

MIDLANDS STATE UNIVERSITY



FACULTY OF SOCIAL SCIENCES

DEPARTMENT OF PSYCHOLOGY

*INTERNALIZING AND EXTERNALIZING PROBLEMS AND HOW THEY RELATE TO
ACADEMIC SELF-CONCEPT IN STUDENTS AT GATEWAY HIGH SCHOOL.*

BY

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*A DISSERTATION SUBMITTED TO THE FACULTY OF SOCIAL SCIENCES IN
PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE BSC HONOURS DEGREE IN
PSYCHOLOGY*

MAY 2016

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lizing and externalizing problems and how they relate to academic self-concept in students

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GATEWAY HIGH SCHOOL**

DEGREE IN WHICH DISSERTATION WAS PRESENTED: **BSC HONOURS IN
PSYCHOLOGY**

YEAR GRANTED: **2016**

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DEDICATION

To

MOM & DAD

I LOVE YOU.

Acknowledgements

At the end of this important achievement in my academic career, I would like to thank my supervisor Mr. Matiya for his encouragement and support throughout my dissertation. Without his guidance, reassurance and sense of humor, this dissertation would have been more difficult. Thank you for being my mentor.

Much appreciation goes to the Headmaster at Gateway High School, Mr. Mashungu for allowing me to carry out my research at his school. A special thank you goes to the School counsellors Mrs. Mpofu and Ms. Siyachitema, for the support, guidance and prayers. I am also thankful to the following members of staff at Gateway High School, Dr. Muzenda for stimulating ideas in me throughout my whole dissertation writing process, Mrs. Drury the Academics Head for her support and proofreading my work.

This research would have not being successful without the contribution of Helma Hamilton and the entire crew at Youth In Mind, who provided me with the Strength and Difficulties Questionnaire and the Strength and Difficulties scoring software package free of charge.

I am truly grateful to, educational psychologist. Mr. Adam Latif, for the knowledge he gave me when I was preparing this dissertation and his words of motivation.

To my Family and Friends, thank you so much for your constant love and support. Mom thank you for your words of encouragement and telling me to take each day as it comes. Dad thank you so much for inspiring me never to give up. To my friends I do not cease to give thanks to you for constantly reminding me to focus and I will always remember you in my prayers .

Abstract

The relationship between internalizing and externalizing problems and Academic Self-concept in high school students is unsettled. The purpose of the current study was to examine the internalizing and externalizing problems and how they relate to Academic Self-Concept. Internalizing and externalizing problems are indicators of poor mental health in high school students and a public health concern. The study employed a quantitative research approach and a descriptive survey research design. Participants included 160, high school students from 13 – 17 years who were selected using a purposive sampling technique. The sample size was determined using the sample size calculator software package. Data was analyzed using the SPSS software package and Pearson correlation was used. 9.5% of the participants were found to have severe internalizing problems, whilst 10% were found to have severe externalizing problems. Of the students, 3.4% were reported to have a low Academic Self-Concept. The relationship between externalizing problems and Academic Self-Concept was found to be $r = -0.447$ and a $r = -0.510$ was found to exist between internalizing problems and Academic Self-Concept. 22.5% of the students had a negative impact score whereas, 19.2% of the students scored a high total difficulties score on the Strengths and Difficulties Questionnaire. Students at Gateway High School mostly experience peer problems in regards to internalizing problems and conduct problems when it comes to externalizing problems. There is a strong association that exists between internalizing and externalizing problems and Academic Self-Concept.

Keywords: **Internalizing problems, Externalizing problems, Academic Self-Concept.**

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Abbreviations

ADHD- *Attention Deficit Hyperactivity Disorder.*

APA- *American Psychological Association.*

ASC- *Academic Self-Concept.*

ASCS- *Academic Self-Concept Scale.*

ATSZ- *Association of Trust Schools Zimbabwe.*

PBT- *Problem Behavior Theory.*

SDQ- *Strengths and Difficulties Questionnaire.*

SLT- *Social Learning Theory.*

CHAPTER 1

INTRODUCTION

1.1 INTRODUCTION

This chapter offers the basis of the research. The chapter commences with a brief background of the research on the internalizing and externalizing behaviour problems affecting students and how they relate to Academic self-concept from global level narrowing down to local level. Thereafter, the chapter presents the statement of the problem, the purpose of the study, research objectives, and research questions which are linked to the objectives of the study. It then presents the significance of the study, research assumptions, delimitations and limitations of the study. It ends with operational definitions that will be used throughout the research.

1.2 BACKGROUND OF THE STUDY

Internalizing and externalizing behaviour problems are the main reasons that make students seek counselling services at high schools. Internalizing and externalizing behaviour problems consist of emotional problems, conduct problems, hyperactivity problems, peer problems and prosocial behaviour problems. Internalizing and externalizing behaviours are often assumed to be related with a student's Academic Self-Concept (ASC). ASC is an important factor in determining a student's academic achievement and academic functioning. A good understanding of internalizing and externalizing behaviours as a mental health problem globally affecting high school students will most likely result from knowledge of both western and none western cultures. Research on adolescents internalizing and externalizing behaviours are more established in developed countries such as North American and Western European countries than in developing countries like Sub-Saharan countries. Western traditions and practices are influential to how mental health professionals and school counsellors manage internalizing and externalizing behaviour problems in less developed countries. Indigenous knowledge on the particular internalizing and externalizing behaviour problems is not well documented or disseminated hence this study aims to fill the gap in the indigenous literature regarding internalizing and externalizing behaviours affecting High school students.

In the western world, a lot of research has being dedicated to measuring ASC, most of the studies have solely focused on ASC in particular subjects such as math languages and science. Not much

research has focused on the overall ASC of high school students. Locally in Zimbabwe, not much literature is available on the ASC of high school students in private schools and how it is related to internalized and externalized behaviours. This study intends to add to the existing literature by reporting ASC of students in private schools and how it relates to internalized and externalized behaviours.

Western research in regards to exploring internalizing and externalizing behaviours among high school students has varied results. Studies noteworthy, include a research by Hodges and Plow (1990) who reported that there was a strong relationship between internalizing behaviours particularly depression and mathematics. Other correlational studies report that there is a correlation between internalizing behaviours and academic achievement, Masi et al (2000). Furthermore, Undeim and Sund (2008) report that both internalizing and externalizing behaviour problems are not related to reading difficulties. On the other hand, externalizing behaviours such as aggression and delinquency were found to strongly correlate with poor academic performance. Ray, Morris- Yates, Singh, Andrews and Stewart (1995) study concluded that externalizing behaviours are most likely to become a risk factor for developing psychological disturbances in adulthood such as criminal involvement.

In Zimbabwe research in public schools, through the Ministry of Primary and Secondary Education in regards to internalizing and externalizing behaviours have being carried out. According to a research by Sithole,(2003, p. 5) in Harare, Matabeleland and Manicaland reported that all in all 13.8% to 21.3% of students exhibited internalizing behaviours of feeling lonely in the past 12 months. In Manicaland alone 32.7% of students reported internalizing behaviour problems of wanting to commit suicide followed by Matabeleland had 22.9% students reporting to have felt wanting to commit suicide in the past 12 months and Harare had 20.6% students. The study also revealed that in terms of externalizing behaviours of aggression ranging from 37.9% to 47.3 % with schools in Manicaland reporting higher rates. Mpofo (1998) did a research focused on the treatment of externalizing behaviours such as conduct disorder using a cross-cultural perspective and he suggests a multi-disciplinary approach in managing externalizing behaviour problems in children.

Private schools in Zimbabwe are part of a governing body known as the Association of Trust Schools (ATS) and have often being neglected on when it comes to research on internalizing and externalizing behaviours affecting students. The proposed study seeks to add to the existing

literature from a private school perspective. School counsellors, work with students with social, behavioural and academic problems, which all are a result of internalizing and externalizing behaviours. Students who have severe internalizing and externalizing behaviour problems are most likely to be diagnosed with a learning difficulty or any other psychiatric disorder, emotional disorder, oppositional/conduct disorder and hyperactivity/ attention disorder . They are most likely on daily report which is behavioural monitoring program in the school system or put on manual labour or worse facing the risk of being expelled from school. This is an indication of poor mental health in such students and causing withdrawal and poor Academic Self-Concept in students. A case example, encountered at Gateway High School by the School counsellors was that of a male student who had internalizing behaviour problems from being bullied and this resulted in him blaming himself and withdrawing from sport and sometimes not attending school and exhibiting somatization behaviours of pretending to have reoccurring headaches.

