmental support (Millings et al., 2012; Myers et al., 2011).

**Self-reliance**

Self-reliance can be regarded as assessing a person’s feelings of self-confidence
and assurance in one’s ability to make decisions (Reynolds & Kamphaus, 2004). Kreb
(2006) discovered that the key to student success is learning to be responsible and
becoming more self-reliant. Self-reliance has also been explained as the degree to which
students exhibit “personal initiative, behavioral self-regulation, persistence, and
engagement in the classroom” (National Institute of Child Health and Human
Development (NICHD) Early Child Care Research Network, 2008, p. 895–896). Thus,
the theoretical concept of self-reliance has correlations to motivational theories of
457). In this particular context, self-reliance refers to the extent to which a student
employs self-directed behaviors to meet the academic and social demands within the
classroom (Gardner-Neblett et al., 2014).

In a study by Nobis and Sandén, (2008), the concept of self-reliance’, was
separated into three subthemes. The first sub-themes was characterized by “being
independent, active and responsible”, the second sub-theme was described as “having
friends” and the third was “facing sensitivity” (p. 211). Self-reliance was revealed
through expressions of responsibility and independence, in part through the potential to
be able to express certain emotions as well as through close relationships with other
people.
In terms of personal adjustment, higher levels of self-reliance indicate an individual has a tendency to take on responsibility and to face potential challenges in life. Higher levels of self-reliance may indicate that individuals tend to be well controlled by internal systems and not fearful of their emotions (Kreb, 2006; Reynolds & Kamphaus, 2004). Plaistow et al., (2014) analyzed 31 studies in which they identified adolescents’ positive and negative views of mental health. These authors found that many adolescents had a positive view of mental health services in terms of encouraging self-reliance. Their research results highlighted the fact that adolescents valued self-reliance, and taking control over their lives.

Plaistow et al. (2014) also found that negative views included lack of information, stigma, medicalization of their problems, and lack of continuity of care (Plaistow et al., 2014). Nobis and Sandén’s (2008) research results highlighted the fact that the feeling of helplessness led to the emergence of feelings of inadequacy; in other words, sense of inadequacy affected their participant’s level of self-reliance (Nobis & Sandén, 2008). Lower levels of self-reliance may potentially indicate struggles in facing potential challenges in life and a low level of self-confidence and as such, self-reliant behaviors are critical for students to function with autonomy in the classroom as well as taking advantage of classroom learning opportunities (Gardner-Neblett et al., 2014; Kreb, 2006; Reynolds & Kamphaus, 2004).

**Sense of Inadequacy**

The concept of a person’s sense of inadequacy describes feelings, perceptions, and expectations of low achievement, along with a tendency not to persevere, and a perception of being unsuccessful, mainly in relation to their academic ability (Reynolds
Whereas self-esteem can be a component of perceived self-worth, the research results of Simon, Barakat, Patterson, and Dampier (2009) reinforce their proposed hypothesis that self-esteem and sense of inadequacy are distinct and should be examined separately. Self-esteem and sense of inadequacy may be related to different types of coping styles thus providing insight into certain adolescents who might be at increased risk for higher levels of a sense of inadequacy. These authors highlight the importance of cultural, parental, and peer contributions to sense of inadequacy and self-esteem. Specifically, these research results found that self-reported intrapersonal characteristics (i.e., sense of inadequacy and self-esteem) were significantly associated with self-reported internalizing symptoms (i.e., depression and anxiety), in that sense of inadequacy was associated with poorer functioning and self-esteem was correlated with better functioning (Simon et al., 2009).

Adolescents with higher levels of sense of inadequacy have a tendency to set or accept unrealistically high goals (Reynolds & Kamphaus, 2004). Higher levels of sense of inadequacy also relate to a lack of persistence and low levels of being self-assured (Reynolds & Kamphaus, 2004). An adolescent who may have a high sense of inadequacy may have paralleled levels of depressed confidence (Reynolds & Kamphaus, 2004). In relation to a students’ sense of inadequacy, this particular research study examined the relationship between learning or work avoidance goals and their emotions (Seifert & O'Keefe, 2001, p. 81). Seifert and O'Keefe (2001) noted that students with a described “strong sense of self” are self-assured in pursuing learning goals. The results of this particular research study suggested that a sense of competence, confidence, and control were predictive of achieving learning goals.
Seifert and O'Keefe (2001) also concluded that students who engage in performance or work avoidance goals may have correlated feelings of inadequacy. These researchers suggested that work or performance avoidance may be an academic goal in which students look for ways to minimize the amount of work they do in school (Seifert & O'Keefe, 2001). Additionally, research has suggested that emotions may be catalysts for, in this case, academic achievement. These authors concluded that these students’ emotions are part of their way of being. The “learned helpless” person, for example, feels totally helpless, virtually worthless, and utterly incompetent (Seifert & O'Keefe, 2001). A sense of inadequacy, lack of control, or lack of meaning could give rise to the avoidance of work or performance goals. In other words, students who have a higher sense of inadequacy may be bored or feel they have little control, and therefore, could possibly accept work avoidant goals. More importantly, the authors emphasize that this is not a momentary or fleeting feeling, but that it is part of who they are as an overall person (Seifert & O'Keefe, 2001).

Furthermore, adolescents demonstrating feelings of inadequacy, oversensitivity, and worry may be providing a signal to aggressors that they are unable to defend themselves (D'Esposito & Jamilia Riccio, 2011). Sense of inadequacy is also related to perceived self-efficacy and may be affected by repeated exposure to unpredictable life events (Simon et al., 2009). This individual could possibly indicate feelings of being unable to compete in mainstream society, consequently “giving up” to go his or her own way and electing not to pursue traditional or typical life goals (Reynolds & Kamphaus, 2004). The pursuit of various life goals could be directly related to successful, current
and future academic endeavors (D'Esposito & Jamilia Riccio, 2011; Seifert & O'Keefe, 2001).

With similar research results, Salmela-Aro, Kiuru, Leskinen, and Nurmi, (2009) researched three correlating factors contributing to school burnout, with sense of inadequacy being one of those factors. School burnout was best described by exhaustion at school, cynicism toward the meaning of school, and sense of inadequacy at school. Adolescents experiencing higher levels of sense of inadequacy at school and the more cynicism toward the meaning of school had lower levels of academic achievement and lower levels of school engagement (Salmela-Aro et al., 2009).

**Peer Relationships**

Peers and peer relationships are an influential component in an adolescents’ sense of self and psychological well-being, as well as their social and academic development (Kang et al., 2013). It is fundamental to analyze the concept of peer relationships as it serves a significant role in an adolescent’s long term, life course. Measures related to peer relationships of adolescents analyzed in this research investigation were interpersonal relations and social stress. These two behaviors were of particular interest because of their powerful impact on the psychological, physiological and emotional well-being of adolescents’ developmental success.

**Social Stress**

In peer relationships, social stress is a significant factor among adolescents. Adolescents are affected by stressors in the school, home, and work environment, and in their social environment. The level of stress experienced by individuals when interacting
with peers and others can be viewed as social stress. People perform at their best under a certain amount of pressure (Tavolacci et al., 2013). Social stress includes the interaction with peers with associated feelings of tension, pressure, and poor coping abilities (Reynolds & Kamphaus, 2004). In particular, during adolescence, social stress is experienced more frequently and intensely in comparison with other age groups (Lanteigne et al., 2014).

However, when pressure exceeds a person’s ability to cope, this could result in higher and yet even harmful levels of stress. Moreover, stress can set up a cycle of distress and reduce a person’s ability to cope even in ordinary situations (Tavolacci et al., 2013). If an adolescent has higher levels of social stress, he or she may have chronic feelings of tension and pressure as well as an inability to find coping resources such as friends and family (Reynolds & Kamphaus, 2004). More intense feelings of social stress could indicate potential problems of anxiety and confusion. These acute levels of social stress may suggest that the adolescent cannot cope with peer relationships, may feel guilty, and experience unexplained hyperirritability and edginess (Lanteigne et al., 2014; Reynolds & Kamphaus, 2004).

Higher rates of electronic and school-based peer victimization are associated with higher rates of social stress, according to Fredstrom et al., (2011). In D'Esposito and Jamilia Riccio’s (2011) research study focusing on peer victimization, observed that adolescents who felt greater levels of social stress endured greater victimization. These authors hypothesized that social stress may be correlated with victimization because it serves as a substitution for social support as a value of peer relationships. Specifically, adolescents who experience higher levels of social stress are less likely to have a closer...
network of peers who can help them in coping with difficult situations and as a result, may feel higher levels of anxiety (D'Esposito & Jamilia Riccio’s, 2011; Fredstrom et al., 2011).

D'Esposito and Jamilia Riccio’s (2011) research indicated that low social support among peers appeared significant for victimization for males, but not females. This gender difference may be due to the differing structure and nature of girls' and boys' friendships and the influence of social networking in schools. Research suggests that the social networks of females are more cohesive than males, allowing for greater disclosure and increased intimacy (D'Esposito & Jamilia Riccio, 2011). It is possible that girls are more likely to experience victimization within their friendships, as opposed to boys, given the cohesiveness of girls' social networks and the relational nature in which girls are more likely to victimize peers (D'Esposito & Jamilia Riccio, 2011).

**Interpersonal Relationships**

Interpersonal relations play a fundamental role in the lives of people (Saygili, 2014). The quality of people’s relations with others could be an important piece in determining their life quality. According to Reynolds and Kamphaus (2004), an adolescent’s interpersonal abilities relate to the degree of enjoyment that comes from interacting and successfully relating to others. Afolabi, Ogunmwonyi, and Okediji (2009) define interpersonal relations as the ability to co-exist without conflict with others in any given social settings. Interpersonal relations involves understanding how other's feel and preventing actions that can affect others negatively in the academic environment, as well as the work place, in order to interact peacefully among each other. Interpersonal relations also encompass the ability to connect and communicate in a supportive manner
and to establish intimate relationships on a personal or friend-to-friend level (Afolabi et al., 2009; Downie, Mageau, & Koestner, 2008).

The purpose of the research study by Afolabi et al. (2009) investigated the influence of emotional intelligence and the need for achievement on interpersonal relationships and academic achievement of students. The results confirmed that emotional intelligence did have an impact on interpersonal relations, as well as the positive relationship between emotional intelligence and interpersonal relationships. These researchers also recognized a positive influence of need for achievement on interpersonal relationships. This implies that those with high need for achievement will also have good interpersonal relationships. Therefore, Afolabi et al. (2009) concluded that high emotional intelligence is significantly correlated to academic achievement and interpersonal relations.

