

Understanding the Experience of Girls with EBD in a Gender-Responsive Support Group

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Abstract

This study examined the perceptions of adolescent girls with emotional and behavioral disorders (EBD) who were participating in a support group. The focus of the study was to explore the perceptions of the girls' friendships, connectedness with others, ability to establish and maintain relationships, and self-perceptions within the group. The sample consisted of five African American girls ages 15-19 attending a self-contained day school for students with EBD. The study design included three, semi-structured, individual interviews, participant observation of the support group, and collection of field notes and background data. Themes emerged in the areas of: (1) the appearance of normalcy; (2) the influence of negative experiences; (3) the lack of opportunity for exposure to female relationships and role models; (4) the positive influence of gender-responsive programming; and (5) the effects of the environment. Findings and recommendations for practice and future research are discussed.

KEYWORDS: emotional and behavioral disorders, girls, intervention

In general, girls are not identified as often as boys for special education services (American Association of University Women, 1992, 1998; Callahan, 1994; Caseau, Luckasson, & Kroth, 1994). Within the category of emotional and behavioral disorders (EBD), girls are also underidentified (Wehmeyer & Schwartz, 2001). The discrepancy in prevalence rates in EBD has been attributed to girls' exhibition of more internalizing behaviors, such as anxiety, depression, and withdrawal, which are often considered to be more tolerable and less disturbing than the externalizing behavior of boys (Kauffman & Landrum, 2009; Reid, Gonzalez, Nordness, Trout, & Epstein, 2004; Shepard, 2010). In fact, identification of girls with EBD often occurs during hospitalizations rather than in the special education referral

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process (Caseau et al., 1994). Some research shows, however, that girls do demonstrate behaviors to an extreme degree, thus documenting a need to consider their specific needs (Cullinan, Osborne, & Epstein, 2004; Salk, 2004).

Perceptions of girls with EBD may also contribute to their under-identification. Girls with EBD are often viewed in a less than positive manner; some professionals even express aversion to working with them (Rice, Merves, & Srsic, 2008; Salk, 2004). Moreover, many professionals feel unprepared to work with these girls, which may be explained by the scarcity of research on the subject of girls with EBD and interventions proven to be both appropriate and effective.

Few research studies exist that are specific to understanding the characteristics and experiences of girls with EBD, and interventions for girls with EBD tend to rely on blanket interventions geared toward behaviors more often exhibited by boys (Oswald, Best, Coutinho, & Nagle, 2003). Research into the biological and emotional development of girls makes it clear, however, that generalizations from research on boys is not always appropriate (Bell, Foster, & Mash, 2004; Burke, Keaton, & Pennell, 2003; Hipwell & Loeber, 2006). There is a small but growing amount of literature on girls and their unique mental health and behavioral characteristics (Kann & Hanna, 2000; Oswald et al., 2003). One increasingly studied intervention for girls is the use of support groups to foster healthy emotional development (Hossfeld, 2006).

Attempts have been made by organizations and communities to develop gender-responsive programs for females. These programs, mostly in the juvenile justice field, have been developed in hopes that such interventions meet the needs of girls in corrections (Wolf, Graziano, & Hartney, 2009). Principles to guide promising female programming have also been developed to target delinquency, direct policy and program development, and examine the use and key features of gender-specific programs (Bloom, Owen, & Covington, 2005).

One organization, the Girls Study Group (GSG), in association with the Office of Juvenile Justice and Delinquency Prevention (OJJDP), developed a base of research to understand girls' patterns of delinquency, risk and protective factors, effective interventions, gaps in research, effective ways to communicate findings, and ways to influence policy (Zahn, Hawkins, Chiancone, & Whitworth, 2008). GSG has carried out numerous research efforts, one of which evaluated programs designed to prevent or reduce female delinquency. Girls Circle, developed by Hossfeld and Taormina (1998), is one of the interventions reviewed by the GSG and was cited as a promising approach to improve social-emotional development for girls (Hossfeld, 2006).

Girls Circle focuses on needs that are specific to female development and makes use of a structured support group model for girls between the ages of nine and 18. This gender-specific, relational-cultural empowerment model bolsters girls' healthy development within a peer support group by encouraging positive, relationship-based experiences.

For the most part, existing research on students with EBD does not consider gender in either academic or behavioral intervention analyses (Rice & Yen, 2010). Recognizing that common interventions for both genders may not be meeting the needs of girls with EBD, this study sought greater insight into the relational experiences of a sample of young women in a school for students with EBD. This study utilized the Girls Circle curriculum and qualitative methodology to explore the experiences of adolescent girls. An attempt to gain insight into the experience of girls with EBD as they participated in a Girls Circle was guided by the following research questions:

1. How do girls with EBD describe their relational experiences as they participate in a Girls Circle, a gender-responsive, structured, support group curriculum?
 - a. How do girls with EBD perceive the meaning of friendship?
 - b. How do girls with EBD perceive their connectedness to others?
 - c. How do girls with EBD perceive their ability to establish and maintain relationships with others?
2. How do girls with EBD describe themselves as they participate in a Girls Circle, a gender-responsive, structured, support group curriculum?