Knowing the specific internalizing and externalizing behaviour problems affecting high school students is important to school counsellors as this helps them design and create effective interventions to promote mental health within the school. The importance of studying ASC in high school students is that it can be used as a predictor of students overall academic functioning and achievement as well reflect the varied kind of students in a school setup. It is beyond no doubt, that culture plays a key role in determining a student's ASC. The primary goal of this study is to identify the internalizing and externalizing behaviour problems affecting students at Gateway High School. The secondary goal of this study is to assess the prevalence and severity of internalized and externalized behaviour problems and explore their relationship to ASC.

1.3 STATEMENT OF THE PROBLEM

Nearly 20% of adolescents in high schools have a diagnosable mental health /behavioural disorder that results in maladaptive functioning in a school setup ("Mental health statistics," 2016). Approximately, 70% of adolescents with mental health needs do not receive the care they need ("Mental health statistics," 2016).

Untreated mental health issues not only result in poor academic self-concept but also poor school performance, strained relationships with peers, teachers, and family. Internalizing and externalizing behaviour problems in adolescents usually result in psychological problems in adulthood. Internalizing and externalizing behaviour problems are indicators of poor mental health in high school students and a public health concern. High school students at Gateway High School

often fall victim to loneliness, school phobia, depression, ADHD, bullying and substance abuse which is a result of either internalizing or externalizing behaviour problems.

There is a great need for school counsellors to have knowledge of internalizing and externalizing behaviours so that they can put in place relevant interventions within the school system. Internalizing and externalizing behaviour problems are often associated with a negative Academic self-concept.

1.4 PURPOSE OF THE STUDY

The primary goal of this study is to identify the specific internalizing and externalizing behaviour problems faced by high school students at Gateway High School. The secondary goals of this study are to find out the prevalence and impact of internalizing and externalizing behaviour problems on Gateway High School students and use the findings to predict any mental health issues that may affect students. The study also aims to investigate the Academic Self-concept of students at Gateway High School and find out how it relates to internalizing and externalizing behaviour problems

1.5 SIGNIFICANCE OF THE STUDY

This study is significant, Schools Psychological Services Zimbabwe, Association of Trust Schools (A.T.S /CHIZ), High school counsellors and educational psychologists.

Schools Psychological Services Zimbabwe

The study will be significant to the Schools Psychological Services a department within the Ministry of primary and secondary education responsible for school psychological services in Zimbabwean schools. The Schools Psychological Services department will gain knowledge on internalizing and externalizing behaviours affecting high school students in private schools and

Association of Trust Schools (A.T.S/CHIZ)

The study will be beneficial to Association of Trust Schools (A.T.S /CHIZ), in that it will give information on the quality of the current state of mental health of high school students enrolled in private schools, to fulfil their objective of producing quality students who add value to the community.

High school counsellors

The study will be significant to high school counsellors as the results will help them improve their counselling services to students and also come up with effective interventions to address

internalizing and externalizing behaviour problems in students. The results of the study will also help school counsellor's design effective life skills curriculum that equips students with effective coping strategies and appropriate behaviours. The results of the study will also help school counsellors in terms of referring students who need help to appropriate mental health experts.

Educational Psychologists

The study will be significant to educational psychologists both in practice or research. It will stimulate more research in the field of internalizing and externalizing problems in Zimbabwean private schools and also help those in practice come up with better recommendations in psychological reports on management of students with internalized and externalized behaviours

1.6 OBJECTIVES OF THE STUDY

The objectives of the research are as follows:

- To identify the specific internalizing problems affecting students at Gateway High School.
- To identify the specific externalizing problems affecting students at Gateway High School
- To find out the prevalence of both internalizing and externalizing problems affecting students at Gateway High School.
- To assess the impact and severity of internalizing and externalizing problems on students
- To predict any possibility of other mental health disorders related to internalized and externalized behaviour problems
- To find out the relationship between ASC and internalizing and externalizing problems

1.7 RESEARCH QUESTIONS

The study is guided by the following research questions:

Main research question:

What are the internalizing and externalizing problems and how are they related to Academic self-concept in students at Gateway High School

Sub Research Questions:

- What are the specific internalizing problems affecting students at Gateway High School?
- What are the specific externalizing problems affecting students at Gateway High School
- What is the prevalence of both internalizing and externalizing problems affecting students at Gateway High School?

- What is the general impact and severity level of both internalizing and externalizing problems affecting high school students and how do these factors predict students at risk of other psychological problems?
- Does ASC correlate with internalizing and externalizing problems?

1.8 DELIMITATION OF THE STUDY

This study shall be concerned with only internalizing and externalizing behaviours and not any other behaviours. The study also used a cognitive-behaviourism and a self-concept construct model approach and was guided by theories that explain internalizing and externalizing behaviours from an educational school perspective. The study will also focus on private Trust schools in Zimbabwe which are members of the Association of Trust Schools (ATS) and not public institutions. The study is delimited to high school students who are currently enrolled at Gateway High School. Furthermore, the study will be carried out at Gateway High School which will be used as a representative sample for all other private schools in Zimbabwe.

1.9 LIMITATIONS OF THE STUDY

Time was a limitation in this study as the researcher only had a few months to carry out the research and to collect data needed before schools closed for the first term. In addition, another limitation of this research was time taken to administer the research instrument as students had to attend lessons, this had effects on the standardization procedures of the research instrument administered, to resolve this the researcher had to administer the instrument during life skills lessons with permission from the school authorities.

Another limitation of this study was overcoming method bias of the research instruments as the sample included students with mild learning disorders in reading and writing. To overcome this limitation the researcher had to assist the students by reading to them all the questions on the instruments. Item bias was also a limitation of this study, the items on the instrument were too many and they would end up sounding mundane to the participants, to solve this the researcher had to select at least two questions from each subset of one of the instruments. Response bias was also a limitation of the research as students were more likely to provide responses that they believe are socially desirable to minimize such effects the students were given the option to use pseudo names.

1.10 ASSUMPTIONS OF THE STUDY

The study made the following assumptions:

- Internalized and externalized behaviour problems are common among high school students in private school students. Students will be forthcoming with self-reports of internalized behaviours and often students with externalized behaviours are often identified easily by teachers.
- The impact and level of severity of internalizing and externalizing behaviours in high school students is disturbing and often affects their overall school functioning, school adjustment, and these factors and put students' at risk for other psychological problems.
- Gender, Class\ form are factors that affect the prevalence of internalizing and externalizing problems
- There is a close relationship between Academic Self-concept and internalizing and externalizing behaviour problems.

1.11 OPERATIONAL DEFINITIONS

The following definitions will guide the research

- **Internalizing behaviour problems-** The sum of emotional and peer problems scale (Goodman & Goodman, 2009)
- These can also be viewed as behaviours that are focused inside. Students with internalizing behaviour problems have a hard time coping with stressful situations and rather direct their feelings inside
- **Externalizing behaviours-** According to Goodman and Goodman, (2009) externalizing behaviours are the sum of conduct and hyperactivity scales.
- These are behaviours that are focused outward and are observable.
- **Emotional problems-** According to PsychGuides.com (2016) an emotional problem is “feelings of anxiety related to personal or school matters”
- A behavioural dysfunction that makes a student unhappy and inattentive in class.
- **Conduct problems-** PsychGuides.com (2016) defines conduct problems as “hostile irritable and uncooperative attitudes in children”

- A Pattern of behaviour in high school students that goes against the norms of the school setting.
- **Inattention/ Hyperactivity**- A psychological condition characterized by inability to focus or being over active or a combination of both ("PsychGuides.com," 2016)
- This may also infer to poor attention span or hyperactivity behaviours compared to other students of the same age group
- **Peer problems**- Patterns of behaviour characterized by “maladaptive, aggressive or withdrawn behaviours, social information processing biases and poor emotional regulation” (Mikami, 2010)
- Simply this may mean a student’s inability to start or maintain relationships with other students in the school system
- **Prosocial behaviour**-Cherry, (2015) “conceptualizes prosocial behaviours to be behaviours intended to help other people and characterized by the rights, feelings and welfare of other people.
- Also, can be described as actions that help other people or humanity
- **High school students**- male or female adolescents who are currently enrolled at an education system offering a high school curriculum.
- **Academic Self- Concept**- “can be thought of as a student’s self-perception of academic ability formed through individual experiences and interactions” (Rosen, Dalton, Lenonon, & Bozick, 2010, p. 4)
- How a student perceives him/herself in terms of academic aptitude.