From the first day of our lives, we view ourselves in interpersonal situations involving interactions with other people in our daily lives (Sekowski & Siekanska, 2008). Early attachments to parents and other significant peers are “cognitively and emotionally represented in our memories” as examples of personal interpersonal situations (Sekowski & Siekanska, 2008, p. 158). The quality of interpersonal relations is of great significance to the adolescent’s perception of the quality of his/her school life as well as in adulthood within the person’s level of satisfaction with marriage and family life (Sekowski & Siekanska, 2008).

In reference to interpersonal relations, people interact with others, in large part, “to reduce anxiety and affirm one another’s self-image (status, power, and worth)” (Sekowski & Siekanska, 2008, p. 158). Saygili (2004) state that people who have
effective levels of interpersonal relations can cope with problems more efficiently, which is correlated with more self-confidence and they can behave more objectively solving problems. Recent literature has revealed that most adolescents go through this stage successfully without experiencing particular traumas, therefore, reporting a level of relative well-being (Downie et al., 2008; Saygili, 2004).

Research, in terms of interpersonal relations, has recognized that satisfactory relationships with peers and parents are connected to a more positive outcome in adolescence. As far as peer relationships are concerned, friendship is fundamental to adolescents' psychosocial adaptation and establishes an important protective element against deviant behavior, depression, and feelings of alienation. At the same time, the importance of the family's role has been valued for its influence over adolescents' psychosocial adaptation in relation to avoiding deviant and risky behavior (Corsano et al., 2006).

The purpose of Corsano et al.'s (2006) research study was to examine how interpersonal relations and experiences of being alone influenced an adolescents' psychological well-being. Most significantly, the results of the study confirmed the importance of good parent and friend interpersonal relations in the promotion of adolescent' psychological wellbeing and the reduction of dissatisfaction. Psychological well-being depends on acceptance and integration into the peer group, and further, that even when adolescents grow older they continue to need the support of their parents. On the other hand, the research findings also confirmed the presence of inadequate family and friend interpersonal relations gave rise to feelings of dissatisfaction. In other words, adolescents who express unsatisfactory interpersonal relations, sometimes experience
intense feelings of loneliness; while those who are able to rely on good social, interpersonal relations do not usually mention feelings of dissatisfaction or unhappiness (Corsano et al., 2006).

Adolescents, who may struggle interacting with their peers as well as adults, could also potentially lack adequate social skills. These adolescents could blame themselves for lack of success and consequently could indicate feelings of guilt (Reynolds & Kamphaus, 2004). In fact, problems in interpersonal relations could be contributed to problems of sharing thoughts. Individuals who have lower levels of interpersonal relations struggle with problems; they have less self-confidence and they have higher levels of anxiety (Saygili, 2014).

D'Esposito and Jamilia Riccio (2011) found that symptoms of anxiety, a high sense of inadequacy, and elevated social stress are associated with victimization. Specifically, for interpersonal characteristics, victimization was related to inadequate interpersonal relations, stress surrounding relationships with peers, and less social support among their peers. D'Esposito and Jamilia Riccio (2011) examined possible predictors of victimization in terms of internal characteristics (e.g., low self-esteem) rather than physical characteristics.

Another interesting component of this particular research study was the selection of adolescents from rural communities. Although students' risk for being exposed to victimization is generally lower in rural communities, students in rural communities might be as likely to experience victimization as children from other settings due to the small and closely knit community context which characterize most rural settings. With the same cohort of students being maintained from elementary through high school, peer
relationships in many rural schools are unlikely to vary significantly. Thus, the possibility could occur that adolescents from rural communities could likely experience victimization as adolescents from non-rural settings because they are subject to the same group of aggressors year after year (D’Esposito & Jamilia Riccio, 2011).

Sekowski and Siekanska (2008) pinpoint another demographic of adolescents in identifying high achieving and gifted individuals. These two authors describe the term ‘interpersonal relations’ as interactions between people that can be analyzed in various contexts and in relation to various areas of life. More specifically, these two authors note that “attributes typical of gifted people, such as independence, individualism, self-reliance, tendency to make use of the gift and a focus on one’s own interests may lead to alienation and a sense of otherness, and consequently to difficulties in interpersonal relations (Sekowski & Siekanska, 2008, p. 175).” Another interesting aspect the research highlights is that lower sociability can also indicate that gifted students enjoy time on their own through pastimes such as “reading, learning, working on a collection, or writing in a journal (Sekowski & Siekanska, 2008, p. 166).” These results reinforce the importance that school counselors should encourage both cognitive and socio-emotional growth of not only high achievers and the gifted but all adolescents (Sekowski & Siekanska, 2008).

**Role of the School Counselor**

School counselors contribute “to student academic achievement though school counseling programs that address personal/social, career, and academic development of all students” (Barna & Brott, 2001, p. 243). Being that the profession of school counseling is now widely considered to be a comprehensive, developmental,
programmatic component of the K – 12 educational systems, the American School Counselor Association (ASCA) published a national model for school counseling (ASCA, 2005). At its core, the ASCA National Model “encourages school counselors to think in terms of the expected results of what students should know and be able to do as a result of implementing a standards-based comprehensive school counseling program” (Dahir & Stone, 2009, p. 12). The ASCA National Model supports the mission of schools by promoting three main areas in the delivery system: academic achievement, career planning, and personal and social development. This model recommends that school counselors collaborate with students, teachers, parents, and support staff to focus on the development of all students (Dahir & Stone, 2009; Falco, Bauman, Sumnicht, & Engelstad, 2011).

With ever-increasing diversity in schools, school counselors are in the best position to support parents with encouraging academic engagement and increasing the educational aspirations of adolescents. With this in mind, it is essential that school counselors are profoundly aware of the impact of parental involvement in the education of their children and how they may work together with parents or legal guardians to achieve academic and career success for their children and adolescents (Flowers et al., 2003; Greene, 2006).

Flowers et al. (2003) found that when parents supported their adolescents to aim for high educational goals, students usually develop habits in the home that paralleled their work in school. In particular, the African American students who believed their teachers had high expectations of them had higher personal educational aspirations.
Therefore, teachers and school counselors need to impart initial, high expectations of students from the very beginning of their academic careers (Flowers et al., 2003).

School counselors are encouraged to enhance their student’s academia, provide teacher support, and help parents successfully navigate the school bureaucracy so that they, too, can advocate for their children and adolescents (Flowers et al., 2003). In particular, school counselors need to have a clear understanding of the various number of barriers that obstruct academic achievement. School counselors need to be aware of the potential, external oppressive forces integrated into the social, economic, and political framework of the school and community environments. Rather than accepting a stereotypical notion of certain demographics that focus on students’ apparent weaknesses, school counselors should also focus their attention on identifying ways in assisting students with achieving their academic goals (Flowers et al., 2003). As academic leaders, school counselors should work to remove and eliminate barriers that impede academic, social, career, and academic growth for all students (Flowers et al., 2003).

Adolescence has been seen as a period of crisis characterized by profound change and considered a challenging stage in the process of development into adulthood (Corsano et al., 2006). Ever-increasing educational demands, demographic changes, and difficulties with students’ sociopsychological functioning (i.e., self-concept; racial identity; locus of control; relationship with teachers, counselors, and parents, etc.) present numerous issues for many American school systems throughout the United States. To accomplish these monumental tasks, school counselors should first understand how various cultures interact, both positively and negatively, with school systems. More specifically, school counselors, along with teachers and other school administrators need
to understand how these interactions effect locus of control, self-concept, motivation, and achievement and how to develop interventions to help students increasing positive behaviors in these areas (Flowers et al., 2003).

Therefore, the purpose of the current research was to explore and compare possible differences in internalized behaviors and peer relationships of adolescents among students participating in dual enrollment programs and those that are not. Specifically, the internalized behaviors analyzed were locus of control, self-esteem, self-reliance and sense of inadequacy. The specific concepts related to peer relationships that were analyzed include social stress and interpersonal relationships. Studying the potential influence of dual enrollment programs on adolescent internalized behaviors and peer relationships could provide more applicable and valuable counseling practices as well as expanding the overall scientific knowledge base within the counseling profession.
CHAPTER III
METHODOLOGY

The purpose of this chapter was to provide a description of the methodology that was used to address the proposed research questions. This research study attempted to identify the potential influences of internalized behaviors and peer relationships among dual enrolled and non-dual enrolled students. The variables (a) locus of control, (b) self-esteem, (c) self-reliance, and (d) sense of inadequacy of internalized behaviors and the variables (e) social stress and (f) interpersonal relationships of peer relationships were examined. The goal of this study was to determine whether statistically significant differences existed in these variables in 12th grade students enrolled and who were not enrolled in dual enrollment courses. The dependent variables were measured using the BASC-2, specifically the SRP-A (Reynolds & Kamphaus, 2004). This chapter describes the research design, participants, materials, procedures, variables, and data analysis procedures.

Research Design

In this study the researcher examined the levels of internalized behaviors (a) locus of control, (b) self-esteem, (c) self-reliance, and (d) sense of inadequacy, and the levels of peer relationships (e) social stress and (f) interpersonal relations between 12th grade students in dual enrollment courses and not in dual enrollment courses. The research approach was a between groups differences, nonexperimental, comparative, research
design. The researcher did not have control over the independent variable and did not manipulate it (Mertler & Vannatta, 2010). There was no manipulation of subject participation nor any random assignment in this study. The researcher can conclude that the independent variable and the dependent variables could be correlated, but causality cannot be concluded (Mertler & Vannatta, 2010). At the time of the assessment, participants will report on variables related to internalized behaviors and peer relationships. Therefore, the independent variable was the classification of the student (dual enrolled or non-dual enrolled). The dependent variables were the scores on the SRP-A of locus of control, self-esteem, self-reliance, sense of inadequacy, social stress, and interpersonal relations.

**Participants**

Participants in the current study included students in Grade 12 in five private schools, five public schools, and one parochial school in northwest Mississippi. A power analysis indicated that a minimum of 92 students per group (dual enrolled vs non-dual enrolled) for a total of 184 students was necessary in order to obtain sufficient power to detect a moderate relationship. Of the possible total of 665 12th grade students in all the schools, 263 students completed the SRP-A. Of the 12th graders that completed the SRP-A, 181 students, under the age of 18, returned student assent forms and parent consent forms and 82 students, age 18 or older, returned informed consent forms. Therefore, the current study included 263 participants. The total number of students with dual enrollment experience equaled 153, while 110 students did not have any experience with dual enrollment courses.
Institutions

The study was conducted in five public schools, five private schools, and one parochial school in the northwest area of Mississippi. The schools that participated were St. Joseph Catholic School, O’Bannon High School, and Washington School in Greenville, Mississippi; Riverside High School in Avon, Mississippi; Cleveland High School and Eastside High School in Cleveland, Mississippi; Deer Creek School in Arcola, Mississippi; Humphreys Academy in Belzoni, Mississippi; Indianola Academy in Indianola, Mississippi; and Pillow Academy and Greenwood High School in Greenwood, Mississippi.