Theoretical Framework

Relational-Cultural Theory

Relational-cultural theory (RCT), developed by Jean Baker Miller (1976), established the view that psychological development differed for females and was an outgrowth of connection rather than of isolation. This differs from traditional theories of development that value independence over dependence (Jordan, 2001). One of the major tenets of RCT is that emotional connection for females leads to emotional growth (Miller & Stiver, 1997). Some research about girls with behavioral issues has shown relational factors to be social risk factors for girls. These social risk factors include poor parenting practices and family dysfunction, mistreatment or abuse, and association

with deviant peers (Hipwell & Loeber, 2006). Gender-responsive support group models reflect the characteristics of RCT and, thereby, may result in effective interventions for girls (Hipwell & Loeber, 2006).

Social Constructionist Theory

Qualitative research is grounded in the idea that meaning is socially constructed (Merriam, 2002). According to social constructionist theory, knowledge is gained through social interaction and collaboration (Berger & Luckmann, 1966; Vygotsky, 1978). This qualitative study aimed to better understand the experiences and perceptions of adolescent females with EBD as they navigated through a system that has only minimally accounted for their existence through the use of interventions that are not developed with gender in mind (Burke et al., 2003; Hipwell & Loeber, 2006; Wehmeyer & Schwartz, 2001). The question of just how these girls changed in order to fit into a predominantly male setting and how these modifications have influenced their ability to relate to themselves and others is raised.

Methods

With so little information in the field on girls with EBD and even less known about the experiences of girls with EBD in particular, an open-ended approach better serves the need to provide the field with further information. Qualitative methodology that merges direct interaction with analytical observation presents itself as a place to begin to develop a base of knowledge regarding the experiences of these young women. The goal of this research study was to gain an experiential perspective of adolescent girls with EBD as they participated in a gender-responsive support group model.

Participants

The population of this study consisted of female students enrolled in a private, self-contained day school program in suburban Washington D.C. The students in the day school range in age from 13 to 21. To be considered for the study, girls needed to be students in the day school program and have an Individualized Education Program (IEP) that identified them as having an emotional or behavioral disability. Potential study participants received an invitation to the Girls Circle and voluntarily completed an assent/consent form. Verbal consent from parents or case managers for those girls who were wards of the state was obtained with the help of the school's clinical director. All girls participating in the Girls Circle were also evaluated using the Scale for Assessing Emotional Disturbance (SAED). In the event that a girl in the school was not identified for special education services

under the category of EBD, a qualifying score on the SAED would have allowed for participation in the study.

Five girls of African American descent agreed to participate in the Girls Circle and related study. Participation of a small number of girls was appropriate considering the nature of this population and follows the suggestion in the Girls Circle Facilitator Manual (Hossfeld & Taormina, 2007) that smaller groups of four or five may be more appropriate for young women who have issues with trust. The girls in this study ranged in age from 15 years old to 19 years old, and the ethnicity of the girls was reflective of the population at the school.

All of the girls in this study had a history of behavioral or learning challenges that were often exacerbated by excessive truancy and poor social ability with both peers and adults. The five participants provided an interesting snapshot of girls with EBD when considering both background and individual character as described below.

Briana. As one of the older girls in the group, 19-year-old Briana had been enrolled in the school for 3.5 years and was in the 12th grade at the time of the study. Briana was identified as having an EBD in addition to bi-polar disorder and a history of drug abuse. Briana demonstrated a greater ability academically and was hindered mostly by truancy and disruptive behaviors that resulted in a lack of participation or removal from class. Over the years, Briana had shown improvement and was on track to graduate at the time of the study. She was involved with the juvenile justice system and on trial for assaulting another student outside of school. Briana was the mother of a one year-old daughter and lived with her mother and step-father. She attended six of the 10 Girls Circle sessions.

Faith. At the time of the study, Faith had been enrolled in the school for 1.5 years and was a 16-year-old, ninth grade student. She was identified as having an EBD in addition to disruptive behavior disorder and attention deficit hyperactivity disorder (ADHD). Faith had academic challenges specific to reading but had particular issues with comprehending social cues. These two matters combined often resulted in general misunderstandings and confrontation for Faith. Faith had no record of involvement with the juvenile justice system and lived with her biological mother and older brother. She attended seven of the 10 Girls Circle sessions.

Jackie. As the oldest girl in the study, Jackie had been enrolled in the school for 1.5 years at the time of the study and was a 19-year-old, 10th grade student. She was identified as having an EBD in addition to bi-polar disorder and a history of drug abuse. Jackie, though academically capable, was mostly held back by her labile moods whether she was experiencing extreme lethargy or hyperactivity, often the

result of inconsistent use of prescribed medication, which resulted in truant or disruptive behavior. Her drug abuse led to involvement in the juvenile justice system for possession of marijuana. At the beginning of the school year, Jackie had been living with her mother but then moved in with her father. It was specifically noted by the clinical director that both parents were supportive of Jackie. Jackie attended seven of the 10 Girls Circle sessions.

