KNOWLEDGE AND COMMUNICATION SKILLS TRAINING FOR HIGH SCHOOL STUDENTS WITH LEARNING DISABILITIES FOR THE ACQUISITION OF SELF ADVOCACY SKILLS

by

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A thesis submitted in conformity with the requirements for the degree of Doctor of Philosophy Department of Human Development and Applied Psychology Ontario Institute for Studies in Education of the University of Toronto

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ABSTRACT

A knowledge and communication skills program designed to teach self advocacy to high school students who have learning disabilities (LD) was evaluated. Fifty-three adolescents in grades seven through nine, ages 12-17 (mean age 14.8 years), who were identified as LD, participated in the self advocacy study. These students were from three schools in the Montreal Catholic School Board. Twenty-seven students received the self advocacy program and the remaining 26 students were part of an attention control group who received the self advocacy program at the conclusion of the study. Both groups were evaluated using pre- and post-program structured interviews that focused on Knowledge (of learning disabilities, learning style, resources, services, supports, and accommodations, and ability to succeed) and Communication (verbal and non-verbal skills). Academic locus of control was assessed pre- and post-program using the Intellectual Achievement Responsibility Questionnaire. The frequency which students practiced self advocacy was examined every two weeks for approximately three months post-program. Overall, the findings indicate that the Program group significantly improved on all areas of Knowledge and Communication compared to the Attention Control group. In addition, self advocacy skills were maintained over the post-program period. No significant differences were found between the two groups on the measure of academic locus of control. Regression analyses
revealed that changes in Knowledge, Communication skills, and internal locus of control predicted frequency of students' self advocacy for accommodations and resources for three months post-program. Overall, the results suggest that the present knowledge and communication skills training program had a significant impact on the students' self advocacy skills.
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CHAPTER I

INTRODUCTION

The traditional approach to assisting students with learning disabilities (LD) academically has been to have teachers, resource/special education teachers, or parents assume responsibility for these students' learning. Planning, implementation, and the provision of appropriate accommodations and resources for these students has been in the hands of adults (Hoy, 1986). Consequently, some students have learned to become dependent on adults to make academic decisions for them, and expect them to readily and appropriately provide services when needed. Others, on the other hand, find themselves in constant conflict with their teachers or parents because of the adults' decision making power (Hoy, 1986). For example, students may misbehave in class, refuse to do work, or not attend school periodically in order to show opposition to the decisions made by adults. Although it can be argued that teachers and parents have the experience needed to make important academic decisions, in exercising such responsibility, they often fail to give students the opportunity to develop responsibility for their learning and to acquire decision-making skills (Hoy, 1986). According to Ness (1989) and Sachs, Iliff, and Donnelly (1987), students with LD must take responsibility for their learning if success is to be achieved.

An alternative approach is to teach students with learning disabilities self-advocacy skills so that they develop responsibility for their learning while developing decision-making skills. Self-advocacy has been defined as the ability to recognize, make others aware of, and defend one's own interests in order to resolve a given problem (Egly, Leuenberger, Morris, & Friedman, 1987).

In the past two decades, more and more people have come to realize the importance of self-advocacy training programs. To date, self-advocacy training has been employed with various groups of people of varying ages. In some form or another, it has been implemented with college students who have learning disabilities (VanBiervliet & Parette, 1994), parents of young children and adults with disabilities (Zirpoli, Hancox, Wieck, & Skarnulis, 1989; Zirpoli, Wieck, Hancox, &
Skarnulis, 1994). individuals with mild handicaps (Sievert, Cuvo, & Davis, 1988), children with emotional disturbances (Gould & Jansma, 1986), senior citizens (Fedorak & Griffin, 1986), and young adults with LD functioning in the low-average range intellectually (Roffman, Herzog, & Wershba-Gershon, 1994). Overall, the findings indicate that self advocacy training is beneficial for these groups of individuals.

In addition, self advocacy training has been discussed as being important for sex education instruction for sexually abused adults (Turk & Brown, 1993), for people with learning disabilities (Huntley & Benner, 1993), psychiatric patients (Banyay, 1989; Lecklitner & Greenberg, 1983; Plumb, 1993), individuals with developmental delays (Bingley, 1987; Braddock, 1994; Rhoades, Browning & Thorin, 1986), people with visual handicaps (Corn, 1985), cancer patients (Gray, Doan, & Church, 1991), and individuals with physical disabilities (Brooks, 1991). It is evident that teaching individuals self advocacy skills is considered by many as not only important, but beneficial for many vulnerable groups in our society.

Self advocacy training has been employed with students who have learning disabilities (LD). According to the Learning Disabilities Association of Canada, "Learning Disabilities is a generic term that refers to a heterogeneous group of disorders due to identifiable or inferred central nervous system dysfunction. Such disorders may be manifested by delays in early development and/or difficulties in any of the following areas: attention, memory, reasoning, coordination, communicating, reading, writing, spelling, calculation, social competence, and emotional maturation" (1981, p.1).

Limited research on self advocacy training for adolescents with LD has been conducted (Durlak, Rose, & Bursuck, 1994; Phillips, 1990; Rutledge, 1992; Sachs, Iliff, & Donnelly, 1987). Despite this lack of research, self advocacy skills training may be particularly important and
beneficial for high school students with LD for various reasons. First, such training may help prevent these students from experiencing learned helplessness – the belief that one cannot control the outcome of a given situation, regardless of any effort to change it (Seligman, 1975; Wehmeyer, 1993; Zimmerman, 1990). During the high school years, rather than focusing on and fostering these students' strengths, adults sometimes focus on the students' deficits and academic weaknesses. This may be due to the fact that student services are provided on the basis of deficiencies, thus making deficiencies the focus (Hoy, 1986). It is this focusing on deficits, in conjunction with the fact that they have experienced academic failures, that unfortunately may lead these students to experience learned helplessness during the high school years.

The second reason for teaching students with LD self advocacy skills is that such training may assist these students in viewing post secondary education as a realistic possibility. Since many of them experience a history of academic failure (Dudley-Marling, Snider, & Tarver, 1982; Ness, 1989), some begin to feel helpless and come to believe that they do not have the capability of furthering their education after high school (Ness, 1989). However, by equipping them with self advocacy skills during their high school years, they may begin to request the services and accommodations that they need to succeed academically while in high school. This, in turn, may allow them to view post secondary education with optimism.

Third, self advocacy training prepares these students for college or university (Phillips, 1990; Sitlington & Frank, 1990). According to Phillips (1990), although "high school students with LD can succeed with the supervision of their resource teachers. ...they fail in college if they are not well prepared to meet the demands of professors and the high degree of independence and academic excellence this setting demands" (p.466).

The fourth reason why it is important to teach high school students with LD self advocacy
skills is that these skills are essential in the adult world. For example, self advocating can affect career choices (Durlak, Rose, & Bursuck, 1994; Ward, 1988), vocation (Durlak, Rose, & Bursuck, 1994; Ward, 1988), and overall adjustment to life demands (Valenti, 1989).

Lastly, it is also important to teach high school students with LD self advocacy skills because these skills have been found to be characteristic of successful adults with LD. Gerber, Ginsberg, and Reif (1992) examined the characteristics of adults with LD who were vocationally successful. They compared highly successful and moderately successful adults with LD using ethnographic interviews. Their findings indicate that control (of one's life), internal decisions (one's desire, making realistic goals, reviewing and re-evaluating one's LD in a more positive light), and external manifestations (persistence, goodness of fit of individual in a given environment, ability to invent alternate strategies, modifications, and techniques in order to cope in a given environment, support and guidance) constituted the characteristics for vocational success. with these characteristics being more prominent in the highly successful adults with LD.

The present study was designed to address two overall objectives. The first objective was to develop an instructional program that is effective in teaching self advocacy skills to high school students with LD. Effectiveness was evaluated summatively by assessing the frequency in which the students applied the skills for a period of three months post-program. The process of acquisition of skills was also evaluated. As discussed below, the instruction of self advocacy was divided into two major components (Knowledge and Communication), each with several subcomponents. The acquisition of knowledge and communication skills were also assessed.

A theory describing the process of self advocacy was also developed. According to this theory, an effective self advocacy intervention comprises instruction designed to increase students' knowledge about learning disabilities in general and the nature of their own learning disability.
knowledge about their personal learning style, knowledge about available resources, services, supports, and accommodations, and knowledge that they can be successful in spite of their disability. The theory also postulates that the acquisition of effective communication skills is a necessary component of self advocacy. Changes in knowledge and communication skills were postulated to predict frequency of using self advocacy skills post-program. The self advocacy theory also predicts an association between frequency of self advocacy and internal locus of control.
CHAPTER II
LITERATURE REVIEW

Model for Teaching Self Advocacy Skills to
High School Students With Learning Disabilities

To date, although limited research has been conducted on self advocacy training with high school students with LD, no studies have postulated a theory as to what is important for the acquisition of self advocacy skills, nor have any self advocacy models been explicitly outlined in these studies. Therefore, in the context of the present study, based on previous self advocacy literature with high school students with LD, and on literature on adolescents and adults with LD, I set out to develop a theory regarding the acquisition of self advocacy skills. I predicted that that both knowledge and communication skills training are important for the acquisition of self advocacy skills by high school students with LD. Furthermore, I predicted that the acquisition of self advocacy skills would lead to a more internalized academic locus of control for these students. Research on vocationally successful adults with LD indicates that these individuals have an internal locus of control and that they self advocate. However, we do not know the relationship between these two characteristics: that is, whether internal locus of control leads to the practice of self advocacy, or whether self advocating leads to an internal locus of control.

These theories were evaluated by using a model developed for the present study according to previous self advocacy and LD research. Previous self advocacy programs have incorporated a Knowledge component (Durlak, Rose, & Bursuck, 1994; Phillips, 1990; Rutledge, 1992; Sachs, I'lliff. & Donnelly, 1987) which may have included such subcomponents or topics as knowledge of LD, knowledge of personal learning style, knowledge of rights and resources, and knowledge of the
ability to succeed. In addition, some have also included a Communications component (Durlak, Rose, & Bursuck, 1994; Rutledge, 1992) whereby verbal and non-verbal skills were included in the instruction of social skills associated with self advocacy. The present self advocacy model incorporated both the Knowledge and Communication components. However, unlike previous studies, all of the subcomponents outlined above have been included. In addition, no self advocacy studies with high school students who have LD have examined whether or not locus of control changes due to receiving self advocacy training. A diagram outlining the theory of the acquisition of self advocacy skills and how the present self advocacy model is incorporated into this theory is shown in Figure 1.

The purpose of each of the subcomponents of Knowledge and Communication, and the inclusion of an Attribution (locus of control) component, are discussed in detail below. This is followed by discussion of the teaching strategies utilized in the present program in order to teach the skills of self advocacy and an analysis of previous self advocacy programs that have been implemented with high school students with LD. The chapter concludes with the rationale for the present study and hypotheses.

Components of the Self Advocacy Model of the Present Study

i) Knowledge

Knowledge is the first component in the self advocacy model. It is composed of four main areas: knowledge of learning disabilities; knowledge of learning style; knowledge of resources, services, supports, and accommodations; and knowledge of the ability to succeed.
Figure 1

Self Advocacy Theory and Model

Knowledge of:
- Learning Disabilities
- Learning Style
- Resources and Services
- Ability to Succeed

Communication:
- Verbal
- Non-verbal

Self Advocacy
Skills

Internal Locus of Control
a) Knowledge of Learning Disability

Many students with LD have never had the term learning disability explained to them, others do not have a clear understanding of what their particular LD entails, and still others deny that a learning problem exists (Aune, 1991; Hoy 1986; Ness, 1989; Sachs et al., 1987). Therefore, a major component of a self-advocacy program should be to enhance students' understanding of LD.

Sachs et al. (1987) mention three reasons as to why these students should be informed about their LD. First, it is an ethical obligation to inform and explain learning disabilities to these students. Second, informing them can prevent them from experiencing ignorance, defensiveness, and avoidance with respect to their learning disabilities so that realistic academic expectations can be made. Lastly, by informing them, the students can come to realize that those attempting to assist them are their allies, not their enemies.

According to Heyman (1990), in order for these students to accept their disability, they must pass through two stages. First, they need to recognize that a disability exists. Second, they need to recognize that they can achieve and succeed despite their disability. This latter stage can be achieved by providing students with information about their disability and how it affects them as learners (Rutledge, 1992). When these students have the knowledge and understanding of their own learning disabilities, they are one step closer to self-advocating effectively.

Having knowledge about one's learning disability is important for self-advocacy because such knowledge is needed in order to explain to others one's learning problems, strengths and weaknesses in learning, and services and accommodations they require in order to assist them in improving their academic performance (McWhirter & McWhirter, 1990; Ness, 1989). Without this knowledge, it would be difficult for them to assume responsibility for learning and self-advocate effectively (Aune, 1991; McWhirter & McWhirter, 1990; Ness, 1989; Rutledge, 1992). In addition,
it is important for these students to have knowledge of their LD because vocationally successful adults with LD indicate that this knowledge contributed to their success (Gerber, Ginsberg, and Reiff, 1992; Reiff, Ginsberg, and Gerber, 1995).

b) Knowledge of Learning Style

Learning style in the present study is referred to as the understanding of the strengths and weaknesses in one's ability to learn. Many students with LD do not have a full understanding of their learning strengths and weaknesses which further compounds their learning problems (Levine, Clarke, & Ferb, 1981). This knowledge, however, is important for them to have. Armed with this information, these students can begin to take personal responsibility for their learning by requesting services and accommodations that will match their learning style. According to Sachs et al. (1987), a clear understanding of one's learning style is a prerequisite to understanding personal responsibility in learning. This understanding can create an environment for the students in which learning can best be enhanced (Faggella & Horowitz, 1990). Thus, it is important that knowledge of learning style be incorporated into the self-advocacy program. In addition, research on successful adults with LD has found that highly successful adults with LD understand their own strengths and weaknesses with respect to their LD (Gerber, Ginsberg, & Reiff, 1992; Reiff, Ginsberg, & Gerber, 1995). Since this knowledge is found to be characteristic of successful adults with LD, it is then important to teach adolescents self-advocacy skills which incorporate knowledge of learning style.

c) Knowledge of Resources, Services, Supports, and Accommodations

The importance of this subcomponent in the self-advocacy program was that knowledge of
resources, services, supports, and accommodations arms students with the ability to better blend with their environment while increasing their potential for successful learning. This adapting of the environment to meet one's needs is what Gerber, Ginsberg, and Reiff (1992) and Reiff, Ginsberg, and Gerber (1995) call goodness of fit. Highly successful adults choose to work in environments that can adapt to their needs. The same probably applies to students with LD in the classroom. Once a teacher knows about a student's specific learning disability or disabilities, as a result of the student's self advocacy, the teacher, together with the student who knows about his/her LD, can adapt the environment to meet the student's needs. In addition, the more creative the students can be with regards to resources, services, supports, and accommodations, the better their chances of becoming highly successful. According to Gerber, Ginsberg, and Reiff (1992) and Reiff, Ginsberg, and Gerber (1995), successful adults have been found to possess learned creativity. Knowing their strengths with respect to learning, "they [do] not just cope. they creatively excel" (p. 483. Gerber, Ginsberg, & Reiff. 1992). For example, many adults were found to use a large array of modern technology as a means of adapting to their environment (e.g., word processors, dictaphones, tape recorders) (Gerber, Ginsberg, & Reiff. 1992). Therefore, it is important that knowledge of resources, services, supports, and accommodations be a component of the self advocacy program because it exposes the students to available resources, services, supports, and accommodations. In addition, such knowledge, together with the students' knowledge of learning style (strengths and weaknesses), will allow them to match their learning style with available resources, services, supports, and accommodations so as to better enhance their prospects for successful learning. Furthermore, they can be as creative as possible when considering modifications to their method of learning - a characteristic of successful adults with LD.
d) Knowledge of the Ability to Succeed

The purpose of this component was to make students aware that people with LD can succeed, despite their learning problems. Because many students with LD experience a history of academic failure (Dudley-Marling, Snider, & Tarver, 1982; Ness, 1989), some begin to feel helpless and come to believe that since they have learning difficulties in high school, they should not attempt to further their education (Ness, 1989). When students are equipped with self-advocacy skills, they have an increased opportunity to obtain services, resources, and accommodations that will assist them in their academic tasks while helping them in their academic performance.

It is important to incorporate knowledge of ability to succeed into the self-advocacy program because, according to Reiff, Ginsberg, and Gerber (1995), "a plethora of living role models offers examples of realistic and attainable success. These role models can help students develop a realistic appreciation of what it takes to succeed, and of where the possibilities of success lie" (p. 33). In light of their risk of experiencing learned helplessness, having role models can help prevent such experiences by aiding them to view their future realistically and optimistically.

