

An Exploration of Middle School Students' Perceptions of Personal Adolescent Wellness and their Connectedness to School

By

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Abstract

Exploration of students' perceptions of personal adolescent wellness and connectedness to school is important in providing insight and information for enhancement of currently existing programs and in encouraging the implementation of programs that may further assist in promoting the healthy development of adolescents. Providing professionals with further knowledge about what constructs of wellness have the most positive impact on which dimensions of connectedness to school will enable them to make informed decisions about how best to work with students in their adolescent years to ensure a healthy school experience. This study revealed that a relationship exists between an urban adolescent's level of personal wellness and school connectedness. The adolescents' school experiences and the belief that their educators care about them as individuals and as student learners impacts the adolescents' state of balance among social relationships, intellectual development, and emotional, physical, and spiritual wellness.

Keywords: *Adolescent Wellness, Personal Wellness, School Connectedness*

Introduction

Urban middle schools, particularly underperforming schools in the United States are concerned about adolescents' personal wellbeing, connectedness to school, and school success overall. Adolescence provides a period of great opportunity but even greater risk. With continued concern about school violence, bullying, dropout rates, safety, and mental health, schools across the nation are focusing on measures that will ensure a positive school experience and a healthy transition into adulthood. Recent studies have noted numerous problems facing adolescents by examining the risks of teen suicide (Borowsky, Ireland, & Resnick, 2001; Thoubourou & Gregg, 2002), substance abuse (Wilson, Syme, Boyce, & Battistich, 2002), violence (Riner & Saywell, 2002; Thomas & Smith, 2004), psychological health concerns (Hall-Lande, Eisenberg, Christenson, & Neumark-Sztainer, 2007), dropout rates (Heckman & LaFontaine, 2008; Laird, Lew, Debell, & Chapman, 2001), bullying

(Thomas & Smith, 2004), and general health concerns (Maxwell, 2002; Tully, Coen, Booy, & Viner, 2002). Such studies reveal a high level of concern and awareness focused on the state of the nation's youth.

Miller, Leinhardt, and Zigmond (1988) found that school factors are important elements that interact with personal attributes of students to affect whether or not they remain in school. Various researchers (Catalano, Haggerty, Oesterle, Fleming, & Hawkins, 2004; Wilson, 2004; McNeely, Nonnemaker, & Blum, 2002) over the past 50 years have identified school connectedness as a protective factor during adolescence and that students who feel connected to school generally experience lower rates of substance use, gang violence, school drop-out, teen pregnancy, and truancy. Strong associations seem to exist between connectedness, specific social conditions, personal experiences, and delinquent behavior (Catalano et al., 2004; McNeely, et al., 2002; Wilson, 2004). Reducing risk factors and increasing protective factors seems to have mitigating effects on substance abuse, violence, and other juvenile delinquency (State Behavioral Health Epidemiology Workgroup [SBHEW], 2007). Students who feel connected to school are resilient and equipped with problem solving and communication skills, cultural competence, and empathy. These skills render students more likely to make healthy connections and to make positive choices (Werner & Smith, 1992).

School Connectedness

School connectedness refers to students' perceptions that teachers, administrators, and support staff care about them as individuals and about their overall success in school (U. S. Department of Education, 2008). Students who feel cared about, respected, and a part of a school family with high priorities for learning feel a connection to school (American Institutes for Research [AIR], 2007).

Studies conducted over the last decade have identified school connectedness as a significant protective factor and an important element to school adjustment and success in adolescence (McNeely et al., 2002; Shochet, Dadds, Ham, & Montague, 2006; Thomas & Smith, 2004; Thompson, Iachan, Overpeck, Ross, & Gross, 2006). Indicators of school connectedness include a sense of belonging at school, engagement in school activities, and positive relationships among adolescents, adults, and peers (Thompson, et al., 2006). Other indicators include whether or not students like school and feel safe in the school environment. Some of the indicators are protective factors against negative developmental and adjustment outcomes during adolescence (Whitlock, 2006). School efforts to promote connectedness may prevent negative outcomes such as student dropout rates and delinquent behavior.