Rachel. At the time of the study, Rachel had been enrolled in the school for a period of four months and was a 15-year-old, 10th grade student. She was identified as having an EBD in addition to bi-polar disorder and intermittent explosive disorder. Rachel, having the most promising ability academically, was also held back by disruptive behavior and truancy. She had a history of running away and also struggled with recognizing and understanding social cues. Rachel did not have a history of involvement in the juvenile justice system but was committed to the Department of Social Services as a voluntary placement and lived in a group home. She was in contact with her biological mother and the plan during her placement aimed toward reunifying the family. Rachel attended six of the 10 Girls Circle sessions.

Zoey. Enrolled in the school for 3.5 years, Zoey was 17 years old and in the 11th grade. She was identified as having an EBD in addition to mood disorder. Zoey's challenges in reading presented the greatest challenge to her in school and inhibited her willingness and ability to participate at a level similar to that of her peers. She also had history of running away which has resulted in significant time away from school. Zoey did not have a history of involvement in the juvenile justice system but was committed to the Department of Social Services and lived in a two-parent foster home. Zoey did not have contact with her biological mother but was permitted to talk with extended family members under supervision. Zoey attended five of the 10 Girls Circle sessions.

Qualifying Scores on the SAED

The Scale for Assessing Emotional Disturbance (SAED) was used to validate the girls' identification as having an EBD (Epstein, Nordness, Cullinan, & Hertzog, 2002). The SAED is a standardized and norm-referenced scale that assists in the identification of students eligible for special education services under the federal definition of emotional disturbance, and it has been established as a valid and reliable instrument for assessing this population (Epstein & Cullinan, 1998). Overall, the developers of the assessment suggest that users of the SAED can have confidence in its results as preliminary research demonstrated both validity and reliability (Epstein & Cullinan, 1998).

The facilitators of the Girls Circle completed the scale. One facilitator was the clinical director at the school and, the other, a special education teacher. Both facilitators were Caucasian females. Scores calculated from both Girls Circle facilitators confirmed that the five study participants did, in fact, meet the criteria as students with EBD. For each subscale, a higher score is considered to be more deviant so that a percentile rank above 91 or a standard score above 13 on any one of the subscales may suggest that a student should be identified as having an EBD. Tables 1 and 2 provide the percentile ranks and standard scores according to each scorer and study participant when compared to the NonED norms.

Measures

This qualitative design included semi-structured, individual interviews with the girls participating in the Girls Circle and participant observation of the Girls Circle sessions. Additionally, structured interviews with social workers were included to obtain background information on the study participants.

Interviews. This study made use of three, semi-structured interviews. These semi-structured interviews contained a combination of structured and open-ended questions, and the order and wording of the questions varied according to each participant (Merriam, 2002). The use of a semi-structured interview protocol guided the researcher through the interview process with each participant so that a general focus was maintained (Patton, 1990). At the same time, an open-ended and less structured design permitted the girls to respond in unique ways specific to their experience (Merriam, 1998).

Interviews were scheduled approximately three weeks apart and were conducted before, during, and following implementation of the Girls Circle curriculum. The first interview was designed to elicit information as to how the girls were feeling about their relationships and current participation in the general groups being run at the school.

Second interviews were conducted during the implementation of the Girls Circle curriculum. Again, one-on-one, semi-structured, conversational interviews were conducted with each girl. This interview was more closely aligned with the research questions and served as the qualitative indicator of how the girls felt during the implementation of the Girls Circle.

The third and final interview was conducted following completion of the implementation of the Girls Circle. This interview served as a qualitative post-test, included similar questions from the other interviews, but also incorporated the Girls Circle Satisfaction Survey

Table 1
Percentiles for Study Participants Compared to the NonED Normative Sample

| SAED Subscale | Scorer 1 | | | | |
|----------------------------|----------|-------|--------|--------|------|
| | Briana | Faith | Jackie | Rachel | Zoey |
| Inability to Learn | 84 | 75 | 84 | 50 | 84 |
| Relationship Problems | 50 | 50 | 84 | 91 | 75 |
| Inappropriate Behavior | 99 | 95 | 98 | 84 | 91 |
| Unhappiness or Depression | 91 | 75 | 98 | 91 | 84 |
| Physical Symptoms or Fears | 91 | 63 | 91 | 91 | 75 |
| SAED Quotient | 95 | 81 | 98 | 91 | 90 |
| SAED Subscale | Scorer 2 | | | | |
| | Briana | Faith | Jackie | Rachel | Zoey |
| Inability to Learn | 98 | 95 | 75 | 37 | 91 |
| Relationship Problems | 50 | 91 | 84 | 98 | 91 |
| Inappropriate Behavior | 99 | >99 | 98 | 84 | 95 |
| Unhappiness or Depression | 75 | 84 | 95 | 98 | 98 |
| Physical Symptoms or Fears | 37 | 91 | 99 | 91 | 98 |
| SAED Quotient | 90 | 99 | 98 | 95 | 99 |

Note. A percentile rank above 91 in any one category indicates that a child should be identified as ED. Adapted from "Scale for Assessing Emotional Disturbance," by M. Epstein and D. Cullinan, p. 37, Copyright 1998 by PRO-ED, Inc.

