ABSTRACT

ADOLESCENT FEMALE STRESS MANAGEMENT CURRICULUM

By

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May 2015

The purpose of this curriculum is to help adolescent females navigate the stress they experience during this developmental stage in a safe and effective way. The curriculum aims to increase adolescent females' self-esteem, increase their knowledge of effective communication strategies, and increase their ability to identify support systems in life. The curriculum includes eight 1 hour sessions designed to be delivered in a group setting. The curriculum was designed based on a review of the literature and research concerning adolescence, adolescent learning theories, interventions, relational aggression, conflict management, compassion and empathy, healthy relationships, self-esteem, and support systems. Curriculum limitations, implications for social work practice, and recommendations for future curriculums are also discussed.

ADOLESCENT FEMALE STRESS MANAGEMENT CURRICULUM

A THESIS

Presented to the School of Social Work

California State University, Long Beach

In Partial Fulfillment

of the Requirements for the Degree

Master of Social Work

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May 2015

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CHAPTER 1

INTRODUCTION

Adolescence is a complex developmental phase with many challenges that
deserve considerable attention and resources from those in the helping profession
(Schraml, Perski, Grossi, & Simonsson-Sarnecki 2011). Adolescent females try and
navigate their changing environment, however many of them struggle with low self-
esteem, identifying healthy relationships, finding support systems, and communicating
their thoughts, feelings, and needs throughout all of these changes. The five most
frequently experienced sources of stress reported by adolescents are: school work (78%),
parents (68%), romantic relationships (64%), friends' problems (64%), and younger
siblings (64%) (Center for Adolescent Health, 2006). This group curriculum is one that
targets many of the stressors adolescent females face and provides them with tangible
information and skills they can utilize.

Rationale for the Curriculum

There are many curricula currently in place to help adolescent females; however
these curriculums generally focus on one part of an adolescent's experience such as self-
esteem, healthy relationships, or communication skills. For example, the Orange County
Department of Education utilizes a group curriculum that addresses healthy relationships
(Burkett, 2013). This group focuses on the differences between males and females and
communication skills between partners. In addition, it has activities to discuss the

positives and negatives of having sex and how to select a partner. This group is an effective and well-developed curriculum specialized to educate adolescent females on healthy relationships, however many important aspects affecting adolescent girls are not included.

Another example of a curriculum to work with adolescent females is *Bullying in the Girls World: A School Wide Approach to Girl Bullying* written by Senn and Bowman (2007). Senn and Bowman focus on relational aggression and counteract it using awareness of the causes of girl bullying, promoting an understanding that girl bullying behaviors are not something girls have to accept, and lastly providing support and skill building to reduce girl bullying. This curriculum is specific to relational aggression and addresses issues specifically connected to relational aggression.

Purpose Statement

The proposed curriculum developed here focuses on many different areas affecting adolescent girls during this time in their development. It provides activities and discussion based lessons on relational aggression, communication skills, conflict management, empathy and compassion, healthy relationships, self-esteem, and support systems. The group curriculum proposed works to educate participants on skills they can utilize to help manage the difficulties they experience.

Goals and Outcomes

The goal of this curriculum is to help adolescent girls navigate the stress they experience in a safe and healthy way. This curriculum works to help increase self-esteem and educate students on effective communication skills to help them voice their thoughts, feelings, and needs to others. In addition, this curriculum helps students identify support

systems that are available to them and increase their compassionate and empathic behaviors towards themselves and others. Self-esteem is addressed in the materials for week two, six, and seven. Lessons focusing on communication skills are presented in weeks three and eight. In addition the weekly check in and checkout questions allow for communication skills to be practiced in the group setting. During weeks four, five, and seven activities are designed to address support systems and empathic and compassionate behavior towards themselves and others.

Multicultural and Social Work Relevance

This curriculum is designed to be multicultural and is able to be translated into a variety of languages. It takes into account ethnicity, gender, sexual orientation, religion, immigration status, and so on and is composed to work with a variety of students coming from multiple different types of backgrounds. For example, the worksheets utilized during the sessions are designed to facilitate discussion between group members and promote the sharing of their unique experiences.

This work is significantly relevant to social work practice and was designed with the National Association of Social Workers (NASW) Code of Ethics as a guiding framework. For example, the curriculum was composed based upon current research and evidenced-based practices. In addition, the delivery of this group is by a professional who is operating under their scope of practice. The importance of human relationships is shown through this group's purpose to help adolescents identify and utilize available support systems and also help them engage in healthy relationships.

This also is valuable to school social work because it may provide new interventions and strategies to work with adolescent females. Schools are often a place

where professionals can see at risk behavior play out. This makes schools an ideal place to intervene because there is access to the students for a longer period of time than traditional mental health services where a client may come for 1 hour once a week. In schools students can be seen interacting with peers, engaging in courtship behaviors, and using their communication styles. In conclusion, this curriculum is culturally competent and relevant to social work practice in many ways. In addition, it provides school social workers a variety of ways to work with students.

Definition of Key Terms

This curriculum focuses on adolescent females and assisting them in navigating the variety of areas that contribute to the stress they experience. The definitions and ideas utilized for this project are:

Relational aggression: A type of intentional harm that is completed through the manipulation of social relationships. Relational aggression can include the social exclusion of a peer, gossiping, or the spreading of rumors (Goldstein & Tisak, 2010).

Compassion: A sense of caring, empathy, and sympathy that enables one to connect and care for another person (Mongrain, Chin, & Shapira, 2011).

Conflict management: The ability to utilize constructive strategies to effectively manage conflict (De Wied, Branje, & Meeus, 2007).

Empathy: A complex emotion that is other oriented in which a person understands the perspectives of others (De Wied et al., 2007).

Healthy relationships: A relationship based upon respect, safety, support, individuality, fairness and equality, acceptance, honest and trust, and communication (Center for Healthy Teen Relationships, 2006).

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Self-esteem: An attitude that one has about themselves and is often considered a person's ideas of their self-worth and self-efficacy (Bachman, O'Malley, Freedman-Doan, Trzeshiewski, & Donnellan, 2011).

CHAPTER 2

LITERATURE REVIEW

<u>Introduction</u>

The review of literature begins with a discussion of adolescent development and the differences between adolescent females and males. Next, adolescent learning theories and interventions used with adolescents are conveyed. Then, an overview of literature on the topics covered in the curriculum, such as relational aggression, communication skills, conflict management, empathy and compassion, healthy relationships, self-esteem, and support systems, will be examined.

<u>Adolescence</u>

Adolescence is considered to be one of the most difficult times in an individual's life. This stage of development brings new biological, psychological, and social challenges (Schraml et al., 2011). These new challenges and struggles can compromise adolescents' coping skills, resources, and at times jeopardize their well-being. Youth in today's society have a high exposure to stress, and this exposure has been connected to various psychological and physical difficulties (Demir & Urberg, 2004; Rudolph, 2002). The demands that are placed on adolescents can be compared to those of a working adult, with demands that come from all areas of their life including school, peers, parents, and themselves (Schramel et al., 2011). In addition, research is bringing attention to how demanding adolescent schedules currently are in American society and that these

demands come from all aspects of life. Brown, Nobiling, Teufel, and Birch (2011) suggest that in many cases adolescents impacted schedules are connected to their parent's impacted schedules. Many parents have a full schedule and this is then passed on to their adolescent.

All these challenges above affect both male and female adolescents, however gender plays a significant role in how much a young person is affected by these challenges. Both male and female adolescents report comparative levels of stress, however it is the way in which that stress is dealt with that makes a significant difference between males and females. Research has shown that when responding to stress, adolescent females react with negative self-evaluation, rumination, and withdrawal, while adolescent males react with forms of risk taking behavior, delinquency, and disagreeable or aggressive behavior (Daughters, Gorka, Matusiewicz, & Anderson, 2013). Adolescent males experience their stress externally, while adolescent females internalize their experiences with stress. The stress adolescent females experience typically manifests itself as an emotional reaction that has to do with the stressful event occurring and the amount of responsibility they place on themselves for that event (Haraldsson, Lindgren, Mattsson, Fridlund, & Marklund, 2011).

This leads to the differences between adolescent male and female interaction styles. Female peer relationships and friendships tend to include more self-disclosure, intimacy, and emotional support (Demir & Urberg, 2004; Rudolph, 2002)**,** while male relationships and friendships are often based off of a shared activity or companionship (Demir & Urberg, 2004; Rudolph, 2002). Adolescent females are open to a greater risk of stress in interpersonal relationships due to their intimate nature. In addition, they are

more likely to compare themselves to others, observe their environment for possible stressors, and react with self-blame to relationship setbacks (Perry & Pauletti, 2011). Female adolescents experience increased stress levels compared to adolescent males in their relationships with family and friends.

Adolescent females perceive negative interpersonal events as more stressful than adolescent boys do, and generally experience added negative emotions in family and peer interactions (Demir & Urberg, 2004; Rudolph, 2002). Early maturation also plays a significant role in adolescent females' experience of stress. Pubertal changes that occur earlier or later than peers can be a stressor for adolescents. Early maturing females may be scared of the responses they receive due to gaining weight and looking more adult like (Sontag, Graben, Brooks-Gunn, & Warren, 2008). Early maturation can produce a stressful experience and have negative effects on adolescent females' psychological well-being.

Ethnicity is another factor that must be considered when discussing psychological well-being among adolescents. Hispanic adolescents report a higher risk for depression when compared to White, Black, or Asian peers (Guiao & Thompson, 2004). In addition, Hispanic youth were more likely to report having felt sad or hopeless almost every day for two or more consecutive weeks (Guiao & Thompson, 2004). Despite these differences in ethnicity being well documented, little research has been conducted to explain *why* Hispanic youth are more likely to report depressive symptoms. One suggestion made by Cespedes and Huey (2008) is that different expectations of gender roles in families can be a contributing factor. Latinas especially have a difficult time navigating the gender roles and expectations from their specific culture and those of

American culture. These disparities have been shown to produce more familial and mental health consequences for females (Cespedes & Huey, 2008). When compared to adolescent males, adolescent females have increased rates of not only depression, but also related problems such as eating disorders and self-injury (Perry & Pauletti, 2011). There are many areas in which both adolescent males and females experience struggles, however in many areas adolescent females surpass adolescent males in the experience of negative symptoms.

<div align="center">Adolescent Learning Theories</div>

Piaget's Learning Theory provides valuable insight into the understanding of adolescent learning. This theory provides a clear explanation concerning the shift in the way adolescents think and process information (Willmer, 2010). Adolescents are in the stage that allows them to think abstractly and utilize concrete experiences as an anchor for their thoughts (Willmer, 2010). Through this they can think of ideal standards and take into consideration different outcomes and possibilities (Willmer, 2010). Adolescents in this stage can think with the intention of developing solutions to problems and then test these solutions to see if they are effective. A characteristic that is important to this group is that adolescents can now think about their own thought process and then understand it (Willmer, 2010).

Vygotsky's theory of social learning also plays a role in this developmental stage. He believes that learning happens in the interactions between people in shared experiences (Vygotsky, 1978). To develop higher levels of thought one must interact with other people (Lourenço, 2012). Vygotsky (1978) suggests that learning first takes place in a social context and then on an individual level. As adolescents enter this

developmental stage the peer group is crucial. Adolescents test conflict resolution skills, communication skills, and discover what they want and need out of relationships by interacting with each other (Lourenço, 2012). After interacting with others individuals can then reflect back on the interactions and evaluate their effectiveness.

Vygotsky also developed the idea of scaffolding in his theory of social learning (1978). Scaffolding is the concept that suggests an adolescent may not be able to achieve a task independently, however with help from a more knowledgeable or experienced person an adolescent can learn and achieve a task greater than their skill level. Scaffolding speaks to the importance of role models, mentors, teachers, and other important adults in the lives of adolescents to help them learn new skills (Lourenco, 2012).

Interventions

Given that adolescents face a variety of psychosocial challenges (Schraml et al., 2011) and are able to develop and evaluate solutions for themselves (Willmer, 2010), implementing effective interventions is crucial in the effort to ameliorate negative outcomes and promote psychosocial health. Adolescents are concerned with their peer group and peer acceptance. They are struggling to build their identity and can be sensitive to feedback from others and be highly self-conscious. Adolescents also frequently feel that they are alone in their struggles and experiences (Corey, Corey, & Corey, 2010). Thus, an intervention such as group therapy may hold promise as an effective intervention to target these issues. Group therapy is a counseling intervention that develops support among members and can lead to increased self-expression, self-exploration, and self-acceptance (Yalom & Leszcz, 2005). In addition, it has been

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promoted as an effective way to counsel adolescents for a variety of topics (Maldonado, Malott, & Paone, 2008).