Cleveland High School

Cleveland High School served 621 students in Grades 9 to 12 with 128 students in the 12th grade during the 2015 – 2016 school year. Approximately 50% of the student body were girls and 50% were boys. The student body was comprised of 45% African-American, 47% Caucasian, 2% Asian, 1% American Indian, and 5% Hispanic students.

Deer Creek School

During the 2015 – 2016 school year, there were 175 students in Grades Pre-K through 12th at Deer Creek School with only 11 students in the 12th grade. Approximately 45% of the student body were girls and 55% were boys. The total student body consisted of 1% Asian, 5% African-American, 93% Caucasian, and 1% Hispanic students.
Eastside High School

During the 2015 – 2016 school year, Eastside High School served 363 students in Grade 9 through Grade 12. There were 86 students in the 12th grade. Approximately 56% of the student body were girls and 44% were boys. The total student body consisted of 99% African-Americans and 1% Hispanic students.

Greenwood High School

There were 664 students in Grade 9 through Grade 12 at Greenwood High School during the 2015 – 2016 school year. There were 138 students in the 12th grade. Approximately 52% of the student body were girls and 48% were boys. The total student body consisted of 98% African-American, 1% Caucasian, and 1% Asian/Hispanic students.

Humphreys Academy

Humphreys Academy had 156 students in Grade 1 through Grade 12 during the 2015 – 2016 school year. There were 12 students in the 12th grade. Of that number, approximately 80 male students and 76 female students attended Humphreys Academy. The total student body in Grade 1 through Grade 12 consisted of 4 African-Americans, 151 Caucasians, and 1 Indian student.

Indianola Academy

Indianola Academy served 420 students in Pre-K through Grade 12 during the 2015 – 2016 school year. Of that number, approximately 49% of the student body were girls and 51% were boys. The total student population in K3 through Grade 12 consisted
of 7% African-American, 90% Caucasian, 1% Hispanic, 1% Indian, and 1% Asian students. There were 37 students in the 12th grade.

**O’Bannon High School**

During the 2015 – 2016 school year, there were 479 students in Grade 7 through Grade 12 at O’Bannon High School. Approximately 53% of the student body were girls and 47% were boys. The total student body consisted of 95% African-American, 4% Caucasians, 1% Asian and Hispanic students. There were 74 students in the 12th grade.

**Pillow Academy**

During the 2015 – 2016 school year, there were 850 students in Pre-K through Grade 12 at Pillow Academy. There were 42 students in the 12th grade. Within grades 6 through 12, approximately 178 were boys and 188 were girls. The total student body in Pre-K through Grade 12 consisted of 1% African-American, 98% Caucasian, and 1% Hispanic students.

**Riverside High School**

During the 2015 – 2016 school year, Riverside High School served 382 students in Grade 7 through Grade 12. There were 44 students in the 12th grade. Approximately 46% of the student body were girls and 54% were boys. The total student body consisted of 27% African-American, 70% Caucasian and 3% Hispanic.

**St. Joseph Catholic School**

St. Joseph Catholic School served 179 students in Grade 7 through Grade 12 during the 2015 – 2016 school year. Of that number, approximately 92 were girls and 87
were boys. There were 31 students in the 12th grade. The total student body consisted of 92% African-American, 77% Caucasian, and 9% Hispanic students.

**Washington School**

Washington School served 730 students in Pre-K through Grade 12 during the 2015 – 2016 school year. There were 62 students in the 12th grade. Of that number, approximately 40% of the student body were girls and 60% were boys. The total student body in K-3 through Grade 12 consisted of 10% African-American, 85% Caucasian, 2% Hispanic, 1% Indian, and 2% Asian students.

**Possible Behavior Rating Assessments**

Several possible assessment instruments were considered for this study, including the Achenbach System of Empirically Based Assessment (ASEBA; Achenbach, 1993), Conners’ Rating Scales (Conners, 1969), the Revised Behavior Problem Checklist (Quay & Peterson, 1967), and the Behavior Assessment System for Children (Second Edition) (Reynolds & Kamphaus, 2004).

**ASEBA: Child Behavior Checklist and Teacher’s Report Form.**

The researcher first considered the ASEBA (1993) as a possible assessment instrument. It is an extensive system of instruments, including the Child Behavior Checklist (CBCL) and the Teacher’s Report Form (TRF). However, many of the behavioral symptoms on the CBCL and TRF are psychiatric or clinical descriptions (e.g. bowel and bladder problems) and have more relevance in assessing childhood psychopathology (Whitcomb & Merrell, 2013; Yew & O'Kearney, 2013). Many of these more severe low-rate behavioral descriptions are not seen on a daily basis in most
children who have behavioral or emotional concerns. According to Whitcomb and Merrell (2013), some CBCL/TRF items are irrelevant, if not offensive. In addition to inadequate sensitivity of these instruments to recognize less serious problems, other weaknesses of the CBCL/TRF include subjectivity in the score system, limited assessment of social competence, possible bias in understanding data regarding physical symptoms, and problems in combing data across informants. The CBCL/TRF (1991), as cited in Whitcomb and Merrell (2013), may not be the best choice as a rating scale for social skills and routine behavioral problems in home and school settings (Whitcomb & Merrell, 2013; Yew & O'Kearney, 2013).

Conners’ Rating Scales and Conners’ Rating Scales-Revised

The researcher also considered the Conners’ Rating Scales (1969), which were developed in the 1960s by Conners and revised in 1997 as a means of providing standardized objective behavioral assessment data for children with hyperactivity, attentional problems, and related behavioral concerns (Yew & O'Kearney, 2013). To which, Conners (1989) specifically highlights the main use for the CRSR would be for the assessment of attention deficit hyperactivity disorder (as cited in Whitcomb & Merrell, 2013). However, the first limitation the researcher considered was that the size of the CPRS-48 norm population was moderately small, and the geographic and racial structure of the CPRS-48’s norm sample was restricted to the extent that the generalizability of norm-based scores should be questioned (Yew & O'Kearney, 2013). Because the CPRS are relatively brief instruments, Whitcomb and Merrell (2013) recommend these assessments for initial, supplemental screenings with other evaluation
methods in conducting comprehensive clinical assessments. Therefore, the researcher decided that this assessment instrument was not the best choice.

**Revised Behavior Problem Checklist.**

The Revised Behavior Problem Checklist (RBPC, 1983), as cited in Whitcomb and Merrell (2013) is a revision of the original Behavior Problem Checklist (Quay & Peterson, 1967) and one of the pioneering efforts in modern child behavior assessment that opened the door to acceptance, increased development, and the implementation of behavior rating scales (Lahey & Piacentini, 1985; Sima, Farideh, & Mahboobeh, 2008; Whitcomb & Merrell, 2013). However, research has questioned the effectiveness of the RBPC in measuring internalizing symptoms and disorders (Lahey & Piacentini, 1985; Sima et al., 2008). Specifically, studies have demonstrated that the RBPC was not sensitive to difference in depressive symptoms among students with and without learning disabilities. Another limitation includes the raw to T-score conversion tables, which are based on a limited number of cases, with unknown ethnic, cultural, and socioeconomic backgrounds, and are not representative of the geographic breakdown of the U.S. population. Therefore, precautionary efforts should be used in formulating inferences based on the T-score conversions from the normative group (Lahey & Piacentini, 1985; Sima et al., 2008; Whitcomb & Merrell, 2013).

**BASC-2**

The BASC-2 by Reynolds and Kamphaus (2004) is a multi-method, multidimensional, comprehensive set of rating scales used to analyze behaviors and self-perceptions of children and young adults aged 2-25 years. The BASC behavior rating
scales are comprehensive instruments, designed to assess a variety of problem behaviors, school problems and adaptive skills. The BASC-2 is ideally suited for identifying behavior and personality problems including positive/adaptive dimensions as well as negative/clinical dimensions (Reynolds & Kamphaus, 2004; Whitcomb & Merrell, 2013).

As cited by Flanagan (1995), the BASC-2 integrates the strengths of other assessment instruments while addressing the limitations of others. Advantages of the BASC-2 include easily administration and scoring as well as 10-20 minutes completion time for participants. Norms are available for a nonclinical (general) and clinical samples. Internal consistency and test-retest reliability are high and the BASC-2 also includes validity scales for monitoring participants' consistency and truthfulness. The dimensions rated are consistently operationalized across age-ranges. Until the development of the BASC-2, such comprehensive assessments of behavior could not be achieved without using various assessment instruments (Flanagan, 1995). Therefore, the researcher chose this instrument for the study.

**Assessment Instrument Chosen**

The BASC-2 has a number of rating scales; however, this research study used the SRP-A, which assesses persons between the ages of 12 to 21. The SRP-A consists of a total of 176 items. These items included true/false responses as well as four-point rating scales. The items are rated by circling adjacent letters indicating how frequently each behavior is perceived to occur, based on N=Never, S=Sometimes, O=Often, and A=Almost Always. The test form is self-scoring and easy to use.
Scoring System and Scale Structure

Raw scores on BASC rating scales are converted to T-scores (based on a mean score of 50 and standard deviation of 10). Higher scores on the clinical scales always indicate more problems, whereas higher scores on the adaptive scales always indicate greater competencies. Specifically, the SRP-A can be interpreted by transforming raw scores into mean T scores (Reynolds & Kamphaus, 2004). For the purpose of this research study, the scales that were utilized were the Locus of Control scale, the Self-Esteem scale, and the Self-Reliance scale, the Sense of Inadequacy scale, the Social Stress scale, and the Interpersonal Relations scale.

Development and Standardization

The standardization process and level of attention to detail in developing the BASC are exemplary. The norms of the BASC-2 were developed on a representative sample of the general population of male and female children in each age range in the northeast, north central, south, and west portions of the United States. The race/ethnicity of the population was said to mirror the U.S. population in 2001. Race/ethnicity included African-Americans, Hispanics, Caucasians, and others (Reynolds & Kamphaus, 2004).