The method of helping students become aware that people with LD can succeed in the current program was to have a presentation by a guest speaker who succeeded vocationally and personally despite his learning disability. He not only acted as a role model and an example of a successful adult with LD, but also attempted to instill in students the desire to succeed (Reiff, Ginsberg, & Gerber, 1995). To date, no studies have included this component in the self-advocacy programs.

ii) Communication

It is important for the students to communicate effectively and appropriately when they are
advocating for themselves. Teaching communication skills to students with LD is important for two reasons. First. research on communication skills of students with LD indicates that between 40% and 60% of these students have problems with oral communication (Bryan, Donahue, Pearl, & Strum, 1981; Hess, Wagner, DeWald, & Conn, 1993: Wiig & Semel, 1976). More specifically, these students have been found to have difficulties understanding the roles and responsibilities of the speaker and listener, difficulties initiating and maintaining a conversation, difficulties negotiating or persuading in conversation, and difficulties responding to the listener's viewpoint (Bryan, Donahue, Pearl, & Strum, 1993: Wallach & Butler, 1984).

Second, it is important to teach communication skills to students with LD because highly successful adults with LD obtain their resources, services, supports, and accommodations by taking action which involves communication skills (Gerber, Ginsberg, & Reiff, 1992; Reiff, Ginsberg, & Gerber, 1995). They must be able to communicate appropriately and effectively in order to obtain their needs. Research on communication has found various specific communication skills to be important.

Non-verbal communication. also known as body language, is one of two major components in communication. Investigators have found that making eye contact and positive facial expressions (i.e., smile) indicates friendliness (Kleinke, 1986), hand gestures accompanying speech aid in the comprehension of spoken language (Krauss, Morrel-Samuels, & Colasante, 1991), a large number of movements (e.g., tapping/shuffling foot: touching. scratching. or rubbing another body part) indicates nervousness (Harrigan, 1985), and body orientation (i.e., facing individual directly versus standing at an angle) and body posture (i.e., standing erect versus slouching or head facing downward) can indicate a warm versus a threatening interaction (Arnoff, WoiKe, & Hyman, 1992). These are some of the most important non-verbal skills that students must keep in mind and
utilize when advocating in order to attain successful advocacy outcomes.

**Verbal communication skills.** such as proper tone of voice (e.g., audible, not whispering and not above conversational tone), appropriate language, and ability to effectively communicate information, desires, or needs (Hennings, 1975) are a second component of communication which are also important when communicating.

The present program has included communications training and evaluation of students' communication skills when they advocate. The verbal and non-verbal communication skills found to be effective, as indicated by previous research, were incorporated into the program in order to provide an appropriate communications training program. Two methods of collecting data regarding verbal and non-verbal communication skills were used: a) observing students self-advocating (either by the instructor during role plays or by the student's teacher with whom the student advocated); and b) asking students to verbalize the communication skills required when advocating.

### iii) Attribution

Attributions are the perceptions people have concerning the causes of their behaviour (DeCharms, 1976). Rotter (1954, 1966), who first discussed attribution in terms of success and failure, coined the term **locus of control**. Locus of control refers to the extent to which individuals perceive that they have control over life events. People who attribute successes or failures to internal causes, such as ability or effort, are said to have internal locus of control; people who attribute successes and failures to external causes, such as task difficulty or luck, are said to have external locus of control.

Since Rotter's concept of locus of control emerged, it has received considerable attention in
the research literature (Cooley & Ayres, 1988; Dudley-Marling, Snider, & Tarver, 1982; Findley & Cooper, 1983; Mindingall, Libb, & Welch, 1980; Wehmeyer, 1993). One avenue of research on locus of control has focused on attribution patterns of individuals with LD. More specifically, research has found that these individuals tend to be more external in their attributions than their counterparts without LD (Bryan and Pearl, 1979; Mindingall, Wesley, and Welch, 1980; Rogers, 1983; Rogers and Saklofske, 1985; Serafica and Harway, 1979). Dudley-Marling, Snider, and Tarver (1982) reviewed the attribution literature on children with LD and reported that six out of seven studies found that students with LD had higher external locus of control scores relative to average achieving students (Chapman and Boersma, 1979; Fincham and Barling, 1978; Gardner, Warren, and Gardner, 1977; Hallahan, Gajar, Cohen, and Tarver, 1978; Pearl, Bryan, and Donahue, 1980; Tognetti, 1972).

Although there is not agreement in the literature on attribution patterns of LD students with respect to academic success and failure, there is some evidence that students with LD accept responsibility (internal locus of control) for failure, but not for success (external locus of control) (Chapman and Boersma, 1979; Pearl, Bryan, and Donahue, 1980; Tognetti, 1972). If such is the case for some students with LD, then these students are at risk for experiencing learned helplessness – the belief that regardless of any effort, the outcome is the same. They blame themselves for academic failures, such as lack of ability, and blame external factors, such as a task being easy, for academic successes. Thus, they believe they are "powerless to influence their environment" (Dudley-Marling et al. p. 510, 1982), and become entangled in the vicious cycle of learned helplessness.

According to Abramson, Seligman, and Teasdale (1978), in their model of learned helplessness, experiences of lack of control lead to perceptions of uncontrollability. This, in turn.
results in causal attributions of uncontrollable events and expectations of future uncontrollability. It is this sequence that results in learned helplessness. Zimmerman (1990), on the other hand, outlines a model of learned hopefulness whereby experiences of control lead to perceptions of control, which in turn lead to causal attributions and future expectations of control. As a result, learned hopefulness characteristics appear. This model of learned hopefulness may be applied to the present self advocacy model in that it teaches students to take more responsibility and control for their learning so that they may better their chances for success. By increasing their chances for success, they may begin to feel they have more control of their academic learning. With time, they may begin to view their future with more control. As a result, such a program may help prevent, or reverse, the cycle of learned helplessness and alter these students' academic attribution patterns from a more external locus of control to an more internal locus of control. According to Bar-Tal and Bar-Zohar (1977) and Findley and Cooper (1983), internal locus of control is positively correlated with academic achievement. Thus, it is important to examine attribution patterns of those participating in the self advocacy program prior and subsequent to its implementation.

The literature suggests that it is very important for students to learn to take control of their environment, beginning with their academic learning. According to Reiff, Ginsberg, and Gerber (1995), highly successful adults with LD characteristically have control of their lives — control of taking charge of their lives (internal decisions) and control of making adaptations, or self advocating, in order to advance (external manifestations). They claim that "the need for control is the driving force underlying both the internal and external behaviours that are correlated with success" (p. 32, Reiff, Ginsberg, & Gerber, 1995). Their research, however, has not examined the relationship between locus of control and self advocacy skills: Does having an internal locus of control lead to self advocacy practices, or is the reverse true? This question is addressed in the
present study. It is hypothesized that self advocacy practices would lead to a more internalized locus of control. As with the learned hopefulness theory, it is believed that by having students learn to take control of their lives, and having positive results from this, can lead to perceptions of control and eventually future expectations of control. As a result, students begin to have a more internalized locus of control.

**Strategies for Teaching Students with LD**

Research on social skills training has outlined teaching techniques that are important for the generalization and maintenance of social skills. According to Cartledge and Milburn (1986), modelling and role playing are important social skills training techniques that typically consist of (a) instructions, which include providing the rationale for the particular skill, identification of the skill's components, and modelling with directions given (e.g., by instructor, taped models, live models); (b) skill performance, involving the learner to reproduce the target social skill, corrective feedback, and reinforcement; and (c) practice, such as through homework, which allows for maintenance and generalization of the target skill. In addition, they outline communication skills training, which includes verbal and non-verbal skills, role taking, problem solving, and positive reinforcement as some of the additional methods of teaching social skills.

Other researchers have also discussed the importance of verbal instruction, modelling, role playing, performance feedback, rehearsal, and homework for the instruction of social skills. Each of these techniques has been found to facilitate the acquisition and generalization of social skills (Elksnin & Elksnin, 1995; L'Abate & Milan, 1985; Ladd & Mize, 1983; Wiener & Harris, 1997). In addition, according to Wiener and Harris (1997), the use of highly interesting materials, such as a game, and implementing social skills training in students' natural environments have been found to
facilitate the learning of social skills.

Many of the above mentioned social skills training techniques have been used by researchers involved with social intervention programs for students who are identified as learning disabled. In a review of this literature, McIntosh, Vaughn, and Zaragoza (1991) analyzed twenty-two studies whose intervention goals included either increasing peer acceptance or acquiring interpersonal skills. Of these twenty-two studies, fourteen used cognitive-behavioural modifications as teaching strategies. In particular, they included coaching, modelling, role play in structured settings, feedback, and mnemonic strategies for use during social skills or problem solving skills. Interestingly, of these fourteen studies, eleven reported results that were positive.

The proposed self advocacy model utilized several of the above teaching techniques in order to teach the high school students with LD how to self advocate. Verbal instruction was used throughout the program. For example, it was used to provide the students with the rationale, including usefulness and advantages for self advocating, to define learning disability and give examples, to provide information during seminars, to direct group discussions and individual meetings with students, and to teach students how to self advocate, which included verbal and non-verbal communication skills. Verbal instruction was carried out by the instructor and through the use of videotaped models. Modelling and role playing were also used to teach the skills of self advocacy. Specifically, modelling of self advocacy skills, which included verbal and non-verbal communication skills, was done by the instructor and a special education or a resource teacher from each school. Students were given the opportunity to practice and rehearse these skills when given role play scenarios where problem solving of a given situation and role taking took place, with students having numerous opportunities to be the student or teacher in different role plays. Students were given performance feedback and positive reinforcement by the instructor on live and
recorded (during pre-program interview) role play scenarios. Students were also given homework, which entailed advocating to teachers, allowing for the newly learned self advocacy skills to be practised in the students' natural environment. This, in turn, aided in the generalization of these skills. In addition, a guest speaker, who acted as a role model, was invited to speak to the students about his learning disability, and how despite his learning disability, he was vocationally successful. Lastly, a game was played at the end of the program, which reinforced what had been learned during the program.

Analysis of Previous Self Advocacy Programs for High School Students with LD

Only three published studies and one major research paper were identified that conducted self advocacy training programs for adolescents with LD. Table 1 provides a summary of the findings of these studies, which includes a brief description of participants, program components, teaching strategies, duration, research design, measures, and results. Although investigators in previous self advocacy studies have reported positive results, concerns about research design and validity of many of the measures compromise their conclusions. I shall begin by comparing the program components, teaching strategies, and duration of the four studies with each other, and then, using the model discussed above, indicate why I chose to incorporate specific aspects of these components and strategies into the present study. I shall then describe the results of the four studies. Lastly, I will provide an analysis of the research design and measures utilized in the four studies. This analysis will indicate why, in spite of positive findings in previous studies, another study investigating the promotion of self advocacy skills in adolescents with LD is needed.
<table>
<thead>
<tr>
<th>Study</th>
<th>Participants</th>
<th>Program Components</th>
<th>Teaching Strategies</th>
<th>Duration</th>
<th>Research Design</th>
<th>Measures</th>
<th>Results</th>
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<tbody>
<tr>
<td>Durlak et al., 1994</td>
<td>8 adolescents ages 12-17</td>
<td>Knowledge of: 1,D Learning Style Resources/Services Communication Skills: Verbal Non-verbal</td>
<td>Verbal Instruction (seminars) Modeling Role play Corrective Feedback Rehearsal Practice Opportunities Generalization Video-Recordings</td>
<td>Two, 30-40 minute sessions initially Semester 1: twice weekly for 30 minutes Semester 2: once per week, 40-50 minutes</td>
<td>Pre-Post Design on Measures (Scales) Follow-up and Generalization Natural environment</td>
<td>1) Self-Advocacy Scale 2) Self-Awareness Scale 3) Assertiveness Scale for Adolescents 4) Piers-Harris Children's Self-Concept Scale 5) Maintenance of skills 6) Generalization of skills</td>
<td>No significant changes from pre to post program on the Self-Advocacy Scale, Self-Awareness Scale, Assessment Scale for Adolescents, and Piers-Harris Children's Self-Concept Scale. Students in the program were able to acquire, maintain, and generalize self-advocacy skills.</td>
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<td>Rutledge, 1992</td>
<td>9 adolescents ages 12-14</td>
<td>Knowledge of: 1,D Learning Style Resources/Services Communication Skills: Verbal Non-verbal</td>
<td>Verbal Instruction (seminars and individual meetings) Instructional Video Video Recordings Modeling Role play Rehearsal Corrective Feedback Game Generalization Practice Opportunities</td>
<td>6-week program</td>
<td>Pre-Post program structured interviews Generalization Natural environment</td>
<td>1) Knowledge of 1,D 2) Knowledge of learning style 3) Knowledge of rights and resources 4) Knowledge and practice of the skills of self advocacy</td>
<td>Following the program, 3 stated they were 1,D. 3 said “a little&quot;, 3 did not. Post-program, all 9 explained and described personal learning style. All 9 students aware of their right to self advocate after receiving the program. 8/9 students explained significance of self advocacy, defined and described it, and identified self advocacy opportunities with teachers post-program.</td>
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<td>Study</td>
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<td>Phillips, 1990</td>
<td>15 adolescents ages 13-16</td>
<td>Knowledge of: L.D</td>
<td>Verbal Instruction</td>
<td>Step 1: once per week for 10 weeks in Gr. 9;</td>
<td>Pre-Post standardized, open-ended interviews with parents, teachers, and students on Measures 1-3</td>
<td>1) Students’ knowledge of services</td>
<td>14/15 students gave realistic knowledge of services solution to hypothetical problem.</td>
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<td></td>
<td>15 parents</td>
<td>Learning Style Resources/</td>
<td></td>
<td>Step 2: infrequently throughout Gr. 10;</td>
<td>Follow-up: Generalization</td>
<td>2) Students’ perceptions of L.D and of themselves</td>
<td>All students able to indicate reason(s) for academic success and failure post program; 13/15 students disclosed their L.D to their peers, with 10 indicating strengths and weaknesses.</td>
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<tr>
<td></td>
<td>No specifics mentioned</td>
<td>Services Ability to Succeed</td>
<td></td>
<td>Step 3: infrequently throughout Gr. 11;</td>
<td>Natural environment</td>
<td>3) Students’ awareness of career and educational opportunities</td>
<td>5/15 students pre-program vs. 13/15 students post-program had high school course planning to achieve career/vocational goals; 14/15 optimistic about persons with L.D having a career goal.</td>
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<td>Step 4: infrequently, once average performance is obtained in all major academic subjects</td>
<td></td>
<td>4) Students’ perception of the effects of the program</td>
<td>8/15 students increased: ability to speak to others, knowledge of self improvement, ability to think about things differently, understanding of special ed. process, positive attitude towards future.</td>
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<td>Sachs et al., 1987</td>
<td></td>
<td>Knowledge of: L.D</td>
<td>Verbal Instruction</td>
<td>2-3 week program</td>
<td>Post-program questionnaire</td>
<td>5) Parents’ and Teachers’ perception of program effectiveness on their children/students</td>
<td>5/15 positive responses, 10 neutral responses from parents. All teacher responses were positive.</td>
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<tr>
<td></td>
<td>No specifics mentioned</td>
<td>Learning Style Resources/</td>
<td></td>
<td></td>
<td>Follow-up 4-months post-program on Measure 5 Natural environment</td>
<td>6) Generalization of skills</td>
<td>1.5 to 3.6 classroom modifications after 1 year</td>
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<td>Services Ability to Succeed</td>
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Program Components

All of the studies have included some type of knowledge component which can be broken down into knowledge of LD, knowledge of learning style, and knowledge of resources and services (Durlak, Rose, & Bursuck, 1994; Phillips, 1990; Rutledge, 1992; Sachs, Illiff, & Donnelly, 1987). Knowledge of LD involved teaching students about learning disabilities. Knowledge of learning style entailed students coming to an understanding of their cognitive strengths and weaknesses. And knowledge of resources and services involved students learning about classroom modifications, accommodations, services, and resources that are available to them which can help them succeed. In addition to these subcomponents of knowledge, Phillips (1990) and Sachs et al. (1987) also included a topic relating to knowledge of the ability to succeed. This involved students becoming aware that people with learning disabilities can have a successful career and that assistance is available in post-secondary education.

Communication was an additional component area that was included in only two studies. Durlak et al. (1994) and Rutledge (1992) both had some form of communication skills training that involved the teaching of verbal and non-verbal skills to the students in their programs.

All four studies at one point had the students interact with their natural environment with their newly acquired skills and information. Sachs et al. (1987), Phillips (1990), Rutledge (1992), and Durlak et al. (1994) all had their students apply their self-advocacy skills in their academic endeavours. In addition, Phillips (1990) also had the students visit colleges so as to reinforce the content of the topics discussed and for the students to meet with support personnel and college students receiving support services. This was done so as to help students understand how to apply their newly learned skills and information so that transfer and generalization may take place.
According to the model of the present study, both knowledge and communication are considered important components that should be included in a self advocacy program. More specifically, the knowledge component should include knowledge of LD, learning style, resources, services, supports, and accommodations, and the ability to succeed as subcomponents, and the communication component should include verbal and non-verbal communication skills training. The importance of the inclusion of these in the present study was outlined above. Although Durlak et al. (1994) and Rutledge (1992) included both the Knowledge and Communication component areas in their studies, they did not include all of the subcomponent areas. Specifically, knowledge of the ability to succeed was not included in either study. In addition, the present study had students interact with their natural environment in order to practice their newly learned self advocacy skills.