1.12 CHAPTER SUMMARY

This chapter provided an overview of the study of internalizing and externalizing behaviours and how they relate to Academic Self-Concept in high school students at Gateway High School. The background of the problem, statement of the problem, the purpose of the study was discussed. The significance of the study highlighted entities that will benefit from the findings of this study. The delimitations of the study were set and limitations of the study were highlighted. The chapter also outlined the research questions assumptions of the study and objectives of the study

CHAPTER 2

LITERATURE REVIEW

2.1 INTRODUCTION

This chapter provides a detailed overview of related literature review in regards to internalized and externalised behaviours. The literature review will also explore the prevalence and severity of internalized and externalized problems in high school students, as well as in school counselling services and referral services for students with internalized and externalized problems. The literature review will be discussed in light of the conceptual frameworks in mind. However, this study will present a theoretical framework that guides the study. Lastly, the chapter shall discuss the knowledge gap in existing literature.

2.2 CONCEPTUAL FRAMEWORK

This study is directed by four major concepts firstly by a cognitive behavioural concept known as the self-concept by Harter (1999), The Big-Fish-Little-Pond effect, Polyvagal model and the cross-cultural model.

From a cognitive behavioural perspective Harter (1999) proposed a construct termed the self-concept construct. In general, self-concept is simply one's mental picture. Harter self-concept is made up of 4 dimensions which are cognitive self-concept, physical or body self-concept social self-concept, and self-esteem which is one's overall evaluation of self-worth. Put in a high school context, the cognitive self-concept is responsible for a student's academic abilities and school performance, the physical or body self-concept is based on a student's participation in sport and the social self-concept is responsible for a student's acceptance by other peers.

The general idea is that self-concept has an effect on behaviour. Salley et al (2010) postulate that the determinants of self-concept are interaction with others, social comparison, and feedback. A poor self-concept usually results in internalizing or externalizing behaviour problems (Sally et al 2006). This conceptual construct was chosen because it applies to high school students and describes the cognitive and behavioural aspects of internalized and externalized behaviours. Narrowing down to the study in question an important offshoot of the self-concept contrast is the Big-Fish-Little-Pond effect by Marsh Herbet and Hau which guides the understanding of ASC in this study. According to this hypothesis students who have lower ASCs are those students who are

equally able, but placed in schools or classes where average ability of classmates is high and those who have High ASCs are those students who are in classes where academic ability is lower. Implications of this conceptual hypothesis to this study is the effect of the environment on ASC and this is in line with the theories guiding the research. This also translates that the prevalence of internalizing and externalizing problems is also affected by a student's class and other people around the student.

In this study, internalizing problems and externalizing problems are conceptualized in light of the principals of Polyvagal model by Porges. This model explains emotional regulation and manifestation of social behaviours from a physiological point of view. The gist of this three stage model is that neural pathways which are responsive to environmental cues have the sore duty of regulating the automatic state and expression of emotions and social behaviour. In other words internalizing and externalizing problems in students can be perceived as a physiological response to environmental cues that have psychological effects. This is somewhat true in explaining internalized problems such as depression and externalizing problems such as ADHD. To extend this concept, neural pathways also have a huge bearing on a student's emotional stability and regulation, thus causing internalizing problems. Students with no emotional stability have no capacity to maintain their emotional balance. Often is the case, that such students have a poor ASC.

Another conceptual framework to guide this research is the cross-cultural model, which seeks to study behaviour under diverse cultural settings. Much literature of internalized and externalized behavioural problems is from a western perspective. However, the western culture research has proven that internalized and externalized behaviours have negative effects in a student's schooling life. The argument, however, is that behavioural problems labelled as internalized and externalized behaviours in the western culture do not always represent behavioural problems in the Zimbabwean or African culture. According to Bonsteng (1995), behavioural functioning is to be perceived taking account of cultural norms and values. Zimbabwe is a collectivist society and so is the education system of the country. Social order and harmony are important. In a typical Zimbabwean education system set up students are expected to participate in extracurricular group activities such as clubs and sports. Usually students who exhibit externalized behaviours of aggression and disruption compromise the welfare of the collective and are likely to experience social difficulties such as peer rejection. Asher, Parkhurst, Hymel and Williams (1990) report that

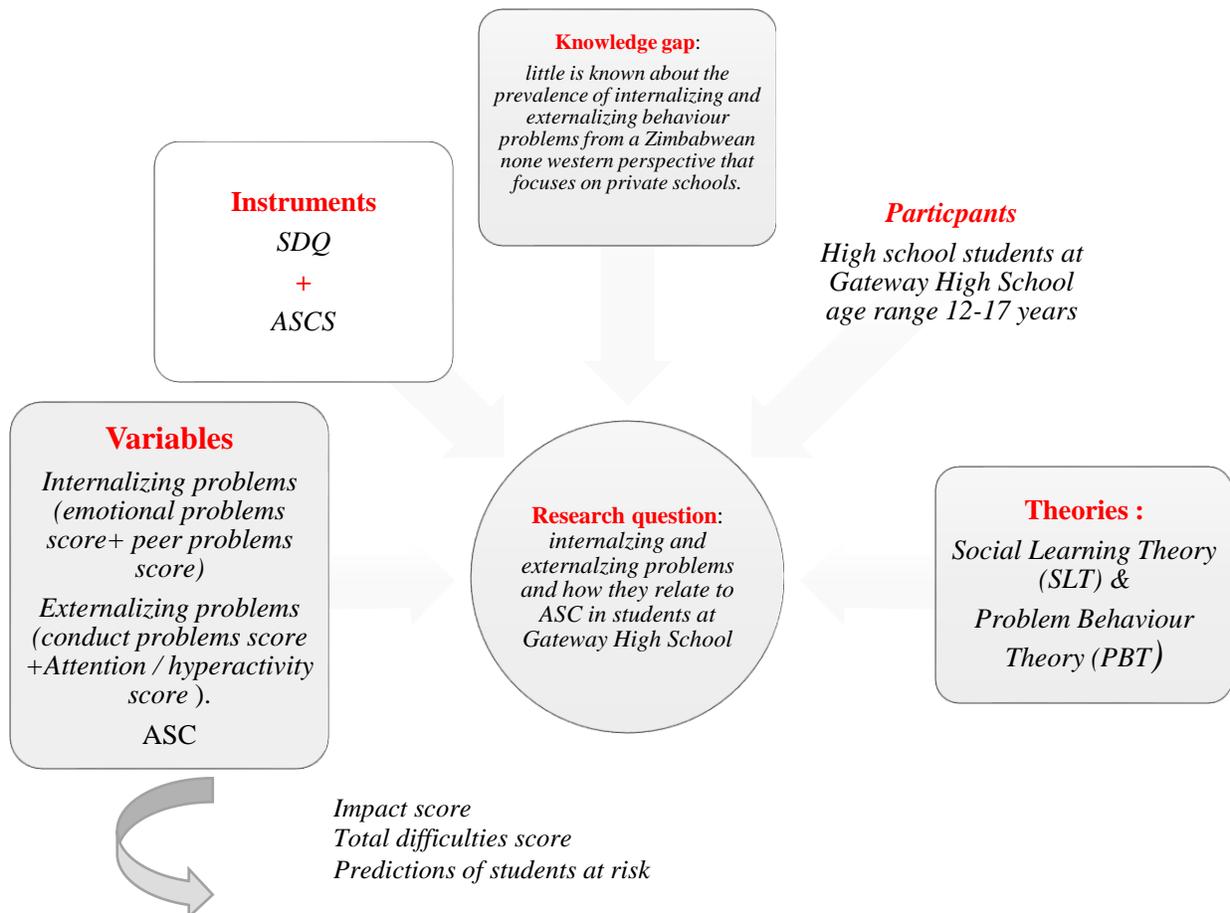
in Western cultures such children do not report loneliness and depression whereas in the Zimbabwean society it's the opposite.