Validity for the BASC-2 is based on correlational studies between the assessment itself and several other measures with established levels of validity. Moderate to strong levels of concurrent validity correlates the SRP-A adolescent forms to the Children’s Depression Inventory, Revised Children’s Manifest Anxiety Scale, the Conners-Wells’ Adolescent Self-Report, and the Achenbach System of Empirically Based Assessment Youth Self-Report (Mental Measurements Yearbook, 17; Reynolds & Kamphaus, 2004).
The general norming sample for the SRP-A consisted of 900 adolescents in the 12-14 age range (450 boys and 450 girls) and 1,000 adolescents in the 15-18 age range (500 boys and 500 girls). Participants were classified or diagnosed with emotional, behavioral, or physical problems. The most common disorders were emotional/behavioral disturbance, mental disabilities or developmental delay, attention deficit/hyperactivity disorder, pervasive developmental disorders, specific learning disabilities, and speech/language impairment. The composite scales of the SRP-A measure behaviors that are associated with inattention/hyperactivity, internalizing problems, emotional symptoms, personal adjustment, and school problems. The primary scales assess a wide range of clinical issues including anxiety, attention problems, depression, and alcohol abuse. Finally, adaptive scales on the SRP-A evaluate interpersonal relations, relations with parents, self-esteem, and self-reliance (Reynolds & Kamphaus, 2004).

For each SRP-A scale and composite, internal-consistency reliabilities were measured by the coefficient alpha. These composites and scales were high and reasonably consistent between clinical and nonclinical groups, between combined-sex and separate-sex groups, and at different age levels. For the general norm samples, composite score reliabilities were very high: in the middle .90s for the Emotional Symptoms Index (ESI) and Internalizing Problems composite, and the middle to upper .80s for the Personal Adjustment and other composites. Reliabilities of the individual scales were also high, with median values near .80 (Reynolds & Kamphaus, 2004).
According to Whitcomb and Merrell (2013), the BASC-2 is an impressive, empirical research based assessment that is practical, easy to use, and represents the best of the newer generation of behavior rating scales.

**Locus of Control scale**

The Locus of Control scale of the BASC-2 (Reynolds & Kamphaus, 2004) evaluates an individual’s perception of his or her level of control over external events. High scores on the Locus of Control scale indicate that the individual has the belief of being controlled by others or by fate or some other abstract force. Lower scores indicate the perception of having internal control over events; in other words, the person feels he/she has control over her feelings and behaviors. Scores in the At-Risk or Clinically Significant range may indicate feelings of helplessness, as well as a belief in luck. These particular persons tend to blame their parents, peers, and teachers for their problems. Clinically Significant scores may reveal a pathological view of external control that may hinder the person’s motivation and the sense of having control over their destiny. For persons between 15 to 18 years old, the combined internal reliability for the SRP-A individual scales is 0.78 on the Locus of Control scale (Reynolds & Kamphaus, 2004).

**Self-Esteem scale**

The Self-Esteem scale of the BASC-2 evaluates an individual’s feelings of both physical and overall characteristics in terms of self-satisfaction. If an adolescent scores higher on the self-esteem scale, he/she is regarded as having higher self-esteem levels making him or her appear warm, open, and self-assured. He or she is more likely to have a good sense of identity, suitable levels of ego strength, and positive peer relations.
Those participants with self-esteem scores in the Clinically Significant range tend to be associated with lower self-esteem, shyness, a sense of dissatisfaction, depression, and anxiety. For the 15 to 18 age range, the combined internal reliability for the SRP-A individual scales is 0.82 on the Self-Esteem scale (Reynolds & Kamphaus, 2004).

**Self-Reliance scale**

The Self-Reliance scale of the BASC-2 evaluates a person’s feelings of self-confidence and assurance in making decisions. If an adolescent scores higher on this scale, it indicates he/she has a tendency to take on responsibility and to face potential challenges in life. High scores on the Self-Reliance scale indicate that these individuals tend to be well controlled by internal systems and not fearful of their emotions. However, low scores in the At-Risk and Clinically Significant ranges may indicate struggles in facing potential challenges in life and a low level of self-confidence. For persons between the 15 to 18 age range, the combined internal reliability for the SRP-A individual scales is 0.70 on the Self-Reliance scale (Reynolds & Kamphaus, 2004).

**Sense of Inadequacy scale**

The Sense of Inadequacy scale of the BASC-2 evaluates feelings and perceptions of low achievement expectations, a tendency not to persevere, and a perception of being unsuccessful academically. High scores on this scale are related to the concept of aspiration, where the individual sets or accepts unrealistic high goals. High scores also relate to a lack of persistence and low levels of being self-assured. These individuals often present symptoms of depression or anxiety. It is also important to highlight that elevated scores on the Sense of Inadequacy scale may be related to academic failure or
underachievement, cognitive deficit secondary to neurological impairment, mental
disabilities, learning disabilities, and depression. At-Risk scores may denote mild to
moderate levels of depressed confidence. Clinically Significant scores could possibly
indicate feelings of being unable to compete in mainstream society and so the individual
“gives up” to go his or her own way and chooses not to pursue traditional or typical life
goals. For the 15 to 18 age range, the combined internal reliability for the SRP-A
individual scales is 0.79 on the Sense of Inadequacy scale (Reynolds & Kamphaus,
2004).

**Social Stress scale**

The Social Stress scale of the BASC-2 assesses the level of stress experienced by
individuals when interacting with peers and others. If an adolescent has higher scores on
the social stress scale he or she may have chronic feelings of tension and pressure as well
as an inability to find coping resources such as friends and family. At-Risk scores
indicate potential problems of anxiety, confusion, and somatic complaints. Clinically
Significant scores may suggest that the young child or adolescent cannot cope with peer
relationships, may feel guilty, or experience unexplained hyperirritability and edginess.
For the 15 to 18 age range, the combined internal reliability for the SRP-A individual
scales is 0.83 on the Social Stress scale (Reynolds & Kamphaus, 2004).

**Interpersonal Relations scale**

The Interpersonal Relations scale evaluates the degree of enjoyment that comes
from interacting and successfully relating to others. At-Risk scores may signify problems
relating to others and lacking adequate social skills. Clinically Significant scores may
indicate problems relating to peers as well as adults. Very low scores on the Interpersonal Relations scale could indicate the person tends to be guilt-prone and could blame themselves for lack of success. For the 15 to 18 age range, the combined internal reliability for the SRP-A individual scales is 0.78 on the Interpersonal Relations scale (Reynolds & Kamphaus, 2004).

Procedures

Prior to collecting data, written permission was obtained from the Institutional Review Board (IRB) of Mississippi State University (see Appendix A). Upon IRB approval, the researcher visited classrooms in five public schools, five private schools, and one parochial school in central northwest Mississippi. The researcher met with potential participants to explain the research study. During this visit, the researcher read a verbal script for recruitment (see Appendix B) that described the study and answered questions from students and other school personnel. For students ages 17 and under, parental consent forms (see Appendix C) were distributed to take home for parents/legal guardians.

During the second visit, the researcher provided student assent forms (see Appendix D) to students (ages 17 and under) whose parents/guardians provided participation approval. For students who were 18 and older, the researcher provided them with an Informed Consent document (see Appendix E) for signature if they chose to participate in the study. The researcher read both the minor assent and the informed consent documents out loud and answered questions before students chose whether or not to sign the forms. Once completed and signed, the researcher collected all documents and administered the SRP-A of the BASC-2 to students who chose to participate.
In order to collect demographic information, the researcher asked participants to complete the front cover of the SRP-A, which asked questions related to the participants’ birth date, school, grade, sex, age, and other data. The ‘other data’ blank was used to identify dual enrolled and non-dual enrolled students.

**Data Analysis**

The following research questions will guide the study:

1. Is there a statistically significant difference between 12th grade students who are taking dual enrollment courses and students who are not taking dual enrollment courses on levels of internalized behaviors ((a) locus of control (b) self-esteem, (c) self-reliance, and (d) sense of inadequacy)?

2. Is there a statistically significant difference between 12th grade students who are taking dual enrollment courses and students who are not taking dual enrollment courses on levels of peer relationships ((e) social stress and (f) interpersonal relationship)?

The researcher examined the data utilizing the multivariate analysis of variance (MANOVA) statistical procedure in Statistical Package for Social Sciences (SPSS, version 22). The MANOVA is applicable when simultaneously studying two or more related dependent variables (DV) while monitoring for the correlations among the DVs (Mertler & Vannatta, 2010). Because groups are being compared, assumptions were investigated for normality, linearity, and homoscedasticity for all the quantitative DVs (Mertler & Vannatta, 2010). The level of significance was 0.05. Demographic variables were also summarized to provide a more adequate understanding and description of participants.
The MANOVA has a role in nonexperimental designs, such as survey research, in which groups of interest are defined and then the differences on any number of metric variables are examined for statistical significance (Hair, Black, Babbin, Anderson, & Tatham, 2006, p. 408). The unique aspect of MANOVA is that the “variate optimally combines the multiple dependent measures into a single value that maximizes the differences across groups” (Hair, et al., 2006, p. 417).

Mertler and Vannatta (2010) cited four advantages of utilizing the MANOVA. First, by measuring several DVs instead of only one, the chances of detecting what actually changes as a result of the differing characteristics (and any interactions) greatly improves. The second advantage of implementing the MANOVA may expose differences not shown in separate analysis of variances (ANOVA); therefore, a MANOVA may sometimes be more powerful. Another advantage of the MANOVA is that it decreases the overall Type I error rate that could occur when using several ANOVAs. Finally, the MANOVA incorporates the intercorrelations among DVs into the analysis, whereas the use of several ANOVAs ignores this incorporation (Mertler & Vannatta, 2010).

However, it must be noted that the MANOVA is substantially more complicated than the ANOVA, in that there are numerous assumptions that need to be met in using the MANOVA. Also, the results are sometimes ambiguous with respect to the effects of the IVs on individual DVs. It should also be noted that implementing two separate MANOVAs will increase the error rate. There are limited situations in which the MANOVA is more powerful than the ANOVA and the MANOVA has a “much less powerful procedure” than the ANOVA (Mertler & Vannatta, 2010, p. 119).
CHAPTER IV
RESULTS AND DISCUSSION

This chapter presents the results of data analyses using the MANOVA. The purpose of this research study was to investigate the dynamics between enrollment status in dual enrollment courses and specific adolescent behaviors. A MANOVA was used to determine the levels of internalized behaviors of (a) locus of control, (b) self-esteem, (c) self-reliance, and (d) sense of inadequacy as well as another MANOVA to determine the levels of peer relationships, including (e) social stress and (f) interpersonal relationships among students in the 12th grade based on their classification of being either dual enrolled or non-dual enrolled.