Teaching Strategies

Various teaching strategies were utilized by the different investigators in order to teach and inform the students about the knowledge and communication components. Durlak et al. (1994) and Rutledge (1992) both used a number of similar teaching strategies, including verbal instruction of material, modelling, role play, rehearsal, corrective feedback on skills, which was in part done through video-recordings of students performing the social skills, and opportunity for generalization of the social skills. In addition, Durlak et al. (1994) included practice opportunities for the social skills, whereas Rutledge (1992) included an instructional video, individual meetings with students, and a game to reinforce newly learned skills.

Phillips (1990) and Sachs et al. (1987), on the other hand, did not include such an extensive number of teaching strategies. Phillips' (1990) self advocacy program involved
teaching students through group seminars and individual meetings. Having students keep a learning log about their learning strengths and weaknesses, which was further enhanced by the completion of a learning style inventory, and having students role play to prepare them for teacher negotiations for classroom modifications. These strategies were used to teach both knowledge and communication components. Sachs et al. (1987), on the other hand, only outline the implementation of a seminar that was used in their program to teach the components of knowledge.

The present study, however, utilized a number of teaching strategies. In particular, all of the strategies utilized in Durlak’s et al. (1994) and Rutledge’s (1992) studies were used in the present program. More specifically, verbal instruction (with groups and individually), modelling, role play, corrective feedback, rehearsal, practice opportunities, instructional videos, video recordings of students self advocating, and the use of a game to reinforce newly learned information and skills were used in the program. Additional teaching strategies, however, were also included. Problem solving, role taking (during self advocacy rehearsals), positive reinforcement, and the appearance of a guest speaker were also incorporated. As discussed above, these are strategies that have been found to be effective in enhancing acquisition and generalization of social skills (Elksnin & Elksnin, 1995; L’Abate & Milan, 1985; Ladd & Mize, 1983; Wiener & Harris, 1997), including children with LD (McIntosh, Vaughn, and Zaragoza, 1991).

Duration

The duration of previous self advocacy programs ranged from approximately two weeks to four years. The program outlined by Sachs et al. (1987), although not explicitly mentioned,
appears to have taken approximately two to three weeks to complete the required seminars. However, the total number of seminars and the length of each were not given.

In the study by Rutledge (1992), the self advocacy program was implemented in six weeks, with pre-program interviews being conducted (time and duration not specified) and follow-up interviews being done two weeks post-program.

The programs by Durlak et al. (1994) and Phillips (1990) were much longer in duration. In the program by Durlak et al. (1994), students initially attended two sessions that were thirty to forty minutes in length. This was followed by two, thirty-minute sessions per week for the student's first semester, and one forty to fifty minute session per week in the second semester. Overall, although it is not specified, it appears that the program took approximately one year to implement. The program outlined by Phillips (1990) appears to have taken approximately four years. This four step program begins with the students who are entering grade nine attending one weekly session for a total of ten weeks. Step two and three involve infrequent sessions, either in a group or on an individual basis, throughout the students' grade ten and grade eleven academic years, respectively. Step four, which involved one-to-one instruction, involves infrequent individual meetings, often on an "as needed" basis.

Although the programs by Durlak et al. (1994) and Phillips (1990) were much longer in duration than that of Rutledge (1992) and Sachs et al. (1987), a meta-analysis of social skills training programs by Schneider (1992) indicates that the number of sessions does not necessarily correlate with program effectiveness. Studies that have utilized social skills training programs that are relatively short in duration have had the greatest effects on the acquisition of social skills.

The duration of the present program is comparable to that of Rutledge (1992). In total, the program was conducted in one- and one-half months. During this period of time, students met in
their respective groups once to twice per week for a total of seven sessions. Each session lasted one hour. The number of sessions per week varied due to pre-scheduled school activities and professional development days.

Results of Previous Studies

No conclusions can be drawn from the Sachs et al. (1987) study which just measured functioning post-program with an unknown number of participants. With no pre-tests and no control group, the scores are not meaningful. Therefore, my description of the results will focus on the other three studies which provided measures across time. As will be discussed below, conclusions from these studies are also limited due to problems with the research design and the measures.

With regards to the acquisition of knowledge, the studies by Rutledge (1992) and Phillips (1990) showed that students were more knowledgeable about personal learning style and resources and services available to them following the intervention. More specifically, Rutledge found that the students were better able to explain and describe their personal learning style and they were more aware of resources and services available to them. In Phillips’ study, students were better able to indicate reasons for academic success and failure, along with strengths and weaknesses with regards to their learning, and were better able to indicate resources and services available to them. Phillips also found that these students were more knowledgeable about LD and ability to succeed. On average, these students’ perceptions of LD and of themselves, and their awareness of career and educational opportunities, increased following program implementation. On the other hand, Rutledge found that the knowledge of LD of the students changed minimally. She did not, however, assess knowledge of ability to succeed.
The acquisition of communication skills was assessed at pre- and post-program in two studies. Durlak et al. (1994) found no significant change in the verbal and non-verbal communication skills of the students after having received self advocacy training, whereas Rutledge (1992) found that the practice of self advocacy skills, which included verbal and non-verbal communication skills, increased after program implementation. Although Phillips (1990) did not formally assess communication skills, she did assess these students’ perceptions of the program and found that approximately half of the students in the program had an increase in ability to speak to others.

Rutledge (1992), Phillips (1990), and Durlak et al. (1994) gave the students the opportunity to generalize their newly learned self advocacy skills in their studies. In all three studies, students were asked to practice their self advocacy skills in non-training settings in their respective schools. Both Rutledge (1992) and Phillips (1990) asked students to advocate to teachers on something that they felt required resources, services, supports, or accommodations. Only Phillips, however, assessed these generalization skills and found that students, on average, advocated more often for modifications one year following self advocacy training. Durlak et al. (1994) also assessed how the students were able to generalize their self advocacy skills to new situations. Students were given seven self advocacy tasks that had to be carried out in the students' school environment. For example, students were required to ask a teacher if a tape recorder may be used to record class lectures. The individual to whom the students advocated was required to assess the self advocacy skills. The results showed that the students were able to generalize their newly learned self advocacy skills to the new situations.

Durlak et al. (1994) was the only study that assessed whether students in the program were able to maintain the self advocacy skills learned. One week after teaching the students
steps to self advocate, information was obtained on whether students maintained these skills. Students were individually asked to write down, or orally state for students with writing disabilities, the steps of self advocacy. If students had difficulty remembering these steps, they were allowed to demonstrate them to the trainer. Overall, the students in the program were able to maintain the steps of self advocacy.

There were additional outcomes in the previous self advocacy studies. Durlak et al. (1994) assessed whether self advocacy training would alter the self-concept or assertiveness of the students. They measured this through the use of the Piers-Harris Children’s Self-Concept Scale (Piers-Harris) (Piers. 1989) and the Assertiveness Scale for Adolescents (ASA) (Lee, Halberg, & Slemon. 1985), respectively. They found no change in either self-concept or assertiveness following the self advocacy training. Phillips (1990), on the other hand, examined the effectiveness of the self advocacy program by asking students, parents, and teachers their perceptions on how the program affected the students. She found that approximately half of the students in the program had an increased perception in the ability to speak to others, knowledge of self improvement, ability to think about things differently, understanding of the special education process, and attitude towards the future. In addition, only one-third of parents had positive perceptions on the effectiveness of the program on their children, with the remainder having neutral responses. whereas all the resource teachers had positive responses to the effectiveness of the program on the students.

Analysis of Previous Research Designs

Although the results of the four studies all showed that self advocacy training may be a promising route to take with adolescents with LD, the methodological short comings of the four
studies render the results unconvincing.

First, the number of participants in some of the studies was not adequate in order to perform statistical analysis. For instance, the Durlak et al. (1994) study had eight adolescents and the Rutledge (1992) study had nine adolescents. In both studies, however, participants were described adequately, with descriptive characteristics including age, gender, IQ, and at least one significant deficit in one academic area. On the other hand, Sachs et al. (1987) did not indicate the number of students who participated in their program, nor did they provide any descriptive characteristics of the participants. The Phillips (1990) study had 15 participants which provides sufficient statistical power for the analyses they did.

Second, the research design of previous studies was also inadequate. More specifically, Sachs et al. (1987) used only a post-design where measures were assessed only at post-program. As a result, the findings are not meaningful because no comparisons can be made with pre-program findings. In addition, they did not include an attention control group with which results of the program group could be compared. Although the remaining three studies utilize a pre-post design (Durlak et al., 1994; Phillips, 1990; Rutledge, 1992), they also did not include an attention control group. Once again, this did not allow for those students who received self-advocacy training to be compared to students who did not receive the program. Such information is important because with a control group differences between the two groups are much more likely a result of the training program and not other extraneous factors.

Third, it is important that students be randomly assigned to groups when doing research because the chances of individual differences confounding the outcome are minimized. However, since the previous studies only had a program group and not an attention control group, randomization of participants, along with the examination of differences between groups
at pre-test. could not be accomplished.

Fourth. the question of efficacy of an intervention. which does not have follow-up data. arises with previous research. More specifically. Rutledge (1992) did not include any type of follow-up assessment as to whether the students continued to advocate in the absence of the instructor asking them to do so. The remaining three studies did. however. use a follow-up measure. Durlak et al. (1994) and Phillips (1990) examined self advocacy practices. whereas Sachs et al. (1987) examined students' attitude and behaviour post-program. Nevertheless. it is difficult to establish validity of these follow-up measures because these studies did not utilize an attention control group with which comparisons could be made.

Lastly. none of the previous studies implemented their self advocacy program with more than one group of students. It is important to examine the instruction of skills with various groups of students because the dynamics within one group may affect the outcome (Burlingame. Kircher. & Taylor. 1994).

According to Burlingame. Kircher. and Taylor (1994). certain methodological criteria should be included by researchers when conducting research on group psychotherapy. This includes the use of adequate number of participants in order that statistical analysis may be carried out. the use of a treatment and a control group to which subjects are randomly assigned. the comparison of these groups at pre-test on characteristics such as age and gender. the comparison of these groups on outcome measures at pre-treatment so that differences between pre- and post-program can be evaluated. the matching of outcome measures to the goals of the treatment. the inclusion of follow-up measures to test durability of improvements. and the use of multiple groups to control for group dynamic effects.

Overall. through the analysis of research designs used by previous self advocacy studies.
no conclusive evidence exists that self advocacy training is a useful intervention. The present study, unlike previous studies, utilized a number of methodological criteria outlined by Burlingame et al. (1994) in order to evaluate and validate the self advocacy model in this study. More specifically an adequate number of students participated in the study so that statistical analysis was possible. These students were randomly assigned to either an attention control group or the program group so that group comparisons could be made in order to determine the effectiveness of the program. In addition, prior to implementing the program, groups were compared on characteristics and outcome measures to ensure equality of groups at pre-program. Furthermore, outcome measures were matched to the goals of the treatment. Interrater reliability and test-retest reliability was evaluated on the developed measure. Multiple groups were used for the implementation of the self advocacy program to help ensure that the gains could not be attributed to the dynamics of a single group. and a follow-up measure on self advocacy practices was carried out to determine whether students continued to self advocate in the absence of the instructor asking them to do so. The follow-up practices of the students who received the program were compared to those of the attention control group so as to establish validity of the results. This program was implemented in the students' natural setting so as to facilitate generalization of skills. In addition, the treatment program was outlined prior to implementation of the program. and the characteristics and teaching style of the instructor are discussed for better knowledge on how results may be generalized.

Measures

All four studies developed measures to assess components of knowledge. with two studies also assessing communication skills. including verbal and non-verbal skills (Durlak et al..
Durlak et al. (1994) had teachers evaluate students' self advocacy performances pre- and post-program using two teachers' rating scales: The Self-Advocacy Scale and The Self-Awareness Scale. These rating scales assessed students' knowledge of LD, learning style, and resources and services, along with communication skills. Rutledge (1992) also assessed knowledge of LD, learning style, resources and services, along with the knowledge and practice of self-advocacy skills, which included communication skills. This information was obtained from structured interviews with students pre- and post-program. These interviews involved students giving verbal responses to questions and scenarios pertaining to the areas of knowledge and communication skills.

Phillips (1990) and Sachs et al. (1987), on the other hand, only assessed components of knowledge. In Phillips (1990) study, through the use of structured interviews pre- and post-program, students were assessed on knowledge of LD, resources and services, and ability to succeed with regards to career and educational opportunities. In addition, students', teachers', and parents' perceptions of the program's effectiveness on the students was examined following the program, also in a structured interview format. Sachs et al. (1987), on the other hand, assessed students knowledge of LD, had them identify important information they had learned from the program, evaluated self-awareness with regards to what they must do to succeed, assessed whether they were able to address their LD (e.g., ability to come to terms with their LD and develop plans to address their difficulties), and determined the impact of the program four-months post-program.

In the present study, like previous studies, the advantages of developing measures to assess knowledge and communication skills are that the measures have sound face validity and content validity. However, due to the type of questions and the inconsistent scoring style of the
interview in this study, internal consistency of the measure cannot be determined. In addition, since there are no standardized tests on knowledge and communication with regards to self advocacy, no data on concurrent validity can be derived. However, interrater reliability and test-retest reliability can be determined with these measures. Previous studies did not examine test-retest reliability of their developed measures, and in only one study did the investigators calculate interrater reliability. Durlak et al. (1994) calculated interrater reliability on the trainers' scoring of students self advocacy skills prior to self advocacy training and during the role play training sessions. Acceptable levels were obtained (Range = .76-1.00).

Durlak et al. (1994) and Phillips (1990) developed measures to assess generalization of skills. Durlak et al. (1994) asked students to practice five specific generalization tasks in non-training settings in the high school. For example, students were requested to ask teachers for clarification of lecture materials. When students performed these generalization tasks in the natural environment, they were given a checklist for faculty or staff to evaluate their performance based on outlined criteria. Students returned the checklists to the trainers, and the data collected were analyzed to determine generalization of skills. Phillips (1990), on the other hand, indicated that students had increased the number of self advocacy practices in the classroom one year post-program; however, no specifics are mentioned on how such information was derived or analyzed.

The advantage of obtaining information on the generalization of skills is to determine whether students are able to perform newly learned skills in the natural environment. However, in the study by Durlak et al. (1994), the generalization of skills was not entirely due to students advocating on their own for their own purposes as was done in the study by Phillips (1990). Students were given specific generalization tasks to complete, regardless of their own personal needs.
Durlak et al. (1994) was the only study that assessed maintenance of self advocacy skills. One week following self advocacy training, students were asked to write down, or orally state where writing was a disability, the steps of self advocacy. Students who had difficulties recalling the steps were allowed to demonstrate them to the trainers. This information is important in that students need to be able to maintain newly learned social skills post-program. Maintenance of skills allows for the proper reproduction of newly learned skills in future situations.

Durlak et al. (1994) was the only study to include standardized measures. In this study, they assessed the pre- and post-outcomes on the Piers-Harris (Piers, 1989) and the ASA (Lee, Halberg, and Slemon, 1985). The Piers-Harris has test-retest reliability coefficients from numerous studies ranging from .42 to .96, and internal consistency estimates ranging from .88 to .93. Content, criterion-related, and construct validity from various studies have generally been quite acceptable. With regard to the ASA, its test-retest reliability was .84, and its internal consistency was .76. Concurrent validity was also assessed, with the ASA being correlated with the Assertion Inventory (Gambrill and Richey, 1975) and the Children’s Action Tendency Scale (Deluty, 1979), with an r of .33 and .55, respectively.

Interestingly, none of the previous studies used academic achievement on standardized tests or school grades as outcome measures. Such information would have been important in that one of the goals of self advocacy is to have students request resources, services, supports, or accommodations that will assist them in achieving academic success. In the absence of such information, it is difficult to know whether the practice of self advocacy skills results in an improvement in academic performance.

The present study, like previous self advocacy studies, developed measures to assess both knowledge and communication. More specifically, through the use of structured questionnaires
pre- and post-program, knowledge of learning disabilities, learning style, resources, services, supports, accommodations, and ability to succeed, and communications skills, including verbal and non-verbal skills, were evaluated. The advantage of such developed questionnaires is that face validity and content validity are good. In addition, these questionnaires had interrater reliability calculated in order to evaluate interobserver agreement and had test-retest reliability calculated in order to determine the correlation between two administrations of the questionnaire. Acceptable interrater reliability (Range .81 to 1.00) and test-retest reliability (.451 to .913). Unfortunately, due to types of questions and their inconsistent scoring style, internal consistency of these questionnaires was not established. In addition, since there have been no standardized tests in the areas of knowledge and communication with regards to self advocacy, no data on concurrent validity could be derived.