Adolescent Wellness

Adolescent wellness is a state of balance between health and fitness physically, mentally, emotionally, and spiritually (Quan, 2006). Adolescents who feel they are maximizing physical and mental potential in life through the integration of mind, body, and spirit in a purposeful manner, usually feel a sense of wellness (Witmer & Sweeney, 1992). Wellness models that focus on individuals' mental, physical, and emotional well-being (Witmer & Sweeney, 1992), direct individuals towards holistically well lifestyles (Myers, Sweeney, & Witmer, 2000; Sleet & Dane, 1985). Some researchers assume that a change in one or more of the life areas will have a positive effect on the quality of life for individuals (Myers, et al., 2000).

Indicators of adolescent wellness include perceptions of *mattering* (Marshall, 2001; Taylor & Turner, 2001), spirituality (Stinnett & DeFrain, 1989), positive family structure and relationships (Demo & Acock, 1996), physical activity and exercise (Ory & Cox, 1994), ethnicity and culture (Erikson, 1968; Garrett, 1999; Hall & Carter, 2006), body image and eating disorders (French, Story, Resnick, & Blum, 1995), mental health and self-esteem (Resnick, Harris, & Blum, 1993; Resnick et al., 1997; Rubin & Mills, 1988), and overall satisfaction with life (Cowan, 1994; Park, 2004). Perceptions of mattering relate to a greater level of psychosocial well-being and overall wellness (Marshall, 2001; Taylor & Turner, 2001). Protective factors that promote healthy psychological wellness include internal motivation, family closeness, quality friendships, and community support (Masten & Garnezy, 1985; Werner, 1989). School and peer connections seem to reduce the risk for negative psychological wellness outcomes such as emotional distress, depression, poor self-confidence, and suicidal behavior (Hall-Lande et al., 2007; Resnick et al., 1997).

Additionally, caring adults at school and in the community play an important role in ensuring the well-being of adolescents (Scales, Benson, & Mannes, 2006). Schools and community programs provide resources and support for adolescents in making healthy choices that may affect well-being. Adolescents who feel a higher sense of personal wellness are more likely to feel emotional wellness, connection to school, and connection to the community, and less likely to suffer from depressive symptoms, delinquent behavior, and suicidal ideation (Eccles et al., 1997; Resnick et al., 1997).

Correlation

A growing body of literature indicates a correlation between positive school connectedness and a variety of positive health outcomes (Bonny, Britto, Klosterman, Hornung, & Slap, 2000; NICHD, 2007; McNeely & Falci, 2004; Resnick et al., 1997; Roth & Brooks, 2003; Thompson, et al., 2006). Accordingly, researchers have found a direct relationship between school disconnectedness and various outcomes such as juvenile delinquency, substance abuse, and numerous mental and physical health indicators (Bonny et al., 2000). Due to the numerous positive outcomes associated with school connectedness, it is important to gain a better understanding of the risk factors associated with low school

connectedness, as well as the factors that could lead to higher levels of connectedness (Thompson, et al., 2006).

Purpose and Participants

This article incorporates the findings of a study which sought to explore the perceptions of middle school students with regard to the impact of their personal wellness and their connectedness to school. The participants in this study included students enrolled in the sixth, seventh, and eighth grades during the 2008-2009 academic year in an urban school system of a major city in the Southeastern United States. At the time of this research, the school system had a student population slightly over 29,000 with approximately 6,953 of those students in sixth, seventh, and eighth grades. The researchers used a convenient sample comprised of data from students in three of the 22 middle and K-8 schools. The convenient sample intended to represent the perceptions of sixth, seventh and eighth grade male and female students. Table 1 and Table 2 present the breakdown of grades and genders of the students who participated in this study. Table 3 presents the total population for each school represented in this study.