(see Figure 1). The Girls Circle Satisfaction Survey was comprised of seven items rated on a four-point scale and four, open-ended interview questions regarding participants' experience in the Girls Circle.

The researcher also conducted structured interviews with the social worker assigned to each study participant in order to obtain background data on the girls. Each social worker was based in the school and was known to the researcher.

Participant observation. The researcher in this study attended each Girls Circle session as participant observer. Participant observation, as often found in qualitative research, was bolstered by the individual, face-to-face interviews conducted throughout the study (Patton, 1990). Participant observation occurred each time the Girls Circle convened. The participant observer often assisted as a co-facilitator but mostly served the main facilitators as a teacher's aide would serve a teacher. In this way, the researcher assisted in planning for the group,

Table 2
Standard Scores for Study Participants Compared to the NonED
Normative Sample

| SAED Subscale | Scorer 1 | | | | |
|----------------------------|----------|-------|--------|--------|------|
| | Briana | Faith | Jackie | Rachel | Zoey |
| Inability to Learn | 13 | 12 | 13 | 10 | 13 |
| Relationship Problems | 10 | 10 | 13 | 14 | 12 |
| Inappropriate Behavior | 17 | 15 | 16 | 13 | 14 |
| Unhappiness or Depression | 14 | 12 | 16 | 14 | 13 |
| Physical Symptoms or Fears | 14 | 11 | 14 | 14 | 12 |
| SAED Quotient | 124 | 113 | 130 | 120 | 119 |
| SAED Subscale | Scorer 2 | | | | |
| | Briana | Faith | Jackie | Rachel | Zoey |
| Inability to Learn | 16 | 15 | 12 | 9 | 14 |
| Relationship Problems | 10 | 14 | 13 | 16 | 14 |
| Inappropriate Behavior | 17 | 20 | 16 | 13 | 15 |
| Unhappiness or Depression | 12 | 13 | 15 | 16 | 16 |
| Physical Symptoms or Fears | 9 | 14 | 17 | 14 | 16 |
| SAED Quotient | 119 | 135 | 131 | 124 | 134 |

Note. Guidelines for Interpreting the Five SAED Subscale Standard Scores Related to the Federal Definition of ED. 17-20 = Very likely child has ED; 14-16 = Likely child has ED; 1-13 = Unlikely child has ED. Adapted from "Scale for Assessing Emotional Disturbance," by M. Epstein and D. Cullinan, p. 37, Copyright 1998 by PRO-ED, Inc.

provided materials as needed, and debriefed with the facilitators following the Girls Circle sessions.

The girls were fully aware of why the researcher was present. It is important to note that the students in the school were already aware of the researcher's presence as part of her duties as a university supervisor; hence, she was not seen as a stranger. Participant observation was an appropriate choice for this study as it is used extensively in educational research and has historic roots intellectually in the academic disciplines of anthropology and sociology.

Validity and reliability of qualitative measures. This study consisted of an intense, three-part, interview process, participant observation of all activities, and the collection of basic demographic data relevant to the study. Verbatim transcription of interviews for use in analysis went beyond the researcher's view of what was significant and allowed for thorough review and understanding (Maxwell, 2005). Additionally, detailed field notes were kept in a way that separately

| | Never True (1) | Sometimes True (2) | Usually True (3) | Always True (4) |
|---|----------------------|--------------------------|------------------------|-----------------------|
| 1. I could share what I was thinking in Girls Circle. | 1 | 2 | 3 | 4 |
| 2. I could ask Girls Circle leaders for help. | 1 | 2 | 3 | 4 |
| 3. Everyone supported me when I made decisions about my life in Girls Circle. | 1 | 2 | 3 | 4 |
| 4. Everyone respected me in Girls Circle. | 1 | 2 | 3 | 4 |
| 5. Girls Circle leaders focus on what I'm good at. | 1 | 2 | 3 | 4 |
| 6. Girls Circle is fun. | 1 | 2 | 3 | 4 |
| 7. No one shares others' secrets in Girls Circle. | 1 | 2 | 3 | 4 |
| 8. What have you learned about yourself since starting Girls Circle? | | | | |
| 9. What have you learned about the other girls in Girls Circle? | | | | |
| 10. What have you learned about relationships from Girls Circle? | | | | |
| 11. Have you changed in any way after being a part of Girls Circle? | | | | |

Figure 1. Girls Circle Satisfaction Survey. Adapted from "Girls Circle General Survey," by B. Hossfeld and G. Taormina, 2007, *Revised Girls Circle Evaluation Tool Kit*, p. 22. Copyright 2007 by Girls Circle Association and Ceres Policy Research.

described the researcher's observations and interpretations during participant observation in an effort to avoid misinterpretation or false claims (Lofland, Snow, Anderson, & Lofland, 2006). In addition, the study utilized triangulation through the use of multiple interviews and ongoing observation and document review, which allowed for all information to be compared and analyzed.

Researcher reflexivity is an important component to control for bias in qualitative research. The importance of "critical self-reflection on one's biases, theoretical predispositions, preferences, and so forth" was recognized and accounted for throughout data collection and analysis (Schwandt, 2001, p. 224). In order to address reflexivity, the researcher collaborated with the Girls Circle facilitators before, during, and following the scheduled sessions. This collaboration served as a debriefing to allow for time to compare observations and opinions regarding happenings during each session. This time also allowed for discussion regarding the impact that participation may or may not

have been having on the girls' overall school experience or concerns that developed throughout the research period.