Generalization and maintenance of self advocacy skills were also examined in the present study. More specifically, maintenance of self advocacy skills was examined for three months post-program whereby students were approached every two weeks and asked whether they had advocated to a teacher in the previous two weeks. This information also confounded with information on generalization of skills since the self advocacy skills were being carried out in the students' natural environment on their own accord. Although Durlak et al. (1994) also examined generalization of self advocacy skills, these students were given specific generalization tasks to complete, and they were evaluated on these tasks with their performance being considered as generalization of self advocacy skills. A more valid measure of the ability to generalize self advocacy skills would entail having students, on their own accord, advocate for what they felt was personally important in order to achieve academic success. This was done in the present study.
The present study also utilized one standardized test. Students' academic locus of control was examined pre- and post-program using The Intellectual Achievement Responsibility Questionnaire (Crandall, Katkovsky, and Crandall, 1965). This questionnaire is commonly used in research studies in order to assess locus of control. It has a reported test-retest reliability of .69 to .74 and an internal consistency of .60.

Present Study Rationale And Hypotheses

The purpose of the present study was to implement and evaluate a self-advocacy program for high school students with LD. It was theorized that both knowledge and communication are important components for the acquisition of self-advocacy skills, and that the acquisition of such skills would, in turn, lead to a more internal locus of control. Using the self-advocacy model described earlier, the following were hypothesized:

H1) Pre- and Post-Program Advocacy Interview for Students and IARQ

It was predicted that at post-program, the Program group would have greater overall improvement than the Attention Control group. More specifically, these improvements were expected in a) Knowledge, b) Communication, (both measured by an interview), and c) Academic Attribution (as measured by the Intellectual Achievement Responsibility Questionnaire).

H2) Outcome of Self Advocacy Skills Training

It was predicted that the Program group would self advocate more often than the Attention Control group over a three month period, post-program as was measured by the Maintenance of Self Advocacy Skills form and verified with the Teacher Checklist.
H3) Theory on Acquisition of Self Advocacy Skills and Internal Locus of Control

It was predicted that a) both knowledge and communication skills training were necessary for the acquisition of self advocacy skills, and b) the acquisition of these skills would, in turn, lead to a more internal academic locus of control.
CHAPTER III

METHODS

Participants

High School Students

Permission to carry out this study was obtained from the Montreal Catholic School Board. School principals were approached, given information about the program, and asked for permission to implement the program in their respective schools. Three schools consented to the implementation of the program. Subsequently, with the permission of each school’s guidance counsellor, a list of students identified as having a ‘Serious Learning Difficulty’ was reviewed. These students had academic delays of two or more years evident in the language of instruction or in mathematics. This list included IQ information obtained from the Wechsler Intelligence Scale for Children – III (WISC-III, 1991), and academic achievement information obtained from the Wide Range Achievement Test – 3 (WRAT-3). Students whose IQ and achievement information had been collected within the past two years were considered for use in this study instead of retesting. Those having an average or above average Full Scale intelligence quotient on the WISC-III (i.e., IQ>85), and one or more academic deficiencies (academic delays of two or more years) in math, reading, or spelling as measured by the WRAT-3, qualified for the program. (Although permission was granted to use IQ and achievement data to identify students who qualified for participation in the program, permission to extract this information for the purpose of descriptive information on participants was not obtained).

Once a list of eligible students was generated, all were given parental consent forms (see Appendix A) to be signed and returned to allow the students to participate in the study. Those students receiving parental consent were also asked to participate in the self-advocacy program on a
voluntary basis. All responded favourably, with the exception of one student. The students willing
to participate in the study were asked to sign a student assent form (Appendix A).

Fifty-three high school students with LD, 31 males and 22 females, from grades 7-9,
participated in the study. The students' ages ranged from 12 years 0 months to 17 years 4 months,
with a mean age of 14 years 8 months. All participants were white, middle class students in a
predominantly white, middle class school district where the social economic status was
homogeneous. Only one grade per school was permitted to participated in the program: School 1
(N=397), sixteen grade 7 students, from a total of 89 students in that grade, participated; School 2
(N=583), twenty-two grade 8 students, from a total of 156 grade 8 students, participated; and
School 3 (N=512), fifteen grade 9 students, from a total of 119 students in that grade, participated.
In each school, the students participating were randomly assigned to either the Program Group or
Attention Control Group. In total, twenty-seven students comprised the Program Group, and
twenty-six comprised the Attention Control Group.

Overall, the representativeness of this sample is comparable to that found in the literature.
More specifically, the total LD population represented approximately 14.6 percent of the total
number of students in the three grades. This is similar to the statistics indicated by the Learning
Disabilities Association of Canada (LDAC) whereby approximately 10 to 15 percent of the school-
age population has a learning disability. Although the LDAC states that the ratio of male to female
students identified as having LD ranges from 3:1 to 8:1, and the present study has a ratio of
approximately 3:2, this can be explained by the fact that in two of the schools, the number of
females in the participating grades exceeded the number of males.
Classroom Teachers

Those teachers who had students participating in the program were also asked to participate. Prior to the program commencing, at the beginning of a scheduled teachers' meeting or Professional Development Day, each of the school principals introduced the self advocacy instructor and the role the program would play in the school. The program instructor then spoke to the teachers, giving them the definition of learning disabilities and self advocacy (Appendix C), explaining to them how the self advocacy program would operate, and the role that they would be playing within it with respect to recording whether students self advocated and evaluating their performances. Teachers were shown an example on an overhead of the Self Advocacy Student Evaluation Form (Appendix E) and the Teacher Checklist (Appendix E) that they would have to complete for various students in the program who approached them and advocated for a particular need. Questions from teachers were then answered at this point in time. This information session concluded by the school principal of each school encouraging the teachers to give their full cooperation with the implementation of the program.

Resource Teachers

One resource teacher from each school was asked to participate in the program. They were requested to participate in two role play scenarios in which they, along with the program instructor, would model to the students how they should advocate to teachers. In both role play scenarios, the resource teacher acted as the classroom teacher, and the program instructor acted as the student requesting resources, services, supports, or accommodations. The resource teacher and the program instructor had one rehearsal whereby two self advocacy scenarios were rehearsed. The resource teacher did not pose any leading questions, and only commented by saying 'yes' and 'O.K.'.
Measures

Pre- and Post-Program Advocacy Interviews For Students

The Pre-Program Advocacy Interview For Students (Appendix B) and the Post-Program Advocacy Interview For Students (Appendix B) are identical structured interviews that have questions relating to two of the three component areas in the self-advocacy model described in Chapter 2: Knowledge and Communication. The interview was adapted from the study by Rutledge (1992). Modifications of some of the original questions and the addition of numerous others, including the role play described below, were compiled to form an initial interview. This initial interview was piloted on several high school students with LD. Questions that were ambiguous were either omitted or reworded. The resulting interview protocol was used for the present study in order to obtain baseline and post-program data on both the Knowledge and Communication component areas for each of the students.

Responses to the questionnaires were either verbal or involved role play. The verbal responses were recorded by the interviewer and the interview itself was audio taped so that responses would be available if any questions arose. If the students' answers were ambiguous, they were asked to elaborate or clarify whenever necessary. All responses were recorded onto the interview forms. Role played responses were video recorded so that the scoring of required criteria could be reviewed by the interviewer. Each individual interview lasted approximately 30 minutes.

The Knowledge component area had questions pertaining to knowledge of learning disability, knowledge of learning style, knowledge of resources, services, supports, and accommodations, and knowledge of the ability to succeed. Knowledge of learning disability entailed asking students what their learning disability was, whether they had one, and if so to describe it. Knowledge of learning style involved asking students questions about how they learn.
and, indirectly, whether they were able to identify that a match or mismatch exists between their learning style and their teachers' teaching style. Knowledge of resources, services, supports, and accommodations included questions pertaining to knowledge of helpful equipment available to them in the school, class, or home (e.g., dictaphone), and whether they were able to solve learning-related problems (e.g., spelling difficulties, reading difficulties) through the use of resources, services, supports, or accommodations. Knowledge of the ability to succeed involved asking questions about what these students believed that students with LD could attain in their future (e.g., complete high school, attend College or University, occupation).

The Communication component area involved both observing students role play self-advocacy scenarios whereby they were scored on specific criteria, and questioning them on communication skills. The role play scenarios involved asking students to self-advocate during both the pre- and post-program interviews. For the pre-program scenario, students were told they had spelling difficulties, and were asked to advocate to the interviewer (posing as a teacher) that spelling errors be corrected on tests but not have them count for loss of marks. For the post-program advocacy scenario, students were told they had processing difficulties, and were asked to advocate to the interviewer (playing the role of a teacher) for extra time on written tests since it takes them longer to process information. These role play scenarios required each student to approach the interviewer (posing as a teacher who was doing work within her classroom), and advocate appropriately and effectively. The student was required to request needs by asking for resources, services, supports or accommodations the student deemed important in order to increase prospects for better learning and academic performance. The 'teacher' did not pose any leading questions to the student throughout the dialogue. Only comments such as 'yes' and 'O.K.' were utilized. Once the students completed their dialogues, the teacher concluded with the following:
'Thank you for bringing this to my attention. I will make sure to keep this in mind for the future'. This segment was video recorded and later scored according to how the students approached, advocated, and communicated their needs to the 'teacher'.

A question regarding communication skills followed the role play scenarios whereby students were asked to indicate the kinds of things that should be done or said when advocating to a teacher for something because of problems or difficulties. This question was asked following the self advocacy scenario so that students would not be given the opportunity to think about what was necessary to say or do when advocating to teachers. As a result, these verbal responses could not be incorporated into the role play scenarios.

**Intellectual Achievement Responsibility Questionnaire (IARQ)** (Crandall, Katkovsky, & Crandall, 1965).

The IARQ is a measure of academic locus of control. The reason for employing this measure was to determine whether or not academic locus of control would become more internalized following the program. It has 34 questions developed for educational settings. The forced-choice responses describe either a positive or negative academic achievement experience. Within each question, one choice involves the student attributing the success or failure to him or herself (internal locus of control), while the other ascribes it to other people or events (external locus of control) (e.g., "When you don't do well on a test at school, is it (a) because the test was especially hard or (b) because you didn't study for it?").

Overall, the total number of positive and negative events for which a student assumes responsibility is summed. This score is the Total IARQ score. Therefore, a high total score on this scale indicates a more internal locus of control, and a low total score denotes a more external locus.
of control. Overall, the IARQ has test-retest reliabilities ranging from .66 to .74, and split-half reliabilities ranging from .54 to .60. It has been used extensively to measure locus of control with students who have learning disabilities (Pearl, Bryan, & Donahue, 1980; Rogers & Saklofske, 1985; Tognetti, 1972; Wehmeyer, 1993). The final individual results yield a total internal locus of control score, a responsibility for success score, and a responsibility for failure score. This locus of control measure was administered orally in order to avoid possible reading or comprehension difficulties, with students following along and recording their preferred responses on their copy. The IARQ was administered to the students in their respective Program or Attention Control groups at the beginning of their first session together (pre-program), and at the conclusion of their last session together (post-program).

**Outcome of Self Advocacy Skills Training**

The purpose of obtaining information on the outcome of the self-advocacy training was to determine whether or not the students continued to self-advocate to teachers in the absence of the instructor asking them to do so. This information was obtained via an interview and a checklist. The Maintenance of Self Advocacy Skills interview (Appendix E) involved asking students individually to whom they advocated and when, for what reason(s), and the outcome. This information was recorded on the Maintenance of Self Advocacy Skills form by the instructor. The interviews were conducted during class hours, every two weeks, for a period of approximately 3 months following the completion of the program, with each interview taking approximately 5 minutes. The students' class schedules were obtained in order to facilitate this process (permission in Appendix A).

The Teacher Checklist (Appendix E) consisted of the names of all students who were in
the Program Group and Attention Control Group. Teachers were required to check the names of those students who had advocated to them during the past two weeks. In addition, teachers were asked to date the form and indicate why the student advocated to them and the outcome. This checklist was distributed to the teachers during the same two-week time frame students were interviewed, and also continued for a period of approximately 3 months. Once teachers completed the checklist, they were instructed to return the form to the instructor's mailbox.

After collecting information every two-week period, the Maintenance of Self Advocacy Skills forms and the Teacher Checklists were reviewed by the instructor. When discrepancies arose, they were dealt with immediately. For instance, if students indicated that they advocated to a teacher, but the teacher did not indicate it on the checklist, then the instructor approached the students or teachers, respectively, to determine whether the teacher may have forgotten about the self advocacy scenario or whether there was a misunderstanding between the student and teacher. This approach allowed for information regarding maintenance and generalization of self advocacy skills to be collected, while information was cross-checked between the student and teacher.

Data Collection Procedures

Students who met the selection criteria and had parental permission to participate in the study were individually taken to a quiet room in their respective school. After introductions, the students received the definition and an example of self advocacy which was then followed by an explanation of the self advocacy program. Once this had been addressed, the students were asked whether they would like to participate in the program. Only one student declined to participate. The remainder of students who had indicated a desire to participate were given a copy of the
student assent form (Appendix A) and asked to follow along as the interviewer read it aloud. Once completed, the interviewer asked if there were any questions. Those who had questions had them addressed. Subsequently, the students were requested to sign the form consenting to their voluntary participation in the study. All students at this point signed their forms. They then proceeded to be interviewed individually using the Pre-Program Advocacy Interview For Students (Appendix B).

Once all the students had been interviewed, they were randomly assigned to one of two groups: Program Group or Attention Control Group. The Program Group (N=27) received the self-advocacy program sessions. The Attention Control Group (N=26) received an alternate program. The programs for the two groups are described below. Both groups had seven sessions, with either one or two sessions being carried out per week. The number of sessions per week varied due to pre-scheduled school activities and professional development days. In total, these sessions lasted for one and one-half months. They took place during school hours at varying class times so that students were not constantly absent from the same class. Each session took approximately one hour and was held in an unused room in the school that was equipped with desks, chairs, and a chalkboard. This location was quiet and appropriately secluded from any interruptions. In each of the three schools, the self-advocacy program for the Program Group and the alternate program for the Attention Control Group were implemented concurrently.

At the beginning of the first group session, and at the conclusion of the last group session, students in both the Program Group and the Attention Control Group were asked to complete the IARQ as a group which was read aloud by the instructor. They were asked to answer each question on their own personal copy as it was read aloud. This allowed for pre- and post-program comparisons between groups on academic locus of control.
Upon the completion of the sessions, the students in both the Program Group and Attention Control Group were interviewed individually in a quiet room using the Post-Program Advocacy Interview For Students (Appendix B). As in the Pre-Program Advocacy Interview For Students, any ambiguous answers required clarification or elaboration from the students. Once all of the students had been interviewed, those students in the Attention Control Group received the self advocacy program.

**Self Advocacy Program**

Prior to the self advocacy program commencing, students received their personal duotang that was filled with the program's handouts. These handouts can be found in Appendix D. All handouts were read orally to the students so as to eliminate any concerns about reading or reading comprehension. These duotangs were given to the students at the beginning of each session and were returned to the instructor at the conclusion of each session. The self advocacy program, which was composed of seven sessions of 55 minutes, is described below.

**Session One**

The purpose of this introductory session was to allow each of the students to get to know one another so that trust and comfort with the group members could be established. In addition, this allowed for the discussion of the self advocacy program's purpose and goals, to come to an agreement on rules and confidentiality (e.g., nothing leaves the room, no teasing or insulting, etc.), and to define learning disability and its meaning to individuals in the group. Following this, self advocacy was defined and examples were given. Subsequently, a discussion took place as to whether any of the students had ever attempted to self advocate, either in school or other
environments, and the outcomes of such attempts.

Session Two

This session began with the students viewing the video "Through Our Eyes". (Learning Disabilities Association of Ontario. 1991). This video involves a special educator speaking to a group of people composed of teachers, friends, parents, psychologists, social workers, and others who are in contact with students who have LD. Overall, the speaker allowed the group to experience the frustration, anger, confusion, misunderstanding, and the fear that these students experience on a day-to-day basis. This video was shown to the students in the self-advocacy program because it was important that they realize that those around them do not necessarily understand what they feel and experience being LD. This also reinforced the fact that they need to speak to others about their disability so that others may understand them and possibly assist them whenever necessary.

A discussion regarding the film followed, and any personal experiences, concerns, or issues that they felt were important to discuss as a group were addressed. Once the discussion was completed, the Learning Style Inventory (LSI) (Dunn, Dunn, & Price, 1989) was administered to the students as a group. The LSI is an instrument that assesses an individual's learning style. More specifically, it identifies "how students prefer to function, learn, concentrate, and perform during educational activities in the following four areas: (a) environment (Sound, Temperature, Light, and Design); (b) emotionality (Motivation, Responsibility, Persistence, and the need for either Structure or Flexibility); (c) sociological needs (Learning Alone, with Peers, with Adults and/or in Several Ways); and (d) physical needs (Perceptual Preference(s), Time of Day, Intake, Mobility)" (p. 6. Dunn, Dunn, & Price, 1989). These four major areas are broken down into a total of 22
specific component areas (e.g., Sound, Motivation, Structure, Learning Alone, Time of Day, Mobility).