The peer group is a significant part of adolescents' lives. Corey et al. (2010) encourage using this peer group because they can often be a positive influence and source of change for adolescents. Group therapy is an ideal intervention because it engages the strengths and struggles of adolescents. They are able to learn about themselves, their values, beliefs, relationships, and choices. Due to the increased focus on their peer group, this developmental stage corresponds with the ideals of group therapy (Corey et al., 2010). In group therapy adolescents are able to identify their struggles, learn to communicate with adults and peers, gain awareness that they are not alone in their struggles, learn how to accept what others can offer, and what they can give to others in return (Corey et al., 2010).

<u>Relational Aggression</u>

With an increased amount of importance placed on the peer group during adolescence the risk of experiencing relational aggression emerges. Relational aggression is a type of intentional harm that is completed through the manipulation of social relationships (Goldstein & Tisak, 2010). Relational aggression can include the social exclusion of a peer, gossiping, or the spreading of rumors. Adolescents view different types of relational aggression very differently. Goldstein and Tisak (2010) interviewed 103 adolescents from public middle schools from a variety of racial backgrounds and socioeconomic statuses. The interviews gained insight into adolescent's views on the acceptability of certain behaviors. Adolescents viewed social

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exclusion as somewhat acceptable, while gossiping was rated negatively and was viewed in a similar fashion as physical aggression (Goldstein & Tisak, 2010).

Gossip is defined as taking part in talk that is evaluative, positive or negative, about a third party who is not present (Cole & Scrivener, 2013). According to Watson (2012) gossip is an integral part of friendship and builds intimacy between two people. For women gossip can serve as an avenue to strengthen the relationship or damage the connection between friends. Gossip is potentially more damaging to the friendship relationships of women because of the more intimate nature of their friendships (Watson, 2012). Goldstein and Tisak (2010) suggest that gossip is seen as a more serious breach of trust and intimacy compared to other behaviors. In this stage of development intimacy, trust, and self-disclosure are integral parts of friendship and building friendships with peers. Social exclusion is seen as something that temporarily impacts a friendship, while gossip can do irreparable damage to a friendship. Research suggests that adolescent females consider relational aggression to be more damaging compared to adolescent males (Goldstein & Tisak, 2004).

Friendship contributes to the emotional adjustment of adolescents and has been related to self-esteem, loneliness, and depressed mood (Demir & Urberg, 2004). Research on adolescent friendship and adjustment suggest that high quality friendships are associated with increases in self-esteem, low levels of loneliness, decreases in depressive symptoms and delinquency (Demir & Urberg, 2004). The best predictor of adjustment is the level in which adolescents feel connected to others and perceive their friendships to be high quality. The transition between elementary school to middle school can be a difficult time for adolescents and close friendships help support

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adolescents through this transition. These relationships are a primary source of support and intimacy (Chow, Ruhl, & Buhrmester, 2013). Demir and Urberg (2004) found that positive friendship quality was the strongest predictor of adjustment in adolescent females.

Electronic communication now plays a huge role in today's adolescents' lives and their interactions with peers. They utilize instant messaging, email, and text messaging to communicate with peers. Forty eight percent of teens believe that the internet has improved their relationships with friends and 61% feel that the time they spend online does not take away time they spend with their friends (Subrahmanyam & Greenfield, 2008). Researchers conducted a survey of Dutch adolescents and found that feedback from social networking sites influenced adolescents' self-esteem. Specifically, positive feedback was correlated with enhancing self-esteem and negative feedback decreasing it (Valkenburg, Peter, & Schouten, 2006).

This stage of development also includes an increase in the likelihood of experiencing negative peer interactions, such as victimization through bullying (Sontag et al., 2008). Electronic communication has opened new avenues for bullying and victimization (Perry & Pauletti, 2011). Before the widespread accessibility of the Internet, cell phones, and social media, adolescents could escape the stress of bullying or victimization at home. These new technologies now make this type of stress a constant twenty four hour battle for teens at home and school (Perry & Pauletti, 2011).

<u>Conflict Management</u>

Adolescence is a phase in life that necessitates the management of a variety of interpersonal conflicts. Adolescence marks a shift from coercive strategies to more

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constructive strategies to effectively manage conflict in friendships (De Wied et al., 2007). As relationships move to a more intimate place during adolescence conflict will occur and need to be managed. Chow et al. (2013) state that adolescents begin to refine their skills of compromise, negotiation, and mitigation with their friends. In addition adolescents that are more empathic have an increased ability to identify and relate to the stress of the other person and better understand the other person's perspective (Chow et al., 2013). Being able to better understand the other person's perspective closes the gap between the differing perspectives and assists in solving the conflict (Chow et al., 2013).

Adolescents' conflict resolution styles are related to those that they use with their parents. Van Doorn, Branje, VanderValk, De Goede, and Meeus (2011) report that both parents and friends contribute to adolescents developing conflict resolution styles. They report that despite high levels of conflict, relationships with parents will continue. So in many cases adolescents will try and exercise different conflict resolution styles with their parents and then generalize them to use with their friends. In early adolescence withdrawal is utilized, as it is an easy to use conflict resolution skill and does not necessarily end a friendship instantly (Van Doorn et al., 2011). As adolescents move to middle and later adolescence friendships allow for more differences and individuality, therefore differences in opinion do not necessarily lead to the ending of a friendship.

Adolescence and the transition to middle school marks an increase in complex interpersonal problems (LaRusso & Selman, 2011). Adolescents' conflicts often include disagreements, social exclusion, personality differences, and violations of trust (Scott, 2008). According to Scott (2008), conflicts among early adolescents are unique due to the social and cognitive changes that are occurring. Their cognitive processes are

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changing from those of fairness and reciprocity to those of identity development, autonomy, and one where peer relationships are important. Conflicts that occur in this developmental stage are more complex and intimate, therefore requiring more sophisticated communication skills to resolve (Scott, 2008). When people experience interpersonal conflict, the amount of responsibility they place on themselves for the conflict can dictate what conflict resolution strategies they use. Scott (2008) reported that when adolescents feel they have some responsibility they are more likely to use more positive and constructive means to solve the problem. In addition, the number of people involved in the conflict, the type of friendship rules being broken, how a person decides to end a friendship, and the level of closeness between friends all play a role in how the conflict will be resolved (Scott, 2008).

<center>Compassion and Empathy</center>

Empathy is a complex emotion that is other oriented. Research suggests that empathy is linked to positive problem solving skills and is negatively linked to conflict engagement in adolescents (De Wied et al., 2007). Empathic tendencies allow for adolescents to better understand others perspectives and it enhances their willingness to behave in constructive ways. Considerable evidence exists that suggests empathy is positively associated with prosocial behaviors, such as helping. For instance, youth who show greater emotional responsiveness are less likely to show aggressive and delinquent behavior (Overbeek, Scholte, De Wied, De Kemp, & Engels, 2007). In addition adolescents who are more empathic are more likely to discuss issues with friends, use compromising strategies, and get less angry when trying to resolve conflicts (De Wied et al., 2007). Adolescent females evidence greater use of empathy, intimacy skills, conflict

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management skills, and friendship closeness when compared to adolescent males (Chow et al., 2013).

Closely related to empathy is compassion. Compassion is defined to be a sense of caring, empathy, and sympathy that enables one to connect and care for another person (Mongrain et al., 2011). Research has shown that when people participate in compassion-based activities they show greater levels of happiness and self-esteem (Mongrain et al., 2011). School social workers that provided students with opportunities to serve others saw students develop social skills, improved behavior, an increased ability to cope with difficulties, and improved academics (Leyba, 2010).

Healthy Relationships

Courtship behaviors begin during this stage of development and the risk of abuse by or against a dating partner emerges (Hickman, Jaycox, & Aronoff, 2004). Approximately 10% of high school males and females report physical violence in their dating relationships (Center for Disease Control and Prevention, 2006). Research has also shown that both adolescent males and females are both victims and perpetrators of a wide variety of abusive and violent behaviors (Noonan & Charles, 2009).

According to Noonan and Charles (2009) abuse and violent acts between adolescents include: name calling, yelling, spreading rumors, slapping, grabbing, and pushing. Adolescents most frequently reported grabbing and touching as sexual abuse. Verbal pressure and coercion into sexual activities was mentioned to also be occurring between adolescents. Hickman et al. (2004) report that both males and females state anger as their main reason for using violence with a partner; however, each gender has different goals when utilizing violence against their partner. Females typically report that

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violence was used as self-defense, while males are more likely to report utilizing violence as a way to exert control over their partner (Hickman et al., 2004). For younger adolescents, dating relationships often take place in public places or group settings; however, many teen dating violence behaviors occur in a private place (Noonan & Charles, 2009). It is suggested that interventions designed for younger adolescents dealing with dating violence should be designed with general topics, such as conflict resolution skills and communication skills, to help develop respectful healthy dating behaviors as young adolescents begin to engage in dating and developing relationships (Noonan & Charles, 2009).

<div align="center">Self-Esteem</div>

Self-esteem is defined as an attitude one has about themselves and is often considered a person's self-worth (Bachman et al., 2011). It is a characteristic that is seen as not only a trait, but also a state (Harter &Whitesell, 2003). This means that as a trait it has stability over time; however, it is also a state, meaning that it reflects responses to life events and cues from other people. Self-esteem can be a predictor of outcomes during adolescence and adulthood. Low self-esteem is associated with adverse outcomes such as depression, substance, abuse, and antisocial behavior (Biro, Striegal-Moore, Franko, Padgett, & Bean, 2006). The development of self-esteem has highs and lows depending on the experiences of the adolescent. It has been found that at 11 years of age self-esteem declines, corresponding with the transition from elementary school to middle school and the beginning of puberty (Biro et al., 2006). Although self-esteem declines at eleven years of age, it appears that self-esteem increases with age (Bachman et al., 2011).

Studies have discovered that during adolescence Black adolescents have higher self-esteem than their White, Native American, Asian, and Hispanic counterparts (Erol & Orth, 2011; Carlson, Uppal, & Prosser, 2000). Biro et al. (2006) suggest that there are two main reasons for why Black adolescent females have a higher level of self-worth when compared to other adolescent counterparts. First, Black adolescent females have a higher self-satisfaction with their physical appearance in early adolescence and feel more comfortable with curvier or thicker body shapes (Harter & Whitesell, 2003; Biro et al., 2006). Second, pubertal changes typically occur for Black adolescents before the transition from elementary school. White adolescents may have less resiliency when compared to Black adolescents due to the fact that the physical changes occur at the same time as the school transition and these must be experienced simultaneously (Harter & Whitesell, 2003).

School environment can play a significant role in the development and stability of an adolescent's self-esteem (Morin, Maïano, Marsh, Nagengast, & Janosz, 2013). Due to where adolescents are developmentally when they attend secondary schools, schools play a crucial role in the development of adolescents' self-esteem (Morin et al., 2013). Adolescents are in a context where they implicitly and explicitly learn about themselves while experiencing significant physical, cognitive, emotional, and societal changes. In school settings, adolescents can experience stressful experiences such as conflict with teachers, rejection from their peers, and failures (Morin et al., 2013). It is possible adolescents can also experience positive self-enhancing experiences such as school success, teacher's warmth and support, and a productive learning environment (Morin et al., 2013).

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Student's perceptions of their school environment plays a determining role in the development of their self-esteem and it has been shown that adolescents that have positive perceptions of their school environment are more likely to have high self-esteem than those who have negative perceptions of their school environment (Morin et al., 2013). Adolescent males benefit more from performance oriented structures, while adolescent females benefit more from mastery oriented structures (Morin et al., 2013). This suggests that the way school settings are designed benefit adolescent males self-esteem compared to adolescent female's self-esteem. School environments have a high focus on achievement and have many performance oriented structures, which could be detrimental to adolescent females. In addition, adolescent females that focus more academically to meet these performance oriented goals may do so at the cost of building social ties. By not building social ties and focusing only on academics the benefits of academic investments can be eliminated (Morin et al., 2013). Relational facets are important in the self-esteem of adolescent females as perceptions of bonding and loneliness have stronger effects on adolescent females than they do adolescent males (Morin et al., 2013).