On the other hand, in the Zimbabwean culture, internalizing behaviour problems such as somatic complaints, depression and feelings of fear receive little attention from parents and teachers. This implies that the Zimbabwean culture does not tolerate internalizing behaviours, for example, a student who is shy inhibited in the Zimbabwean society is positively associated with peer acceptance and perceived to be respectful and reserved whereas in Western culture this could be a symptom of internalized behavioural problems. This study will take into account the cross-cultural conceptual framework so as to accommodate students from different cultures and to give accurate findings of internalizing and externalizing behavioural problems in students at Gateway High School.

CONCEPTUAL FRAMEWORK MODEL DIAGRAM

This study is described by the following conceptual framework:

Figure 2:1 Conceptual framework Diagram.



2.3 LITERATURE REVIEW GUIDED BY RESEARCH QUESTION

2.3.1 OVERVIEW

In most cultures internalizing behaviours are increasing whereas externalizing behaviours are prevalent in adolescents and high school students. Both internalizing and externalizing behaviours are believed to be correlated with poor academic competence. This makes the study internalizing and externalizing behaviours a study of concern school counsellors, educators and educational psychologists as these behaviours can be a predictor of post-secondary education, criminality, and future career and employment prospects for students. On typical schooling day, school counsellors' deal with internalized or externalized behaviour related problems through counselling or life skills lessons.

Almost everyone experiences internalizing or externalizing behaviours at some point. When internalizing and externalizing behaviours become severe and result in school malfunctioning in students they are labelled internalizing and externalizing disorders. School interventions by school counsellors and teachers usually address the symptoms of internalized and externalized behaviours. In most private school set ups in Zimbabwe if internalized and externalized disorders are serious the school counsellor usually refers the child for clinical assessment by a psychologist or psychiatrist.

This review of literature explored the symptoms, severity, and prevalence of internalized and externalized behaviours specifically, depression, anxiety, somatisation, hyperactivity, conduct problems, prosocial problems and peer problems.

2.3.2 INTERNALIZED BEHAVIOUR PROBLEMS IN STUDENTS.

Internalized behaviours are a pattern of behaviours in which emotions and feelings are inwardly directed, for example, self-blame, anxiety and depression. Students with internalized behaviour problems often have a poor self-concept of themselves. Garaigordobil, Pe`rez and Mozaz (2008) report that the most prevalent mental health issues that are internalized in nature among high school students are mood and anxiety disorders. Furthermore, Costello et al (1996) suggest that internalized disorders are more common in female students than in male students. A prevalence study by Merikangas (2010) found out that, the most prevalent internalized problem in children and adolescents is depression followed by anxiety.

However from a different standpoint, Bryan, Mathur and Sullivan () research concluded that internalized behaviour problems are more common in students with learning disorders compared

to those without learning disorders. Their study also found out that students with learning disorders were more likely to suffer from somatic complaints, anxiety problems, and depression. What is generally known is that internalized disorders occur from failure to decrease negative emotions and or increase positive emotions. In light of this idea adolescents in high school will have not fully developed the capacity to regulate their emotions. Teachers, educators, and school counsellors have a great need to be aware of the risk factors and warning signs of internalized behaviours of students in a school system.

In a study by Chavira, Stein and Bailey (2004), it was found out that students with internalizing problems such as anxiety and depression often go unnoticed by teachers and parents. This study in some way seems to apply to the Zimbabwean education system most especially in government schools where there are no school counsellors or mental health personal for easy identification of such students. Even in Zimbabwean private schools, some teachers have little or no knowledge of the symptoms of internalized behaviour problems. In a typical high school setting, it is often the case that students with disruptive behaviours are noticed and receive help through counselling or specialized programs such as daily report, monitoring, and compulsory homework training. Culture also plays a role in the identification of internalized behaviour problems, according to the Zimbabwean culture one does not have to be fully expressive of their negative emotions, most especially in males as this would be deemed a sign of weakness. This then results in those students seated at the back of the classroom with emotional problems being overlooked and in most cases these are usually female students whilst those with externalizing disorders are easily identifiable. Most high school students are in their adolescents' phase, a developmental period characterized by drastic mood changes that may affect their general mental health. Adolescents are less likely to consult mental health services such as high school counselling department (Walcott and Music 2012). The most common internalizing disorders that affect students in high schools are depression, anxiety and somatization complaints.

Depression is one of the most common internalized behaviour problems in high school students accounting for 11.2% of adolescents of the age range of 13-18% globally being diagnosed annually (Merikangas et al 2000). Symptoms of this internalizing behaviour can affect a student's academic functioning. Research by Hodges and Plow (1990) reports that there is a correlation between depression and performance of a student in mathematics. Depression in high school students also causes attention problems, loss of interest in a school activity, school related anxiety and poor

academic achievement. In contrast Fite, Wimsalt, Vitulance, Ratther and Schwartz (2010) found out that depression did not have any effect on academic performance. In fact, Mayes and Calhoun (2007) found out that children with depression academically performed the same way with a control group on academic skills such as attention, writing and processing skills.

Somatisation is also another common internalizing behaviour affecting high school students. Raymonds and Kufman (2004) define somatization as a complaint of physical problems without a relevant cause and usually a response to a psychological difficulty. In most cases it is most common in female students and they usually complain about symptoms such as headaches etc. It is also most common in students with learning difficulties.

Anxiety in western societies affects 15-24% of adolescents (Fox et al 2008). This internalizing behavioural problem is multi-faceted ranging from generalized anxiety, subject specific anxiety, career decision-related anxiety, and exam related anxiety. According to Woods (2006), anxiety has several negative effects on high school students which include effects on problem solving, memory and attention.

2.3.3 EXTERNALIZED BEHAVIOURS

Externalized behaviour problems, unlike internalized behaviour problems, are characterized by overt and observable symptoms. In other words externalized behaviours do not only have an effect on the individual but also on others like peers. In high school students, the most common externalized behaviour problems are hyperactivity problems, conduct problems, peer problems and prosocial behaviours problems.

In the Zimbabwean collectivist society, where social order and harmony are important externalized behaviours are often shunned against. Students who show symptoms of externalized behaviours such as hyperactivity in the class are often easily identified and punished by teachers. In some cases, they are incorporated in school interventions such as a daily report, monitoring or calling in parents to discuss possible measures that are available to help the student.

Externalizing behaviours are more common in male students than in female students. Externalizing behaviours such as hyperactivity often result in referrals for mental health services for students exhibiting such (Pikoet et al 2005). However, Arnold (1997) states that externalised behaviours can be difficult to treat and prevent. However Mpofu (1998) from a cross-cultural Zimbabwean perspective advocates for a multi-sectoral treatment approach in treating externalized behaviour

problems one that consists of mental health experts and also other authorities in the society such as pastors and traditional healers.

A western research carried out in America by Centre for Disease Control and Prevention CDC (2010) showed that five million children of the age range of 3-17 have Attention Hyper Activity Disorder (ADHD). Cross-cultural research by Kashala, Tylleskar, Kayembe and Sommerfelt suggests that ADHD is increasing in developing countries in Africa by 6%-10%. Regardless, not very much is known about the prevalence of ADHD in Sub-Saharan Africa, although recent data from South Africa suggests rates of over 17% with higher rates in children living with HIV (Chibanda, 2015). Not much is known about the prevalence rate of ADHD in Zimbabwe as most cases go undiagnosed.

Another common externalizing behaviour problems noteworthy is conduct disorder and aggressive symptoms. A combination of both conduct problems and aggressive symptoms is often referred to as a disruptive disorder. According to Zhang, Hsu, Katsiyannis, Barrett and Ju (2011) are often associated with juvenile delinquency.

Educational psychology research by Hodges and Plow (1990) notes that students with conduct disorder have low verbal abilities. Frick et al (1991) claim that externalized behaviours, in general, have a negative impact on academics because students with externalized behaviours often have poor attention problems. Data from existing literature is of the notion that externalizing behaviour problems predict academic underachievement and that poor academic achievement does not predict externalizing behaviour problems (Richards, Symons, Green and Szuszkiewicz, 1995).