Research Questions

The following research questions directed the study:

Research Question 1: Is there a statistically significant difference between 12th grade students who are taking dual enrollment courses and students who are not taking dual enrollment courses with respect to levels of internalized behaviors, including (a) locus of control (b) self-esteem, (c) self-reliance, and (d) sense of inadequacy?

Research Question 2: Is there a statistically significant difference between 12th grade students who are taking dual enrollment courses and students who are not taking dual enrollment courses with respect to levels of peer
relationships, including (e) social stress and (f) interpersonal relationships?

Analysis of the Data

Demographic Characteristics

The original sample size consisted of 263 participants. Due to lack of fully completing the SRP-A of the BASC, three participants were eliminated from the data set. Table 1 provides a summary of demographic information.

Table 1

Demographic Characteristics of 12th Grade Students Who Participated in the Study.

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>n</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Girls</td>
<td>147</td>
<td>56%</td>
</tr>
<tr>
<td>Boys</td>
<td>113</td>
<td>44%</td>
</tr>
<tr>
<td>Dual Enrolled</td>
<td>152</td>
<td>58%</td>
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<tr>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Girls (n = 103, 68%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Boys (n = 49, 32%)</td>
<td></td>
<td></td>
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<tr>
<td>Non-Dual Enrolled</td>
<td>108</td>
<td>42%</td>
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<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Girls (n = 44, 41%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Boys (n = 64, 59%)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Mahalanobis Distance and Assumptions of MANOVA

Assumptions of the MANOVA include using a random sample that was independent of each other, while accounting for multivariate normality, equal variances or homoscedasticity, and linearity of the dependent variables. Independence among the sample was not violated as the participants were voluntary and chosen at random.
Normality histograms of the dependent variables (locus of control, self-esteem, self-reliance, sense of inadequacy, social stress, and interpersonal relationships) were created to examine multivariate normality (see Appendix F). Transformation techniques were applied, but did not affect the normality since the normality deviations were not significant. Both the Box test and Levene’s test indicated no problems with homogeneity of variance or the circularity assumption. Self-esteem and interpersonal relationship scores were negatively skewed, whereas sense of inadequacy and social stress were positively skewed. However, the MANOVA is reasonably robust to violations of normality with adequate sample sizes (Hair et al., 2006). The scores of locus of control and self-reliance were in normal or close to normal range.

**Analysis for Research Questions**

The two research questions and MANOVAs are described below.

*Research Question 1:* Is there a statistically significant difference between 12th grade students who are taking dual enrollment courses and students who are not taking dual enrollment courses with respect to levels of internalized behaviors, including (a) locus of control (b) self-esteem, (c) self-reliance, and (d) sense of inadequacy?

A MANOVA was performed to determine if there was a statistically significant difference between 12th graders enrolled in dual enrollment courses and 12th graders not enrolled in dual enrollment courses with respect to levels of internalized behaviors. After reviewing the results of the data, it appears that the levels of self-esteem were statistically significant, $F(1, 257) = 3.89, p = .05, \eta^2 = .004$. However, analyses revealed no statistically significant differences with respect to the other internalized behavior levels.
of locus of control, self-reliance, and sense of inadequacy variables between students enrolled in dual enrollment courses and students not enrolled in dual enrollment courses, Pillai’s Trace = .023, $F(4, 254) = 1.518$, $p = .197$, $\eta^2 = .023$. The group statistics are shown in Table 2 below.

Table 2

*Means and Standard Deviations for Dual Enrollment and Non-Dual Enrollment Students for the Four Internalized Behavior Variables*

<table>
<thead>
<tr>
<th></th>
<th>Dual Enrolled Students</th>
<th>Non-Dual Enrolled Students</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$M$ ($SD$)</td>
<td>$M$ ($SD$)</td>
</tr>
<tr>
<td>Locus of Control</td>
<td>52.95 (10.24)</td>
<td>51.14 (9.06)</td>
</tr>
<tr>
<td>Self-Esteem</td>
<td>50.16 (9.84)*</td>
<td>52.63 (9.98)*</td>
</tr>
<tr>
<td>Self-Reliance</td>
<td>53.86 (8.74)</td>
<td>55.09 (8.88)</td>
</tr>
<tr>
<td>Sense of Inadequacy</td>
<td>49.86 (9.82)</td>
<td>49.15 (9.53)</td>
</tr>
</tbody>
</table>

Note: *$p \leq .05$

*Research Question 2:* Is there a statistically significant difference between 12th grade students who are taking dual enrollment courses and students who are not taking dual enrollment courses with respect to levels of peer relationships, including (e) social stress and (f) interpersonal relationships?

The researcher performed a MANOVA to determine if there was a statistically significant difference between 12th graders enrolled in dual enrollment courses and 12th graders not enrolled in dual enrollment courses with respect to levels of peer relationships. After reviewing the results of the data, the researcher determined the levels
of social stress and interpersonal relationship variables were not statistically significantly different between students enrolled in dual enrollment courses and students not enrolled in these courses, Pillai’s Trace = .004, $F(2, 256) = .515, p = .598$, $\eta^2 = .004$. The group statistics are shown in Table 3.

Table 3

Means and Standard Deviations for Dual Enrollment and Non-Dual Enrollment Students for the Two Peer Relationship Variables

<table>
<thead>
<tr>
<th></th>
<th>Dual Enrolled Students</th>
<th>Non-Dual Enrolled Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Stress</td>
<td>51.07 (9.94)</td>
<td>50.46 (10.95)</td>
</tr>
<tr>
<td>Interpersonal Relationships</td>
<td>52.53 (8.30)</td>
<td>52.31 (9.36)</td>
</tr>
</tbody>
</table>

Summary of Procedure and Analysis

The researcher implemented the SPSS Version 21 to analyze data discussed in this chapter. Descriptive statistics provided demographic characteristics of the sample including gender, school, and dual enrollment status. The researcher conducted one MANOVA to investigate possible dynamics between enrollment status in dual enrollment courses and internalized behaviors, including (a) locus of control, (b) self-esteem, (c) self-reliance, and (d) sense of inadequacy. The researcher used another MANOVA to investigate possible dynamics between enrollment status and peer relationships including (e) social stress and (f) interpersonal relationships among students in the 12th grade. Results indicated that only self-esteem levels were significantly different among students.
CHAPTER V
CONCLUSION

A summary of the between groups differences research design concerning the investigation of the dynamics between enrollment status in dual enrollment courses and the specific adolescent behaviors of internalized behaviors and peer relationships was examined. Specifically, this chapter reviews the results of the two MANOVAs conducted by the researcher. One MANOVA was used to examine the variables of internalized behaviors of (a) locus of control, (b) self-esteem, (c) self-reliance, and (d) sense of inadequacy, where as a second MANOVA was used to examine variable of peer relationships, including (e) social stress and (f) interpersonal relationships among students in the 12th grade based on their classification of being either dual enrolled or non-dual enrolled. The BASC-2 (Reynolds & Kamphaus) scores from the SRP-A, were used to collect data along with denoting status of participation in dual enrollment coursework. This chapter includes a discussion of the research results, implications for practice, limitations, recommendations for future research, and a summary of the research study.

Discussion of Results

Although research has shown the potential significance of dual enrollment programs, the potential influence that completing college level courses during high school may have on the emotional and mental well-being of adolescents has been
inconclusive (Flowers et al., 2003; Ganzert, 2014; Hugo, 2001; Karp & Hughes, 2008; Kim et al., 2004; Mokher & McLendon, 2009). Discovering what influences internalized behaviors, peer relationships, and academic performance may provide school counselors a better understanding of the personal, social, and academic development of adolescents (Corsano et al., 2006; D'Esposito & Jamilia Riccio, 2011; Flowers et al., 2003; Seifert & O'Keefe, 2001).

This study investigated the levels of internalized behaviors of (a) locus of control, (b) self-esteem, (c) self-reliance, and (d) sense of inadequacy as well as peer relationships, including (e) social stress and (f) interpersonal relationships among students in the 12th grade based on their classification of being either dual enrolled or non-dual enrolled. Identifying these specific issues in adolescents and assisting them with their personal, social, and academic growth can be critical in preventative measures. This study provides school counselors and other educational personnel with literature to assist with supporting the overall development of 12th grade students.

The primary purpose of this study was to determine if there was a statistically significant difference between students who were classified as dual enrolled as compared to students who were classified as non-dual enrolled with respect to levels of internalized behaviors of (a) locus of control, (b) self-esteem, (c) self-reliance, and (d) sense of inadequacy as well as peer relationships, including (e) social stress and (f) interpersonal relationships among 12th graders in five public schools, five private schools, and one parochial school in Mississippi.
Procedures

The researcher used a between groups differences research design to answer the following research questions:

*Research Question 1:* Is there a statistically significant difference between 12th grade students who are taking dual enrollment courses and students who are not taking dual enrollment courses with respect to levels of internalized behaviors, including (a) locus of control (b) self-esteem, (c) self-reliance, and (d) sense of inadequacy?

*Research Question 2:* Is there a statistically significant difference between 12th grade students who are taking dual enrollment courses and students who are not taking dual enrollment courses with respect to levels of peer relationships, including (e) social stress and (f) interpersonal relationships?

The independent variable in this study was whether or not a high school 12th grader was enrolled in at least one dual-enrollment course. The dependent variables were the scores related to locus of control, self-esteem, self-reliance, sense of inadequacy, social stress, and interpersonal relations. Levels of locus of control, self-esteem, self-reliance, sense of inadequacy, social stress, and interpersonal relations were measured by the Self-Report of Personality Adolescent version of the BASC-2.

Included in the study were 263 participants from the 12th grade in five public schools, five private schools, and one parochial school in the northwest area of Mississippi. The researcher administered a demographic survey and the SRP-A (Reynolds & Kamphaus, 2004) to the participants in the 11 schools.
Internalized Behaviors

Once the researcher scored the BASC-2 SRP-A (Reynolds & Kamphaus), she entered the data into *SPSS Version 21* and the first of two MANOVAs was conducted. After the results were reviewed, she determined that only the self-esteem scores were statistically significant \((p < .05)\).

Self-Esteem

Self-esteem, as it relates to school achievement, requires continuous and meaningful environmental support from school counselors as well as, parents, teachers, and administrators (Millings et al., 2012; Myers et al., 2011). For this research study, it is noteworthy that out of the six dependent variables, the participant’s self-esteem levels were statistically significant and higher for students not participating in dual enrollment courses.