This study also utilized peer review by requiring an evaluation of interview protocols before use in addition to an evaluation of the coding procedure and interpretation of those codes. Peer review was employed before the start of data collection, continued as themes emerged, and served as a guide during data analysis and the writing process. Inter-rater reliability was found to be consistent among reviewers who evaluated the coded data before the final writing process commenced.

Procedures

The Girls Circle facilitators evaluated the curriculum and, based on the needs of the girls in the group, chose the 10-week theme titled Relationships with Peers and opted to adapt the last session from week eight of the theme titled Friendship, which was thought to include a more suitable closing activity. These session themes encompassed topics related to the girls' development of relationships with themselves and others in addition to topics associated with acceptance of self and of others. Groups were held every Monday morning at 10:00 a.m. for one hour, and the topics of the sessions were: (1) Connecting with Each Other; (2) "Labels"—Exploring New Perspectives; (3) Expressing Myself; (4) Accepting All Different Parts of Myself; (5) Cultivating Respect; (6) Giving Voice to Feelings, Part I; (7) Giving Voice to Feelings, Part II; (8) Romantic Relationships: What is It Worth to You?; (9) Girlfights or Girlfriends; and (10) Appreciation Celebration.

Because the curriculum was not written specifically for girls with learning or emotional disabilities, the facilitators of the group met weekly to plan and adapt the session materials to meet the needs of the girls. Consideration of reading ability and capacity to comprehend were taken into account in addition to the social dynamics of the group. As a result, general understanding of the topics seemed to work well for the girls as long as ideas and concepts could be repeated or rephrased.

Each week followed the Girls Circle format, which organizes each session into the following six parts: (1) Opening Ritual—an action that marks the beginning of the session in an attempt to set the tone of the group; (2) Theme Introduction—a description of the session topic, discussion, and activity; (3) Check-In—an opportunity for girls to, one at a time, share experiences, feelings, or ideas with other members of the group; (4) Activity—an opportunity for girls to express experiences and beliefs through a variety of verbal, non-verbal, creative, and experiential forms; (5) Sharing of Activity—girls come

back together to share their experiences of the activity through reflection and discussion to promote social connection; and (6) Closing Ritual—an action that marks the completion of the group, emphasizes the importance of the group process, and positively transitions participants out of the session (Hossfeld & Taormina, 2007).

Results

Many themes emerged from the data and were coded into sub-themes of friendship, connectedness, the ability to establish and maintain relationships, and perceptions of self. The subthemes were further coded across research questions that resulted in following categories: (1) the appearance of normalcy; (2) the influence of negative experiences; (3) the lack of opportunity for exposure to female relationships and role models; (4) the positive influence of gender-responsive programming; and (5) the effects of the environment. Each category below includes at least two sample quotations from the voices of the girls in the study.

Appearance of Normalcy

The girls in this study seemed to have similar views on connectedness and relationships to those that might be expected of their typically developing peers. Responses during the interview process demonstrated an element of normalcy that was unexpected considering the severity of the behaviors often exhibited by the girls. Findings indicated that, in friendships, these girls with EBD were looking for trust, loyalty, and honesty, acceptance and respect, and an element of sacrifice and dedication. Common language throughout the girls' responses to questions regarding friendship and qualities they look for in those they consider to be friends revolved around trust, loyalty and honesty. These terms were defined by the girls on numerous occasions as "keeping it a hundred" which was interpreted to mean acting in a 100% honest and upfront manner. For example, Briana described:

I'm the type of person to keep it a hundred with you. I don't have to cut cards and I feel as though if you're going to be a good friend to me, I don't need you to have to cut cards. I just want you to be upfront with me. So, honesty, loyalty, and trust in a friendship...It's a lot.

Additionally, when the girls think about what it means to connect with others, they are looking for someone to be there for them, for openness yet confidentiality, and time to develop a connection. Jackie described her thoughts on this as follows:

A friend has to be loyal, honest, respectful. They have to be someone I can talk to when I have a problem. I want a friend who is...a friend in deed instead of a friend in need. I don't want a friend who is going to be there for you only when they want something. I want a friend who is going to be there regardless of what I'm going through. Talk to them about problems, what I'm going through at home. You understand? That I don't have to hear it from the whole school because of that one person that goes and tells 'em. I don't like that. I'm a very truthful person. I'm very honest. And, I respect people. And, I'm very real. I don't like fake people.

What this reveals underneath all of the issues these girls deal with on a daily basis is that these young women have what may be considered to be a conventional understanding of the elements that are more likely to result in healthy and lasting relationships. It can be concluded that girls with EBD do, in fact, value friendship and connection with others and express a desire to develop and maintain positive relationships.