The effect of externalizing behaviour problems is that students who exhibit such symptoms violate the basic rights of others and society. They often have poor prosocial skills and this in turn with the effects of other disruptive behaviours leads to peer problems. For example, a student with disruptive behaviours is more likely to bully other students and possibly face peer rejection and disapproval from teachers. In the Zimbabwean education system, there are many regulations that govern expected behaviours in schools, for example, the Ministry of Primary and Secondary Education has a policy on student discipline to protect the rights of both students and educators.

2.3.4 ACADEMIC SELF-CONCEPT (ASC)

One of the determinants of a student's school adjustment is ASC, it is a vital component for student success in high school. Over the years, ASC has become an important in educational psychology that has stimulated numerous researches. It refers to the perception of students toward their academic ability.

Lawrence et al (2013) research suggests that ASC explains a student's perception about their academic aptitude. Marsh (1990) however, report that ASC is multi-faceted and involves a student's self-concept in various aspects of their academic life. A lot of studied have examined subject specific ASC, for example Lawrence et al (2013), examined the ASC of students in science subjects. Be that as it may, Marsh (1999), distinguishes ASC in 3 key components, which are cognitive, motivational and affective components. This translates that ASC is made up of a student's view on their cognitive ability, level of intrinsic and extrinsic motivation and their emotional view in regards to school. This seems to suggest that either internalizing or externalizing problems seem to have an association with ASC. The relationship, however is uncertain in literature.

What is known rather, is the relationship of ASC with ethnicity and academic achievement. Studies noteworthy are studies by Choi (2005) who verified that ASC is a predictor of academic performance and academic achievement. Another study by Coklay (2003) shows that ethnicity is related to ASC, the study was a comparative cross-cultural study between African and European-American students. Haung (2011), found a strong correlation to exist between ASC and academic achievement. There is a gap in existing literature on how internalizing problems and externalizing problems are related to ASC most especially in a Zimbabwean school set up.

What is known and proven in literature however is the different patterns of behaviour between students with a high ASC and students with a low ASC. Bong and Skaalik, (2003) in an empirical study reported that students with a high ASC are active learners who take up challenging academic tasks, have better metacognitive skills, highly motivated and complete tasks such as homework in time. In contrast students with a low ASC according to a study by Broc, (2001) have poor confidence in their academic capabilities, avoid academic tasks they find challenging and may cause them distress or anxiety. In general these students have poor cognitive skills and are not motivated in their school work. These studies stimulate interest to the relationship that exists between ASC and internalizing and externalizing problems

2.3.5 REFERRALS OF MENTAL HEALTH SERVICES FOR STUDENTS WITH INTERNALIZED AND EXTERNALIZED BEHAVIOURS

When students with either internalized or externalized behaviour problems are identified in the school system there is a wide array of referral options at disposal. The first point of call usually is the school Counselling and Guidance Department where the school counsellor, who in most cases has training background in mental health services evaluates the student and give a possible recommendation to employ. However such specialized school departments are not yet established in most schools and there are only available at a few private schools in the country. In cases where there are no such departments teachers or the school, head is usually responsible for referrals.

If the case is severe the student is usually referred to seek external mental health services. The mental health system in Zimbabwe is multi-layered with professionals like psychologists, psychiatrists and social workers who are trained with a western perspective of diagnosis and treatment of internalized and externalized behaviours. Parents have two options once their child is referred for mental health services, the first one is to consult a private clinician or educational psychologist or seek public mental health services such as the Schools Psychological Services. This usually depends on the availability of financial resources. However western research claims that most referrals made in regards to internalized and externalized behaviours are usually made from the school (Burns et al 1995).

Another fact noteworthy is the reason of referral. In most cases students with externalizing behaviour problems are the ones who are mostly referred to seek mental health services whereas those with internalized are often not referred to seek mental health services. For example, in a school climate like that of Gateway High School students with externalizing behaviours who are disruptive in class or at sports are the ones teachers often refer to the school counselling services. However new trends in referrals have being reported by a Norwegian study by Reigstad et al (2004), according to the study students with internalized problems are the ones who are most referred for mental health services compared to those with externalized problems. The study bases this hypothesis on the grounds that schools now have mental health professionals who work there such as school counsellors who are either social workers or psychologists and also teachers are now being trained on mental health issues.

The contemporary trend in referrals in Zimbabwe in regards to student internalizing and externalizing behaviour problems is that most students from private schools are usually referred to

specialists in private practice and such services are usually restricted to high-income families as evaluations are expensive hence limiting the population demographic

2.4 THEORETICAL FRAMEWORK

Theories that have contributed to this research are the Social Learning Theory (SLT) by Bandura and the Problem Behaviour Theory (PBT) by Jessor. Arnett (1999) considers 3 domains that result in behavioural problems that are either internalized or externalized in adolescents and these conflict with parents, mood disruptions, and risk behaviours. These two theories have been carefully selected because they directly link with the conceptual framework of the research, they explore school mental health in students, explain behavioural dysfunction and maladaptation in high school students. From a cross-cultural psychology analysis, in the Zimbabwean culture, it is believed that behaviours are learnt socially from others in the environment and these theories explain internalized and externalized behaviours from such a standpoint.

2.4.1 Social Learning Theory (SLT)

The SLT was propounded by Albert Bandura and is a combination of both cognitive and behavioural approaches. The gist of this theory is that behaviour is dually influenced by the environment and psycho-cognitive factors. The theory puts much emphasis on paying attention to and modelling behaviours, cognitions (emotions, attitudes, beliefs) of others. From this standpoint, this implies that internalized and externalized behaviour problems are a result of students modelling behaviours of other people they observe in the school or none school environment. SLT is also in line with the Big-Fish-Little pond hypothesis discussed in the conceptual framework in that students can learn to have either a high or low ASC depending on the average ability level of other students in the class/school.

The core principles of the SLT are observational learning and adoption of modelled behaviour. Observational learning entails that the modelled behaviour is organized, rehearsed and overtly manifested. Retention only occurs after the behaviour is coded into words, labels and images. Adoption of modelled behaviour occurs when modelled behaviour is strengthened only if the outcomes are valued and seeing as important to the individual or lead to desirable or expected behaviour. For instance, a student through observational learning can learn to fidget and be hyperactive in class, he rehearses this behaviour and it overtly manifests and then later adopts this externalized behaviour because it brings desirable outcomes of peer acceptance.

According to the SLT for successful behaviour modelling to take place 4 necessary requirements have to take place. The first requirement is attention to the modelling events in the environment. The features that influence the observer's attention to those events are arousal level, perceptual set, and emotions. The second factor for effective modelling of behaviour is retention and this involves remembering what was observed, coding, organizing and rehearsing it at the cognitive level. The third factor is a reproduction of modelled behaviour and this involves emulating the observed behaviour. The last factor is motivation and this involves self-reinforcement.

From the ideas of SLT, this study assumes that internalized and externalized behaviours by students are a result of the principles of the SLT, the implications of this ideology are that emotional problem, conduct problems, hyperactivity problems, peer problems and prosocial behaviour problems are learnt socially from the environment. The social learning theory has influenced other theories that explore the issue of internalized and externalized behaviours such as the Problem Behaviour Theory (PBT).

2.4.2 Problem Behaviour Theory (PBT)

An offshoot of the SLT is the Problem Behaviour Theory (PBT) by Richard Jessor. Jessor (1991) cites that he developed the theory to explain behaviour in a small rural tri-ethnic community, none the less this theory is also applicable to a high school set up as it can also depict the development and nature of internalizing and externalizing behaviour problems in high school students.

The central idea of the PBT is that all internalized and externalized behaviour problems are a resultant of 3 structure systems that are made up of a number of variables. The first structure system is the behaviour system. This structured system is made up of problem behaviours, which by definition refer to behaviours that go against social and legal norms of the society. From a school context, such behaviours may include externalized behaviours such as bullying, substance use or even internalized behaviours such as withdrawal from school activity required for a student. Conventional behaviours are those behaviours that are socially acceptable in any social set up.