Table 1

Male and Female Students

School	Males	Females	Total
School A	13	27	40
School B	14	21	35
School C	9	25	34

Table 2

Grades of Students

School	6 th Grade	7 th Grade	8 th Grade
School A	8	22	10
School B	7	17	11
School C	12	13	9

Table 3

Total School Population Middle and K-8 Schools

School	6 th Grade	7 th Grade	8 th Grade	Total	School Population
School A	117	88	109	445	
School B	59	64	72	454	
School C	111	107	106	324	

Instrumentation

For this study, the researchers used the Adolescent School Connectedness Survey (ASCS) to measure students' perceptions of connectedness to school and the Adolescent Wellness Inventory (Stinnett et. al., 1995) to measure students' perceptions of wellness. The data collected enabled the researchers to determine first, the relationship between urban school adolescents' perceptions of school connectedness and wellness, and second, differences, if any, between male and female adolescents on the connectedness-wellness index (CWI). The CWI is the ratio (quotient) of connectedness to wellness and the researchers used it to determine whether there was a gender difference in the adolescent school connectedness-wellness relationship.

The ASCS is an 11-item Likert response scale instrument that yielded scores which measured students' overall perceptions of school connectedness (high expectations, sense of belonging, and fair treatment) on a scale from 1 to 5. The score of 1 represented the lowest rating, and the score of 5 represented the highest rating. Further, students' perceptions of school connectedness measured feelings of being part of the school, as well as the existence of close and supportive relationships among students and staff members.

The ASCS was developed based on questions used in the School Climate and Connectedness Survey (SCSS) developed by AIR (2007). The SCSS is a 73-item Likert response scale instrument that yields scores which measure middle and high school students' overall perceptions of school climate (high expectations, school safety, and school leadership) and school connectedness (respectful climate, peer climate, caring adults, community involvement) on a scale from 1 to 5. Research in this study focused on middle school students. In order to ascertain a greater probability that participants answered each survey question entirely and accurately, the researchers used an abridged version of the SCSS and connectedness literature as a resource to develop an instrument to measure middle school students' perceptions of connectedness to school. The Cronbach alpha reliability coefficient for this scale was .913.

The Adolescent Wellness Inventory (Stinnett, 1995) is an 11-item Likert scale that measures the degree of self-perceived wellness in the area of social relationships, intellectual development, emotional wellness, physical wellness, and spiritual wellness. An item analysis found each of the 11 questions to be significantly discriminating at the .0001 level between those adolescents whose total Adolescent Wellness scores fell in the upper quartile and those whose total scores fell in the bottom quartile. Jittrapanun (1994) and Stinnett (1995) obtained a split-half reliability coefficient of .95. The Adolescent Wellness Inventory had a high correlation (significant at .0001) with the highly validated Family Member Well-Being Index (McCubbin & Thompson, 1987).

Data Analysis

The Pearson Product Moment Correlation was the statistical tool used to determine if a statistically significant relationship existed between students' perceptions of personal wellness and students' perception of connectedness to school. An independent samples t-test provided a comparison of the mean CWI scores and determined if a statistically significant difference existed between the CWI of male and female middle school students. Of the 150 surveys distributed to students in three middle schools in an urban school district, 109 Adolescent Wellness Inventories and Adolescent School Connectedness Surveys (ASCS) were usable and complete for the study. Consequently, the response rate was 73 percent.

Results of Analysis

The researchers conducted a Pearson’s Product Moment correlation coefficient to test the null hypothesis. The null hypothesis was that there would be no statistically significant relationship between the perceptions of middle school students’ personal wellness and their level of connectedness to school.

The correlation coefficient, r , revealed a statistically significant relationship between middle school students’ levels of personal wellness and middle school students’ levels of connectedness to school $r(108) = .373, p < .001$. This indicated a moderate positive relationship between the level of middle school students’ personal wellness and the level of middle school students’ connectedness to school. The greater sense of connectedness that adolescent middle school students’ experienced with school then the greater sense of wellness they also perceived.

The null hypothesis was rejected. Figure 1 demonstrates the relationship between wellness and connectedness.