<u>Support Systems</u>

Trusting relationships at home and at school are crucial protective factors that contribute to the wellbeing and positive development of adolescents (Drolet & Arcand, 2013). These relationships can include peers, teachers, school staff, counselors, and parents. The sense of belonging in the school setting is associated with positive development in adolescents (Drolet & Arcand, 2013). A sense of belonging is created

when adolescents feel that they are being listened too, they are being understood, and that adults have flexibility when trying to meet their needs.

There are four main types of social support. The first is concrete support and this type of support is acts of assistance. The second type of support is emotional support and this type of support is being there in times of hardship. The third type of support is advice support which is providing not only advice, but reassurance as well. The fourth type of support is esteem support and with this type of support one will rate and inform another person of their worth (Mcgrath, Brennan, Dolan, & Barnett, 2014).

Social support during adolescence is a very complex. According to Valle, Bravo, and Lopez (2010), emotional support begins for adolescents around the ages of 12 or 13, first by the adolescents' parents and then by peers. This parallels the developmental process where the peer the group becomes the prominent focus compared to parents. Their findings then suggest that concrete support throughout adolescence is fulfilled at a higher level by parents than by friends. Emotional support is fulfilled at a higher level by the peer group than adolescent's parents (Valle et al., 2010). It is difficult for parents to maintain that confidence with their adolescents where adolescents will come to them to discuss their personal problems.

Where adolescents find their friends can also dictate the type and amount of support they receive from them. In early adolescence, where adolescents' friends come from makes a difference in the amount of support, whereas later in adolescence the peer group is more unified and support provided is more equally distributed (Valle et al., 2010). According to Valle et al. (2010) in early adolescence peer support comes mainly from friends that are in the adolescent's school network, whereas friends that come from

community places, such as clubs, associations, or sport teams, contribute a lower amount of support until late adolescence.

<div align="center">Conclusion</div>

It is clear that adolescence is an inherently complex developmental phase that deserves considerable attention and resources by those in the helping profession (Schraml et al., 2011). With the great amount of importance placed on the peer group during adolescence, adolescents are open to the risk of experiencing relational aggression and are in the process of refining their conflict management and communication skills (Goldstein &Tisak, 2010; De Wied et al., 2007). Youth who show empathic tendencies are able to better understand the perspective of others (De Wied et al., 2007). Courtship behaviors are starting to occur, which opens adolescents up to the risk of dating violence (Hickman et al., 2004). In addition, self-esteem is lower for adolescent females when compared to males and trusting relationships are crucial to positive development (Rudolph, 2002; Demir & Urberg, 2004; Drolet & Arcand, 2013). As such, a curriculum aimed to address these challenges and potential risk factors is warranted.

The present curriculum will address a variety of topics that are informed by developmental and psychosocial research pertaining to adolescence. Topics include relational aggression, communication skills, conflict management, empathy and compassion, healthy relationships, self-esteem, and support systems. These topics are crucial aspects that influence adolescent females and the level of stress they likely experience.

The curriculum is designed to create a comprehensive intervention for adolescent females so they can navigate the challenging developmental period and the stress they

experience in an effective and healthy way. The curriculum and its organization will be

discussed and outlined in the following chapters.

CHAPTER 3

METHODS

Curriculum Purpose and Objectives

The goal of this project is to create a comprehensive curriculum to deal with the struggles adolescent females' experience. It is designed to address a variety of areas in which adolescent females experience stress and provide them with skills to help navigate their way through this developmental stage. Curriculum goals include: (a) increasing participants strategies to manage relational aggression; (b) improve participants ability to effectively communicate their thoughts, feelings, and needs to others; (c) increase participants compassionate and empathic acts towards themselves and others; (d) increase participants insight into characteristics of healthy relationships and characteristics they find important in relationships; (e) increase participants ability to identify positive characteristics about themselves and (f) increase participants ability to identify support systems for themselves.

Rationale for the Curriculum

Adolescence is a complex developmental phase that requires attention and resources by those in the helping profession (Schramel et al., 2011). Throughout adolescence there is a significant amount of focus and attention placed on the peer group and this opens adolescents up to the risk of relational aggression (Goldstein & Tisak, 2010). Adolescents are in the process of learning and refining their conflict management

and communication skills and youth who show more empathic tendencies are able to better understand the perspective of others (De Wied et al., 2007). Courtship behaviors begin during this developmental phase and with this so does the risk of dating violence (Hickman et al., 2004). In addition self-esteem for adolescent females is lower than their male counterparts and trusting relationships are crucial to positive development (Rudolph, 2002; Demir & Urberg, 2004; Drolet & Arcand, 2013). As such a curriculum designed to address these potential risk factors and challenges is justified.

<u>Curriculum Design</u>

The curriculum was designed with eight group sessions to be facilitated in the school setting. The curriculum could be facilitated by licensed clinical social workers, social work interns, marriage and family therapists, marriage and family therapy trainees, or others in the helping profession that are working at a school site. It is suggested that one or two facilitators facilitate the group. Eight weeks allows for the group to be facilitated and completed before the typical winter and summer breaks, so the group is not interrupted by week long or multiple week long breaks. Sessions are 50 minutes to one hour long and groups will meet once a week. This time frame is long enough to facilitate the session and allow time for discussion, but short enough so participants do not miss a large amount of vital instruction time during the school day.

This curriculum is designed to be a closed group and could be facilitated multiple times throughout the school year. A closed group design was chosen so a strong level of rapport and trust can be achieved and participants can engage in honest and meaningful discussion during the sessions. It is suggested that the group be facilitated with six

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participants to be sure the facilitator can manage the group dynamics and be able to respond appropriately to each member.

<center>Target Group</center>

Ideal participants for this group are adolescent females' ages 11 to 14 years of age, or sixth through eighth grades. Participants could be those who struggle with low self-esteem, experience difficulties in relationships with peers or adults, or show other signs of having difficulty managing the stress that occurs during this developmental stage.

<center>Sessions</center>

The curriculum is divided into eight different sessions. All of the sessions last approximately 50 minutes to 1 hour. The session cover pages provide facilitators with the time frame, the purpose, the required materials, preparations instructions, and the agenda for the sessions. The session content sheets provide facilitators with the information to be covered throughout the session. All necessary worksheets for each session follow the session content sheet.

Session one covers the purpose of the group, confidentiality, and has participants begin to introduce themselves to the other group members. Session two addresses relational aggression and strategies participants can utilize to help manage it. The third session educates participants on communication skills and effective conflict management skills. During the fourth session compassion and empathy will be addressed and participants will identify ways in which they care for themselves and others. The fifth session educates participants on characteristics of healthy relationships and prompts participants to identify additional characteristics that are important to them in

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relationships. The sixth session covers self-esteem and educates participants on self talk.

The seventh session educates participants on support systems and assist participants in

identifying their personal support systems. The final session facilitates the termination of

the group and provides group members with a letter they have written to themselves and

can open one month from the completion of the group to remind them of the things they

have learned during the eight weeks.

<center>Working in Groups with Adolescent Females</center>

Adolescent females bring a unique set of characteristics to the group therapy

setting. First the way females learn compared to their male counterparts is different.

According to Jacobs, Kuriloff, Andrus, and Cox (2014) females reported learning best

from activities that were clear, easily understood, and that could be directly related to

their own lives. When thinking about abstract concepts adolescent females were better

able to conceptualize and problem solve when a concrete example was provided to

illustrate the concept (Jacobs et al., 2014). For example in the group therapy setting

utilizing vignettes of common experiences among adolescent females can be used to help

to illustrate concepts and assist adolescent females in directly relating the information to

their personal lives.

In addition providing activities that allow for adolescent females to discuss and

collaborate with each other are crucial to keeping them engaged in learning and for the

information being presented to have a lasting impression (Jacobs et al., 2014).

Relationships are central to this developmental stage and working and collaborating with

peers furthers the learning of adolescent females. For example in the group therapy

setting having participants work together to solve problems, brain storm ideas, and share

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their thoughts and feelings with others helps adolescent females integrate the information

further than if they worked independently (Jacobs et al., 2014).

CHAPTER 4

CURRICULUM MODULES

Implementing the Curriculum

The curriculum consists of eight sessions that are included in appendices C-J.

The following chapter includes additional information necessary for facilitators utilizing

this curriculum.

Facilitators Guide and Participant Worksheets

The curriculum provides instructions for how facilitators can implement each

group session. The session cover pages and session content sheets provide directions to

facilitators on how to complete the eight different sessions. Session cover pages provide

facilitators with the time frame, purpose for each group session, the required materials,

preparation steps, and the session agenda. Session content sheets provide facilitators with

the group opening and closing questions and the information, worksheets, and activities

to cover with participants during the session. Please see appendices C-J.

Preparing to Implement the Curriculum

Prior to starting the group curriculum group facilitators can utilize the Facilitator

Preparation Check List (Appendix A) and the General Tips for Facilitators (Appendix B).

In addition before beginning the group facilitators should review the literature review in

Chapter 2, especially if they have limited work experience with adolescent females.

Selecting a Space

Facilitating group therapy in a school setting can at times be difficult. Depending on the size of the school finding an office large enough or a classroom that is available to facilitate the group in may be challenging. Finding an area that can protect confidentiality and limit distractions is required.

Program Evaluation

There are four levels in which curricula and trainings can be evaluated upon to determine their effectiveness (Green & Pasztor, 2007). The first level curricula and trainings can be evaluated upon is by the participants' level of satisfaction with the group, whether or not the participants found the group to be valuable. The second level trainings and curricula can be evaluated upon is using pre and post tests to see if there is a change in attitudes, knowledge, or behaviors following the completion of the group. A third level in which curricula and trainings can be evaluated would be on the integration of skills and knowledge learned in the group to the participants' everyday life. The fourth level of evaluation would include evaluating to see if the skills and knowledge learned in the group were actually benefitting the participants (Green & Pasztor, 2007).

To evaluate this curriculum level 1 and level 2 evaluations will be conducted. Pre and post intervention surveys will be used to assess whether participants experienced an increase in knowledge after participating in the group. In addition post intervention surveys will be used to determine the level of participant satisfaction with participating in the group.

About the Author

Jayna Seidel is a graduate student in the Master of Social Work program at California State University, Long Beach. She received her Bachelor of Science in Human Services with a minor in child and adolescent studies from California State University, Fullerton in January 2013. When completing her first year in the social work program Jayna discovered her passion for working with adolescent females and being in the school setting while interning in the East Whittier City School District. Her work with adolescent females can be traced back to while she was in high school where she completed her community service hours with adolescent females in an after school program. Jayna has had an interest in group therapy since completing her bachelor's degree and believes it is important for adolescent girls to have a place of support and a place where they can build their personal competencies.

CHAPTER 5

DISCUSSION

Limitations of the Curriculum

There are multiple limitations to this curriculum. The first limitation is that this curriculum has not been formally tested for effectiveness. The proposed curriculum has been developed based upon the review of current research and the personal work experience of the author. Therefore, tests would need to be conducted to confirm its effectiveness.

Another challenge for this curriculum is that of the time frame. The group is only eight 1 hour sessions. Group facilitators may find it difficult to complete the curriculum activities in the suggested amount of time. It could possibly leave not enough time for other important topics that could come up with the group members. This population may also be easily distracted and could possibly spend a large amount of time off topic if not redirected back to the group topic.

Implications in Social Work Practice

Adolescent females are a vulnerable population that many in the helping profession will encounter. Social workers will encounter adolescent females in a variety of settings and it is important that they are well versed in this populations unique needs. Those in the school setting need to be prepared to address this populations needs in relation to their specific setting. In addition by identifying the vulnerability of this

population one should further their education to better serve those in need, a crucial aspect to social work practice.

<div align="center">Recommendations for Future Curricula</div>

Due to the lack of comprehensive curriculums designed for adolescent females more research and work needs to be done to create more comprehensive curriculums to address the needs of adolescent females. In addition there is a need for more interventions designed for the school setting and the unique challenges that are faced by group facilitators in this environment. Those that are involved in the helping profession and work in the school setting would greatly benefit from more interventions designed to fit the structure of the school setting.

APPENDICES

APPENDIX A

FACILITATOR PREPARATION CHECK LIST

Facilitator Preparation Check List

Before the Group:

    Check to be sure the room or space where the group is held is available.
    Review the agenda and content sheet for the session.
    Gather necessary materials including writing utensils, art supplies, and copies of handouts.
    Arrange the tables and chairs in the room into a circle.