Influence of Negative Experiences

As a result of predominantly negative relational experiences, the girls have developed protective measures that steer them away from what would be considered appropriate for typically developing adolescent females as examined through relational-cultural theory (RCT). When the girls considered their ability to establish and maintain relationships, they expressed that they are seeking commonality and understanding while trying to avoid jealousy, competition, and negative influences. The girls had difficulty speaking to their actual ability to establish and maintain relationships but, once again, they did have a clear idea of and were able to formulate what establishing and maintaining relationships means to them. While commonality and understanding were the main elements of a friendship the girls looked for, they commented more frequently on the negative factors that prevented relationships from establishing or lasting. Jealousy and competition, as the most common problem encountered by the girls, presented as a perceived issue and, ultimately, resulted in their reported avoidance of other females in order to evade such negativity. Jackie had a particular issue with a female outside of school and stated:

It is difficult because I don't want it...I've been so in denial of her being jealous of me, but it's like, now, look at the bigger picture. Females...They bring too much. They bring drama.

It's jealousy. And, that's it. Drama and jealousy. And, it's like, you get so fed up with it, it's like, okay, well whatever.

Faith had also experienced a situation with a female outside of school and described her experience and how she, ultimately, could no longer be friends with the individual:

My number one best friend that I was talking about in group... We're not best friends no more. And, it was just how she was. I didn't approve of it. And, on top of that, I was like...I didn't know she was talking behind my back until maybe, like, last week. So, that really...That really ticked me off. Cause I feel as though, you're my best friend. Why should you talk about me? It's not a competition. BUT, that's how she tried to make things feel. And, it was like, I just had to cut her off. You do you. I do me.

These feelings may be heightened for these particular girls because of the nature of their underlying emotional issues which often trap them in negative emotional cycles (Christensen, 2007; Cullinan et al., 2004; Henning-Stout, 1998). Many of the girls, when asked, commented that, in general, they did not have very many friends and were quick to condemn a friendship as a protective measure to avoid any further emotional discomfort. The nature of the school environment itself may also be a contributing factor to their relational challenges considering that almost all students in the school struggle with very similar social problems. The issue of time to establish connections with others also presents here considering that placement for most students in schools such as this are typically meant to be temporary. This may serve to add to the challenge of establishing and maintaining positive relationships simply due to lack of both time and opportunity.

Finally, all of the girls referred to looking ahead to their future as a reason for staying away from peers, especially females. The overall negativity experienced, resulting in problems for the girls both in school and in their personal lives, meant that they viewed avoidance as another protective measure that ultimately decreased the chance that they would make poor decisions that could potentially hold them back. Briana shared that her relational problems with females had been an ongoing problem from a young age:

I have like, personally, ever since elementary, I have always had a problem with keeping female friends. I have always had that problem cause my attitude is very, like...I have a short fuse. And, like, I always found myself arguing with a

female. And, it's like, with a dude, I don't need to do that. It's like, me and a dude could click more than me and a female can. And, like, that's why I have, like, I really only have like a certain amount of females I mess with...Like...I could call them...Those are my friends. We can hang out. We can do this. We can do that. But, then, it's like, when I come to my male best friends, it's like, aw yeah, I know him. But, it's like female-wise? No.

This way of thinking illuminates how opportunities such as those provided by gender-responsive programs like Girls Circle may increase the ability of girls with EBD to establish and maintain relationships, resulting in exposure to more positive interactions with others in a way that encourages proper emotional development.

Lack of Opportunity or Exposure to Positive Female Relationships and Role Models

RCT describes the ways in which girls develop a sense of self within relationships as they connect with others in meaningful and positive ways (Miller, 1976; Miller & Stiver, 1997). This study found that girls with EBD report missing these important connections in their lives, which is likely inhibiting emotional growth and may very well be contributing to an inability to develop healthy relationships with female counterparts. In Faith's words, "I don't have a lot of friends. I have family. I don't have any friends outside of here. Cause I stay to myself." Additionally Jackie explained:

Mostly what works for a lot of girls is no drama. Basically, cause a lot of females I noticed these days do not like to hang around other females. Cause for the simple fact that a whole rack of females together just causes drama. I don't have no relationships with nobody. I just know them. I stay to my...I want to stay to myself, but it's kind of hard to do in this school. I just want to focus on my goals right now. Cause when you have a boyfriend or if you have a girlfriend, all they do is mess up what you really want to do because there's always going to be arguments. Relationships are not what you want when you're going through a life change.

Minimal exposure to healthy relationships, a theme that presented consistently throughout the interviews with the girls, meant that while the girls had opinions on their relational experiences, they had few positive examples of which to speak. Additionally, the potential for the girls to have a greater amount of experience with and, therefore, a greater level of comfort with male counterparts is another

factor to consider as girls with EBD are often schooled in classes where the majority of students are male (Reid et al., 2004). The possibility exists that, as a result of being schooled predominantly with boys, the girls have not had enough exposure to or experience in healthy female relationships.

What must be considered is the possibility that these girls are being denied the opportunity to develop friendships and connect in ways that are supported by a relational-cultural model that may, in the end, promote more suitable opportunities designed specifically around the unique development of adolescent females. This lends support to the use of interventions such as Girls Circle, which consider gender in both planning and implementation, to provide opportunities for relational growth with peers for girls with EBD, especially with those that are female.