The **LSI** was employed as a teaching tool to show the students that there are different learning modalities, and that by becoming aware of how they learn best, they may enhance their ability to self-advocate (Phillips, 1990) which may enhance their success in learning (McWhirter & McWhirter, 1990; Ness, 1989). This inventory has 104 items, all on a five-point Likert scale with responses including 'strongly disagree', 'disagree', 'uncertain', 'agree', and 'strongly agree'. Standard scores of 60 or above indicate a strong preference for a particular area, while standard scores of 40 and below indicate a low preference for the particular area. Scores falling between 40 and 60 indicate neither a high or low preference for the particular area. The **LSI** was administered orally, with students recording their preferred responses on their personal score sheet, so to avoid reading or reading comprehension concerns.

Upon completion, the students were asked to fill in the **Student Advocacy Plan**. The **Self Advocacy Plan** was a work sheet that allowed the students to reflect on how they learn, possible modifications or interventions that they could use that would assist in their learning, and possible self-advocacy strategies they may use in order to obtain the particular modifications needed to assist in their learning. The purpose of this handout was to give the students the opportunity to reflect on their learning style, and how that may be matched to teaching style and resources, supports, or accommodations they need. Students then shared this information with a partner and later with the group. It was emphasized that being comfortable in sharing information about one's learning disability and learning style was an important step in accepting their LD and in learning how to self-advocate. This session concluded with the group as a whole determining possible steps on how to self-advocate. These steps were then compared to the following **Steps On How To Self Advocate**: 
1. Before approaching a teacher, think about what you are going to say (Cummings & Fisher, 1993).

2. Make sure it is a convenient time to speak to the teacher. If not, make an appointment (Rutledge, 1992).

3. Discuss your learning disability, related problems, and learning style to the teacher.


5. Come to an agreement or understanding.


7. Take Action.

Session Three

The video, "How Difficult Can This Be?" was viewed at the beginning of this session. This video was produced by the Learning Disabilities Association of Ontario in 1991. It showed students with LD discussing their personal problems, the issues they face with respect to their learning disability, and how people with LD differ with respect to learning and learning styles. This video helped students in the program realize that there are different ways to learn, and that individuals have their own styles for learning.

A discussion followed regarding the film, and any personal experiences, concerns, or issues that they felt were important to discuss as a group were addressed. Once this was completed, the students reviewed the Steps On How To Self Advocate that were outlined in the previous session. Subsequently, students were taught how to carry out these steps appropriately and effectively according to FLEMBAND. This is an acronym that was created by the instructor so that the students could remember the appropriate communication skills to be used while advocating. The students were introduced to this acronym and were asked to keep it in mind when approaching
someone for resources, services, supports, or accommodations. **FLEMBAND** represents the following:

- **F** - *positive facial expressions* (i.e., smiling) (Kleinke);
- **L** - *listening* (Cummings & Fisher, 1993);
- **E** - *eye contact* (Kleinke, 1986); 1986);
- **M** - *avoiding large number of movements* (i.e., tapping foot, rubbing arm) (Harrigan, 1985);
- **B** - *good body posture* (i.e., facing the teacher, standing erect) (Arnoff, Woiwe, & Hyman, 1992);
- **A** - *getting help from another adult if the meeting with the teacher is not a success* (Cummings & Fisher, 1993);
- **N** - *focusing on what one needs, not on what one thinks the teacher is doing wrong* (Cummings & Fisher, 1993); and
- **D** - *being diplomatic, tactful, and respectful* (i.e., speak politely) (Cummings & Fisher, 1993).

**Session Four**

At the beginning of this session, the group reviewed the **Steps On How To Self Advocate** and **FLEMBAND** taught in the previous session. This was followed with the students completing the **Things to Advocate for...** handout. This handout is a checklist developed so that students could check off "yes" or "no" on the indicated items as to whether or not they felt it was something for which they needed to advocate. This list could then be used in all subsequent and future classes in order to evaluate whether or not material or information being taught needed to be modified so that it matches the students' learning style. Each student was required to determine whether they needed to advocate for specific resources, services, supports, or accommodations in order for personal learning and academic performance to be enhanced. Additional things to advocate for could be added below the heading 'Others'. Once completed, students were paired and asked to
discuss with their partner what resources, services, supports, or accommodations they personally decided would assist them academically and why. In addition, they were asked to consider whether the 'things to advocate for' selected by their partner could possibly benefit themselves. The purpose of this activity was to have students realize that different people have different learning problems, that their partner may have selected something that they did not consider beneficial, and that although people choose similar 'things to advocate for', it may be for different reasons.

Meanwhile, individual students were asked to meet with the instructor so that they could receive their personal results on the LSI. The findings were type-written under the headings 'I learn best', 'I do not learn well', and 'Does not matter'. Each of the 22 component areas of the LSI were placed under one of the above headings with examples in order to assist the students in understanding their specific findings. Students were allowed to ask any question or discuss any concerns they had with respect to their particular findings. Once the students had conferred with the instructor, they were asked to consider the LSI findings as they continued to complete the above handout.

The session concluded with the students discussing their 'Things to Advocate for...' handout with the group stating the reasons why such a choice was thought to assist their learning. They were also asked to relate their choices to their particular learning style findings from the LSI.

**Session Five**

The Steps On How To Self Advocate and FLEMBAND were reviewed. This was followed by the modelling of two self advocacy situations by the instructor and a resource teacher. At this point, the students were asked to take note of how the Steps On How To Self Advocate and FLEMBAND were used in the role play. Upon completion, students were paired with other
students and given opportunities to role play given advocacy scenarios (e.g., need to work in the resource room because it is quieter, need to have class notes photocopied because they cannot keep up with note copying due to processing difficulties). While role playing, students had to incorporate the Steps On How To Self Advocate and FLEMBAND. Each student was given two opportunities to be a teacher and two to be a student.

Students were then paired with a new partner and asked to role play a given scenario in front of the group. The reason for this was that students may need to self advocate in the presence of others. Therefore, they were given the chance to do so in front of their peers. Those observing were asked to note whether or not the Steps On How To Self Advocate and the FLEMBAND communication skills were utilized.

The video recordings done during the Pre-Program Advocacy Interview For Students were shown at this point (permission, Appendix A). The student whose video recording was playing was asked to point out what was done correctly and incorrectly during the video taped self advocacy scenario. The other students were also asked to observe, and if anything was omitted by the student who was analyzing and criticizing his/her own video recording, the group would be asked to give their input. This procedure was done with each student's video upon permission. This appeared to be a useful learning process for the students because it allowed them to see themselves advocate from an observer's point of view while also learning from their mistakes and gaining knowledge on how to self advocate appropriately in the future.

At the end of the session, the students were assigned homework whereby each student was required to advocate to two teachers. Students were asked to complete the Advocacy Homework Assignment for each of the advocacy situations. This assignment was a work sheet to be completed by the students after they had approached a teacher and self advocated on a matter that
was of concern to them. This assignment was given in order for the students to practice their self advocacy skills while allowing for generalization of these skills. Students were able to return with any questions or concern they had with respect to their personal self advocacy experiences. This assignment was due the next session.

Once students had advocated to their teachers, they were instructed to give them the **Self Advocacy Student Evaluation Form** (Appendix E). These forms were evaluations that had to be completed immediately after every instance in which students had advocated to the teachers as part of the advocacy homework assignment. On these forms, teachers were asked to assess the students' self-advocacy performances fairly and accurately. Teachers rated how the students advocated and communicated (verbally and non-verbally), and whether the steps on how to advocate were utilized appropriately. Once this had been completed, the teachers were asked to sign and date the evaluations, and return them to the instructor's temporary mailbox in the respective school. These evaluations were scored out of 15, with a criterion for mastery of 12/15 (80%). It was explained to the students when they were handed out the forms that in order to receive a passing grade, students had to receive a score of 12 or more on the **Self Advocacy Student Evaluation Form**. Those students who received a score of less than 12 on either one or both of the two required self-advocacy assignments were required to re-advocate, either to the same teacher or someone new, until the criterion was met.

**Session Six**

The **Advocacy Homework Assignment** assigned at the end of the previous session was reviewed. Personal experiences, how they felt during and following the self-advocacy scenario, possible improvements in their approach, and other comments or concerns the students had were
discussed. This was followed by a talk from a guest speaker who had been diagnosed with learning disabilities. Students had the opportunity to hear this individual speak about his learning disability, how it has affected his life, and how he, as a student, had to overcome his learning disability so that he could be the successful person he is today. This was important for the students in the program because it was necessary for them to realize that their learning disabilities should not be used as a crutch, but rather, be viewed as a hurdle that can be surpassed. A question and answer period followed during which the students had the opportunity to pose questions to the guest speaker.

**Session Seven**

During the last session, students participated in *The Social Life Game* (Griffiths, 1991; Wiener & Harris, 1997). The game includes a game board, Monopoly money, one die, and index cards with four types of tasks. “Give and Take” cards involved students unknowingly selecting true or false comment cards, with monopoly money being given to the bank for having selected a false comment card and money collected from the bank for selecting a true comment card. “Right or Wrong” cards involved students indicating whether a comment was either true or false. “Fill-in” cards required students to correctly complete a sentence that had either a word or phrase missing. “Role play” cards required students to act out a self-advocacy scenario with the person to their right. All of the questions were written on cards that were placed in the center of the game board. These questions were designed to elicit responses with respect to the three component areas of the self-advocacy program. They were taken from the game played in Rutledge's (1992) study, with some additional questions being added due to the addition of the Attribution and Communication components, and of the subcomponent ability to succeed under the Knowledge component. (see Appendix D for game questions and game rules).
For the purpose of the game, students were divided into two groups, with each group taking one turn to play the game while the others were either responsible for the Monopoly money, keeping track of the players' points earned, or observing that the players played fairly. The students who played the game each took one turn, with each turn involving throwing a die, moving along the game board accordingly, and landing on either the role play, right and wrong, fill-in the blank, or give and take questions. If their response was correct, Monopoly money was awarded. If their response was incorrect, Monopoly money was taken away. Once the game was completed, students who had collected the most Monopoly money in each game were given the opportunity to select a treat (e.g., chocolate bar, potato chips, cookies, chewing gum, etc.). Students who participated in the game exchanged places with those who observed. Once again, when the game was completed, students who had collected the most Monopoly money in each game were given the opportunity to select a treat. A certificate for completing the self-advocacy program was awarded to each of the students at the end of this session (see Appendix D).

Attention Control Program

Students in the Attention Control Group also participated in a series of 7 sessions of an alternate program that ran concurrently with the self-advocacy program. These sessions involved viewing two films. During these sessions, students were asked to comment on these films in discussion and written format with the instructor initiating topics for discussion. Within each film and between films, students were asked to make character comparisons, discuss plot development and themes, and critique the films on choice of role characters, filming style, setting, and other comparable features. The reason for these sessions was to eliminate the possibility that attention to the program group would be a confounding variable affecting the
results at the end of the program. Furthermore, since the Program Group viewed and commented on films and engaged in discussions and paper-and-pencil tasks, this was kept consistent by having the attention control group experience a similar format. Once again, all handouts were read to the students so as to eliminate any concerns about reading or reading comprehension.
CHAPTER IV

RESULTS

Preliminary Analyses

Prior to analysing the data, preliminary analyses were done on the attendance rate of the students who participated in the study, on the data collected during the study, and on the equivalence of the Program Group and Attention Control Group at pre-test. The results are discussed below.

i) Attendance

Overall, there was a high percentage of attendance by the students who participated in the program group and in the attention control group. The attendance rate was approximately 95 percent for both groups, with 1.4 students being absent per session for the Program Group and 1.3 students for the Attention Control Group. The reason for such high attendance may be attributed to the fact that the program was carried out in the students' school during class time. Attending a non-curriculum based class may have been a strong incentive. In addition, the dynamism and positive attitude of the instructor, along with the encouragement given to the students to attend each subsequent session may have promoted regular attendance. Furthermore, sessions were scheduled according to the school calendar of activities so as to help maximize attendance rate.

ii) Data Collected

Prior to analyzing the results, the data were examined for outliers; none were found. Subsequently, the age variable was recoded into two groups split at the median (ages 144 to 175 and 180 to 209 months) so as to better distribute the number of students per age group because of
the large age range. It should also be noted that the school variable was confounded with the grade variable since in each of the three schools, a different grade participated.

iii) Equivalence of Groups at Pre-Test

Data were first analyzed to determine whether there were significant differences between the Program Group and Attention Control Group at pre-test with regard to participant characteristics and component areas. Table 2 outlines the means and standard deviations of the participant selection and component areas Total scores. One-way analyses of variance revealed that there was no significant age difference between the Program Group and the Attention Control Group (F(3.33) = 0.503, p = 0.683). A Chi-square analysis for the variables school which students attended ($X^2 = 0.07, df = 2, p > 0.2$) and gender ($X^2 = 1.02, df = 1, p > 0.2$) did not reveal any significant differences between the two groups. One-way analysis of variance also revealed that the Program Group and the Attention Control Group did not differ on the predictor variables of Knowledge Total ($F(1.51) = 0.30, p = 0.587$), Communication Total ($F(1.51) = 3.312, p = 0.082$), and Attribution Total ($F(1.51) = 0.575, p = 0.453$) at pre-test.

Interrater Reliability and Test-Retest Reliability of the Pre-Post Program Advocacy Interview for Students

Interrater reliability of the Pre- and Post-Program Advocacy Interviews was calculated using Cohen’s kappa. One additional rater, who was blind as to group status of the students, randomly scored approximately 25 percent of the Interviews (12 in total). Using kappa, interrater reliability was obtained for the Knowledge and Communication component areas and their subcomponent areas. In general, acceptable levels of interrater agreement were obtained and are as follows: Knowledge Total = .92. Knowledge of Learning Disabilities = .96. Knowledge of
Table 2

Subject Characteristics and Component Area Totals at Pre-Test
For Program Group and Attention Control Group

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<th>Attention Control Group (N=26)</th>
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</thead>
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<td>17</td>
</tr>
<tr>
<td>Females (N=22)</td>
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<td>9</td>
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</tr>
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<tr>
<td>School 2</td>
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<td>School 3</td>
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<tr>
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<tr>
<td></td>
<td>5.76</td>
<td>3.48</td>
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</table>
Learning Style = .93. Knowledge of Resources, Services, Supports, and Accommodations = .98. Knowledge of the Ability to Succeed = .81. Communication Total = 1.00. Communication Role Play = 1.00, and Communication Interview = 1.00. Overall, the average kappa for the interview was .96 (Range = .81 to 1.00).

Test-retest reliability was also evaluated. The Pre- and Post-Program Interviews for Students completed by the Attention Control group (N=26) were used to determine the test-retest coefficients. Using Pearson Correlation, test-retest reliability was obtained for the Knowledge and Communication component areas and their subcomponent areas. In general, acceptable levels were obtained and are as follows: Knowledge Total = .913. Knowledge of Learning Disabilities = .724. Knowledge of Learning Style = .502. Knowledge of Resources, Services, Supports, and Accommodations = .755. Knowledge of the Ability to Succeed = .883. Communication Total = .560. Communication Role Play = .451, and Communication Interview = .567. Overall, the test-retest reliability of the questionnaire was .875. All of the correlations were significant at the .01 level, with the exception of Communication Role Play, which was significant at the .05 level.

Analysis of Data

Once preliminary analyses were completed, data from the Pre-Post Program Advocacy Interview, IARQ, and frequency of self advocacy practices post-program were examined. A multivariate analysis of variance (MANOVA) with repeated measures was performed on the interview data and IARQ. This was followed by univariate analysis on the component areas, and later with post-hoc analysis of variance with repeated measures on the subcomponent areas on the significant univariate findings. For the purpose of analyzing the data with regard to the
frequency of self advocacy practices post-program. a MANOVA was used followed by t-tests. Pearson Correlation was used to determine how each of the component and subcomponent areas, along with the outcome results of the self advocacy training, correlated with each other. Hierarchical multiple regression analyses were performed on the component areas to determine what variables contribute to the frequency of self advocacy practices, and what variables contribute to the academic attribution (locus of control) of the students.

i) Pre-Post Program Advocacy Interview and IARQ

A multivariate analysis of variance (MANOVA) with repeated measures was performed on the Knowledge, Communication, and IARQ Total Scores, with Group (Program versus Attention Control) as one factor and Time (Pre-Post) as a repeated measure. This was followed up with univariate two-way repeated measure analyses of variance for each of the three variables (Knowledge Total, Communication Total, IARQ Total). The results of the MANOVA showed a main effect for Group (F(3.49)= 295.737, p<.001), with the Program Group achieving higher scores than the Attention Control Group. There was a significant multivariate Time effect (F(1.51)=428.986, p<.001) with post-program scores exceeding pre-program scores. Consistent with the hypothesis that the Program Group would improve more from pre-test to post-test than the Attention Control group, the Group-by-Time interaction effect was significant (F(1.51)=300.470, p<.001).