During the Group:

    Review group rules.
    Present session topic and agenda for the session.

After the Group:

    Collect writing utensils and art supplies.
    Be available for questions or concerns.
    Make sure room is left clean and organized.

APPENDIX B

GENERAL TIPS FOR FACILITATORS

General Tips for Facilitators

- The curriculum should be delivered in a discussion style format. Adolescents do not respond well to lectures and this group should be different than attending another class in their school schedule.

- Participant involvement is crucial to the development of rapport in the group and the overall success of the group. When participants contribute it is important to positively reinforce their participation and provide feedback or follow up questions to the group based on their responses.

- It is crucial to explore participants' contributions to the group. For example, participants may make vague statement such as, "My sister supports me." In this instance, it would be important to explore what "support" means to that participant and other group members.

- The activities provided here are a guideline and are flexible. They may take more or less time than suggested. The check-in and check-out may also be something that a facilitator will need to adjust to fit the allotted group time.

- To help increase participation bringing small candies to hand out can be very helpful and encourage participation of group members.

APPENDIX C

SESSION 1 AND HANDOUTS

Session 1: Introduction

Time: 50 minutes to 1 hour

Purpose:
- To discuss purpose of the group, confidentiality, and develop group rules.
- Begin to have participants introduce themselves to group members.
- Complete Pre Intervention Survey.

Materials Required:

Writing utensils for all group members
Markers or colored pencils for all group members
Piece of large poster paper for Group Rules Poster
Copies of the Pre Intervention Survey (Appendix L) for all group members
Copies of What's in Your Backpack? Worksheet for all group members

Preparation:

Gather required materials and review Session 1 Content Sheet.

Session Agenda:

1. Discuss facilitators' role, purpose of the group, and confidentiality.

2. Develop group rules.

3. Complete Pre Intervention Survey.

4. Complete What's in Your Back pack? Worksheet.

5. Check-Out

Session 1 Content Sheet

1. Discuss facilitators' role, purpose of the group, and confidentiality.

      First introduce the group facilitators, their name and job title, to the group. Then discuss the purpose of the group and let participants know that the group will focus on the struggles they face and that in the group they will learn new ways to help them get through all the things they encounter with friends, family, and boyfriends or girlfriends. Inform participants that the group will meet for eight weeks for approximately an hour once a week.

      It is crucial that the group facilitator discuss confidentiality and its limitations. Personal experiences will be discussed throughout the group so it is important for participants to know what is required by law to be reported by the group facilitator. When discussing confidentiality be detailed and provide examples of the limitations so it is clear for participants.

2. Develop the group rules.

      First ask the participants what rules they need to feel safe in the group. Participants may have a difficult time developing their own rules. Here are some examples of common rules:

- What is said in group stays in group
- Be respectful
- The right to pass
- Taking turns to speak

      If group members have a difficult time coming up with rules, provide examples of possible situations in which the rules above are broken. For example, discuss scenarios of group members telling non-group members about what someone said in group or participants being disrespectful. The examples will help prompt discussion among group members and prompt them to develop rules.

Write these rules on a piece of poster paper so they can be displayed at every group session.

3. Complete Pre Intervention Survey.

      Have participants complete the Pre Intervention Survey individually. Be sure their initials are filled in, so they can be compared to the Post Intervention Survey following the completion of the group. See Appendix L for the Pre Intervention Survey.

Session 1 Content Sheet contd.

4. Complete What's in Your Backpack? Worksheet.

Explain to the group that this worksheet will help everyone in the group to get to know each other. Participants can fill in each space answering the questions and participants can color the person in the center to look like themselves.

5. Check-Out Question

Explain to the group that each week the group will typically begin with a check in question and end with a check out question. These questions are designed to get the group thinking about the week's topic as the group is beginning and to help see what participants are taking away from the group each week as the group concludes. In the following Session Content Sheets only the questions will be listed, but should follow this same format.

For example facilitators this week could say, "So that is almost all the time we have for group this week, as we leave the group tell the group one fact about you that you would for the group to know about you?".

What is in Your Back Pack?

My name is:

In the future I will:

Outside of School I:

I love:

My favorite food is:
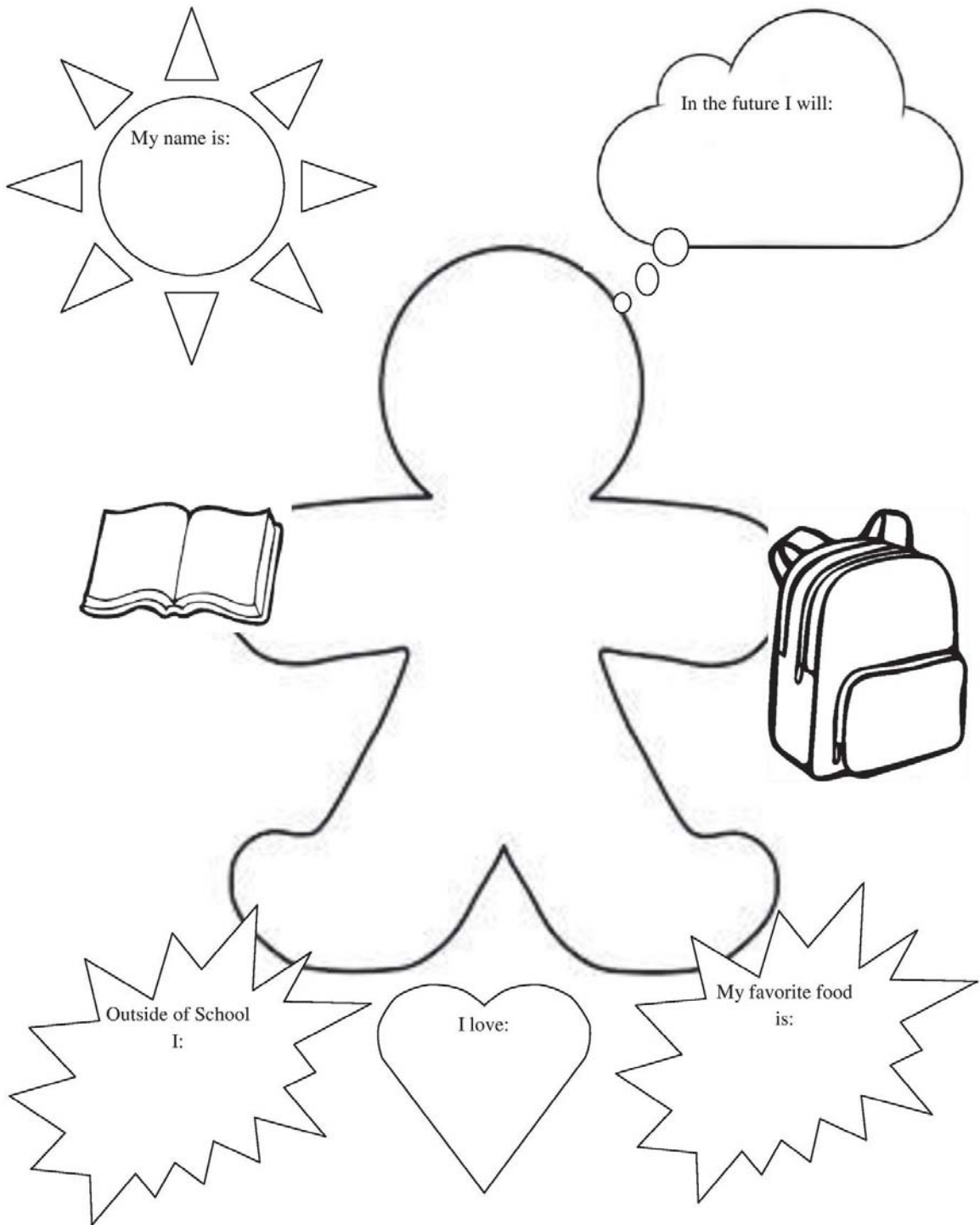
(Adapted by Cronin, 2013)

APPENDIX D

SESSION 2 AND HANDOUTS

Session 2: Relational Aggression

Time: 50 minutes to 1 hour

Purpose:
- To educate participants on relational aggression.
- Engage group in discussion of effective skills to manage relational aggression.

Materials Required:

Writing utensils for all group members
Copy of What is Relational Aggression? Worksheet for the facilitator
Copy of How Can I Handle Relational Aggression? Worksheet for the facilitator

Preparation:

Gather required materials and review Session 2 Content Sheet.

Session Agenda:

1. Check-In

2. Discuss what relational aggression is.

3. Discuss strategies to handle relational aggression.

4. Check-Out

Session 2 Content Sheet

1. Check-In Question

      How does it make you feel when someone spreads a rumor about you or excludes you from a group of friends?

2. Discuss what relational aggression is.

      First facilitators can ask the participants what they think relational aggression is. Facilitators can utilize the What is Relational Aggression? Handout to help guide the discussion with participants. Discuss with participants that the difference between bullying and relational aggression is the manipulation of social relationships.

3. Discuss strategies to handle relational aggression.

      Facilitators can utilize the Strategies to Help Relational Aggression Worksheet and the How Can I Handle Relational Aggression? Worksheet to discuss with participants what relational aggression looks like and what girls can do to combat it. First read the scenarios on How Can I Handle Relational Aggression Handout and use the discussion question below to discuss further with participants. Have participants share their ideas on how to handle the situations and any strategies that have previously helped them. Then share any strategies from the Strategies to Help Relational Aggression Worksheet that have not been discussed.

4. Check-Out Question

      What strategy that we talked about today do you think you will be able to utilize?

What is Relational Aggression?

Relational Aggression is behavior that is intended to hurt someone by harming their relationships with others. It is often covert and subtle and requires careful observation. It is not just "kids being kids." It is hurtful, intentional behavior that damages self esteem and makes it difficult for creating and maintaining healthy relationships. It may include all or some of the following:

- Eye rolling
- Ignoring
- Building alliances
- Teasing and put downs
- Spreading rumors and gossip
- Forming exclusive cliques
- Cyberbullying

Strategies to Help Relational Aggression

- Ignoring it and walking away.

- Act like you don't care.

    In many cases people that engage in relational aggression want to get a reaction out of the other person. When someone gets upset that is what the other person is looking for. When a person acts like they don't care then it is taking away what the other person desires.

- Talk with and hang out with other friends.

- Journal about what happens.

    In many cases people keep thinking about things that happen over and over again. By journaling about the situation it helps get what happened out on paper and off a person's minds.

- Find other interests outside of where the relational aggression is happening.

    When people have another area of interest in their life other than where the relational aggression is occurring then they can go to that other area for support and find friends and other people to engage with.

(Adapted by Ophelia Project, 2010)

How Can I Handle Relational Aggression?

Scenario 1: Gossip and Spreading Rumors

Monica and Janice have been best friends since fourth grade. They recently just started middle school and were excited to be at the new school. Monica and Janice did not have the all of the same classes together and each began to meet new friends. Despite not having classes' together and meeting new friends, the two girls remained best friends and saw each other on the weekends. While at lunch one day Monica and Janice were eating lunch with separate groups of people when Maria, a mutual friend, came to Monica and started saying mean and untrue things about Janice. Maria kept saying over and over again how bad of a person Janice was and that she could not believe what she was wearing to school that day. Maria had even said that Janice had had sex with another boy in their class. Being Janice's good friend Monica knew that Maria was saying things that were not true about Janice. Maria had been telling other girls at their school the same things about Janice.

What could Monica be thinking and feeling while Maria is gossiping and spreading rumors about her best friend?

What could Monica do when Maria is gossiping about Janice?

Scenario 2: Being Excluded from the Group and Cyberbulling

Claudia has had the same friend group since 6th grade. However, recently she has noticed her friends are not inviting her when they go to the movies and are not talking to her at school. She is not really sure what happened or why they would stop taking to her and inviting her to hang out with them. While at school she feels alone and that they are always in a group talking about her. On Facebook Claudia has noticed they created a special "club" only for the girls that are in their group. The girls first started to post pictures of other students at school and write mean comments about them. Now they post rumors about Claudia and she get messages that tell her she is ugly and she should just kill herself.

What could Claudia be thinking and feeling when she is not included with her group of friends?

What could Claudia do when she is excluded from her friend group?

What could Claudia do on Facebook to help herself?