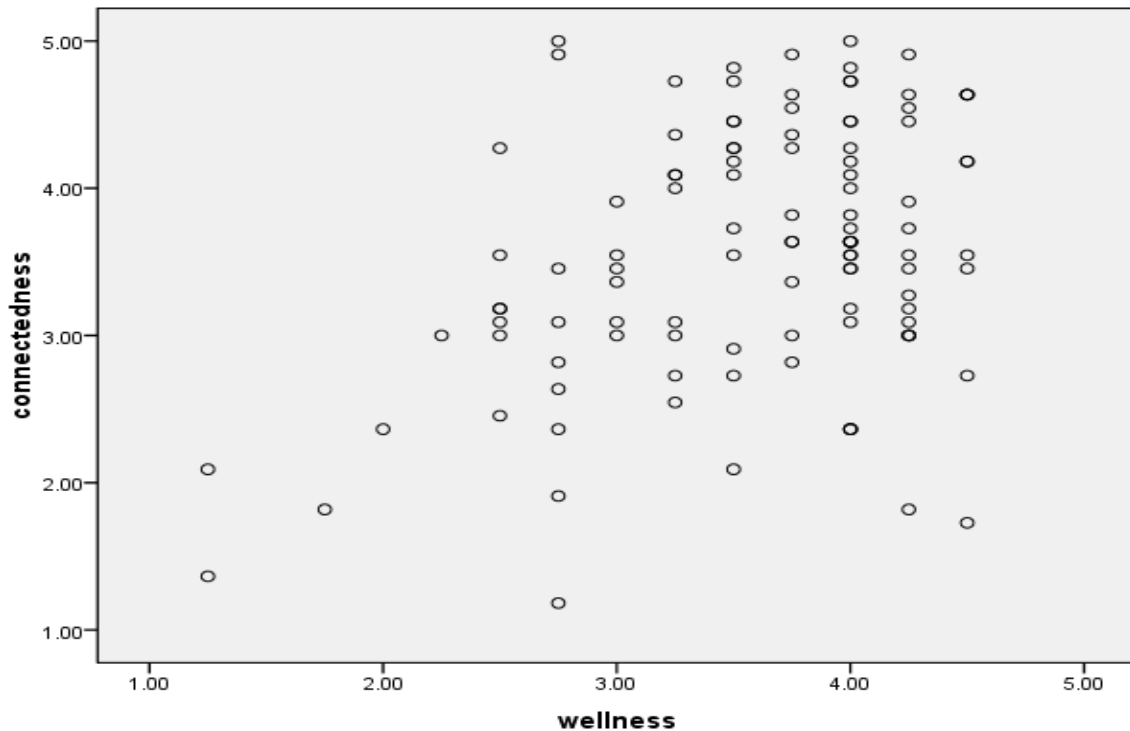


Figure 1. The Relationship between Middle School Students’ Perceptions of Personal Wellness and Connectedness to School

The second null hypothesis tested the difference between male and female adolescent students’ in regard to the relationship between connectedness and wellness (CWI).Table 4

summarizes means and standard deviations of CWI for middle school male and female students.

Table 4

Means and Standard Deviations of CWI for Middle School Male and Female Students

Group Size	<i>M</i>	<i>SD</i>	<i>n</i>
Male Students	1.00064	.27998	36
Female Students	1.03333	.26072	73

The independent samples t-test revealed no statistically significant difference in the CWI for male and female students, $t(107) = .494$, $p = .622$. The average overall male students' perception of school connectedness and personal wellness (ratio) index ($M = 1.00064$, $SD = .27998$) was not significantly different from the average for female students ($M = 1.0333$, $SD = .26072$). The null hypothesis was retained.

Discussion

The results revealed that urban middle school students' perceptions of personal wellness were directly associated with students' connectedness to school. The former being a composite score of wellness feelings of physical health, depression, loneliness, and happiness and the latter a measure of a sense of belonging, evidence of fair school policies and procedures, and a sense that teachers and administrators generally cared about students. These results are supported by the research conducted by Eccles, Early, Frasier, Belansky and McCarthy (1997) and Bonny et al., (2000) which revealed that adolescents who felt a connection to caring adults and a sense of belonging to school reported higher levels of emotional well-being and physical health respectively.

In contrast, the study by Albrecht, Reynolds, Cornelius, Heideinger and Armfield (2002), determined that school connectedness was a risk, not a protective factor for substance abuse, delinquent behavior and precocious sexual behavior or other determinant aspects of wellness. The results also reflected the studies of Myers & Sweeney (2005) and Kenny, Bolger and Kashy (2002) that indicated that adolescent males and females do not differ in reported wellness and school connectedness.