The univariate analyses showed that the Group, Time, and Group-by-Time interactions occurred for both the Knowledge and the Communication Total scores, but not for the IARQ Total scores. With regard to the Knowledge Total score, there was a significant Group effect (F(1.51)=155.822, p<.001), with the Program Group obtaining higher scores than the Attention Control Group. a significant Time effect (F(1.43)=85.907, p<.001). with students obtaining higher
scores at post-test compared to pre-test. and a significant Group-by-Time interaction (F(1.43)=145.376. p<.001), with the Program Group showing greater gains from pre-test to post-test than the Attention Control Group. Similarly, with regard to the Communication Total score, there was a significant Group effect (F(1.51)=906.966. p<.001), with the Program Group obtaining higher scores than the Attention Control Group. a significant Time effect (F(1.43)=181.034. p<.001), with students obtaining higher scores at post-test than at pre-test. and a significant Group-by-Time interaction (F(1.43)=275.297. p<.001), with the Program Group showing greater gains from pre-test to post-test than the Attention Control Group. In contrast, there were no significant main effects or interaction effect for IARQ Total score. Means and standard deviations are shown in Table 3. The significant Group-by-Time interaction effects are depicted in Figure 2.

Given the above results, post-hoc analyses were done using repeated measures analysis of variance for each subcomponent area in the Knowledge and Communication component areas. Overall, the results of the analyses revealed significant Group effects for each of the subcomponent areas: Knowledge of Learning Disability (F(1.51)=38.976. p=.001); Knowledge of Learning Style (F(1.51)=39.944. p=.001); Knowledge of Rights. Resources. Services. and Accommodations (F(1.51)=195.063. p<.001); Knowledge of the Ability to Succeed (F(1.51)=75.678. p<.001); Communication (Role Play) (F(1.51)=620.393. p<.001); and Communication (Interview) (F(1.51)=576.785. p<.001). In each of the subcomponent areas, the Program Group obtained higher scores than the Attention Control Group.

Similarly, a significant Time effect was found for each subcomponent area: Knowledge of Learning Disability (F(1.43)=12.838. p=.001); Knowledge of Learning Style (F(1.43)=11.557. p=.001); Knowledge of Rights. Resources. Services. and Accommodations (F(1.43)=88.332. p<.001); Knowledge of the Ability to Succeed (F(1.43)=14.342. p<.001); Communication (Role
Table 3

Means and Standard Deviations of Pre-Post Program Performance for Group by Component Area

<table>
<thead>
<tr>
<th>Component Area</th>
<th>Program Group</th>
<th></th>
<th>Attention Control Group</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mean</td>
<td>SD</td>
<td>Mean</td>
<td>SD</td>
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<tr>
<td>Knowledge Total</td>
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<td></td>
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<td>14.44</td>
<td>3.83</td>
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<tr>
<td>Post</td>
<td>25.78</td>
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<td>Communication Total</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pre</td>
<td>7.04</td>
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<td>2.01</td>
</tr>
<tr>
<td>Post</td>
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<td>Attribution Total</td>
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<td></td>
</tr>
<tr>
<td>Pre</td>
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<td>24.62</td>
<td>3.48</td>
</tr>
<tr>
<td>Post</td>
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<td>6.19</td>
<td>25.04</td>
<td>3.42</td>
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</table>
Pre- and Post-Program Knowledge and Communication Totals by Group

Knowledge Total

Pre-Program | Post-Program
---|---

Communication Total

Pre-Program | Post-Program
---|---

Figure 2.
Overall, the post-program scores of the students in the Program Group were significantly higher than the pre-program scores.

Significant Group-by-Time interactions were also found for each of the subcomponent areas: Knowledge of Learning Disability (F(1.43)=16.18, p<.001); Knowledge of Learning Style (F(1.43)=35.235, p<.001); Knowledge of Rights, Resources, Services, and Accommodations (F(1.43)=124.728, p<.001); Knowledge of the Ability to Succeed (F(1.43)=23.532, p<.001); Communication (Role Play) (F(1.43)=172.409, p<.001); and Communication (Interview) (F(1.43)=180.275, p<.001). Within each of these subcomponent areas, the Program Group achieved greater gains from pre-test to post-test than the Attention Control Group. Means and Standard Deviations are shown in Table 4. The Group-by-Time interaction effects are shown in Figures 3 and 4.

ii) Outcome of Self Advocacy Skills Training

Every two weeks for approximately three months following the self advocacy program, students from both groups were asked whether they had advocated in the previous two weeks. This information was compared to that obtained from teachers who were asked to indicate the students who advocated to them in the same previous two weeks and the reasons why they advocated to them. Any discrepancies were resolved with the teacher and student. The resulting number of self advocacies data were analyzed using a multivariate analysis of variance (MANOVA) and t-tests. The MANOVA revealed a significant Group effect (F(6.32)=16.414, p<.001), indicating that the Program Group and the Attention Control Group differed on the maintenance of self advocacy skills. Post-hoc t-tests revealed significant differences between the two groups at week four (t(45)=3.964, p<.001), week eight (t(44)=3.019, p=.005), week ten (t(48)=7.606, p<.001), and week
Table 4

Means and Standard Deviations for the Subcomponent Areas of Knowledge and Communication Component Areas by Group

<table>
<thead>
<tr>
<th>Subcomponent Areas</th>
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<td>Of Learning Style</td>
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<td>Of the Ability to Succeed</td>
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</table>
Pre- and Post-Program Knowledge Subcomponent Area Totals by Group

Knowledge of Learning Disabilities

Knowledge of Learning Style

Knowledge of Resources and Services

Knowledge of Ability to Succeed

[Bar charts showing the comparison between Pre-Program and Post-Program scores for different knowledge areas by group.]
Figure 4.

Pre- and Post-Program Communication Subcomponent Area Totals by Group

Communication - Role Play

[Bar chart showing mean scores for Attention Control Group and Program Group before and after the program.]

Communication - Interview

[Bar chart showing mean scores for Attention Control Group and Program Group before and after the program.]
twelve ($t(48)=4.051$, $p<.001$) post-program, with the Program Group advocating more often than the Attention Control Group. No significant differences, however, were found between the two groups at week two and at week six post-program, although at week six the differences approached conventional levels of significance ($t(46)=1.782$, $p=.081$). Figure 5 shows the mean number of times the students in the Program and Attention Control Groups advocated to their teachers.

iii) Theory on the Acquisition of Self Advocacy Skills and Internal Locus of Control

Pearson Correlations were calculated for the independent and dependent variables in the study. The results are summarized in Table 5. These correlations indicate that the subcomponents of knowledge, which include knowledge of LD, learning style, resources, services, supports, accommodations, and ability to succeed, are individually correlated with Knowledge Total, ranging from 0.623 for Knowledge of LD to 0.915 for Knowledge of Resources, Services, Supports, and Accommodations. It was also found that each of the subcomponents were significantly correlated with each other, with correlations ranging from 0.293 to 0.656. Similarly, the Communication subcomponents, which included both verbal and role play as subcomponents, were highly correlated with Communication Total. The correlations were 0.936 for the verbal responses and 0.981 for the role plays. These subcomponents were also highly correlated with each other ($r = 0.851$). Outcome Total was significantly correlated with all of the variables ($r = 0.282$ to 0.650) except IARQ, whereas IARQ was not correlated with any of the variables. These results suggest that while Knowledge and Communication and their subcomponents may be important for self advocacy, they had no significant impact on locus of control.

In order to better define the relationship among Knowledge, Communication, Outcome Total, and IARQ, two hierarchical multiple regressions were performed. The first analysis involved
Figure 5.

Outcome of Self Advocacy Skills Training

![Bar chart showing the outcome of self-advocacy skills training with two groups: Attention Control Group and Program Group. The chart displays the mean number of self-advocacies over the number of weeks post-program.](chart_image)
Table 5

Pearson Correlations Among Knowledge and Communication Totals and Subcomponent Totals, IARQ, and Outcome Total

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<th>KLS</th>
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<th>KAS</th>
<th>KTOT</th>
<th>CV</th>
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<tr>
<td>OUTCOME</td>
<td>▲0.439</td>
<td>*0.282</td>
<td>**0.424</td>
<td>*0.339</td>
<td>▲0.462</td>
<td>▲0.650</td>
<td>▲0.506</td>
<td>▲0.624</td>
<td>-0.131</td>
<td></td>
</tr>
</tbody>
</table>

*p ≤ .05  **p ≤ .01  ***p ≤ .001

KLD – Knowledge of Learning Disabilities  
KLS – Knowledge of Learning Style  
KR – Knowledge of Resources, Services, Supports, Accommodations  
KAS – Knowledge of the Ability to Succeed  
KTOT – Knowledge Total  
CV – Communication (Verbal)  
CRP – Communication (Role Play)  
COMTOT – Communication Total  
IARQ – Intellectual Achievement Responsibility Questionnaire  
OUTCOME – Outcome Total
the total number of self advocacies over a three-month period post-program (Outcome Total) as the predicted dependent variable. and the second analysis involved IARQ scores post-program as the dependent variable. With regard to the first hierarchical multiple regression predicting Outcome Total, the order of entry for the independent variables was Group, Knowledge Total, Communication Total, and IARQ Total, with the latter three scores being the change from pre- to post-program (post-program total scores minus pre-program total scores). Change in scores was used because the theory predicted that change, or acquisition of knowledge and communication skills, would predict frequency of self advocacy. It should be noted, as shown in the results described above, that significant change in Knowledge and Communication Total scores occurred only in the Program Group. Due to the sample size, possible interactions among the independent variables were not included in the regression analysis. The final analysis of variance of the multiple regression was highly significant \(F(4, 48) = 11.312, p < .001\). The results from the regression analysis yielded a significant main effect for Knowledge \((T = -2.140, p = .037)\), Communication \((T = 2.199, p = .039)\), and IARQ \((T = -2.087, p = .042)\). The final squared multiple R was 0.485, which means that approximately 49 percent of the variance is explained by the linear equation of these independent variables.

In the first hierarchical regression, the theoretically motivated order of entry of the variables was Group (Program Group and Attention Control Group), Knowledge, Communication, and IARQ. The changes in value of the squared multiple R was the largest (0.367) when Group was entered, then Knowledge Total increased the \(R^2\) by 0.028 for a new total of 0.395. then Communication Total increased the \(R^2\) by 0.044 for a new total of 0.439, and finally IARQ increased the \(R^2\) by 0.046 for a new total of 0.485. Although the variable Group increased the \(R^2\) from 0.000 to 0.367, once all of the variables were entered, Group did not
significantly contribute to the variance. The unique variance contributed by the Group, as calculated with the squared semi-partial correlations, was 2.5 percent. Knowledge Total was 4.9 percent. Communication Total was 4.8 percent, and IARQ was 4.7 percent. The combined unique variance contributed by all variables to the total variance (48.5 percent) was 16.9 percent. with the remaining 31.6 percent of the total variance being due to the correlated independent variables.

In the second analysis with IARQ as the dependent variable, the order of entry for the independent variables was Group, Knowledge Total, Communication Total, and Outcome Total, with the Knowledge and Communication Total scores being the change from pre- to post-program (post-program total scores minus pre-program total scores). The final analysis of variance of the multiple regression was not significant ($F(4.48)=1.302, p=.283$). The final squared multiple R was 0.098, indicating that only approximately 10 percent of the variance is explained by this model.
CHAPTER V
DISCUSSION

The students in the Program Group who received self advocacy training achieved significant gains in self advocacy skills compared to the Attention Control Group. In particular, these gains were noted in an increase in Knowledge and Communication. Relative to the Attention Control Group, I found that the students who participated in the self advocacy training program had increased their knowledge about learning disabilities, learning style, resources, services, support, and accommodations available to them, and their ability to succeed. In addition, this group also had significant gains at post-program in communication skills compared to the Attention Control Group. On the other hand, no significant gains were made by either group with regards to academic attributions for academic successes and failures.

Overall, the outcome of the self advocacy training program revealed that the students in the Program Group advocated significantly more often than the Attention Control Group post-program for a period of approximately three months. Furthermore, as was hypothesized, it was found that both Knowledge and Communication were predictive of the acquisition of self advocacy skills, with locus of control also contributing to the acquisition of these skills. Contrary to the hypothesis, however, self advocacy skills were not predictive of internal locus of control. These results are discussed below, beginning with the findings from the three component areas of the self advocacy model (Knowledge, Communication, Attribution), followed by a discussion of the outcome results of the self advocacy skills training program. This chapter concludes with a discussion on the theory of the acquisition of self advocacy skills and internal locus of control, limitations of the present study, and implications for future research.
Self Advocacy Theory and Model

Knowledge

The Knowledge Total scores of the students in the Program Group increased following the implementation of the self advocacy program whereas the Knowledge Total scores of the Attention Control Group remained fairly stable. Upon closer examination, the gains in the Knowledge component area were due to an increase in Knowledge in each of the subcomponent areas which included Knowledge of Learning Disabilities, Knowledge of Learning Style, Knowledge of Resources, Services, Supports, and Accommodations, and Knowledge of the Ability to Succeed.

The gains in the Knowledge of Learning Disabilities by the Program Group were not surprising in light of the fact that many students with LD do not understand the term learning disability, while others do not clearly understand what their personal learning disability entails, and still others deny having a learning disability (Aune, 1991; Hoy 1986; Ness, 1989; Sachs et al., 1987). Therefore, providing high school students with LD information about learning disabilities and how it relates to them personally was expected to result in an increase relative to the Attention Control Group. This finding has also been evident in previous self advocacy studies with high school students with LD (Durlak et al., 1994; Rutledge, 1992; Sachs et al., 1987). Thus, the results suggest that Knowledge of Learning Disabilities can be increased with students who have LD in high school. An implication of this finding is that there is a need to teach students with learning disabilities about learning disabilities because they typically are not fully aware or do not clearly understand learning disabilities and how it may pertain to their academic difficulties. Furthermore, such knowledge is important for these students’ future because it has been found to be a characteristic of successful adults who have LD (Gerber, et al., 1992; Reiff et al., 1995).

Knowledge of Learning Style also increased in the Program Group relative to the Attention
Control Group. According to Levine, Clarke, and Ferb. (1981), many students with LD do not fully understand their own learning strengths and weaknesses, which adds to their learning problems. Therefore, the students' gain in knowledge about their personal learning style, which included strengths and weaknesses, was expected given the fact that such knowledge is often lacking in these students. Similar results were found by Rutledge (1992) who also measured an increase in this area after having implemented her self-advocacy program. Other studies have included this subcomponent in their self-advocacy programs (Durlak et al., 1994; Phillips, 1990; Sachs et al., 1987); however, they did not evaluate whether the students' knowledge about personal learning style differed as a result of including this subcomponent in their program. Overall, the results of the present study indicate that there is a need for instructing high school students with LD that different learning styles exist. With such information about personal strengths and weaknesses with regards to learning style, these students can apply this information to their present academic endeavors and to their adult lives so that success may be achieved (Gerber, et al., 1992; Reiff et al., 1995).

The Knowledge of Resources, Services, Supports, and Accommodations scores of the students in the Program Group also significantly increased whereas the Attention Control Group scores remained stable. As mentioned previously, students with LD do not fully understand their own learning strengths and weaknesses (Levine, Clarke, and Ferb, 1981). Therefore, requesting resources, services, supports, and accommodations would be a difficult task because they would not be able to match such requests with their own personal learning style. Consequently, it was expected that these students would gain knowledge about resources, services, supports, and accommodations, particularly after having learned about their personal strengths and weaknesses with regards to learning. These findings support the findings of Rutledge (1992) where knowledge in this area increased subsequent to the implementation of her self-advocacy program. Although
other investigators have included this component in their program (Durlak et al., 1994; Phillips, 1990; Sachs et al., 1987). They did not formally evaluate any changes in knowledge in this area pre- and post-program.

The Total score for the Knowledge for the Ability to Succeed subcomponent varied little in the Attention Control Group whereas a significant increase was found in the Program Group. At pre-program, the fact that the two groups did not differ was expected considering the fact that many students with LD experience repeated academic failures (Dudley-Marling et al., 1982; Ness, 1989). As a result, some begin to feel helpless, believing that since they have learning difficulties in high school, they should not pursue post secondary education (Ness, 1989). At post-program, however, having had a successful adult with LD speak to them, coupled with positive self advocacy experiences during the program, it is not surprising that gains in this area by the program group were achieved.

Overall, although the small sample size of the present study did not allow for a regression analysis to be performed to determined which of the Knowledge subcomponent areas were necessary for the acquisition of self advocacy skills, a Pearson correlation among Knowledge Total and the subcomponents revealed that the subcomponents do correlate highly with the Knowledge Total scores. Therefore, this suggests that these subcomponents may play an important role in the acquisition of self advocacy skills. However, the exact relationship between these subcomponents and the acquisition of self advocacy skills is unknown. This relationship can be perhaps examined in future research.

**Communication**

The Communication Total scores of the students in the Program Group increased following the implementation of the self advocacy program whereas the Communication Total scores of the
Attention Control Group remained fairly stable. These responses were evident in the students' role play scenarios and verbal response to a question relating to communication skills during the interview, which indicate that the students were able to both verbalize and enact what is necessary for self advocacy. It was encouraging that the students in the self advocacy program increased their communication skills post-program because these students have been found to have problems with communication skills (Bryan et al. 1981; Hess et al., 1993; Wiig & Semel, 1976). Incorporating these strategies that have been found to be effective in social skills training programs (McIntosh, Vaughn, & Zaragoza, 1991; Wiener & Harris, 1997) appeared to facilitate the acquisition of communication skills in self advocacy.