APPENDIX E

SESSION 3 AND HANDOUTS

Session 3: Communication Skills and Conflict Management

Time: 50 minutes to 1 hour

Purpose:
- To assist participants in identifying their personal communication style.
- Educate participants on effective communication skills.

Materials Required:

Writing utensils for all group members
Copies of Passive, Aggressive, and Assertive Communication Worksheet for all group members
Copies of "I" Statement Worksheet for all group members

Preparation:

Gather required materials and review Session 3 Content Sheet.

Session Agenda:

1. Check-In

2. Discuss different communication styles.

3. Discuss and complete "I" Statement Worksheet.

4. Check-Out

Session 3 Content Sheet

1. Check In Question

Do you communicate most like an eagle, a turtle, or a shark?

2. Discuss different communication styles.

To begin, have participants discuss each animal and how they communicate. Have participants suggest characteristics of the different communication styles. Distribute and utilize the Passive, Aggressive, and Assertive Communication worksheet to educate participants on the different styles after participants have guessed characteristics for each style. Read through the hand out and ask participants to share what they think and feel when others use the different styles of communication. Ask participants whether or not they think their style of communication has changed from the animal they initially stated during the check in question after learning about the different styles.

3. Discuss and complete "I" Statement Worksheet.

Facilitators can transition to the "I" Statement Worksheet by stating, "Sometimes it can be difficult to communicate our thoughts, feelings, and needs with others especially during a conflict situation." Utilize the "I" Statement Worksheet to teach participants the "I" statement formula and use the scenarios to help participants practice using I statements. Share with participants that they can use "I" statements when they are happy as well, not only in a conflict situation.

4. Check-Out Question

Where and when do you think "I" messages might be helpful for you?

Passive, Aggressive, and Assertive Communication

Passive Communication-Turtle

When using passive communication an individual does not express their needs or feelings. Passive individuals often do not respond to hurtful situations, and instead allow themselves to be taken advantage of or to be treated unfairly.

Traits of Passive Communication

- Poor eye contact
- Allows others to infringe upon their rights
- Softly spoken
- Allows others to take advantage

Aggressive Communication- Shark

Aggressive communicators violate the rights of others when expressing their own feelings and needs. They may be verbally abusive to further their own interests.

Traits of Aggressive Communication:

- Use of criticism, humiliation, and domination
- Frequent interruptions and failure to listen to others
- Easily frustrated
- Speaking in a loud or overbearing manner

Assertive Communication- Eagle

With assertive communication an individual expresses their feelings and needs in a way that also respects the rights of others. This mode of communication displays respect for each individual who is engaged in the exchange.

Traits of Assertive Communication:

- Listens without interrupting
- Clearly states needs and wants
- Stands up for personal rights
- Good eye contact

(Adapted by Therapist Aid, 2014)

"I" Statements

Taking responsibility for your feelings will help you improve your communication when you feel upset or angry. One way to achieve this is by using *"I" statements*. This technique will allow you to communicate what is upsetting while minimizing blaming. If our statements feel too blaming, the person we are trying to speak to will often become defensive.

"I" Statement format: "I feel _____ when _____ because _____."

Examples

Regular	"You make me angry because you are always late"
"I" Statement	"I feel frustrated when people come home late because I stay awake worrying."

Regular	"You never call. You don't even care."
"I" Statement	"I feel hurt when people don't call me back because it seems like people don't care."

Practice

Scenario	Your friend keeps cancelling plans at the last minute. Last weekend you were waiting for them at a restaurant when they called to tell you they would not be able to make it. You left feeling hurt.
"I" Statement	

Scenario	You are working on a project with a group and one member is not completing their tasks on time. You have repeatedly had to finish their work which has been very frustrating.
"I" Statement	

Scenario	A friend who borrows movies from you usually brings them back damaged. They want to borrow one again but you're feeling worried.
"I" Statement	

(Adapted by Therapist Aid, 2012)   52

APPENDIX F

SESSION 4 AND HANDOUTS

Session 4: Empathy and Compassion

Time: 50 minutes to 1 hour

Purpose:
- Educate participants on empathy and compassion.
- Support participants in identifying empathic and compassionate acts they take towards themselves and others.

Materials Required:

Writing utensils for all group members
Copies of Caring for Myself worksheet for all group members
Copies of Caring for Others Worksheets for all group members

Preparation:

Gather required materials and review Session 4 Content Sheet.

Session Agenda:

1. Check-In

2. Discuss empathy and compassion.

3. Complete Caring for Myself and Caring for Others Worksheet.

4. Check-Out

Session 4 Content Sheet

1. Check In Question

What does it mean to be compassionate?

2. Discuss empathy and compassion.

First facilitators can discuss what compassion and empathy means and what compassion and empathy means to the participants. Facilitators can share with the participants these definitions of compassion and empathy.

> Compassion: A sense of caring, empathy, and sympathy that enables one to connect and care for another person.

> Empathy: A complex emotion that is other oriented in which a person understands the perspectives of others.

Facilitators can discuss with participants ways that people can be compassionate and empathic. In addition discuss that compassion and empathy can be shown towards ourselves and others.

3. Complete Ways to Care for Self and Others Worksheet.

Facilitators can pass out the Caring for Myself and Caring for Others Worksheet. Participants can complete the worksheet and then share with the group after each worksheet. Facilitators can discuss with participants their thoughts and feelings before the compassionate or empathic act takes place and then their thoughts and feelings afterwards. Facilitators can help participates see that after compassionate or empathic acts take place generally they will feel better than they did before, whether they were the ones that did it or someone else does it towards them.

If participants have difficulty thinking of ways that they care for themselves and others, facilitators can provide examples to help participants. For example, a facilitator might use the example of taking care of a pet. "So if we had a pet puppy and we wanted to take care of him, would we feed him a bunch of candy? Would we keep him locked in a cage all day? What might we do to take care of him?" Participants could then suggest ways to care for the puppy. Then the facilitator could say, "So now let's think about you, how do you take care of you?"

4. Check Out Question

In the next week when is a time you can show empathy or compassion to someone else?

Caring for Myself

Directions: On the lines below, write the ways that you can care for yourself physically, emotionally, and mentally. If you need more lines, you may add them.

Me
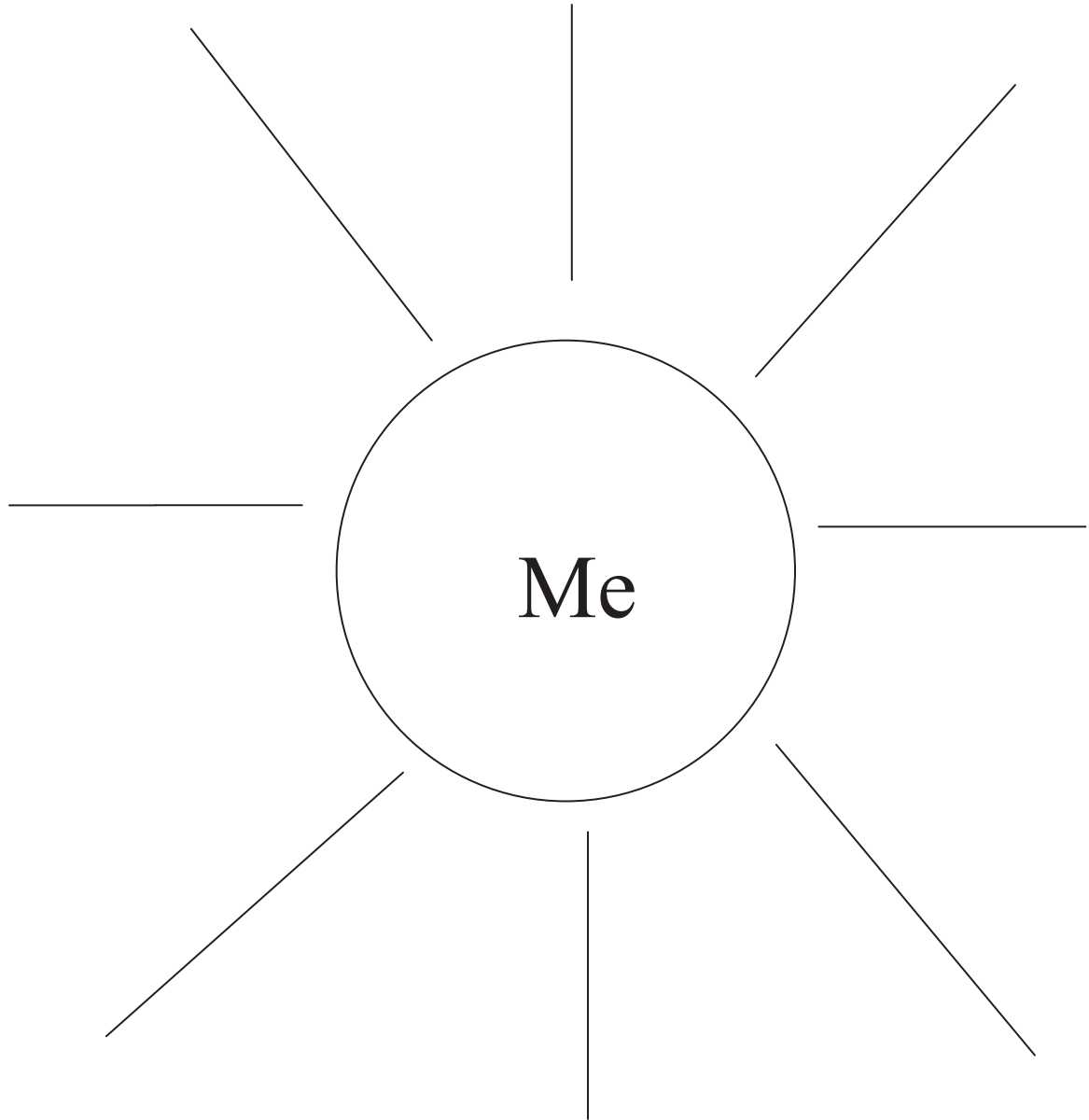
Something I am going to do for myself is
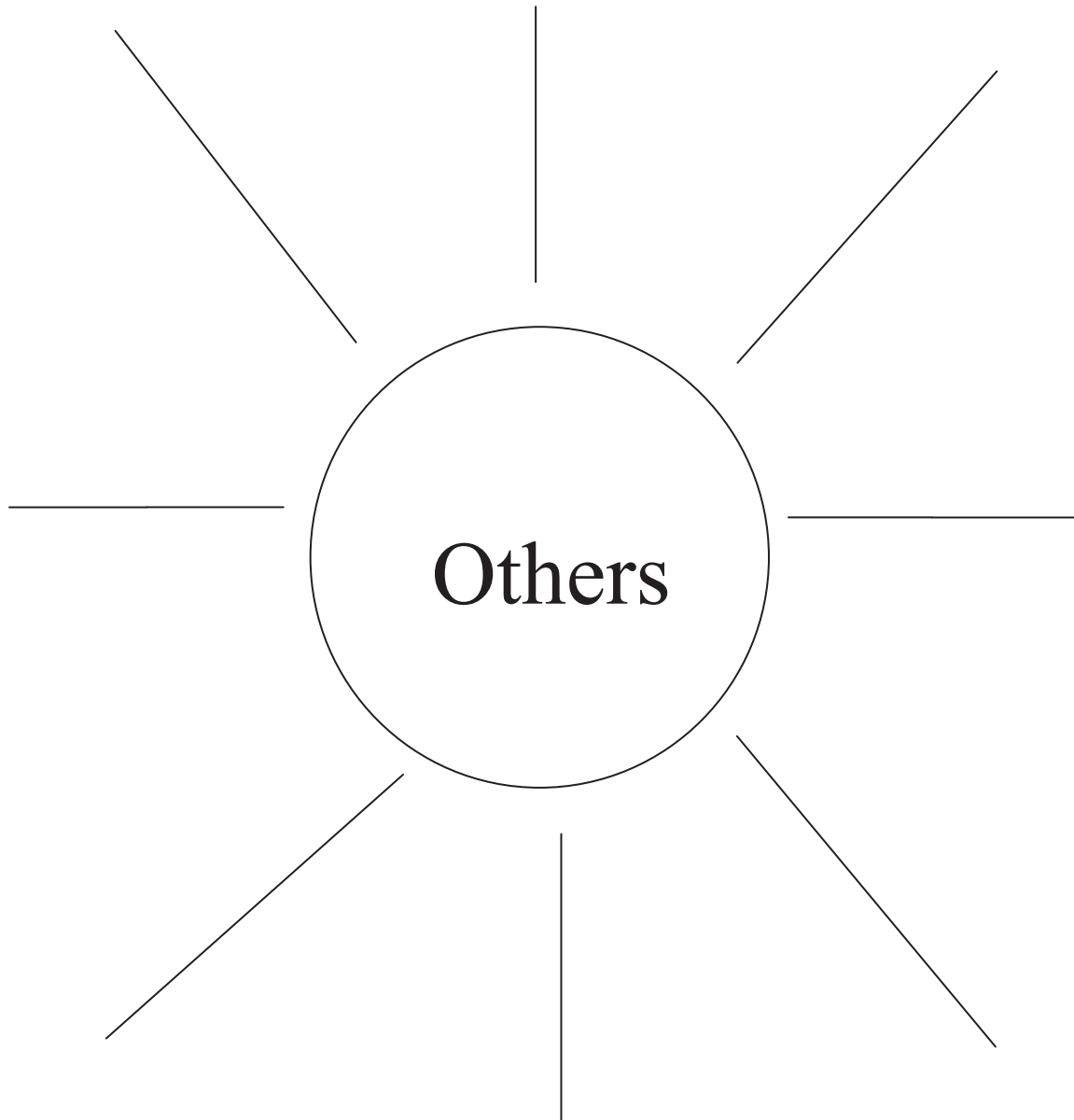
_____

_____

(Adapted by Kirby, 2012)

Caring for Others

Directions: On the lines below, write the ways that you care or have cared for others. If you need more lines you may add them.