The second structure system is the personality system. This structure is made up of psychological factors and the motivation instigation structure which is determined by the value placed on achievement and independence. The theory states that the personal belief structure is related to a person's concept of self, relative to the society's personal control structure that is responsible for determining a student's reasons for not participating in problem behaviours. This concept is similar to that of the self-concept construct explained in the conceptual framework. However, the PBT

assumes that problem behaviour rooted in personality correlates with poor academic achievement, poor school adjustment, deviance and low self-esteem.

The last structure system according to PBT that explains problem behaviours is the perceived environment structure system. It is comprised of a student's relationship to his or her support network and proximal variable. The proximal variable deals with a student's environment in relationship to available models of behaviour. In high school student's problem behaviour such as substance abuse which is a conduct problem are often accompanied by high peer approval and problem behaviours often stem out in school environments that have poor teacher and parent support.

The theory elucidates that when the personality structure system and environment system structure clash behavioural problems arise and these manifest as internalized behaviours or externalized behaviours in students at high schools. Jessor (1991) adds that risk factors that contribute to the development of deviance are internalized behaviours such as low self-esteem, poor success expectations and feelings of loneliness all which are part of the personality structure system. The PBT draws a mutual relationship existing between internalized and externalized behaviour problems.

2.5 KNOWLEDGE GAP

In the past two decades internalized and externalized behavioural problems have received tremendous attention from the field of developmental psychopathology (Cicchetti & Cohen, 1995), very little researches on internalized and externalized behaviour problems have adopted an educational psychology approach in studying such behaviours. Moreso, not much literature has attempted to address the relationship that exists between ASC and internalizing and externalizing behaviours.

Existing literature on internalizing and externalizing behaviours is mostly from a western perspective. The little existing literature in none western cultures is epidemiological in nature focusing on the mean level of academic functioning of students in public schools with internalized and externalized behaviour problems. Not much is documented on the psychological adjustment of students in private schools with internalizing and externalizing behaviour problems in the Zimbabwean society.

The core aim of this study is to add to the existing literature on knowledge on the psychological wellbeing of students in Zimbabwean private schools, whilst providing evidence on the validity of

western conceptualizations of internalized and externalized behaviours and their association with ASC. Wiez et al (1998) in a comparative study of children in North America and children from collectivist societies such as Kenya that place emphasis on obedience and authority found out that children in collectivist societies had low externalizing behaviour problems and high internalizing behaviour problems. This translates that the prevalence of internalizing and externalizing behaviours vary across cultures and this study seeks to report the prevalence of internalized and externalized behaviours from a Zimbabwean cultural perspective paying particular attention to private schools.

2.6 SUMMARY

The chapter opened with a conceptual framework that presented various conceptualizations of internalizing and externalizing problems and ASC that were employed in this study. It then presented the literature review that was guided by research questions. A theoretical framework made up of the SLT and PBT was outlined to explain the nature of internalized and externalized behavioural problems. The chapter concluded with a section on the knowledge gap which justified the need for this study.

CHAPTER 3

RESEARCH METHODOLOGY

3.1 INTRODUCTION

This chapter will address the research paradigm and research design of this study. The chapter will also pay attention to the sampling technique to be employed in creating a sample for this study. Data presentation and analysis will be discussed. The chapter ends, with a discussion of the ethical considerations the research will be sensitive to.

3.2 RESEARCH PARADIGM

According to Anderson, 2004 research paradigms can be classified into 2 major paradigms, namely the positivist and the interpretive research paradigms. This research, however, will employ a positivist paradigm specifically a Quantitative research paradigm. The quantitative research paradigm has being selected because it eliminates or minimizes subjectivity of judgement by the researcher (Kealey & Protheroe, 1996) this implies the research in question will achieve a degree of accuracy. To suit the epidemiological nature of this study a quantitative research paradigm was selected because a quantitative research is usually reliable, valid and generalizable in its clear prediction of effect and cause (Cassel & Symon, 1994, p. 12). To add on this research paradigm has being considered to meet the method of enquiry of this research which is to use a predetermined research instrument so as to yield statistical data.

Smith, (1988) asserts that quantitative research involves counting and measuring behaviour and performing statistical analysis of a body of numerical data. Hence, this paradigm in context with the study will allow the researcher to measure internalizing and externalizing behaviours as well as the ASC of high school students and statistically analyse data to determine the prevalence, and impact of these behaviours on school adjustment of students at Gateway High School. Smith (1988) also adds that quantitative research assumes that there is an objective truth that can be measured and explained scientifically.

3.3 RESEARCH DESIGN

The research design that defined this research is a descriptive survey research design. A descriptive survey research design is mainly focused on identification of attributes of a particular phenomenon, in context to this study the research design will identify internalizing and externalizing behavioural

problems as well as ASC in high school students at Gateway High School. The advantage of employing a descriptive research design is that it depicts a clear picture of internalizing and externalizing behavioural problems and how they relate to ASC in Gateway High School students. According to Creswell (2003), descriptive surveys make use of predetermined research instruments and the findings will be used to yield statistical data that can be predictive, explanatory or confirming. This design will allow the researcher to measure the significance of results from the selected sample of the overall population at Gateway High School.

3.4 SAMPLING

Quantitative research seeks to infer data from a sample population. The core objective of this study is to represent the Gateway High School population in a sample that takes into account age, cultural background, ethnicity, and sex; so as to meet the goals of a quantitative research design which is empirical generalisations of many.

3.4.1 POPULATION SAMPLE

Gateway High School has a total student population of 700 students that is comprised of 348 boys and 352 girls. The population is a mixed ethnic population.

3.4.2 TARGET POPULATION

The population under study in this research are students both males and females who are currently enrolled at Gateway from the ages of 12 to 17.

3.4.3 STUDY SAMPLE

Bartlett, Kotrilik, & Higgins, (2001) emphasise the importance of determining a good sample size, so as to avoid inappropriate, excessive or inadequate sample sizes as this will have an effect on the quality and accuracy of the research. The sample size for this research was determined by using the Survey system sample size calculator software package. The confidence level or margin error used was 95% and a confidence level of 6.8 (*reduced to 2 significant figures*). The sample size calculator uses the following formula

$$ss = \frac{Z^2 * (p) * (1-p)}{c^2}$$

Where Z = Z value p= percentage picking a choice expressed as a decimal (.5) used and c = confidence level interval expressed as a decimal (The survey system, 2016).

According to Ary, Jacobs, & Azaveih, (1996), these statistical considerations in determining sample size are acceptable in most social sciences and educational research.

The study sample for this study was made up of 160 students both males and females. The students are in their adolescent's period and in the age range of 12-17 years. The study sample is also comprised of students from different ethnic backgrounds (African, Euro/American and other). The sample also has students who are under Special Needs Education under the Accelerated Christian Education program and Career Oriented Program, with mild learning difficulties.

3.4.4 SAMPLING TECHNIQUE

This study adopted a none-probability sampling technique, particularly a purposive sampling technique. A purposive sampling technique is also referred to as a judgemental/ selective judgemental sampling technique and it fully depends on the judgement of the researcher. This sampling technique was employed mainly because it is in line with the quantitative research design. In addition, this technique gives the researcher an opportunity to create a representative sample of the whole population in question and be able to make generalizations from statistical inferences gathered from the study. Making use of this technique the researcher will carefully select classes from either form 2-5 that will be a considered representation of the whole population of Gateway High School.

3.4.5 RESEARCH INSTRUMENTS

This research shall make use of the Strengths and Difficulties Questionnaire (SDQ) (self-report) and questions adapted from the Academic Self-Concept Scale (ASCS).

The SDQ was carefully selected on the reasons that it is culturally sensitive to none western cultures and has being used in a wide variety of cultures with a good track record of cultural equivalence and translations in over 30 languages. The SDQ is also effective in epidemiological studies to generate prevalence estimates in subpopulations defined by some common characteristics such as high school students. The SDQ was also selected because of its good reliability and validity in both western and none western cultures.

The SDQ consists of 25 questions and is divided into subscales namely the emotional symptoms, conduct problems, hyperactivity/ inattention problems and pro-social behaviour. Each subset in the SDQ generates a score range of 0 to 10 if all items are completed. Externalizing behaviours have a score range of 0-20 and are the sum of conduct and hyperactivity scores. On the other hand, Internalized behaviours are a combination of emotional symptoms score and peer problems score

with a score range of 0-20. The SDQ also has a total differences score of a range of 0-40 to explain the level of difficulty a student is facing as well as an impact score of a score range of 0-10. The version of the SDQ used in this research has an impact supplement attached to the SDQ which is used to assess if the reported problems are causing any distress or social impairment to the respondent.