Positive Influence of Gender-Responsive Programming

As reported by the girls, the Girls Circle had a positive influence on their relationships with each other, and the overall experience appeared to have constructive outcomes for both their friendships and feelings of connectedness with each other. For example, the girls demonstrated a desire for acceptance and respect but also an understanding that this must be offered by each person involved in a friendship. In a conversation about advice to Rachel, Briana stated:

Briana: Can I have the Talking Stick? I have to give everybody feedback, I'm sorry. Rachel, I am very much proud of you, also, for what you...I thought you was going to do it and you did not do it. I am very much proud. Faith is proud. Jackie and Zoey is proud, too.

Faith: Oh, I'm definitely proud of her.

While the girls generally expressed themselves through their personal, negative experiences, they had an overall awareness of their roles in relationships and that a certain level of sacrifice and dedication is needed in order to put forth the effort to truly be there for someone. Elements of RCT could be seen in the girls' actions toward each other throughout the course of the study as they could be observed in their attempts to support and offer guidance to one another. The girls reported that their relationships had improved with each other as a result of participation in the group, and they all expressed interest in future groups that might be held. Faith commented:

One minute I was mad at them and they was mad at me. Then, it seemed like every time we came to Girls Circle we connect

now because ya'll are there and we talk about our problems.
Now, I talk to many of the girls in the group.

Zoey had similar feelings and referred to the same incident by stating, "Me and Faith wasn't cool at first and then we got in group and we started talking and we expressed our feelings and got cool again." This reinforced the idea that the potential for these young women to develop in connection with others may very well be possible, but opportunities for them to do so are certainly needed.

In support of the girls' desire for openness within a relationship with an agreement of confidentiality, the girls were able to affirm that what they shared in the Girls Circle did, in fact, remain within the group. This may be attributed to the consistent reinforcement of guidelines throughout the group sessions and an established level of respect for the group that developed over time. The fact that confidentiality did not prove to be a problem for this particular group is especially important to consider and may also be attributed to the ways in which the girls valued the Circle, which ultimately encouraged mutual respect and discretion. The girls were able to use the group as a safe place to express themselves and foster greater connections with female peers. At the same time, breaches in confidentiality throughout the girls' relational experiences outside of the group strengthen the argument for increased opportunity for these young women to have purposeful interactions that result in an experiential understanding of friendship and connection.

Effects of Environment

The physical environment of the room seemed to set a tone that was different compared to that of other groups in which the girls had participated. Both the girls and the facilitators expressed similar thoughts on the environment, commenting that it was soothing, calming, and peaceful. The girls appeared surprised the first time they came to the Girls Circle and frequently expressed how much they enjoyed what had been done for them. The facilitators specifically addressed how they felt the atmosphere contributed to better behavior on the part of the girls and that the environment played a significant role in the overall success of the group.

The atmosphere seemed to be an element of the group that allowed for the girls to feel comfortable and expressive. This is not to say that they did not express behaviors typical of girls with EBD but more that a change in behavior and attitude could be noted. For example, Jackie, who was often the most disruptive of the group, stated softly at one point, "This was really fun and I thank you guys for giving us this opportunity...for me to speak like this. Um...Just thank you." In

another instance, Jackie communicated emotionally as she expressed:

I would like to share what I think about this group. The reason I like this group is cause I can be myself, and I can say what I want. Cause, you know, if you're downstairs and you want to talk and you want to express yourself, they won't let you. They'll be like, hold up, raise your hand. And, I really like that you three people [referring to the facilitators and researcher]...I would like to thank you for taking your time out to come sit with us girls. Cause I know it's a heavy, heavy mess. We love you guys very much and just because, you know, we say things to you guys that might get you mad or might hurt your feelings or might make you want to just throw something at our heads...But, we love you guys.

At another time, Briana stated, "I wish I could stay here all day," and the rest of the girls responded in agreement.

The facilitators felt that the environment played a significant role in the overall atmosphere and development of the group. The clinical director, who acted as one of the facilitators, expressed during a feedback session after the seventh meeting of the Girls Circle that the group was one of the best she had ever run. She attributed this to, "first and foremost, the ambiance." She explained that this was one of the first groups that she had run where the behavior management piece was not so overwhelming that it allowed for little else to be accomplished. In her opinion, while everyone was in the room, the time was used effectively because the girls were not resistant. Ultimately, this facilitator expressed that the Girls Circle had "rejuvenated" her openness to the use of support groups in the school.

The girls' positive response to the atmosphere established for the group and their recognition of the effort on the part of the facilitators to set the tone cannot be overlooked. The girls' acknowledgement and appreciation of the facilitators' efforts was demonstrated through their verbal reactions and behavior during the group sessions. It appeared that the girls attempted to reciprocate the effort on the part of the facilitators by openly expressing their gratitude, by increasing their effort to meet the groups' established guidelines, and by generally increasing the level of respect and consideration they exhibited in the Girls Circle compared to what was typically observed of the girls in the school program.