Others

Something I am going to do for another person is

_____

_____

(Adapted by Kirby, 2012)

APPENDIX G

SESSION 5 AND HANDOUTS

Session 5: Healthy Relationships

Time: 50 minutes to 1 hour

Purpose:
- To educate participants on characteristics of healthy relationships.
- Assist participants in identifying specific characteristics that are important to them in relationships.

Materials Required:

Writing utensils for all group members
Markers or colored pencils for all group members
2 pieces of blank white paper for all group members
Copies of What Do I Want in a Healthy Relationship? Worksheet for all group members

Preparation:

Gather required materials and review Session 5 Content Sheet.

Session Agenda:

1. Check-In

2. Complete Characteristics of Healthy Relationship Activity.

3. Discuss characteristics that are important to the participants.

4. Check-Out

Session 5 Content Sheet

1. Check-In Question

      Pick a relationship that you have seen in the media and tell the group what makes their relationship positive or negative?

2. Complete Characteristics of Healthy Relationship Activity.

      Pass out to each member 2 blank pieces of white paper and some markers or colored pencils. Then have participants complete each number on one side of the white paper. Guide the group through each number one by one.

1. When I see someone in a **healthy relationship**, I see them doing things like: (*you cannot use words, you must draw stick figures doing activities that are illustrative of a healthy relationship!*)

2. When I hear someone in a **healthy relationship**, I hear them saying things like: (*write words or statements you might hear people in a good relationships say to each other*)

3. When someone is in a **healthy relationship**, they usually feel like: (*what are the emotions you might feel if you were in a healthy relationship*)

4. When I hear or see someone in an **unhealthy relationship**, I see or hear them doing things like: *(you can write words or draw pictures)*

      After each picture has been completed have each member share with the group what they put down on their paper. As each member shares highlight the Characteristics of Healthy Relationships on the What Do I Want in a Healthy Relationship? Worksheet.

3. Discuss characteristics that are important to the participants.

      After completing the activity above pass out copies of the What Do I Want in a Healthy Relationship? Worksheet to each member. Review the Characteristics of Healthy Relationships and use examples from the participants' drawings to illustrate the eight characteristics of healthy relationships. Then move into the Other Things I Want and Need in a Relationship and discuss with participants what are other characteristics that are important to them in relationships.

4. Check-Out Question
      What is one thing you are taking away or have learned from the group today about healthy relationships?   (Adapted by Center for Healthy Teen Relationships, 2006)

What Do I Want in a Healthy Relationship?

Characteristics of Healthy Relationships

Respect
Being accepted and allowed to be who you are. No one should pressure you into doing things you are not comfortable with such as drinking, drugs, or unwanted physical contact.

Safety
Feeling safe both emotionally and physically. Emotional safety means you feel comfortable being you without fear of being put down. Physical safety means you are not being hurt or pressured into unwanted physical contact.

Support
Caring for you and want what is best for you. Your friends should understand if you can't hang out because you have to study or spend time with family.

Individuality
Feeling like you can be yourself; after all, being an individual is what makes you, you!

Fairness and Equality
Having an equal say in your relationships. From the activities you do together to the friends you hang out with, you should have equal say in the choices made in your relationships.

Acceptance
Friends or girlfriends/boyfriends accepting you for whom you really are. You shouldn't have to change who you are or compromise your beliefs to make someone like you.

Honesty and Trust
Honesty builds trust. You can't have a healthy relationship without trust! If you have ever caught your friend or boyfriend or girlfriend in a huge lie, you know that it takes time to rebuild your trust.

Communication
Talking face-to-face (not just by text) about your feelings. Listen to one another and hear each other out. Text messages, Facebook, or MySpace messages should be respectful; not mean, hurtful, or inappropriate.

Other Things I Want and Need in a Relationship

1. _____

2. _____

3. _____

(Adapted by Center for Healthy Teen Relationships, 2006)

APPENDIX H

SESSION 6 AND HANDOUTS

Session 6: Self-Esteem

Time: 50 minutes to 1 hour

Purpose:
- Educate participants on self-esteem and self-talk.
- Engage participants in discussion of self-talk and how it relates to low and high self-esteem.
- Support participants in eliciting their own positive self-talk.

Materials Required:

1 $1.00 Bill
Copy of You Never Lose Your Value Worksheet for facilitator

Preparation:

Gather required materials and review Session 6 Content Sheet.

Session Agenda:

1. Check-In

2. Complete You Never Lose Your Value Activity.

3. Discuss and educate participants on Self-Talk.

4. Check-Out

Session 6 Content Sheet

1. Check-In Question

   Tell the group one thing you like about yourself.

2. Complete You Never Lose Your Value Activity.

   Facilitators can utilize the Never Lose Your Value Worksheet in conjunction with the instructions below.

   Take out the $1.00 bill and tell the participants to imagine that the dollar bill is a $1,000 bill. Ask participants who would like to have the $1,000 bill. All the participants will raise their hand or say they want the $1,000 bill. Then the facilitator tells the participants that this $1,000 bill has been used to clean the bathroom floor and has been spit on. The facilitator can crumple up the $1,000 bill and then step on it. Facilitators can then ask the participants who still wants the $1,000 bill? The participants will still want the $1,000 bill despite everything the facilitator has said about the $1,000 bill. Then transition from talking about the $1,000 bill to talking about the participants as people. The facilitator can say, "That when you're born, you have value and as we go through life despite what happens or what people say your value is still there, just like the $1,000 bill. It is just our perception of our value that changes." Facilitators can utilize the You Never Lose Your Value worksheet to help facilitate this portion of the group.

3. Discuss and educate participants on Self-Talk.

   Facilitators can state that depending on how we perceive our value dictates what kind of self-talk we use with our selves. Ask the participants what they think self-talk is. Discuss with participants that self-talk is the messages we tell ourselves about ourselves. For example "I am a good person, I am stupid, I am smart, or I am ugly". Then ask participants what they think self-esteem is. Inform participants that self-esteem is an attitude that one has about themselves and is often considered a person's ideas of their self-worth and self-efficacy. Then prompt participants to discuss the differences between low and high self-esteem. Facilitators can utilize The Messages We Tell Ourselves: Self Talk Worksheet to discuss with participants what low and high self-esteem means and what self-talk looks like for low self-esteem and high self-esteem. Discuss with participants the type of self-talk they use with themselves and have them share examples of messages they tell themselves.

4. Check-Out Question

   What is a positive statement you can say to yourself?

64

You Never Lose Your Value

YOU NEVER LOSE YOUR VALUE

Motivational speaker Bobby Petrocelli was talking to middle school students when he asked for a one-dollar bill.

"Make believe this is a $1,000 bill. Who would want it?" Bobby asked, holding the bill above his head. Everyone's hand went up.

Bobby pretended to spit and blow his nose into the bill. He threw it on the floor, stomped on it, then asked the audience to imagine he was wiping the floor of the men's bathroom with it.

"Who wants this bill?" Bobby asked again. Everyone's hand was raised.

"Why would you want this bill?" Bobby asked.

"Because it's a thousand dollars," the audience replied.

"That's right," Bobby said. "It still has value. When you're born, you have value. Your value never changes. What changes is your *perception* of your value."

Bobby had used the $1,000 bill to say that a person can be bullied, spat upon, stomped, or dragged on the floor. But just like the $1,000 bill, the person will always retain his/her value.

You're a valuable, wonderful person regardless of what anyone says or does. Don't let others change your view of yourself.

There's **nothing wrong with you.** It's the bully who has the problem.

(Adapted by Goodstein, 2008)

65

The Messages We Tell Ourselves: Self –Talk

Self-talk is the inner voice inside our mind that tells us messages about our self and what is going on in our life that we do not necessarily say out loud.

Negative Self-Talk

Negative self-talk is the inner voice that makes us feel bad about our self and what we have going on in our life. For example:

I am stupid.
I am ugly.
Why would anyone like me?

Negative Statements I Say to Myself

_____

_____

_____

_____

Positive Self-Talk

Positive self-talk is the inner voice that makes us feel good about our self and what we have going on in our life. For example:

I am a smart person.
I am beautiful.
People like me.

Positive Statements I Say to Myself

_____

_____

_____

_____

APPENDIX I

SESSION 7 AND HANDOUTS

Session 7: Support Systems

Time: 50 minutes to 1 hour

Purpose:
- Educate participants regarding support systems.
- Assist participants in identifying and describing their personal support systems.
- Complete activity that integrates previous group sessions.

Materials Required:

Writing utensils for all group members
Copies of My Flower Activity for all group members

Preparation:

Gather required materials and review Session 7 Content Sheet.

Session Agenda:

1. Check-In

2. Complete My Flower Activity.

3. Share completed My Flower Activity with the group.

4. Check-Out

Session 7 Content Sheet

1. Check-In Question

Who is someone in your life that you feel supports you?

2. Complete My Flower Activity.

First have participants fill in the center of the flower with their name. Then have each of the participants fill in the petals with characteristics they like about themselves. During the previous week the group focused on self-esteem, it is important to have participants think back to the previous week and remember what they identified as liking about themselves. For example, "I am caring, funny, smart, generous" etc. It may be difficult for participants to identify positive traits about themselves. The facilitator may have to help participants and prompt them with questions or provide examples of characteristics.

After the center of the flower and the petals have been filled in have the participants fill in the stem and leaves of the flower with people that support them. The facilitator may say something like, "Remember last week when we had the activity with the $1000 bill and we talked about how sometimes when things happen or when people say certain things we lose our "petals" and we do not think those positive things about ourselves. So who helps keep your flower standing tall when some of your petals get taken away?" After filling in the people that support them underneath the flower where the roots are participants can fill in the things people do that make them feel supported. For example participants can fill in things like they talk with me, they spend time with me, or they help cheer me up by telling me jokes.