The ASCS was chosen to measure ASC in this study because it has a proven track record validity and reliability (Cokley, Komarraju, Cunningham, & Muhammad, 2003). The major reason why the ASCS was selected is because it measures overall academic self-concept, unlike other available scales which measure subject-specific academic self-concept, hence the ASCS is in line with the overall goals of this study. It was also considered for this study because the items in the scale are user-friendly, in simple English which is easy for high school students to understand hence it is age appropriate and context appropriate.

Initially, the ASCS is made up of 40 questions and 3 main subscales namely cognitive, motivational and affective subscales. However for this particular research the researcher carefully selected at least 2 questions per subscale and created an adapted version of the ASCS made up of 14 questions so as to add value to the research and make the scale more valid in line with the research question. A scoring guideline was also created by the researcher for the adapted version of the ASCS which has a score range of 0-28 and the higher the score the higher the ASC one has.

3.4.6 PRETESTING

Before the initial research, the researcher shall administer the research instruments to a random group of students at Gateway High School who are not part of the initial study. This will give the researcher an opportunity to rehearse the instruments and also practice scoring the instruments

3.5 DATA WORK

3.5.1 DATA COLLECTION PROCEDURE

After receiving approval letter the research supervisor, the researcher approached the School Headmaster at Gateway High School with a letter requesting permission to carry out a study at the school. The School Counsellors at the school notified parents of students who were going to take part in the research that their children were going to take part in a research.

The research instrument was administered during scheduled Life Skills lessons, the researcher first explained to the class that the research was strictly confidential and that results of the survey will not include the students' names but summarized data and if they wish, they could use pseudo names

but on the condition they provide their accurate date of birth, sex, age, and ethnicity. Students were reminded to provide honest answers. They were told not to begin marking answers until after the directions had being discussed.

The researcher had to comply with the administration procedure of the research instrument basing mostly on the SDQ standardized administration procedure. Firstly, the researcher discussed and explained choices for the SDQ items (Not true, somewhat true, certainly true) and ASCS (Disagree, Neither, Agree). Following that, the researcher read all the questionnaire items aloud both of the SDQ and the ASCS (without the choices) with 3-5 second pauses between items depending on the reading level of the students. Before beginning to answer the questions participants were given the opportunity to ask questions if they had any.

The students were instructed to answer the questions basing on their behaviour in the past 6 months. Administering the research instrument approximately took 35 minutes. After they had completed the questionnaire, the researcher explained to the students the benefits of the research to them and the school and asked if they came across any questions they found to be either daft or any questions they wished to discuss. This was done to help reduce any psychological side effects triggered by taking part in the research.

3.5.2 DATA PRESENTATION

The study will present data descriptively, using graphs, tables, and charts

3.5.3 DATA ANALYSIS

Firstly the questionnaire (SDQ), shall be scored using the SDQ scoring software (version 2.03). From the analysis of the results the SDQ software is able to make Diagnostic predictions if either the student is at risk of any psychiatric disorder, emotional disorder, oppositional or conduct disorder or inattention or hyperactivity disorder.

The ASCS shall be scored manually using a predetermined score guide.

A software package for analysing data the SPSS (version 21) shall be used in this research. The SPSS has several descriptive statistics tools for carrying out statistical data and these will be employed in the research. To determine the relationship between internalizing and externalizing behaviours and ASC a correlation shall be calculated using the SPSS software.

3.6 ETHICAL CONSIDERATION

Ethics are key to any research, they act as procedural considerations a researcher should adhere to. This study will be guided by the following ethics that have being drawn from the American Psychological Association (APA) Code of Ethics (2010). According to Standard 8 of the APA code of ethics when carrying out a research the following considerations should be put in place:

3.6.1 Informed consent to research

Participants should be informed about the purpose of the research, reasonably foreseeable consequences that may be expected to influence their willingness to participate in the research such as prospective benefits or adverse effects of taking part in the research. The participants should also be informed of their right to decline to participate and withdraw from a research once research has begun. Participants should also be informed on limits of confidentiality. In this research to ensure high levels of confidentiality, participants were allowed to use pseudo names.

3.6.2 Client/patient, student and subordinate research participants

The APA Ethics code, (2010) section 8.04, recommends that when conducting research on students, clients or subordinates, the researcher should take necessary measures from adverse consequences of declining or withdrawing from the research.

3.6.3 Confidentiality

The results shall not be disclosed to the participants or any third party the results shall only be presented as summarized data. Findings are strictly confidential and shall only be used for educational purposes.

3.6.4 Reporting research results

According to APA ethics code (2010) the researcher should not fabricate research results.

3.7 CHAPTER SUMMARY

The core aim of this study is to explore internalized and externalized behaviours in students at Gateway High School and how they are related to academic self-concept. This chapter provided a description of how data was acquired. Next, the chapter looked at the research instrument to be used to gather data from the participants. Lastly, the chapter concluded with an outline of how data was going to be presented and analysed.

CHAPTER 4

DATA ANALYSIS, PRESENTATION & INTERPRETATION.

4.1 INTRODUCTION

The major goal of this study was to determine the internalizing behaviours and externalizing behaviours of students at Gateway High School and how they relate to a student's ASC. This chapter will present results and analysis on internalizing and externalizing behaviour problems, the prevalence of internalizing and externalizing behaviours. Descriptive results will also be on the impact of internalizing and externalizing behaviours and students who are at risk of other behavioural problems also shall also be presented and analysed in this chapter.

4.2 CHARACTERISTICS OF PARTICIPANTS

Participants of this study included 160 high school students at Gateway high school. The participants were in the age range of 13-17, with a mean age 15.2, a mode of 14 and a std Deviation of 1.215. Descriptive information on the ages of participants is summarized

Age.

Table 4.1 Age of Participants

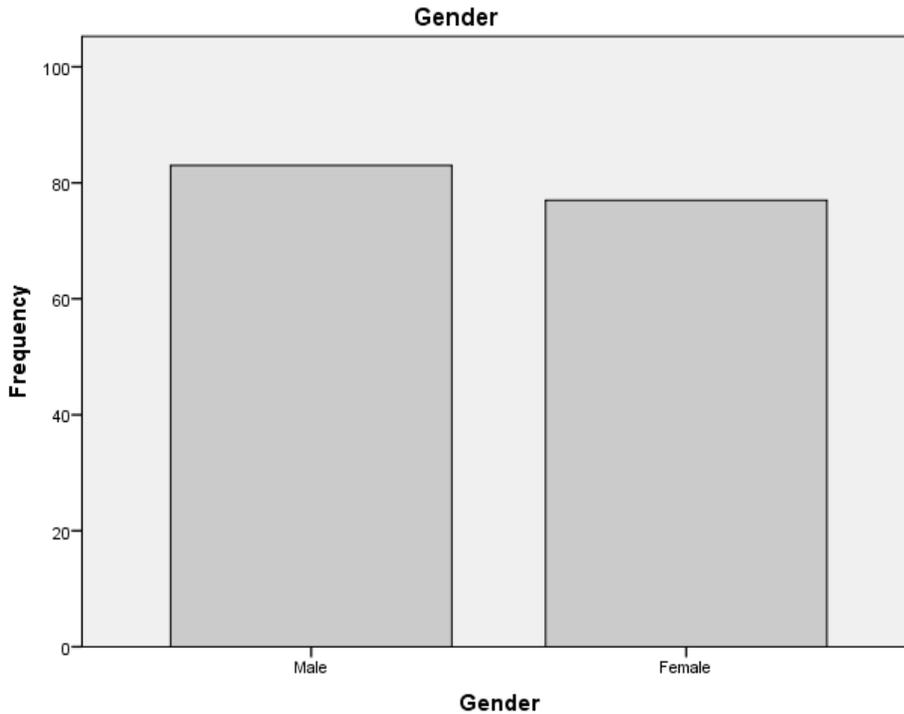
Age of participants				
Age	Frequency	Percent	Valid Percent	Cumulative Percent
12	2	1.3	1.3	1.3
13	9	5.6	5.6	6.9
14	46	28.8	28.8	35.6
15	38	23.8	23.8	59.4
16	41	25.6	25.6	85.0
17	24	15.0	15.0	100.0
Total	160	100.0	100.0	

Notes: std Deviation 1.215, mean 15.12, mode 14

Gender.