Self-esteem is defined as the feelings, such as self-respect and self-acceptance that individuals have about themselves (Bosson et al., 2003). Self-esteem has been directly associated with an individuals' activities, their social network, and what they hear about themselves from others (Myers et al., 2011). Multiple studies have linked a positive sense of self-esteem to factors such as overall psychological and emotional well-being (González, Casas, & Coenders, 2007; Keyes, 2006). On the other hand, low self-esteem has been linked to outcomes such as depression, health problems and negative internalizing behaviors (Cairns et al., 2014; Corsano et al., 2006; Plaistow, et al., 2014).

As a result of participating in school counseling interventions, school counselors are encouraged to incorporate assessments and measures into their comprehensive school counseling program evaluation initiatives to effectively monitor the relationships between
students' changes in self-esteem and academic performance (Keyes, 2006; Myers et al., 2011). Improvements in academic self-esteem have been linked empirically to enhanced school performance and positive academic outcomes, therefore advocating with teachers and school administrators about the need for developmental counseling interventions is imperative (Coopersmith, 2002; Myers et al., 2011).

**Implications for School Counseling Practice**

School counselors have the capability and capacity to assist students in becoming successful within the domains of career, academic, and personal/social aspects. In order to become successful as a professional, school counselors are encouraged to hold themselves accountable by aligning comprehensive school counseling programs with the ASCA National Model (Scheel & Gonzalez, 2007; Tavolacci, et al., 2013). Through a significant amount of available tools, school counselors have opportunities to implement various intervention and prevention techniques that include classroom guidance, peer mentoring, parent education, developmental workshops, and small group work to effectively and efficiently serve students.

**School Counselor Leadership**

School counselors have the potential to address unhealthy levels of low self-esteem during high school before students reach possible levels of self-destructive behavior later in life (Tavolacci et al., 2013). According to Tavolacci et al., the risk of onset of substance use and related problems is heightened during the period of an adolescent’s life when they enter into college. In today’s highly competitive society, students face more stress than ever, in relation to studying, examinations, or peer, teacher
or parental pressure. Stress should not be considered on its own, but should be associated with potential risk behaviors, such as low levels of self-esteem, leading to onset of substance use and related problems heightened during adolescence. Tavolacci et al. (20130) highlight the significance of student’s attitude of turning a blind eye towards detrimental levels of internalizing behaviors, which as previous stated, could be a possible indication of serious mental and psychosocial problems in the future (Cairns et al., 2014; Corsano et al., 2006; Plaistow, et al., 2014).

Scheel and Gonzalez (2007) specifically noted “the future of the school counseling profession hinges on its ability to play an integral part in the learning process of students. School counseling interventions consistent with the ASCA National Model are designed to influence students' academic motivation through career, academic, and personal/social domains. To maximize their effectiveness, school counselors must be able to identify ways they can contribute to the learning process of their students.” (p.5-6)

Being sensitive to student wellness, school counselors are in a unique position in understanding student motivation in relation to academic performance, conditions in which students should utilize school counselors. Analyzing internalized behaviors and peer relationships, specifically focusing on levels of self-esteem, directly aligns with the concept of understanding student motivation and therefore assists school counselors with implementing specific interventions and preventive programs within comprehensive school counseling programs (Scheel & Gonzalez, 2007).

D'Esposito and Jamilia Riccio (2011) regard school counselors as playing a vital role in the development and implementation of prevention and intervention efforts in the
lives of adolescents. With identification of key characteristics of vulnerability relative to self-esteem, school counselors may easily put into practice preventive activities. School counselors can set the precedent by offering support and educational programming school-wide, as well as offering individual counseling services focused on the topic of self-esteem.

A fundamental strategy D'Esposito and Jamilia Riccio discuss is that school counselors might consider implementing universal screenings for mental health, such as the BASC-2, (Reynolds & Kamphaus, 2004), as an approach to recognize children and adolescents who may be at risk for poor peer relationships and negative internalized behaviors, such as low levels of self-esteem. The identification of such at risk children and adolescents could be regarded as a method of early intervention or, if detected in a timely manner, a form of preventive measure, as it might place school counselors in a unique position to disrupt the cycle of negative peer relationships and poor internalized behaviors before it ever begins.

Current data indicate that universal mental health screenings in schools, in general, results in improved outcomes for students and an overall decrease in emotional and behavioral problems. Through the implementation of universal mental health screening and early intervention, school counselors can be aggressively involved at the school and individual level in effecting positive change. Previous research has focused on school counselors' involvement in program implementation to foster positive school climate or counseling interventions to reduce negative peer relationships and poor internalized behaviors once a child has been identified as being victimized. However, there is less discussion centered on the role of school counselors in implementing early
intervention strategies and services to prevent these negative behaviors, such as low self-esteem, from ever occurring (D'Esposito & Jamilia Riccio, 2011). Taking a proactive approach by implementing specific interventions centered on increasing self-esteem, school counselors can positively impact the overall well-being of student development. One such strategy for prevention is classroom guidance.

**Classroom Guidance**

Collaborating with teachers and other school personnel by developing school-widestrategies to increase peer support, inclusion in their classrooms, while focusing on positive effects of healthy levels of self-esteem can greatly impact the overall well-being of students. School counselors can suggest academic strategies that create inclusive collaborative learning groups by basing the formation of groups on student interests that could encourage friendship formation and, therefore, positively influencing students’ levels of self-esteem (D'Esposito & Jamilia Riccio, 2011). Additionally, school counselors can plan lessons based adjusting to college life as well as, changes in peer relations after high school.

Classroom guidance lessons are an important preventive strategy within successful school counseling programs. Using needs assessments, school counselors can survey students to determine what type of development workshops best meet the needs of students. Hugo (2001) provides a specific example of school counselor’s role within classroom guidance lessons that provide an orientation to participation in dual enrollment courses in California.

A significant component of the dual enrollment program is the offering of an orientation titled “Orientation to Higher Education.” Hugo reports that dual enrollment
courses offer “a valuable jump start” to students in their postsecondary options, as it is focused on the student’s experience during their first year of college. Students are educated on the specifics of being able to earn high school and college credit, satisfy graduation requirements and career planning course, and acquire significant skills in college research. Working closely with students within this orientation course provides substantial advantages for the student and the school counselor.

More importantly, classroom guidance lessons provide opportunities for the school counselor to be highly sensitive to possible fluctuating levels of self-esteem in students, as well as providing students convenient access to utilizing the skills and competencies of their school counselors in times of need. On the surface, classroom guidance lessons appear to serve one purpose, presenting psychoeducational information. However, school counselors can utilize them as an effective means of creating positive relationships with their students. This positive interaction of students and school counselors has the potential to create an environment in which school counselors can be highly sensitive to aspect of student self-esteem.

**Peer Mentoring**

Within comprehensive school counseling programs, counseling efforts should not only encompass those students who are most at risk but should also systematically balance programming efforts to encourage academic, career, and social competencies among the entire student body. Peer mentoring programs specifically focused on the topic of self-esteem can serve as a specific intervention tool for school counselors to access a larger number of students by supervising one group of older students who can teach, support, and serve as role models to groups of other students (Karcher, 2009).
collaboration of students and school counselors within peer mentoring programs has the potential to create an environment that allows more students access the professional services of their school counselors.

Addressing student self-esteem, Karcher’s research discovered an association between serving as a peer mentor and improvements in levels of internalized behaviors. Students who participated as peer mentors reported greater increases in self-esteem than did a comparison group. When students take ownership in the execution of the peer mentoring services for other students, the overall number of students affected by the comprehensive school counseling program could potentially increase dramatically. Peer mentors not only increase the services of the school counseling program in an outreach function, but they are an invaluable part of a comprehensive school counseling program (Karcher). Peer mentoring programs are appropriate for adolescents who often struggle with self-esteem issues because of the proactive nature of collaboration among the students, as well as the positive direction of the overall goal of peer mentoring (Karcher, 2009).

**Parent Education**

School counselors should continuously strive to establish a positive working relationship with parents to promote student achievement (Griffin & Galassi, 2010). Parents play a pivotal role identifying strategies to close achievement gaps, increase student development, and advance overall academic success. Griffin and Galassi (2010) contend that school counselors can be a valuable resource for parents by encouraging parents to increase their own effectiveness in supporting their children in overcoming barriers to academic success. Collaborating with academic stakeholders, school
counselor are challenged to optimize the academic, career, and personal development of their students. Specifically, parental involvement has not only influenced positive sense of self-efficacy and self-esteem in their children but parental involvement also positively affects student achievement and reduction of problem behaviors (Griffin & Galassi, 2010).

Effectively opening the lines of communication with parents, school counselors can educate parents on the benefits of dual enrollment programs, while simultaneously positively impacting overall student achievement. One particular student population, first-generation college attendees, faces significant barriers to attaining a postsecondary education. A benefit of dual enrollment courses is that it enables students whose parents did not attend college to gain a better knowledge of the various factors of the postsecondary experience (Griffin & Galassi, 2010). In most cases, these students lack an awareness of postsecondary education in general, the admissions and financial aid processes, as well as the level of academic rigor which could indirectly affect their levels of self-esteem.

Overall, first-generation students are less prepared academically and less likely to pursue college preparatory courses and take college entrance exams. More often than not, they also frequently postpone enrollment in a college or university (Hugo, 2001). Therefore, it is vital that school counselors take a proactive stance to engaging this particular student population by offering dual enrollment courses as a viable option, while simultaneously being sensitive to the potential impact on student self-esteem. In other words, if students have healthy levels of self-esteem, they are more likely to view college as viable option. The overall goal of school counselors is improving student
success, therefore, understanding the needs of specific students is another component that can improve the effectiveness of comprehensive school counseling programs.

**Small Group Work**

Developmental workshops, as well as other prevention strategies, such as classroom guidance activities, can create awareness within the school environment for the potential need of more in-depth intervention measures, such as focus groups. Small group work can be developed for certain themes, such as self-esteem. Understanding the driving theme of a small group can prepare the group leader, as well as the members, in hopes of the members gaining a better understanding of their overall well-being.

In terms of focusing on self-esteem in the small group context, Shi and Steen (2012) conducted a research study that allowed school counselors to conduct semi-structured groups that had some flexibility for students to process their feelings in groups. The results indicated that participants’ self-esteem improved, which could have been a result of learning more about themselves as well as sharing their personal thoughts and feelings with the group. Another positive outcome of the group work, was that individual improvement of students’ GPA could be explained by their elevated self-esteem because previous research supported the reciprocal relation between self-esteem and academic achievement (Shi & Steen, 2012).