Yet, while the girls certainly continued to display behavior that might be expected of girls with EBD, the young women in this group would often catch themselves in the act and self-correct inappropriate behavior independent of redirection from facilitators. At the same

time, a difference was noted when observing a change in the behaviors of the girls in the Circle and the ways in which they transitioned back into the school program. In most instances, the girls reverted immediately back to typical, and often inappropriate, behaviors. This further supports the observation that the girls' attempts to curb behavior and exhibit polite and appropriate manners were indicative of the potential of the girls to learn and practice better conduct in an environment that actively supports such effort.

Recommendations

Little is known about girls with EBD and how they perceive themselves and their relational experiences. This study, in an attempt to give voice to this understudied population, highlights the need to consider gender when working with this population, the need for the voices of these young women to be heard, and the need for continued research in order to improve services and outcomes for girls with EBD.

Recommendations for Practice

Training in gender differences and gender-responsive programming. According to the available research, minimal consideration has been given to the use of gender-responsive programming and its potential effectiveness when used with girls with EBD. In that case, those individuals working with girls with EBD are likely uninformed and, therefore, ill-prepared to truly work effectively with or foster restorative opportunities for these young women. Training in both gender differences and the use of gender-responsive programming is necessary in order to bridge the gap between research and practice.

Early intervention. Results of this study demonstrate the potential effectiveness of gender-responsive programming such as Girls Circle and lend support to earlier implementation of these programs, particularly with girls with EBD. As previously stated, program placement often separates girls with EBD from their typically developing peers or their disabling condition prohibits them from developing and maintaining stable and lasting relationships.

Isolation or difficulty in establishing connections with others can begin at a young age depending on when a girl is identified for special education services. In that case, early intervention with programs that address academic and behavioral needs must also be supplemented with offerings that support proper social and emotional development. For example, the Girls Circle curriculum offers programming for girls as young as nine years old with the majority of the intervention providing support for girls ages 11 to 18. Gender-responsive programs

such as this may be utilized as a preventative measure from the time a girl is identified as having an EBD. This could serve to curb the development of poor social skills and coping mechanisms and increase the likelihood for relational growth through connection with others.

Extended time for intervention. Considering the nature of girls with EBD, the range of circumstances that many have experienced, and the emotional damage that is often sustained, extended time when using programs such as Girls Circle may be necessary. The facilitators participating in study commented that the possibility of using the curriculum for the entire school year may not only be necessary but more effective with this population. This would provide flexibility in terms of timing the topics according to the specific needs of the group and would also, at least somewhat, eliminate the impact of erratic attendance. Issues of attendance are a consistent problem with this population and must be taken into account. Running a program such as Girls Circle throughout an entire school year would permit ongoing support for the girls by ensuring that a greater number of groups may be attended over an extended period of time.

Consideration of environment. The results of this study suggest without question that the physical environment developed for the purpose of the intervention played a key role in the girls' overall experience. It seems that feeling special was not a sentiment often experienced by these girls with EBD and providing an environment that stimulated this emotion cultivated an atmosphere of appreciation that encouraged respect, trust, and openness. This unexpected, yet positive, outcome indicates the importance of not only considering the nature of the girls in the group and the emotional environment but also the potential that the physical environment may have on the success of the group.

Recommendations for Future Research

Continued research into what works for girls with EBD. Further research into what works for girls with EBD is warranted and supported by the results of this study. As previously stated, future research on children and adolescents with EBD must equally consider both girls and boys. Yet, the study of girls with EBD must be given special attention as this is a population that is not only understudied but historically educated in environments that are predominantly male with interventions that have been developed with males in mind (Burke et al., 2003; Hipwell & Loeber, 2006; Reid et al., 2004). It is hoped that this study will help to encourage future examination of this topic so that research will go beyond simple consideration and truly influence the implementation of gender-responsive programming for girls with EBD.

Increase in research that evaluates the effectiveness of gender-responsive programming. While research into the effectiveness of gender-responsive programming does exist, such as what has been conducted by the Girls Study Group in association with the Office of Juvenile Justice and Delinquency Prevention, the need to continue to grow this knowledge is clear. Studies into the effectiveness of gender-responsive programming must consider research that goes beyond its use in juvenile justice settings and focus on how to effectively use such programming as a preventative measure before girls with EBD are involved in the system.

Additionally, while measuring the effects of gender-responsive programming on factors like self-esteem, self-efficacy, body image, and perceived social support is essential, an increase in the focus on how girls with EBD develop friendships and what impedes connection is just as important. The development of quantitative measures to measure effectiveness of gender-responsive programming according to its influence on relationships would add to research that examines the perceptions of those participating in the intervention. Studies that include the use of control groups would also enhance the research base on this topic.

Continued qualitative research into girls with EBD. With current research only minimally addressing the needs of female students with EBD, the need to expand this research base in general is clear. However, the unique needs of this population may be even better understood through use of qualitative research that allows for the girls to personally express their perceptions of their experiences and needs. The challenges presented by girls with EBD, particularly when it comes to their ability to establish and maintain relationships, may be most accurately represented by examining the ways in which they describe their experiences. Understanding the meaning behind the relational experiences of girls with EBD should be done so in a way that goes beyond what can be collected through formal, quantitative measures so that the varying perspectives and insights of young women with EBD may be evaluated through a more comprehensive and holistic approach.

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