3. Share the completed My Flower Activity with the group.
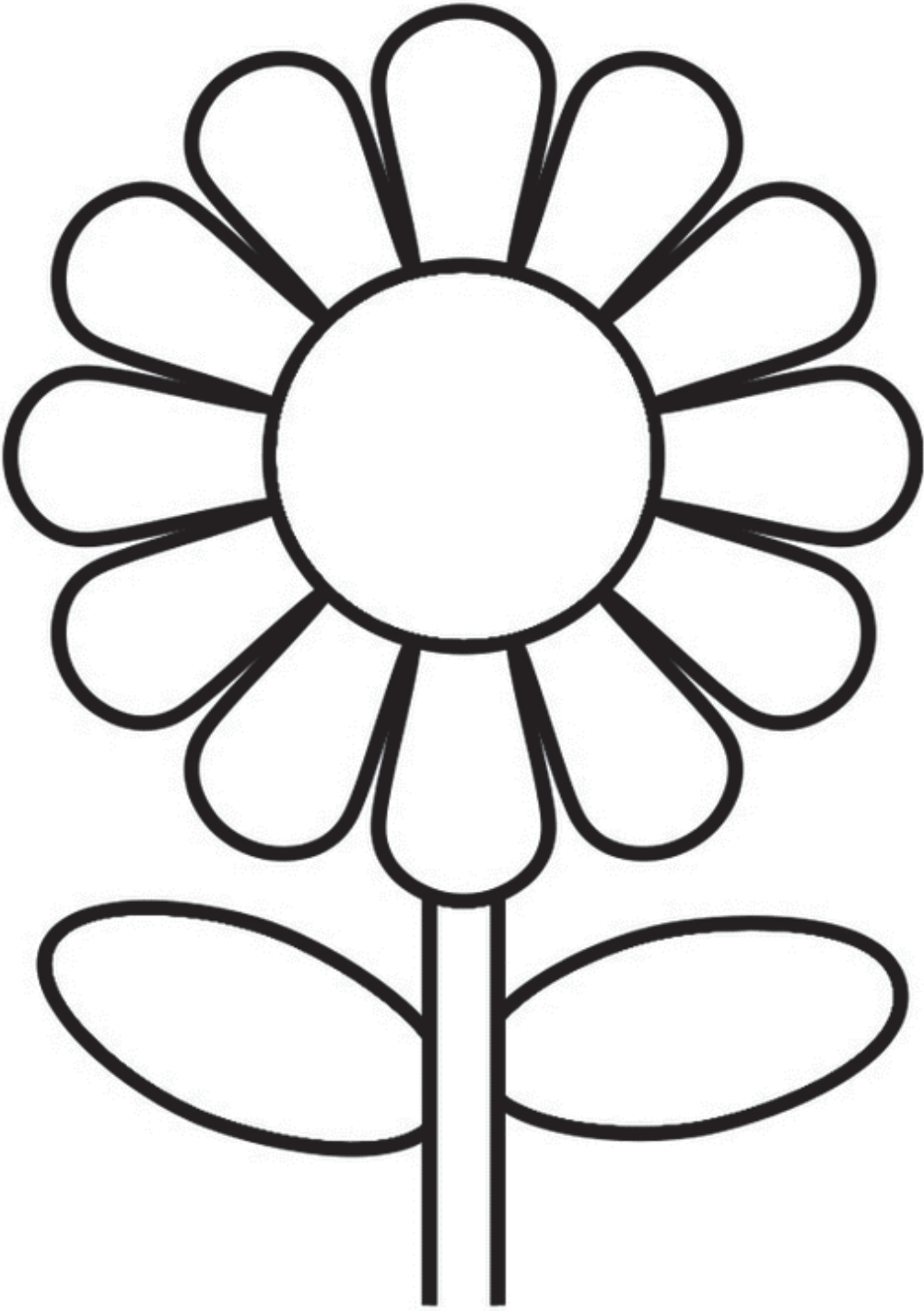
After completing the worksheet have participants go around and share what they have put on their flower. Participants do not need to share every item on their flower, but have each member share something with the group.

4. Check-Out Question

How can people best support you?

My Flower Activity

(Adapted by Cronin, 2013)

APPENDIX J

SESSION 8 AND HANDOUTS

Session 8: Termination

Time: 50 minutes to 1 hour

Purpose:
- Review progress made by participants.
- Facilitate ending of the group and provide participants with a transitional object.
- Complete Post Intervention Survey.

Materials Required:

Writing utensils for all group members
Copies of the Post Intervention Survey (Appendix M) for all group members
Special paper and envelopes for Letter to Myself Activity for all group members

Preparation:

Gather required materials and review Session 8 Content Sheet.

Session Agenda:

1. Check-In

2. Complete Post Intervention Survey

3. Complete Letter to Myself Activity

4. Check-Out

Session 8 Content Sheet

1. Check-In Question

How are you feeling about today being our last group session?

2. Complete Post Intervention Survey.

Have participants complete the Post Intervention Survey individually. Be sure their initials are filled in, so they can be compared to the Pre Intervention Survey following the completion of the group. See Appendix M for the Post Intervention Survey.

3. Complete Letter to Myself Activity

The Letter to Myself Activity is an opportunity for participants to reflect on what they have learned during the group. Participants will write these letters individually and place them in their envelopes provided. Encourage participants to write in the letter things they have learned and what they would like to remind themselves of in a month from the final group. On the envelope instruct the students to write "Open On:" and then the date one month from the final day of group. They can open the letters one month from the final day as a reminder of the group and what they have learned. Facilitators should emphasize participants' progress and accomplishments they have made during the group. After completing the Letter to Myself Activity have participants share with the group one reminder for themselves that they included in the letter.

4. Check-Out Question

Was the group overall helpful to you? Why or why not?

(Adapted by Cronin, 2013)

APPENDIX K

EVALUATION INSTRUCTION SHEET

Evaluation Instructions Sheet

Section 1
Section 1 of the evaluation is the Rosenberg Self-Esteem Scale, a 10-item self-report measure that assesses self-esteem. Participants will rate each item on a 4-point ordinal response scale from 1 (*Strongly Disagree*) to 4 (*Strongly Disagree*). After reverse scoring items 2, 5, 6, 8, and 9, each item should be summed so that higher scores indicate higher self-esteem.

Section 2
Section 2 is designed to evaluate participants' progress with communication skills. These questions were designed specifically for this curriculum. For all questions give "Strongly Disagree" 1 point, "Disagree" 2 points, "Agree" 3 points, and "Strongly Agree" 4 points. Higher scores indicate greater progress with bettering participants' communication skills.

Section 3
Section 3 is designed to evaluate participants' support systems and participants' level of compassion and empathy. These questions were designed specifically for this curriculum. For all questions give "Strongly Disagree" 1 point, "Disagree" 2 points, "Agree" 3 points, and "Strongly Agree" 4 points. Higher scores indicate greater progress with support systems and showing compassion and empathy.

Section 4
Section 4 appears only in the post intervention survey and consists of open-ended questions in which participants will write their response in the spaces provided. These questions will gather information regarding the knowledge participants gained, the overall helpfulness of the group, which topics specifically were considered to be the most helpful, and changes that can be made to better the group.

APPENDIX L

PRE INTERVENTION EVALUATION FORM

Pre Intervention Survey

Participant Initials: _____

1. Please select your current grade level.
   A. 6th Grade
   B. 7th Grade
   C. 8th Grade

2. What racial or ethnic group do you identify with?
   a) Latino or Hispanic
   b) White or Caucasian
   c) Black or African American
   d) Asian or Pacific Islander
   e) Native American
   f) Biracial or Multiracial (please specify) _____
   g) Other (please specify) _____

3. What is your age? _____ years old

Section 1
Below is a list of statements dealing with your general feelings about yourself. Please indicate how strongly you agree or disagree with each statement.

1. On the whole, I am satisfied with myself.

      Strongly Disagree   Disagree   Agree   Strongly Agree

2. At times I think I am no good at all.

      Strongly Disagree   Disagree   Agree   Strongly Agree

3. I feel that I have a number of good qualities.

      Strongly Disagree   Disagree   Agree   Strongly Agree

4. I am able to do things as well as most other people.

      Strongly Disagree   Disagree   Agree   Strongly Agree

5. I feel I do not have much to be proud of.

     Strongly Disagree   Disagree   Agree   Strongly Agree

6. I certainly feel useless at times.

     Strongly Disagree   Disagree   Agree   Strongly Agree

7. I feel that I'm a person of worth, at least on an equal plane with others.

     Strongly Disagree   Disagree   Agree   Strongly Agree

8. I wish I could have more respect for myself.

     Strongly Disagree   Disagree   Agree   Strongly Agree

9. All in all, I am inclined to feel that I am a failure.

     Strongly Disagree   Disagree   Agree   Strongly Agree

10. I take a positive attitude toward myself.

     Strongly Disagree   Disagree   Agree   Strongly Agree

Section 2

Below is a list of statements. Please indicate how strongly you agree or disagree with each statement.

1. I know how to use an "I" message.

     Strongly Disagree   Disagree   Agree   Strongly Agree

2. I am knowledgeable of effective ways to communicate my thoughts, feelings, and needs.

     Strongly Disagree   Disagree   Agree   Strongly Agree

3. I know what my personal communication style is.

Strongly Disagree   Disagree   Agree   Strongly Agree

4. I am able to utilize effective communication strategies.

Strongly Disagree   Disagree   Agree   Strongly Agree

5. I know the difference between a blaming message and an "I" message.

Strongly Disagree   Disagree   Agree   Strongly Agree

Section 3

Below is a list of statements. Please indicate how strongly you agree or disagree with each statement.

1. I can identify people in my life that support me.

Strongly Disagree   Disagree   Agree   Strongly Agree

2. I am supportive of important people in my life.

Strongly Disagree   Disagree   Agree   Strongly Agree

3. On a regular basis I do things that are compassionate and empathetic.

Strongly Disagree   Disagree   Agree   Strongly Agree

4. I use positive self-talk and am compassionate toward myself.

Strongly Disagree   Disagree   Agree   Strongly Agree

5. I am able to identify ways I take care of myself and others.

Strongly Disagree   Disagree   Agree   Strongly Agree

APPENDIX M

POST INTERVENTION EVALUATION FORM

Post Intervention Survey

Participant Initials: _____

Section 1

Below is a list of statements dealing with your general feelings about yourself. Please indicate how strongly you agree or disagree with each statement.

1. On the whole, I am satisfied with myself.

      Strongly Disagree   Disagree   Agree   Strongly Agree

2. At times I think I am no good at all.

      Strongly Disagree   Disagree   Agree   Strongly Agree

3. I feel that I have a number of good qualities.

      Strongly Disagree   Disagree   Agree   Strongly Agree

4. I am able to do things as well as most other people.

      Strongly Disagree   Disagree   Agree   Strongly Agree

5. I feel I do not have much to be proud of.

      Strongly Disagree   Disagree   Agree   Strongly Agree

6. I certainly feel useless at times.

      Strongly Disagree   Disagree   Agree   Strongly Agree

7. I feel that I'm a person of worth, at least on an equal plane with others.

      Strongly Disagree   Disagree   Agree   Strongly Agree

8. I wish I could have more respect for myself.

      Strongly Disagree   Disagree   Agree   Strongly Agree

9. All in all, I am inclined to feel that I am a failure.

      Strongly Disagree   Disagree   Agree   Strongly Agree

10. I take a positive attitude toward myself.

      Strongly Disagree   Disagree   Agree   Strongly Agree

Section 2

Below is a list of statements. Please indicate how strongly you agree or disagree with each statement.

1. I know how to use an "I" message.

      Strongly Disagree   Disagree   Agree   Strongly Agree

2. I am knowledgeable of effective communication strategies.

      Strongly Disagree   Disagree   Agree   Strongly Agree

3. I know what my personal communication style is.

      Strongly Disagree   Disagree   Agree   Strongly Agree

4. I am able to utilize effective communication strategies.

      Strongly Disagree   Disagree   Agree   Strongly Agree

Section 3

Below is a list of statements. Please indicate how strongly you agree or disagree with each statement.

1. I can identify people in my life that support me.

      Strongly Disagree   Disagree   Agree   Strongly Agree

2. I am supportive of important people in my life.

      Strongly Disagree   Disagree   Agree   Strongly Agree

3. On a regular basis I do things that are compassionate and empathetic.

     Strongly Disagree   Disagree   Agree   Strongly Agree

4. I use positive self-talk and am compassionate towards myself.

     Strongly Disagree   Disagree   Agree   Strongly Agree

5. I am able to identify ways I take care of myself and others.

     Strongly Disagree   Disagree   Agree   Strongly Agree

Section 4

Please write your response in the space provided.

What were three things you learned from participating in the group?
_____
_____
_____
_____

Was this group helpful overall? Why or why not?
_____
_____
_____
_____

Which topics do you think were most helpful?
_____
_____
_____
_____

What other topics or issues do you think need to be included for the group to be better?
_____
_____
_____
_____

APPENDIX N

CURRICULUM REFERENCES

References

Center for Healthy Teen Relationships. (2006). Building healthy teen relationships: Teen curriculum. Retrieved from http://idvsa.org/wp-content/uploads/2013/01/Healthy-Relationships.pdf

Cronin, T. (2013). *Butterfly Buddies*. East Whittier City School District Group Curriculums: Whittier, CA.