Powell, Newgent, and Lee (2006) examined perceived self-esteem of three groups of participants over three observations (pretest, posttest, and 1-week follow-up) to determine if the use of cinematherapy as a therapeutic intervention enhanced the self-esteem of youth with a serious emotional disturbance. All participants were involved in a 6-week coping skills group designed to educate them about mental health issues, to
educate them about how to formulate new problem-solving skills and utilize techniques for better coping, and to promote positive self-esteem and self-worth. Cinematherapy is a powerful approach that utilizes metaphor via film to create a safe and entertaining environment for self-exploration. School counselors and other mental health professionals should consider utilizing creative techniques and metaphorical language to increase insight, reduce resistance, and facilitate self-esteem enhancement (Powell et al., 2006).

Radcliffe and Bos (2013) suggest school personnel collaborate with the school counseling department to schedule meetings with college resources specialists to orient students, teachers and parents about the nature and location of resources to assist students’ college and career readiness. A distinguishing feature of this research is that it supported a group of young adolescents, starting in their sixth-grade year and continuing through their high school years. Through group work in assisting students’ college and career readiness, these authors found improvements in students’ self-esteem in relation to academic-related perceptions, beliefs, and strategies; rising perceptions of college; improving trends in academic performance; and stronger perseverance in high school (Radcliffe & Bos, 2013).

**Limitations**

Even though the research conducted in this study was thorough, limitations were still present. First, the sample was taken from only a small area of Mississippi, it can only be generalized to the counties in which the study was conducted. To thoroughly understand the relationship between variables from a fully inclusive point of view, it may be necessary for future studies to encompass larger geographical areas.
Also, participation was limited to students who voluntarily agreed to participate in the study and for some students under the age of 18, who received parental permission. These students may not be representative of students who did not participate in the current research study. Additionally, students’ responses to the BASC-2 (Reynolds & Kamphaus, 2004) may not have been completely accurate because they may have been concerned about answering honestly or they did not understand statements on the SRP-A. Finally, depending on their class schedules, it is possible that some students, due to fatigue, completed the SRP-A inaccurately.

Finally, the two participant groups had unequal sample sizes. There were 44 more participants in the group of dual enrollment students than in the group of non-dual enrolled students. MANOVA allows for groups to be unequal, but having equal groups might have allowed the assumption of normality to be met. Transformations were performed but did not eliminate the skewness of the data. In spite of the unequal groups the homogeneity of variance assumption was met.

**Recommendations for Future Research**

This study increases the specific knowledge base to the literature while examining the significance of internalized behaviors and peer relationships among adolescents. There was no previous research on the dynamics between enrollment status in dual enrollment courses and specific adolescent behaviors students. As a result of this study, the researcher made the following recommendations for future research.

First, a potential future study should be conducted statewide to increase the number of potential participants and increase the generalizability. Also, future studies could be longitudinal. Dual enrollment eligibility begins during the 11th grade, therefore
other studies could follow students beginning in the 11th grade until the completion of 12th grade to fully examine the levels of locus of control, self-esteem, self-reliance, sense of inadequacy, social stress, and interpersonal relations and dual enrollment status as they mature.

Future studies may also want to include analysis of gender differences on internalized behaviors and peer relationship levels and how this factor impacts academic performance. Other demographic possibilities include attempting to obtain a more diverse racial makeup among participants and analyzing this factor with reference to internalized behaviors and peer relationship levels. Also, future research could explore the impact of the participation in dual enrollment courses in very affluent schools, as opposed to poverty stricken schools in relation to academic performance. Regarding socioeconomic status, future studies could explore the impact of student’s financial means of accessibility to dual enrollment courses and how this factor impacts academic performance. Finally, having a better understanding of the impact of the parental or legal guardian influence on students’ choice of participation in dual enrollment courses and how this factor could impact internalized behavior and peer relationship levels could be of potential value.

Summary

Dual enrollment courses can provide the means in which more students can continue to pathways of postsecondary success. Through the incorporation of the dual enrollment courses, school counselors have the opportunity to interact with students on a regular basis in an atmosphere that is positive and enlightening, not the case in other instances. School counselors are able to establish positive relationships with students on
a more personal level in a high school setting where in many cases, the entire class size often numbers in the thousands (Hugo, 2001). This interaction between students and school counselors can potentially foster a relationship to a greater foundation of knowledge and insight. The focus on dual enrollment status within this study brought an awareness of the significance of self-esteem. This research study has addressed strategies for academic success in terms of being sensitive to the overall degree of self-esteem levels in adolescents. Therefore, it is imperative school counselors are sensitive to self-esteem levels among students, which as previously stated, can possibly influence the overall success of students.

School counselors are instrumental in providing the necessary assistance students need to obtain academic success. School counselors have the potential to positively impact student success in terms of being sensitive to their overall well-being, which includes psychological, physiological, and emotional dimensions of adolescent development. These dimensions are the driving forces behind successful, comprehensive school counseling programs.
REFERENCES


APPENDIX A

IRB APPROVAL LETTER
April 11, 2014

Mary Bess Pannel
P.O. Box 901
Brazos, MS 36038

RE: HRPP Study #13-334: Differences in Dual-Enrolled and Non-Dual-Enrolled Students with Regards to Internalizing Disorders and Peer Relationships

Dear Mrs. Pannel,

This email serves as official documentation that the above referenced project was reviewed and approved via expedited review for a period of 4/1/2014 through 3/15/2015 in accordance with 45 CFR 46.119 #7. Please note the expiration date for approval of this project is 3/15/2015. If additional time is needed to complete the project, you will need to submit a Continuation Review Request form 30 days prior to the date of expiration. Any modifications made to this project must be submitted for approval prior to implementation. Forms for both Continuation Review and Modifications are located on our website at http://www.orc.msstate.edu/human/subjects/forms/.

Any failure to adhere to the approved protocol could result in suspension or termination of your project. Please note that the HRPP reserves the right, at anytime, to observe your and any associated researchers as they conduct the project and audit research records associated with this project.

Please note that the MSU HRPP accreditation for our human subjects protection program requires an approval stamp for consent forms. The approval stamp will assist in ensuring the HRPP-approved version of the consent form is used in the actual conduct of research. Your stamped consent form will be attached in a separate email. You must use the stamped consent form for obtaining consent from participants.

Please refer to your study number (#13-334) when contacting our office regarding this project.

We wish you the very best of luck in your research and look forward to working with you again. If you have questions or concerns, please contact Nicole Morse at nmorse@orc.msstate.edu or call 662-325-5210. In addition, we would greatly appreciate your feedback on the HRPP approval process. Please take a few minutes to complete our survey at http://www.surveymonkey.com/s/Y2C7Q3Q.

Sincerely,

Nicole Morse, CIP
IRB Compliance Administrator

cc: Advisor: Kimberly Hall
APPENDIX B

VERBAL SCRIPT FOR RECRUITMENT
Hello, my name is Mary Bess Pannel and I am a doctoral student at Mississippi State University. I am doing a research project on potential differences in behavior of dual enrolled students and non-dual enrolled students. I am here to ask for your voluntary participation in my study. If you choose to participate in this study you will be asked to complete a survey that asks about self-esteem issues, relationships with your family and friends and other behaviors. Please know that you will not be penalized for not participating in the study, participation is completely voluntary. If you do not want to participate, you are not required to do so and you will not be negatively affected in anyway if you choose not to participate. If you are under the age of 18, I have a consent form for both you and your parent(s)/guardian(s) to look over and sign. If you are 18 years old or older, you will have an informed consent form to look over and sign. I will be glad to answer any questions that you may have.
APPENDIX C

ASSENT FORM
Assent Form

Fall 2014
RE: Student assent for completion of student survey, for those under 18 years of age

Dear Student,

You are being asked to participate in a research project. This form provides you with information about the project. Please read the information below and ask any questions you might have before deciding whether or not you would like to participate.

My name is Mary Bess Pannel and I am a doctoral graduate student in the Counselor Education program at Mississippi State University. In order to fulfill the requirements of the program, I am conducting a research study looking at the behavioral aspects, such as stress, anxiety, and self-esteem, etc., of twelfth grade students who may or may not be enrolled in a dual enrollment class. Dual enrollment classes are available to eleventh and twelfth grade students who have completed a specified number of high school class credits and have a certain GPA. The dual enrollment classes are offered by community colleges and four year universities. The courses not only count toward high school graduation, they also count towards college level credit.

You are being asked to voluntarily complete the Self-Report of Personality - Adolescent (SRP-A), a rating scale within the Behavior Assessment System for Children, Second edition (BASC). The BASC is a behavioral assessment that assists in gaining a better understanding of the behaviors and emotions of children and adolescents. The total estimated time to participate is 40-50 minutes. Administrative time will take 10-20 minutes and the SRP-A will take 30 minutes to complete.

The outcome of this research study will enable school counselors and students to have a more clear understanding of behavioral aspects, such as levels of stress and anxiety, involved in taking a dual enrollment, college level course, while attending high school. The benefits and drawbacks will be addressed within the study to assist school counselors and students in deciding whether or not to enroll in a college level course, while also trying to balance the demands of being a twelfth grader. No anticipated forms of physical or social/economic risks should be involved for the participants. No forms of incentives or compensation will be involved.

There are additional things about this study you should know. The participation is completely voluntary. You will NOT be asked to include your name so that your answers are confidential. Additionally, it is possible that potential participants’ answers will be linked to identifiers, such as the name of their high school, during publication/presentations. The survey is going to ask you questions about anxiety and self-esteem. There are no anticipated risks of physical or social harm by completing this survey. However, there could be unanticipated psychological risks to completing this survey. If you should feel uncomfortable, upset, or feel down upon completing the questionnaire, it is recommended that you should talk to your school counselor, parent/guardian, pastor, or a trusted adult.

The primary researcher, Mary Bess Pannel, will collect and have access to the data from the SRP. Collected data and informed consent forms will be retained in a secure filing cabinet for a period of 5 years. It will be locked in a filing cabinet in the primary researcher's office and only the researcher will have a key to this filing cabinet. After this time, all acquired data will be destroyed. Subjects will not be photographed, video-taped, or audio-taped in any manner. It is important to understand that these records will be held by a state entity and therefore are subject to disclosure if required by law.

Approv: 4/11/14
I-15-15

IRB # 13-334
If you have any questions, please ask now. If you should have any questions later or want additional information, please contact Mary Bess Pannel at 662-577-3565 or by email at mtp110@msstate.edu. The faculty advisor for this research project, Dr. Kimberly Hall, may be reached at 662-438-0129.