Some of the studies on self advocacy programs with high school students with LD have included some type of communication skills training (Durlak et al., 1994; Rutledge, 1992). However, unlike the present study, these investigators did not evaluate whether such training resulted in any change in communication skills by these students.

As with the Knowledge subcomponent areas, determining which of the Communication subcomponent areas were necessary for the acquisition of self advocacy skills was not examined due to sample size limitations. Once again, a Pearson correlation among the Communication Total scores and the subcomponents revealed that the subcomponents do significantly correlate with Communication Total, thus suggesting that these subcomponents may play an important role in the acquisition of self advocacy skills. However, the exact relationship between these subcomponents and the acquisition of self advocacy skills is unknown. This relationship can be examined more closely in future research.
Attribution

The Attribution Total scores of the students in the Program Group and Attention Control Group did not differ at both pre- and post-program. Although it was predicted, despite any previous self advocacy research examining this component, that those students participating in the self advocacy program would alter their attribution practices with regards to academic successes and failures, the findings indicated otherwise. This result may be due to the fact that these students experience a history of repeated academic failure (Dudley-Marling et al., 1982; Ness, 1989), with students taking responsibility for failures, but not successes (Chapman and Boersma, 1979; Pearl, Bryan, and Donahue, 1980; Tognetti, 1972). As a result, these students are at risk for experiencing learned helplessness, the belief that they are “powerless to influence their environment” (Dudley-Marling, 1982). Given such attribution patterns due to their history of negative academic experiences, then it is not surprising that a seven session self advocacy program did not alter their academic attribution patterns. In addition, these students were not given attribution training as part of the program. Therefore, the short time period and the absence of an attribution training program may have influenced the current finding.

Outcome of Self Advocacy Skills Training

The frequency with which the students in the Program Group of the present study self advocated to their teachers was significantly better than that of the Attention Control Group. This difference in frequency may have been due to the fact that the students in the Program Group realized the benefits of self advocating, such as receiving academic resources, services, supports, or accommodations which then may have helped them with regards to their academic performance. In turn, having such needs met, with the increased potential for success, may have led to further self
advocacy practices. For instance, one student, after realizing he had misunderstood a question on a quiz, approached his teacher and explained his situation. As a result, he was able to re-write that particular question and later received full marks for it. After having had that experience, he began to self-advocate more often.

The self-advocacy practices acquired by the Program Group may be attributed to numerous additional factors. First, research has found that implementing a social skills program in an environment with which people interact on a daily basis can facilitate both the acquisition and generalization of the social skills (Wiener & Harris, 1997). The present study implemented the self-advocacy program in the students' school environment whereby they advocated to teachers with whom they are in contact daily. Second, role play, where a social skill is performed and practiced, and homework assignments that provide opportunity for practice of newly learned skills in a natural environment, can aid in the maintenance and generalization of social skills (Cartledge & Milburn, 1986). In the present self-advocacy program, the students were required to role play and they were given a self-advocacy homework assignment where they had to approach various teachers and self-advocate. Lastly, rehearsal has been found to improve performance of social skills (Ladd & Mize, 1983) which, in turn, can facilitate the maintenance and generalization of these skills (Wiener & Harris, 1997). In the present study, the students rehearsed the newly learned self-advocacy skills during program sessions and when they advocated to teachers for their homework assignment. Overall, given that the students role played self-advocacy scenarios, rehearsed them, and were given a self-advocacy homework assignment to be completed in their school (natural environment) with their teachers, then it is not surprising that the outcome of the self-advocacy training program resulted in the students in the Program Group self-advocating more often than the Attention Control Group post-program.
It may be argued that questioning students at 2-weeks post-program about their self-advocacy practices may have cued the students in the Program group to begin self-advocating, particularly since there were no differences between the two groups at this point but there were thereafter. However, this was controlled for by also asking the Attention Control group about their self-advocacy practices. Cueing the Attention Control group did not prompt them to self-advocate. Although the cueing may have prompted the Program Group to self-advocate, the data suggests that the cueing was only helpful because they had the skills.

Theory on the Acquisition of Self Advocacy Skills and Internal Locus of Control

Validity of the Theory

The results of the present study support the theory that both Knowledge and Communication were necessary and important components for the acquisition of self-advocacy skills. More specifically, knowledge of LD, learning style, resources, services, supports, and accommodations, and communication skills, including verbal and non-verbal skills, facilitated the acquisition of self advocacy. This was accomplished through the use of verbal instruction, modelling, rehearsal, practice opportunities, guest speaker, game, performance feedback, positive reinforcement and role play, including role taking and problem solving. Through the students gaining knowledge of learning disabilities, in addition to learning about their personal learning styles and resources, services, supports, and accommodations available to them, they were able to request academic assistance using appropriate communication skills taught in the program. As a result, these students not only acquired self-advocacy skills, but also continued to use them during a three month period post-program.
It was also hypothesized that the acquisition of self advocacy skills was predictive of internal locus of control. In other words, it was predicted that the academic locus of control of the students participating in the self advocacy program would become more internalized post-program. Contrary to the prediction, the acquisition of self advocacy skills did not lead to internalisation of locus of control. Instead, it would appear that those students who had a more internal locus of control were more likely to self advocate than those who had a more external locus of control. In other words, internal locus of control was predictive of self advocacy skills acquisition. Figure 6 depicts the relationship between these components. As discussed previously, it is possible that no change in academic attribution patterns was found because the duration of the program was relatively short and no attribution training was included. Furthermore, perhaps frequency of self advocacy practices did not lead to a more internal locus of control because, in light of a history of negative academic experiences and the fact that attribution patterns are relatively stable characteristics, students need to experience numerous positive self advocacy outcomes in order to internalize their locus of control. It is possible that assessing the students’ locus of control after they self advocate for a long period of time may result in a different outcome.

What the results of the present study did show was that those students who had an internal locus of control were more likely to advocate. It appears that having control of one’s life may help promote self advocacy skills in that these students are more likely to take initiative in and responsibility for their learning, and therefore self advocate more often. Perhaps it is this relationship - internal locus of control affecting self advocacy practices - that aids adults with LD to become vocationally successful; however, additional research in this area is needed.

Whether an inverse relationship exists between the Knowledge, Communication, and
Figure 6

Acquisition of Self Advocacy Skills

Knowledge

Communication

Internal Locus of Control

Acquisition of Self Advocacy Skills
internal locus of control with the acquisition of self advocacy skills is possible. In other words, does the acquisition of self advocacy skills increase Knowledge, Communication, or internal academic locus of control? This relationship was not examined in this study. Perhaps future research should examine this relationship by re-evaluating Knowledge, Communication, and academic locus of control at a later date post-program (i.e., 6 months, 1 year).

Limitations of the Research

There were a few shortcomings of the present self advocacy program. First, although interrater reliability and test-retest reliability of the Pre- and Post-Program Advocacy Interview for Students was good, and the scale had sound content validity in that it was connected to the information taught in the program, concurrent validity of the scale was not established since there are no pre-existing measures with regards to this interview.

Second, the self advocacy program's impact on the students' grades was not measured. This information would have been important in that the self advocacy program was implemented in order to help students learn self advocacy skills so that they may request resources, services, supports, or accommodations that would help them succeed academically. Any gains in the students' academic performance due to self advocating would have further consolidated the importance of such a training program for students with L.D.

Lastly, although the Program Group and the Attention Control Group experienced similar program formats, they differed on role play participation. The Program Group was given the opportunity to role play self advocacy scenarios, whereas the Attention Control Group did not participate in any type of role play. Due to time constraints given by the schools, and the duration of the videos shown to the students, the inclusion of role play was not possible.
Implications for Future Research

The addition of a measure that evaluates students' academic performance pre- and post-program, along with long-term results, would yield important information. If students' self-advocacy practices resulted in an increase in academic performance, then such a program would not only be beneficial for these students, but also important in that these students would experience academic success after years of experiencing repeated academic failures (Dudley-Marling et al., 1982; Ness, 1989) and possibly learned helplessness (Seligman, 1975; Wehmeyer, 1993; Zimmerman, 1990).

Future research should also consider long-term follow-up measures on the maintenance of the self-advocacy skills. It would be interesting to note whether students, after successfully acquiring self-advocacy skills, such as in the present program, continue to self-advocate over a long period of time. For instance, determining whether the students advocate in the subsequent academic school year when they have new teachers with whom they have not advocated and who may not necessarily fully understand their learning disabilities would be important. If the results are negative, it may be helpful, for example, to include a booster session in self-advocacy during each year of the high school curriculum.

Lastly, the results of the present study suggest that, while Knowledge and Communication significantly increased from pre- to post-program by the students who received the self-advocacy training program, there was no change in academic attribution. A lack of change in this area may have been due to the fact that the present program did not include attribution training for the students. Durlak et al. (1994) also attempted to measure possible changes in self-concept and assertiveness in their self-advocacy program by assessing the students on the Assertiveness Scale for Adolescents and the Piers-Harris Children's Self-Concept
Scale pre- and post-program: however, like the present study, no significant changes were found.

Future studies should consider including attribution training as a teaching component, particularly since internal locus of control is predictive of the acquisition of self advocacy skills. In addition, future research should also consider examining academic locus of control following a self advocacy program that has been implemented over a longer period of time. A change in academic attributions may require more time than was allotted in the present study. Such research would be important because it may be a solution to reversing the cycle of learned helplessness while contributing to the acquisition of self advocacy skills. Hopefully, a change in academic locus of control may generalize to these students’ non-academic endeavours. However, further investigation is warranted.

**Implications for Practice**

There are several benefits to implementing the present self advocacy program in high schools. First, this study yielded positive results in a short period of time. The program took six weeks to implement, with one-hour sessions, once or twice per week. Having students with LD acquire such important skills in a short period of time means that the present program can be implemented in schools without having these students miss a large number of classes. Second, this program can be implemented in small groups as opposed to on an individual basis. Lastly, the short period of time to implement the program, along with the option of implementing it with small groups of students, keeps the amount of time and financial resources required by teachers, special educators, or school personnel to teach this program down to a minimum.
CONCLUSION

A self advocacy program such as the one described above would benefit LD high school students by giving them the opportunity to become aware of their disabilities, abilities, and learning styles. Through this knowledge, these students can find the resources, services, supports, or accommodations that best meet their needs, eventually taking control of their learning by advocating for their needs with communication skills that are appropriate and effective. Overall, such a self advocacy program may not only assist them in their present academic situations, but also in preparing them for and increasing their chances for a successful future in both academic and non-academic endeavours.

One of the students in the program had great difficulties completing English tests and exams due to a writing disability. After having received the self advocacy program, where she advocated to her English teacher for more time on tests and exams, she said “If I knew the teacher would help me, I would have asked for help earlier”. This was just one of many positive comments by students in the program, which indicates the need for self advocacy training for high school students with learning disabilities.
References


Appendix A
Dear Parent(s) or Guardian(s)

I am a graduate student in the Department of Human Development and Applied Psychology at the Ontario Institute for Studies in Education. University of Toronto. Under the supervision of Dr. Judith Weiner, and with the permission of the Montreal Catholic School Board, principal, and teachers of your child’s school, I am going to begin a self advocacy program for students who have learning difficulties. Self advocacy means recognizing what one needs, making others aware of these needs, and obtaining these needs in order to resolve a given problem. In other words, it is like being a lawyer for one’s self.

Teaching students self advocacy skills is beneficial and important for various reasons. First, these skills help student in high school and in post-secondary education because the students will learn how to ask for the help they need so that they can learn better. Second, self advocacy skills training can help prevent these students from experiencing learned helplessness (the belief that they cannot control the outcome of a given situation, regardless of any effort to change it). Students with learning difficulties can begin to feel like they have no control of how they do in school, but the self advocacy program will teach them how to take control of their learning so that they can learn better. Third, self advocacy skills are important in the adult world because they can affect career choices and vocation. Lastly, self advocacy involves many skills that have been found to be characteristic of successful adults with learning difficulties.

With your permission, your child may be a part of this program. He/she will be given an interview that will be tape recorded, verbal responses written, and one part video recorded. This interview will take approximately 20 minutes. All material will be stored in locked files and all data and information obtained or discussed will be kept confidential. Once this is completed, students will be divided into two groups. One group will receive the self advocacy program immediately. The self advocacy program will involve teaching students about “learning disabilities”, individual learning styles, resources, services, supports, and accommodations available that can help them learn, how to approach teachers and advocate for what they need, and helping them realize that people with learning disabilities can succeed.

While the first group receives the self advocacy program, the second group will be involved in comparing historical characters through the use of film. When this is completed, both groups will be interviewed again using the same format. All students will then be approach briefly, once every two weeks, about their self advocacy practices. Once this is completed, the group who was involved with comparing films will then receive the self advocacy program.

For both groups, the students will be out of class for 2 hours per week (one hour twice a week) for a total of 4 weeks. All meetings will be scheduled together with the school and teachers so that students will not miss important material. Your son/daughter may withdraw from the study at any time. If you have any questions or concerns, please feel free to contact me at the school. If I am not available, please leave a message and I will return your call as soon as possible.

Sincerely,

Loreta Brunello-Prudencio. M.A.  
Dr. Judith Wiener. Ph.D.
Research Consent Form

I have read the letter explaining the research study to be conducted by Mrs. Loreta Brunello-Prudencio. I understand that my child will be interviewed and given a locus of control questionnaire. will participate in the self advocacy sessions, be re-administered the locus of control questionnaire and interview, and will be approached briefly regarding self advocacy practices. I further understand that my child may withdraw from the study at any time.

Please return this permission form as soon as possible.

Please check (_) the appropriate:

_________ I DO give permission  __________ I DO NOT give permission

for my son/daughter _______________________________ (print name) to participate in the project on self advocacy program conducted by Loreta Brunello-Prudencio. I understand that my child has the right to withdraw from the study at any time.

_____ I WOULD like my child's academic achievement scores to be provided to his/her school

_____ I WOULD NOT like my child's academic achievement scores to be provided to his/her school

Parent/Guardian name: ________________________________

Parent/Guardian signature ________________________________
Dear student,

I am a student from the Ontario Institute for Studies in Education, University of Toronto. I am doing a study with students who have learning problems to find out if a self advocacy program helps students with their learning. I would like your participation in this program. This program would be helpful in teaching you about learning disabilities, how you learn best (e.g., best time of day to study, where to study), what materials can help you learn, and how to approach teachers and ask for things that will help make learning easier.

Before the program begins, you will be interviewed. The interview will be tape recorded and one part video recorded, and all your answers will be written down on an interview form. These will not be heard or seen by any teachers or parents. The video will, however, be seen by you and a small group of students during one of the program sessions. At the end of the program, the videos and the tape recordings will be destroyed.

Once the interview is completed, you will be randomly placed into one of two groups. One group will receive the self advocacy program described earlier, and the others will be involved in comparing historical characters through the use of film. When this is completed, both groups will be interviewed again using the same format. I will then approach you briefly, once every two weeks, about your self advocacy practices. Once this is completed, the group who was involved with comparing films will then receive the self advocacy program.

Both groups will be out of class for 2 hours per week (one hour twice a week) for a total of 4 weeks. All meetings will be scheduled together with the school and teachers so that you will not miss important material. Since I need to set meeting times, I would need your permission to get your class timetable. This information, and all other information given during the program, will be kept secret. You may withdraw from the study at any time. Do you have any questions?

Please print your name, check (_) the correct line, and sign your name at the bottom.

1. ______________________________ (print name)

( ) __________________ wish ( ) __________________ do not wish

to participate in the self advocacy program done by Loreta Brunello-Prudencio. I understand that I have the right to leave the program at any time.

Signature _______________________________
Appendix B
Pre- and Post-Program Advocacy Interview For Students

Name: __________________________________________

Date: __________________________________________

Age: ______ Date of Birth: ________________

Grade: ________

Headings (in bold), words italicized, and information within brackets will not be stated verbally in the interview. These are only for use by the instructor. Scoring criteria follows.

After a brief and friendly chit-chat:
Today, I am going to ask you a few questions and I would like for you to answer them to the best of your ability. Later on, you will also be asked to role play, or act out, something. Throughout the whole time, we will be tape recorded, and for the role playing, we will be video recorded. All of the recordings will be destroyed after the program is completed. Try not to be worried or nervous. This is not a test. All I want you to do is try your best. Do you have any questions? (Any questions will be answered at this time).