Conclusions and Implications for School Related Social Work Practices

It should be noted that the primary limitation of this study was selection bias. The sampling was convenient and the participants were composed only of middle school students who had obtained parental consent. The researchers strived to reduce confounding variables by selecting schools that were comparable in socio-economic status and academic performance. The strength of the study lies in its minor distinction in variables from existing studies. First, school connectedness was measured as the extent of caring displayed by educators to adolescent students and the resulting students' sense of belonging to school, with no reference to school activities and the school environment as a whole. Second, wellness was defined as adolescent wellness, a balance between health and fitness physically, mentally, emotionally and spiritually (Quan, 2006), with no reference to additional wellness determinants, which include substance abuse, delinquent behavior and precocious sexual behavior.

Based on these distinctions, the overall results indicate that for adolescents in grades six through eight (11 to 14 year olds) of urban school systems in the Southeastern United States, a relationship exists between levels of health, physical, mental, emotional and spiritual fitness (adolescent wellness) and the extent of "caring for adolescents" displayed by their educators and the resulting students' sense of belonging (the extent of school connectedness). The implications of these results for educators, then, are as follows:

Educators ought to consider exploring alternatives to student programs and instructional approaches that are ineffective because they do not address the physical, emotional, and health related challenges of adolescents. Many educators are not trained to deal with the emotional and physical problems faced by adolescents (Kimber, Sandell, & Bremberg, 2008). Frequent contact with other professionals such as school social workers and mental health professionals improves social and psychological functioning, maximizes well-being, and promotes the academic functioning of children (Constable, Massat, McDonald, & Flynn, 2006). Such professionals should be sought often to work with school personnel and family members to ensure the success of each child.

In addition, school administrators and teachers are equipped to assist in developing school policies that address the emotional and developmental needs of adolescents and create a sense of belonging. Specifically, school administrators can assist schools in addressing issues suggested by Loukas, Suzuki, and Horton (2006) such as applying fair disciplinary policies, creating an environment of trust, hiring competent teachers, implementing high standards and expectations, and providing opportunities to bond with supportive staff members in order to provide additional safeguards against school disconnectedness.

Additional comments recorded by the researchers explain why students in this study expressed such extreme connectedness to school. The common theme of the comments revealed that students were so disconnected at home that they felt connected at school. School provided a sense of stability with caring adults and structured activities including breakfast,

lunch, and extracurricular time. Students who perceived educators as caring individuals who provided a safe environment for physical, social, emotional, and academic development were more likely to be connected to school without regard for socioeconomic status (Blum, 2005).

Students in this study were interested in having someone with whom they could talk personally. Mentoring programs may meet the specific needs of students in a particular school. With facilitation by administrators, teachers and individual schools could partner with a mentoring organization such as Big Brothers Big Sisters (Tierney, Grossman, & Resch, 1995) and the Healthy Kids Mentoring Program (King et al., 2002).

School connectedness is higher in students who have parents involved in school activities (Thompson et al., 2006). Administrators could be intentionally trained to better work with teachers and parents to increase parental involvement by providing expertise on organizing parent workshops, school field days, open house events, and parent volunteer opportunities at school.

Additionally, administrators could better learn how to advise on extracurricular activities that increase school connectedness and academic performance (McNeely et al., 2002). Extracurricular activities in school such as the Positive Youth Development (PYD) framework provide a basis for adolescents to participate in expressive identity proceedings and adolescent wellness exercises (Coatsworth, Palen, Sharp, & Ferrer-Wrede, 2006).

In conclusion, there is a direct relationship between the personal wellness and school connectedness of urban adolescent (11-14 year olds) middle school students in southern school systems. An adolescents' feeling of health including physical fitness, mental fitness, and spiritual fitness is directly associated with the extent of the sense of belonging fostered by caring teachers. This is pertinent to adolescent educators for several reasons.

Primarily, physical and psychological changes experienced by adolescents may increase the potential for negative wellness outcomes (Wheaton, 1990). McNeely and Falci (2004) found that adolescents who perceive that teachers support them are less likely to initiate health-risk behaviors. Accordingly, researchers have found a direct relationship between school disconnectedness and various outcomes such as juvenile delinquency, substance abuse, and numerous negative mental and physical health issues (Bonny et al., 2000). Consequently, adolescent educators are well positioned to assist adolescents' navigate a healthy school experience.

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