For questions regarding your rights as a research participant, or to discuss problems, express concerns or complaints, request information, or offer input, please feel free to contact the MSU Regulatory Compliance Office by phone at 662-255-3094, by e-mail at irb@research.msstate.edu, or on the web at http://orc.msstate.edu/human_subjects/participant/

Voluntary Participation:
Please understand that your participation is voluntary. Your refusal to participate will involve no penalty or loss of benefits to which you or are otherwise entitled. You may discontinue your participation at any time without penalty or loss of benefits. You may skip any items that he or she chooses not to answer. Your refusal will not impact current or future relationships with Mississippi State University. To do so, simply tell the researcher that you wish to stop.

Please take all the time you need to read through this document and decide whether you would like to participate in this research study. If after reading the information above, you agree to participate, please sign below. If you decide later that you wish to withdraw your permission, simply tell the researcher. You may discontinue your participation at any time.

Options for Participation:
Please initial your choice for the options below:
___ The researcher may contact me again to participate in future research activities.
___ The researcher may NOT contact me again regarding future research.

Please take all the time you need to read through this document and decide whether you would like to participate in this research study.

If you agree to participate in this research study, please sign your name.

_____ Yea, I’ll be in the study. _____ No, I do not want to be in the study.

Participant's Name (Please Print): ____________________________________________

Participant's Signature: ___________________________ Date: ______________

Investigator’s Signature: ___________________________ Date: ______________

Mary Bess Pannel
mtp110@msstate.edu
APPENDIX D

PARENTAL/GUARDIAN CONSENT
Dear Parent or Guardian,

You are being asked to allow your child to participate in a research project. This form provides you with information about the project. Please read the information below and ask any questions you might have before deciding whether or not to allow your child to participate.

My name is Mary Bess Fennel and I am a doctoral graduate student in the Counselor Education program at Mississippi State University. In order to fulfill the requirements of the program, I am conducting a research study looking at the behavioral aspects, such as stress, anxiety, and self-esteem, etc., of twelfth grade students who may or may not be enrolled in a dual enrollment class. Dual enrollment classes are available to eleventh and twelfth grade students who have completed a specified number of high school class credits and have a certain GPA. The dual enrollment classes are offered by community colleges and four year universities. The courses not only count toward high school graduation, they also count towards college level credit.

Your child will be asked to voluntarily complete the Self-Report of Personality - Adolescent (SRP-A), a rating scale within the Behavior Assessment System for Children, Second edition (BASC). The BASC is a behavioral assessment that assists in gaining a better understanding of the behaviors and emotions of children and adolescents. The total estimated time to participate is 40-50 minutes. Administrative time will take 10-20 minutes and the SRP-A will take 30 minutes to complete.

The outcome of this research study will enable school counselors and students to have a more clear understanding of behavioral aspects, such as levels of stress and anxiety, involved in taking a dual enrollment, college level course, while attending high school. The benefits and drawbacks will be addressed within the study to assist school counselors and students in deciding whether or not to enroll in a college level course, while also trying to balance the demands of being a twelfth grader. No anticipated forms of physical or social/economic risks should be involved for the participants. No forms of incentives or compensation will be involved.

There are additional things about this study you should know. The participation is completely voluntary. Your child will NOT be asked to include his/her name so that their answers are confidential. Additionally, it is possible that potential participants' answers will be linked to identifiers, such as the name of their high school, during publication/presentations. The survey is going to ask questions about anxiety and self-esteem. There are no anticipated risks of physical or social harm by completing this survey. However, there could be unanticipated psychological risks to completing this survey. If your child should feel uncomfortable, upset, or feel down upon completing the questionnaire, it is recommended that he/she should talk to you or their school counselor, pastor, or a trusted adult.

The primary researcher, Mary Bess Fennel, will collect and have access to the data from the SRP. Collected data and informed consent forms will be retained in a secure filing cabinet for a period of 5 years. It will be locked in a filing cabinet in the primary researcher's office and only

Agreed: 4/1/14
Signed: 3/5/15
IRB # 13-334
the researcher will have a key to this filing cabinet. After this time, all acquired data will be destroyed. Subjects will not be photographed, video-taped, or audio-taped in any manner. It is important to understand that these records will be held by a state entity and therefore are subject to disclosure if required by law.

If you should have any questions or want additional information, please contact Mary Bess Pannel at 662-571-3665 or by email at mbp110@msstate.edu. The faculty advisor for this research project, Dr. Kimberly Hall, may be reached at 601-484-0196. For information regarding your rights as a research subject, please contact the MSU Regulatory Compliance Office at 662-325-3649.

Please understand that your child’s participation is voluntary. Your refusal to allow your child to participate will involve no penalty or loss of benefits to which you or your child is otherwise entitled. You may discontinue your child’s participation at any time without penalty or loss of benefits. Your child may skip any items that he or she chooses not to answer. Your refusal will not impact current or future relationships with Mississippi State University. To do so, simply tell the researcher that you wish to stop.

Please take all the time you need to read through this document and decide whether you would like for your child to participate in this research study. If after reading the information above, you agree to allow your child to participate, please sign below. If you decide later that you wish to withdraw your permission, simply tell the researcher. You may discontinue your child’s participation at any time. You will be given a copy of this form for your records.

Child’s name (please print)  

Parent or Legally Authorized Representative’s Signature  Date

Investigator’s Signature  Date
Mary Bess Pannel
662-571-3665
mbp110@msstate.edu

If a Legally Authorized Representative (rather than a parent), must have documentation to show LAR status.
APPENDIX E

INFORMED CONSENT FORM
Informed Consent Form

Fall 2014
RE: Student consent for completion of student survey, for those 18 years of age and older

Dear Student,

You are being asked to participate in a research project. This form provides you with information about the project. Please read the information below and ask any questions you might have before deciding whether or not you would like to participate.

My name is Mary Bess Pannel and I am a doctoral graduate student in the Counselor Education program at Mississippi State University. In order to fulfill the requirements of the program, I am conducting a research study looking at the behavioral aspects, such as stress, anxiety, and self-esteem, etc., of twelfth grade students who may or may not be enrolled in a dual enrollment class. Dual enrollment classes are available to eleventh and twelfth grade students who have completed a specified number of high school class credits and have a certain GPA. The dual enrollment classes are offered by community colleges and for year universities. The courses not only count toward high school graduation, they also count towards college level credit.

You are being asked to voluntarily complete the Self-Report of Personality - Adolescent (SRP-A), a rating scale within the Behavior Assessment System for Children, Second edition (BASC). The BASC is a behavioral assessment that assists in gaining a better understanding of the behaviors and emotions of children and adolescents. The total estimated time to participate is 40-50 minutes. The administration time will take 10-20 minutes and the SRP-A will take 30 minutes to complete.

The outcome of this research study will enable school counselors and students to have a more clear understanding of behavioral aspects, such as levels of stress and anxiety, involved in taking a dual enrollment, college level course, while attending high school. The benefits and drawbacks will be addressed within the study to assist school counselors and students in deciding whether or not to enroll in a college level course, while also trying to balance the demands of being a twelfth grader. No anticipated forms of physical or social/economic risks should be involved for the participants. No forms of incentives or compensation will be involved.

There are additional things about this study you should know. The participation is completely voluntary. You will NOT be asked to include your name so that your answers are confidential. Additionally, it is possible that potential participants' answers will be linked to identifiers, such as the name of their high school, during publication/presentations. The survey is going to ask you questions about anxiety and self-esteem. There are no anticipated risks of physical or social harm by completing this survey. However, there could be unanticipated psychological risks to completing this survey. If you should feel uncomfortable, upset, or feel down upon completing the questionnaire, it is recommended that you should talk to your school counselor, parent/guardian, pastor, or a trusted adult.

The primary researcher, Mary Bess Pannel, will collect and have access to the data from the SRP. Collected data and informed consent forms will be retained in a secure filing cabinet for a period of 5 years. It will be locked in a filing cabinet in the primary researcher’s office and only the researcher will have a key to this filing cabinet. After this time, all acquired data will be destroyed. Subjects will not be photographed, video-taped, or audio-taped in any manner. It is important to understand that these records will be held by a state entity and therefore are subject to disclosure if required by law.
If you have any questions, please ask now. If you should have any questions later or want additional information, please contact Mary Bess Pannel at 662-517-3865 or by e-mail at mtp110@msstate.edu. The faculty advisor for this research project, Dr. Kimberly Hall, may be reached at 601-484-0189.

For questions regarding your rights as a research participant, or to discuss problems, express concerns or complaints, request information, or offer input, please feel free to contact the MSU Regulatory Compliance Office by phone at 662-325-3994, by e-mail at info@research.msstate.edu, or on the web at http://orc.msstate.edu/humansubjects/participant/

Voluntary Participation:
Please understand that your participation is voluntary. Your refusal to participate will involve no penalty or loss of benefits to which you or are otherwise entitled. You may discontinue your participation at any time without penalty or loss of benefits. You may skip any items that he or she chooses not to answer. Your refusal will not impact current or future relationships with Mississippi State University. To do so, simply tell the researcher that you wish to stop.

Please take all the time you need to read through this document and decide whether you would like to participate in this research study. If after reading the information above, you agree to participate, please sign below. If you decide later that you wish to withdraw your permission, simply tell the researcher. You may discontinue your participation at any time.

Options for Participation:
Please initial your choice for the options below:
____ The researchers may contact me again to participate in future research activities.
____ The researchers may NOT contact me again regarding future research.

Please take all the time you need to read through this document and decide whether you would like to participate in this research study.

If you agree to participate in this research study, please sign your name.

____ Yes, I’ll be in the study. ______ No, I do not want to be in the study.

Participant’s Name (Please Print):_____________________________________

Participant’s Signature ___________________________________________ Date ____________

Investigator’s Signature ___________________________________________ Date ____________

Mary Bess Pannel
mtp110@msstate.edu
APPENDIX F

HISTOGRAMS
Figure F1. Histogram displaying normality for the dependent variable locus of control.

Note: Mean = 52.2, Std. Dev. = 9.789, N = 260

Figure F2. Histogram displaying negative skewness for the dependent variable self-esteem.

Note: Mean = 51.18, Std. Dev. = 9.952, N = 259
**Figure F3.** Histogram displaying normality for the dependent variable self-reliance.

Notes: Mean = 54.37, Std. Dev. = 8.799, N = 260

**Figure F4.** Histogram displaying a positive skew for the dependent variable sense of inadequacy.

Notes: Mean = 49.57, Std. Dev. = 9.764, N = 260
Figure F5. Histogram displaying a positive skew for the dependent variable social stress.

Notes: Mean = 50.81, Std. Dev. = 10.351, N =259

Figure F6. Histogram displaying a negative skew for the dependent variable interpersonal relationships.

Notes: Mean = 52.43, Std. Dev. = 8.718, N =260