Knowledge

Knowledge of learning disability:

1. Can you tell me what a learning disability is?

________________________________________________________________________________________

________________________________________________________________________________________

2. Do you think you have a learning disability? Yes_____ No_____

3. Tell me about your learning disability?

________________________________________________________________________________________

________________________________________________________________________________________
4. How does it affect you?


Knowledge of Learning Disabilities TOTAL ____
(max. total 4)

Knowledge of learning style

1. Do you think people learn the same way or differently? Differently ____  Same ____

2. Tell me when or how you learn best?


3. Why?


4. When do you find it hard to learn?


5. Why?


6. What subjects are you good at?
7. Why? ________________________________________________________________

8. What subjects are you poor at? _________________________________________

9. Why? ________________________________________________________________

10. Which teacher do you think teaches you best? _____________________________

11. Why do you think you learn more with that teacher? _______________________
    ______________________________________________________________________
    ______________________________________________________________________
    ______________________________________________________________________

12. When you have a test, how do you study for it? ____________________________
    ______________________________________________________________________
    ______________________________________________________________________
    ______________________________________________________________________

13. Do you think the way you study helps you learn? Yes_____ No_____  

14. Why? ________________________________________________________________
    ______________________________________________________________________
    ______________________________________________________________________

Knowledge of Learning Style TOTAL _____  
(max. total 10)
Knowledge of resources, services, supports, and accommodations

1. Can you name 3 equipment in the school, class, or home. that might be used to help you, or others, learn better? 

2. Have you ever used any equipment to help you learn? (If yes) Tell me about it. 

3. Can you give me 2 things that people in the school can do to help you learn better? 

4. Have you ever approached someone to help you learn? (If yes) Tell me about it. 

5. Imagine it is your first day at a new school. None of the teachers know you. Knowing you have spelling difficulties, what kinds of things would you ask your teacher to do, or let you do or use, to help you deal with this problem? 

Repeat the underlined sentence with the following replacing the italicized words. Same scoring procedure as above.

reading difficulties
Knowledge of Resources, Service, Supports, and Accommodations TOTAL ________
(max. total 8)

Knowledge of the ability to succeed


                                                                                   

2. Do you think you can do well in school even though you have a learning disability?
   Yes ___  No ___

3. Why? (only if previous answer is 'yes') _______________________________________

                                                                                   

4. Do you think people with learning disabilities, like yourself, can finish high school?
   Yes ___  No ___

5. Why? (only if previous answer is 'yes') _______________________________________

                                                                                   

problems taking tests) ________________________________________________________

difficulty understanding when a teacher uses charts and diagrams __________________

                                                                                   


6. Do you think people with learning disabilities, like yourself, can go to College or University?  
Yes ____ No ____

7. Why? (only if previous answer is 'yes')
________________________________________________________________________
________________________________________________________________________

8. Do you think that students with learning disabilities, like yourself, can go into a wide variety of areas for jobs? Yes ____ No ____

9. What kind of jobs do you think people with learning disabilities can get? ___________________________  
________________________________________________________________________

Knowledge of the Ability to Succeed TOTAL: ____
(max. of 7)

TOTAL KNOWLEDGE COMPONENT: ____
(max. total of 29)

*Communication Skills*

1. Now we are going to role play, or act out, a scene. I'll be the teacher and you be the student. Pretend I am in the classroom and you are on your way to see me. (1. Pre-program scenario. 2. Post-program scenario) 1. You have spelling difficulties and have to ask me, the teacher, if I can correct the spelling errors on tests but not have them count for loss of marks. 2. You have difficulty processing information. You have to ask me, the teacher, if you can be given extra time on written tests because it takes you longer to process information.
Scoring of video: A score of 1 is given for each of the following if they are present (max. 15).

Approached the teacher _____

Asked whether it was a good time to discuss an issue _____

Indicated that he/she has a learning disability _____

Discussed/explained problems related to the learning disability _____

Was prepared with what he/she wanted to say _____

Made suggestions/requests to ameliorate the situation _____

Came to an agreement or understanding with the teacher _____

Said 'Thank You' at the end _____

Showed positive facial expressions (i.e., smiling) _____

Listened to the teacher _____

Used eye contact throughout _____

Avoided unnecessary movements (i.e., tapping foot, swinging arm) _____

Body posture was appropriate (i.e., facing teacher and standing/sitting erect) _____

Focused on what he/she needed, not on what the teacher was doing wrong _____

Was diplomatic, tactful, and respectful (i.e., polite, appropriate vocal tone) _____

Role Play TOTAL: _____

(max. 15)
2. Can you tell me what kinds of things you should do or say when you go to a teacher and ask for something because of some problem/difficulty you have? (1 point for any of the criteria mentioned in question above) ______________________________________________________________

_________________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________

Verbal TOTAL: _____

(max. 5)

TOTAL COMMUNICATION COMPONENT: _____

(max. total 20)
Appendix C
Definition of Learning Disabilities

Learning Disabilities Association of Canada:

"Learning Disabilities is a generic term that refers to a heterogeneous group of disorders due to identifiable or inferred central nervous system dysfunction. Such disorders may be manifested by delays in early development and/or difficulties in any of the following areas: attention, memory, reasoning, coordination, communicating, reading, writing, spelling, calculation, social competence, and emotional maturation" (1981, p.1).
Definition of Self Advocacy

*Self advocacy* has been defined as the ability to recognize, make others aware, and defend one's own interests in order to resolve a given problem (Egly, Leuenberger, Morris, & Friedman, 1987).
Appendix D
Self Advocacy Plan
(Rutledge. 1992)

Name ________________________________

Date ________________________________

1. Describe your learning style:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

2. Possible interventions or modifications to assist your learning:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

3. What strategy would you use to self advocate:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
STEPS ON HOW TO SELF ADVOCATE

1. Before approaching a teacher, think about what you are going to say (Cummings & Fisher, 1993).

2. Make sure it is a convenient time to speak to the teacher. If not, make an appointment (Rutledge, 1992).

3. Discuss your learning disability, related problems, and learning style to the teacher.


5. Come to an agreement or understanding.


7. Take Action.
When advocating to someone, always keep in mind the following:

**F** - *positive facial expressions* (i.e., smiling) (Kleinke).

**L** - *listening* (Cummings & Fisher, 1993).

**E** - *eye contact* (Kleinke, 1986, 1986).

**M** - *avoiding large number of movements* (i.e., tapping foot, rubbing arm) (Harrigan, 1985).

**B** - *good body posture* (i.e., facing the teacher, standing erect) (Arnoff, Woike, & Hyman, 1992).

**A** - *getting help from another adult if the meeting with the teacher is not a success* (Cummings & Fisher, 1993).

**N** - *focusing on what one needs, not on what one thinks the teacher is doing wrong* (Cummings & Fisher, 1993), and

**D** - *being diplomatic, tactful, and respectful* (i.e., speak politely) (Cummings & Fisher, 1993).
Things to advocate for...

I need the teacher to photocopy overheads or class notes before each class.  

I need a student in the class to take notes for me from overheads, blackboard, and from other sources with which I have difficulty.  

I need classes to be tape recorded so that I can listen to them again.  

I need the teacher to use less difficult words when giving me my homework and assignments.  

I need the teacher to take time to re-explain things for me whenever I find it necessary.  

I need extra time on written tests and/or exams.  

I prefer to have oral tests and/or exams.  

I would like spelling errors to be corrected but not count for marks.  

I need more time to do homework because of my disability and therefore would like more time to do my assigned work.  

I have difficulty understanding the teacher and therefore need to sit at the front of the class.  

I need the teacher to present information to me in a chart or picture so that I can understand it better.  

I need to ask the teacher for reading material that uses lower vocabulary so that I can understand it better.  

I cannot read well aloud so I need to ask the teacher if he/she will let me read to him/her in private.  

Since my spelling is poor, I could benefit from using the computer for assignments so that I can use spell check and avoid spelling errors.

OTHERS:
Advocacy Homework Assignment
(Rutledge, 1992)

Name: ________________________________

After advocating to a teacher, please complete the following questions.

1. What teacher did you speak to?
   ________________________________________________________

2. Did you make an appointment to see the teacher?
   ________________________________________________________

3. Did you plan in your mind or write down what you wanted to say ahead of time?
   ________________________________________________________

4. Tell how you began the conversation.
   ________________________________________________________

5. Did you describe your learning difficulty? Tell how you did described it.
   ________________________________________________________

6. What support did you ask for? How did you ask for it?
   ________________________________________________________

7. Check off your feelings during the conversation: shy___, confident___, nervous___,
shaky___, worried___, smiling___, angry___, relaxed___, afraid___, tense___, frustrated___.

8. What did the teacher say?
   ________________________________________________________

9. What did you do well?
   ________________________________________________________

10. How would you improve?
    ________________________________________________________
11. Rate yourself on this self advocacy situation:

Excellent __, Good __, Fair __

12. The most difficult parts of the conversation were:

___ getting started    ___ talking about my problem    ___ explaining my concerns

___ asking for support ___ saying thank you    ___ keeping eye contact

___ keeping good posture ___ nervous body movements

Others:
Self Advocacy Game - Rules

How to play: Prior to the game, each player will be given $100 in Monopoly money from the Bank, and will be asked to select one of the available objects to represent themselves on the game board. Each player will then role the die. The individual with the highest number will be first to start the game, followed by the person on the left (clockwise direction), and so forth. The game board has the following squares upon which an individual's object may land, each with a corresponding monetary value that must be either given or taken from the bank:

Out for dinner                     give $ 20
Movies                               give $ 10
Pay day                             take $ 50
Play a role                         take $ 15
Fill in                             take $ 10
Right or wrong                      take/give $ 5
Give and take                       give/take $ 5

At the conclusion of the game, the player with the most money wins !!!

Game Questions

PLAY A ROLE

1. You have difficulty understanding the French teacher. You know you have trouble learning when you are distracted by others people. You ask the teacher if you can sit at the front of the class.

2. You have a teacher that speaks very quickly. You don't always understand what she says. You are an auditory learner. You ask if you can tape the class so you can listen again at home.

3. Your History teacher gives long notes on the board. It helps you to learn when the information is in a chart or a picture. Speak to the teacher about getting help turning the "notes" into charts or pictures.

4. You got back your history test. Your mark was low even though you studied. Ask the teacher to help you understand where and why you got the low mark.

5. Part of your disability is that you cannot write and organize your work very well. You feel you would get better marks if you were able to get photocopied notes from a friend. Ask your teacher about this.
6. You have a science test coming up. You know your work but you know you need more time to write your answers. This is part of your disability. Ask the teacher if someone can write for you - you will dictate.

7. You have to do a project for science. The teacher wants you to use 5 references. You have difficulty reading and can only find 3 books you can use. Speak to your teacher about this.

8. Your English teacher has assigned a poetry project where you have to write 8 poems. Writing is difficult for you. Speak to the teacher about doing fewer poems.

9. You did not do your homework last night because you didn't understand it. Speak to the teacher about this.

10. Your math teacher has just taught a new topic and you don't understand it. You need to see a sample question to help you with your homework. Speak to the teacher about this.

11. Your teacher has just assigned math homework. You know you will not be able to get it all done in 1 night because you have to work through all the steps. Ask the teacher about reducing the homework.

12. You have to do a book report for language arts. You will have to read some of it aloud in front of the class. Your oral reading is not as good as your friends. You ask the teacher if you could read privately for her.

RIGHT OR WRONG

1. It's better if your friends don't have learning difficulties.

2. It is important to plan in your mind what you will say before you approach a teacher.

3. Try not to look at the teacher's eyes when you advocate for something.

4. Don't ever talk to a teacher unless you have made an appointment first.

5. Say thank you if the teacher agrees to your request otherwise just smile and say good-bye.

6. Never tell teachers you have a learning disability.

7. If you are explaining your learning style to a teacher and he/she doesn't understand, you should just say forget it.

8. Let your true feelings show. Tell the teacher exactly how you feel about him/her.

9. It is a good idea to make an appointment to express a concern to a teacher.
10. It is better to tell a "white lie" to a teacher than to discuss the real reason your homework is not done.

11. You should be able to explain the reasons why you are requesting support from a teacher.

12. If teachers know about your learning difficulties, they will use it against you.

13. Individuals who have learning disabilities cannot succeed in life.

14. It is because of good luck that you do well on tests.

15. You don't do well on assignments because the teacher is a hard marker.

**FILL IN**

1. When you are angry that a teacher didn't agree to your request, you should _____________________________.

2. Advocacy means _________________________________________.

3. It is important to advocate for yourself with teachers because _______________________________________.

4. When you have made an appointment to see a teacher, you should _______________________________________.

5. If a teacher does not want to make any changes for you, it may be useful to say you have a _______________________________________.

6. Having a learning disability does not mean you are _____________________________.

7. Everyone has their own special and unique way of _______________________________________.

8. It is important to know your learning style so _______________________________________.

9. Learning style is a fancy word for _______________________________________.

10. A learning disability is _______________________________________.

11. My disability is _______________________________________.

12. When your friends ask about your learning problems, you should _____________________________.

13. When you do well in school, it is because _______________________________________.
GIVE AND TAKE

GIVE

1. You were so nervous when you talked to the teacher that you kept banging your foot against the chair.
2. You told the teacher what you wanted instead of explaining the concerns you have.
3. You lost your temper when the teacher didn't agree to your request.
4. You didn't remember to keep the appointment you made with the teacher.
5. The teacher agreed to your request but you didn't keep up your end of it.
6. When the teacher asked why you needed the support, you couldn't answer.
7. You believe that you will not succeed in life because of your learning disability.
8. You did poorly on an assignment because the teacher doesn't like you.
9. You were slouching in your chair when you advocated to your teacher.

TAKE

1. You looked directly at the teacher and stood up or sat down calmly when you talked to him/her.
2. You planned what you would say to the teacher on paper or in your mind before you went in.
3. You explained your learning style clearly before you made your request.
4. You were on time for your appointment and didn't forget it.
5. You were able to negotiate or discuss that ways that the teacher could support you at school.
6. You said "thank you" after you spoke to the teacher.
7. You know that regardless of your learning disability, you can succeed in life.
8. You did well on a test because you put effort into studying.
9. When you advocated to your history teacher, your tone of voice was not too loud nor too soft.
This is to certify that

has fulfilled the requirements of the

Self Advocacy Program

under the instruction of Loreta A. Brunello-Prudencio.

Date: ___/___/___
Appendix E
Self Advocacy Student Evaluation Form

The following is an evaluation form to be completed once a student has advocated to you. Indicate 'yes' or 'no' for each question. If a 'no' response is given, briefly give your reason (e.g., 10. Was there appropriate eye contact? no - student constantly looked around room: little eye contact). Please be fair and accurate in your assessment. The total score will be calculated by myself. Please sign and date the form and return it in my mailbox, preferably the same day. Thank you, Mrs. Loreta Brunello-Prudencio.

1. When the student approached you, did he/she ask whether it was an appropriate time to discuss an issue with you? If it was an inappropriate time, did he/she make an appointment? _____

2. Did the student discuss his/her learning disability and/or related problems? _____

3. Did the student discuss his/her learning style? _____

4. Was the student prepared with what he/she wanted to say to you? _____

5. Did he/she make requests and/or suggestions for possible modifications? _____

6. Did the student and you come to an agreement or understanding? _____

7. Did he/she "thank you" for your assistance or time? _____

8. Did the student show positive facial expressions (i.e., smiling)? _____

9. Did the student listen to you? _____

10. Did the student have eye contact with you? _____

11. Did the student avoid unnecessary movements (i.e., tapping foot, rubbing arm)? _____

12. Was body posture appropriate (i.e., facing you, standing erect - both must be present for a 'yes' response)? _____
13. Did the student focus on what he/she needs and not on what he/she thinks you are doing wrong? _____

14. Was the student diplomatic, tactful, and respectful (all 3 must be present for a 'yes' response)? _____

15. Did the student use appropriate tone of voice (audible, not whispering, not loud)? _____

YES

TOTAL: _____
(Max. 15) Teacher's Signature Date
Teacher Checklist  
(sample only)

*Please date, and check the name of any student who has advocated to you in the past TWO weeks. Write the students' names below and briefly state the reason why they advocated and the outcome.* Once completed, please return this form to my mailbox. Thank you. Mrs. Loreta Brunello-Prudencio.

**DATE:** ____________________________

**Students:** Samantha Smith ____ Paul Timber ____ Timothy Brown ____ Jessica Tas ____

Shelly Magmas ____ Tina Scantini ____ etc...

<table>
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<tr>
<th>Student Name</th>
<th>Reason for advocating and outcome</th>
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etc...
Maintenance of Self Advocacy Skills

Student Name: ___________________________ Date of meeting: __________________

1. Have you asked any teachers for help or modifications in the past two weeks? Yes ___ No ___
   (If yes) Who did you ask? __________________________________________________________
   When did this happen? ____________________________________________________________
   What was the result of this? _______________________________________________________

Additional self advocacies.

2. Have you asked any teachers for help or modifications in the past two weeks? Yes ___ No ___
   (If yes) Who did you ask? __________________________________________________________
   When did this happen? ____________________________________________________________
   What was the result of this? _______________________________________________________

3. Have you asked any teachers for help or modifications in the past two weeks? Yes ___ No ___
   (If yes) Who did you ask? __________________________________________________________
   When did this happen? ____________________________________________________________
   What was the result of this? _______________________________________________________

4. Have you asked any teachers for help or modifications in the past two weeks? Yes ___ No ___
   (If yes) Who did you ask? __________________________________________________________
   When did this happen? ____________________________________________________________
   What was the result of this? _______________________________________________________