Goodstein, P. (2008). *200+ Reproducible Activity Sheets That Help Educators Take A Bite Out Of Bullying*. Warminster, Pennsylvania: Marco Products, Inc.

Kirby, B. (2012). *Grab Bag Guidance & Other Small-Group Counseling Topics For Middle School Students*. Warminster, PA: Marco Products.

Ophelia Project (2010). It Has a Name: Relational Aggression. Retrieved from http://www.opheliaproject.org/GirlsRA/GirlsMS.pdf

Therapist Aid. (2012). *"I" Statements*. Retrieved from http://www.therapistaid.com/co n t ent/0093.pdf

Therapist Aid. (2014). *Passive, Aggressive, and Assertive Communication*. Retrieved from http://www.therapistaid.com/content/0061.pdf

Rosenberg, M. (1965). *Society and the adolescent self-image*. Princeton, NJ: Princeton University Press.

REFERENCES

REFERENCES

Bachman, J., O'Malley, P., Freedman-Doan, P., Trzesniewski, K., & Donnellan, M. (2011). Adolescent self-esteem: Differences by race/ethnicity, gender, and age. *Self and Identity*, *10*(4), 445-473. doi:10.1080/15298861003794538

Biro, F., Striegal-Moore, R., Franko, D., Padgett, J., & Bean, J. (2006). Self-esteem in adolescent females. *Journal of Adolescent Health, 39*, 501-507. doi: 10.1016/j. jadohealth.2006.03.010

Brown, S., Nobiling, B., Teufel, J., & Birch, D. (2011). Are kids too busy? Early adolescents' perceptions of discretionary activities, overscheduling, and stress. *Journal of School Health*, *81*(9), 574-580. doi: 10.1111/j.1746-1561. 2011 .006 29.x

Burkett, J. (2013). *Girl's healthy relationships group*. Orange County Department of Education Group Curriculums: Santa Ana, CA.

Carlson, C., Uppal, S., & Prosser, E. (2000). Ethnic differences in processes contributing to the self-esteem of early adolescent girls. *The Journal of Early Adolescence, 20*(1), 44-67. doi: 10.1177/0272431600020001003

Center for Adolescent Health. (2006). *Confronting teen stress: Meeting the challenge in Baltimore city a guide for parents, teachers, and youth service providers*. Retrieved from http://www.jhsph.edu/research/centers-and-institutes/center-for-adolescent-health/_includes/Teen_Stress_Guide.pdf

Centers for Disease Control and Prevention. (2006). Youth risk behavior surveillance-United States, 2005: Surveillance summaries. *Morbidity and Mortality Weekly Report*, *55*, SS-5.

Center for Healthy Teen Relationships. (2006). Building healthy teen relationships: Teen curriculum. Retrieved from http://idvsa.org/wp-content/uploads/2013/01/Healthy-Relationships.pdf

Céspedes, Y., & Huey, S. (2008). Depression in Latino adolescents: A cultural discrepancy perspective. *Cultural Diversity and Ethnic Minority Psychology*, *14*(2), 168-172. doi: 10.1037/1099-9809.14.2.168

Chow, C., Ruhl, H., & Buhrmester, D. (2013). The mediating role of interpersonal competence between adolescents' empathy and friendship quality: A dyadic approach. *Journal of Adolescence*, *36*(1), 191-200. doi:10.1016/j.adolescence. 2012.10.004

Cole, J., & Scrivener, H. (2013). Short term effects of gossip behavior on self-esteem. *Current Psychology*, *32*(3), 252-260. doi: 10.1007/s12144-013-9176-3

Corey, M., Corey, G., & Corey, C. (2010). *Group: Process and practice*. Belmont, CA: Brooks/Cole, Cengage Learning.

Cronin, T. (2013). *Butterfly Buddies*. East Whittier City School District Group Curriculums: Whittier, CA.

Daughters, S., Gorka, S., Matusiewicz, A., & Anderson, K. (2013). Gender specific effect of psychological stress and cortisol reactivity on adolescent risk taking. *Journal of Abnormal Child Psychology*, *41*(5), 749-758. doi:10.1007/s10802-013-9713-4

De Wied, M., Branje, S., & Meeus, W. (2007). Empathy and conflict resolution in friendship relations among adolescents. *Aggressive Behavior*, *33*(1), 48-55. doi: 10.1002/ab.20166

Demir, M., & Urberg, K. (2004). Friendship and adjustment among adolescents. *Journal of Experimental Child Psychology*, *88*(1), 68-82. doi: 10.1016/j.jcep.2004.02.006

Drolet, M., & Arcand, I. (2013). Positive development, sense of belonging, and support of peers among early adolescents: Perspectives of different actors. *International Education Studies*, *6*(4), 29. doi: 10.5539/ies.v6n4p29

Erol, R., & Ulrich, O. (2011). Self-esteem development from age 14 to 30 years: A longitudinal study. *Journal of Personality and Social Psychology, 101*(3), 607-619. doi: 10.1037/a0024299

Goldstein, S., & Tisak, M. (2004). Adolescents' outcome expectancies about relational aggression within acquaintanceships, friendships, and dating relationships. *Journal of Adolescence,* 27, 283–302. doi:10.1016/j.adolescence.2003.11.007

Goldstein, S., & Tisak, M. (2010). Adolescents' social reasoning about relational aggression. *Journal of Child and Family Studies*, *19*(4), 471-482. doi: 10.1007/s10826-009-9319-1

Goodstein, P. (2008). *200+ Reproducible activity sheets that help educators take a bite bout of ullying*. Warminster, PA: Marco Products.

Green, Y., & Pasztor E. (2007). Research sequence meeting; Curriculum development projects [Meeting handout]. Long Beach, CA: California State University, Long Beach.

Guiao, I., & Thompson, E. (2004). Ethnicity and problem behaviors among adolescent females in the united states. *Health Care for Women International*, *25*(4), 296-310. doi: 10.1080/07399330490278330

Haraldsson, K., Lindgren, E., Mattsson, B., Fridlund, B., & Marklund, B. (2011). Adolescent girls' experiences of underlying social processes triggering stress in their everyday life: A grounded theory study. *Stress and Health*, *27*(2), e61-e70. doi:10.1002/smi.1336\

Harter, S., & Whitesell, N. (2003). Beyond the debate: Why some adolescents report stable self-worth over time and situation, whereas others report changes in self-worth. *Journal of Personality*, *71*(6), 1027-1058. doi: 10.1111/1467-6494 .71060 06

Hickman, L., Jaycox, L., & Aronoff, J. (2004). Dating violence among adolescents: Prevalence, gender distribution, and prevention program effectiveness. *Trauma, Violence, & Abuse, 5*(2), 123-142. doi: 10.1177/1524838003262332

Jacobs, C., Kuriloff, P., Andrus, S., & Cox, A. (2014). Reaching girls: If teachers want to reach girls, they must align their practices with girls' specific learning needs. *Phi Delta Kappan*, *96*(1), 68-135.

Kirby, B. (2012). *Grab Bag Guidance & Other Small-Group Counseling Topics For Middle School Students*. Warminster, PA: Marco Products.

LaRusso, M., & Selman, R. (2011). Early adolescent health risk behaviors, conflict resolution strategies, and school climate. *Journal of Applied Developmental Psychology*, *32*(6), 354-362. doi: 10.1016/j.appdev.2011.05.003

Leyba, E. (2010). How school social workers integrate service opportunities into multiple elements of practice. *Children & Schools*, *32*(1), 27-49.

Lourenço, O. (2012). Piaget and Vygotsky: Many resemblances, and a crucial difference. *New Ideas in Psychology*, *30*(3), 281-295. doi: 10.1016/ j.newideapsy ch.2011. 12.006

Maldonado, J., Malott, K., & Paone, T. (2008). Exploring group activity therapy with ethnically diverse adolescents. *Journal of Creativity in Mental Health*, *3*(3), 285-302. doi: 10.1080/15401380802347962

McGrath, B., Brennan, M., Dolan, P., & Barnett, R. (2014). Adolescents and their networks of social support: Real connections in real lives?. *Child & Family Social Work*, *19*(2), 237-248. doi: 10.1111/j.1365-2206.2012.00899x

Mongrain, M., Chin, J., & Shapira, L. (2011). Practicing compassion increases happiness and self-esteem. *Journal of Happiness Studies, 12*(6), 963-981. doi: 10.1007/s10 902-010-9239-1

Morin, A., Maïano, C., Marsh, H., Nagengast, B., & Janosz, M. (2013). School life and adolescents' self-esteem trajectories. *Child Development*, *84*(6), 1967-1988. doi: 10.1111/cdev.1208

Noonan, R., & Charles, D. (2009). Developing teen dating violence prevention strategies: Formative research with middle school youth. *Violence Against Women, 15*(9), 1087-1105. doi:10.1177/1077801209340761

Ophelia Project. (2010). *It Has a Name: Relational Aggression*. Retrieved from http://www.opheliaproject.org/GirlsRA/GirlsMS.pdf

Overbeek, G., Scholte, R., De Wied, M., De Kemp, R., & Engels, R. (2007). Early adolescent empathy, parental support, and antisocial behavior. *The Journal of Genetic Psychology*, *168*(1), 5-18.

Perry, D., & Pauletti, R. (2011). Gender and adolescent development. *Journal of Research on Adolescence, 21*(1), 61-74. doi: 10.1111/j.1532-7795.2010.00715.x

Rosenberg, M. (1965). *Society and the adolescent self-image*. Princeton, NJ: Princeton University Press.

Rudolph, K. (2002). Gender differences in emotional responses to interpersonal stress during adolescence. *Journal of Adolescent Health*, *30*(4), 3-13. doi: 10.1016 /S10 54-139x(01)00383-4

Schraml, K., Perski, A., Grossi, G., & Simonsson-Sarnecki, M. (2011). Stress symptoms among adolescents: The role of subjective psychosocial conditions, lifestyle, and self-esteem. *Journal of Adolescence, 34*, 987-996. doi: 10.1016/j.adolesce nce. 2010.11.010

Scott, W. (2008). Communication strategies in early adolescent conflict: An attributional approach. *Conflict Resolution Quarterly*, *25*(3), 375-400. doi: 10.1002/crq.213

Senn, D., & Bowman, S. (2007). *Bullying in the girl's world: A school-wide approach to girl bullying (grades 3-8)*. Chapin,SC: YouthLight.

Sontag, L., Graber, J., Brooks-Gunn, J., & Warren, M. (2008). Coping with social stress: Implications for psychopathology in young adolescent girls. *Journal of Abnormal Child Psychology*, *36*(8), 1159-1174. doi: 10.1007/s10802-008-9239-3

Subrahmanyam, K., & Greenfield, P. (2008). Online communication and adolescent relationships. *The Future of Children*, *18*(1), 119-146. doi: 10.1353/foc.0.0006

Therapist Aid. (2012). *"I" Statements*. Retrieved from http://www.therapistaid.com /content/0093.pdf

Therapist Aid. (2014). *Passive, Aggressive, and Assertive Communication*. Retrieved from http://www.therapistaid.com/content/0061.pdf

Valkenburg, P., Peter, J., & Schouten, A. (2006). Friend networking sites and their relationship to adolescents' well-being and social self-esteem. *CyberPsychology & Behavior, 9*(5), 584–90. doi: 10.1089/cpb.2006.9.584

Valle, J., Bravo, A., & Lopez, M. (2010). Parents and peers as providers of support in adolescents' social network: A developmental perspective. *Journal of Community Psychology*, *38*(2), 16-27. doi: 10.1002/jcop.20348

Van Doorn, M., Branje, S., VanderValk, I., De Goede, I., & Meeus, W. (2011). Longitudinal spillover effects of conflict resolution styles between adolescent-parent relationships and adolescent friendships. *Journal of Family Psychology*, *25*(1), 157-161. doi: 10.1037/a0022289

Vygotsky, L. (1978). *Mind in society*. Cambridge, MA: Harvard University Press.

Watson, D. (2012). Gender differences in gossip and friendship. *Sex Roles*, *67*(9), 494-502. doi: 10.1007/s11199-012-0160-4

Willmer, S. (2010). *Piaget's theory of cognitive development* [Class handout]. Fullerton, CA: California State University, Fullerton.

Yalom, I., & Leszcz, M. (2005). *Theory and Practice of Group Psychotherapy* (5th ed.). New York, NY: Basic Books.