In regards to gender, 51.9% of participants were male and 48.1 % females as presented in the bar graph bellow.

Figure 4.1 Gender of participants



Notes: From the bar graph 83 students are male in the sample and 77 students are female

Form/Class.

In this study participants were drawn from different forms/classes. The participants came from form 2,3,4,5 lower 6) and students from a special needs education classes namely the Accelerated Christian Education class (ACE) and Career Oriented Program (COP). The following table presents the frequencies of participants are presented below.

Table 4.2 Form/ class of participants

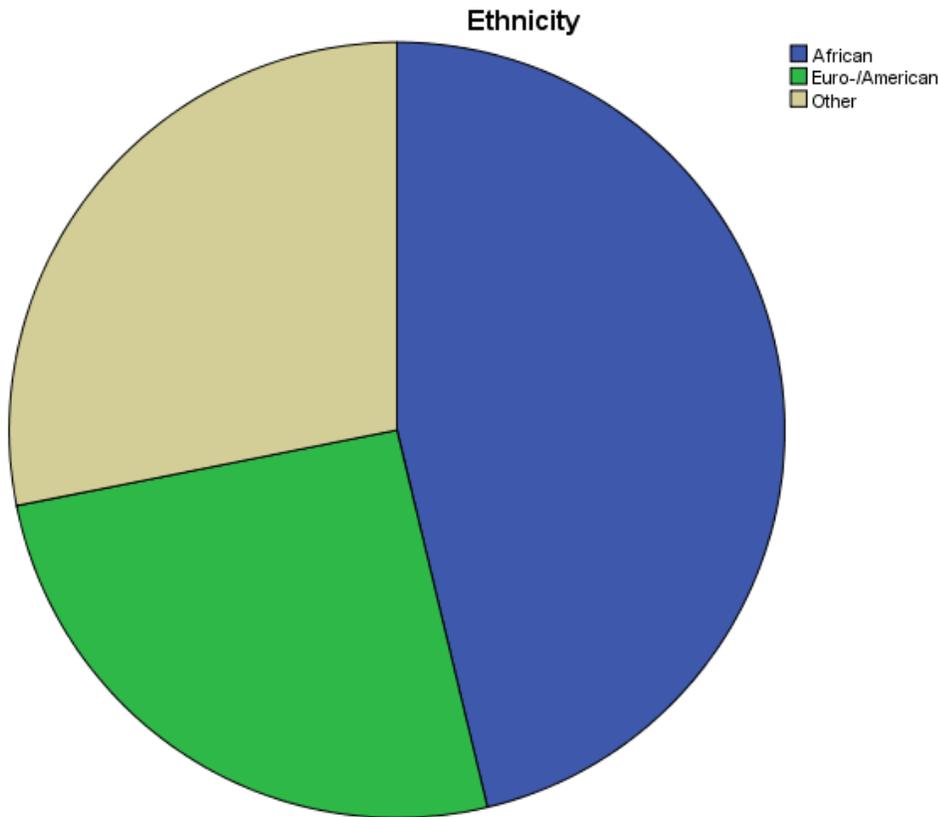
Form/Class of participants				
Form/ Class of participants	Frequency	Percent	Valid Percent	Cumulative Percent
Special Needs Class	14	8.8	8.8	8.8
<i>(Form)</i>				
2	45	28.1	28.1	36.9
3	48	30.0	30.0	66.9
4	35	21.9	21.9	88.8
5	18	11.3	11.3	100.0
Total	160	100.0	100.0	

Note: The Special needs class is comprised of students from both Accelerated Christian Education class and Career Oriented program class.

Ethnicity

A total of 74 students belonged to an African ethnic group, 41 students were from either a European ethnic group of American ethnic group and 45 students belonged to other ethnic groups.

Figure 4.2: Ethnicity of participants



Note: Other includes 75.3 students from a mixed ethnic background, 9% Asian students and 15.7% Indian students

The assumption is that the characteristics of the participants are a representation of the student population of Gateway High School.

4.3 SPECIFIC INTERNALIZING BEHAVIOURS IN STUDENTS AT GATEWAY HIGH SCHOOL.

According to the SDQ manual score guide, internalizing behaviours are the total of emotional problems score subscale and the peer problems subscale. Both these sub-scales have a score range of 0 to 10. The internalizing behaviours score ranges from 0 to 20. A higher score indicates that a student has internalizing behaviour problems. Specific internalizing behaviours facing students at Gateway high school as per research instrument can be classified as emotional problems and peer problems. *Table 4.3* gives an outline of measures of central tendency of emotional problems score, peer problems score and internalizing problems score of the participants of this study.

Table 4.3: Measures of Central tendency for Internalizing problems

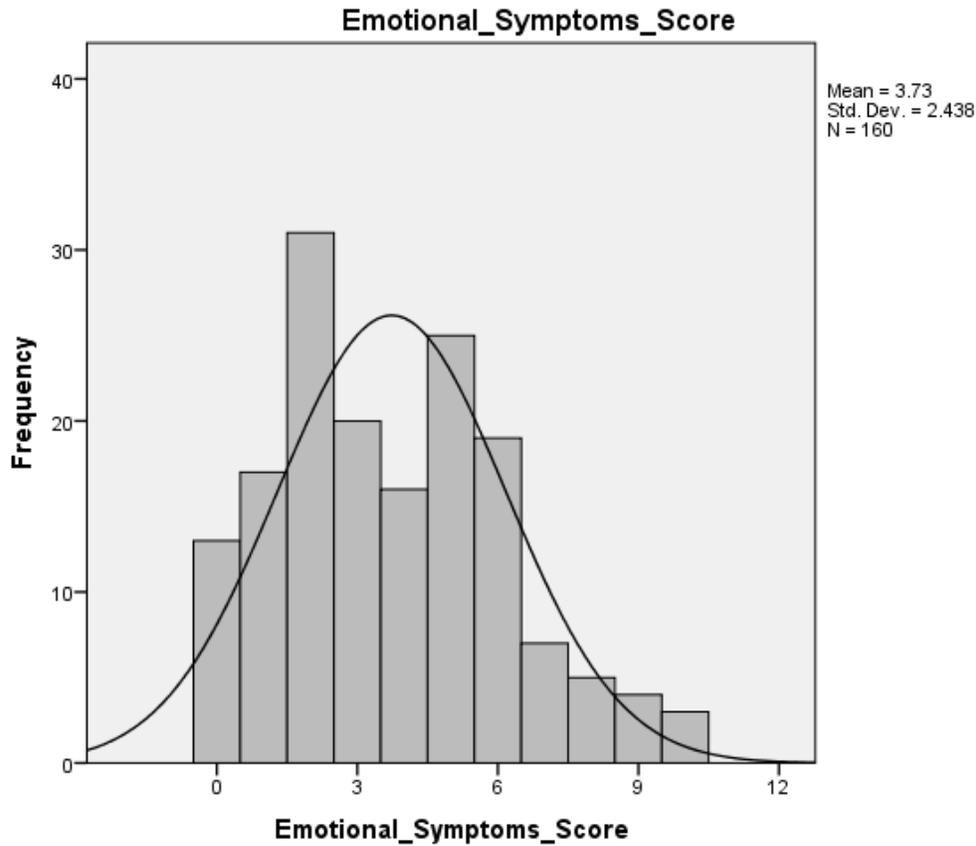
	Emotional Problems	Peer Problems	Internalising Score
Mean	3.73	2.85	6.5813
Mode	2	2	6.00
Std. Deviation	2.438	2.032	3.62464
Variance	5.946	4.128	13.138

Note: Total number of participants is 160.

Emotional Problems

One of the specific internalized problems faced by students is emotional problems. Categorized results (based on SDQ score manual) from this study report that 76.2% of the participants fall into the normal band of students with no emotional problems, 11.9% are in the borderline band and 11.9% are in the Abnormal band. Descriptive results are summarized in the graph below.

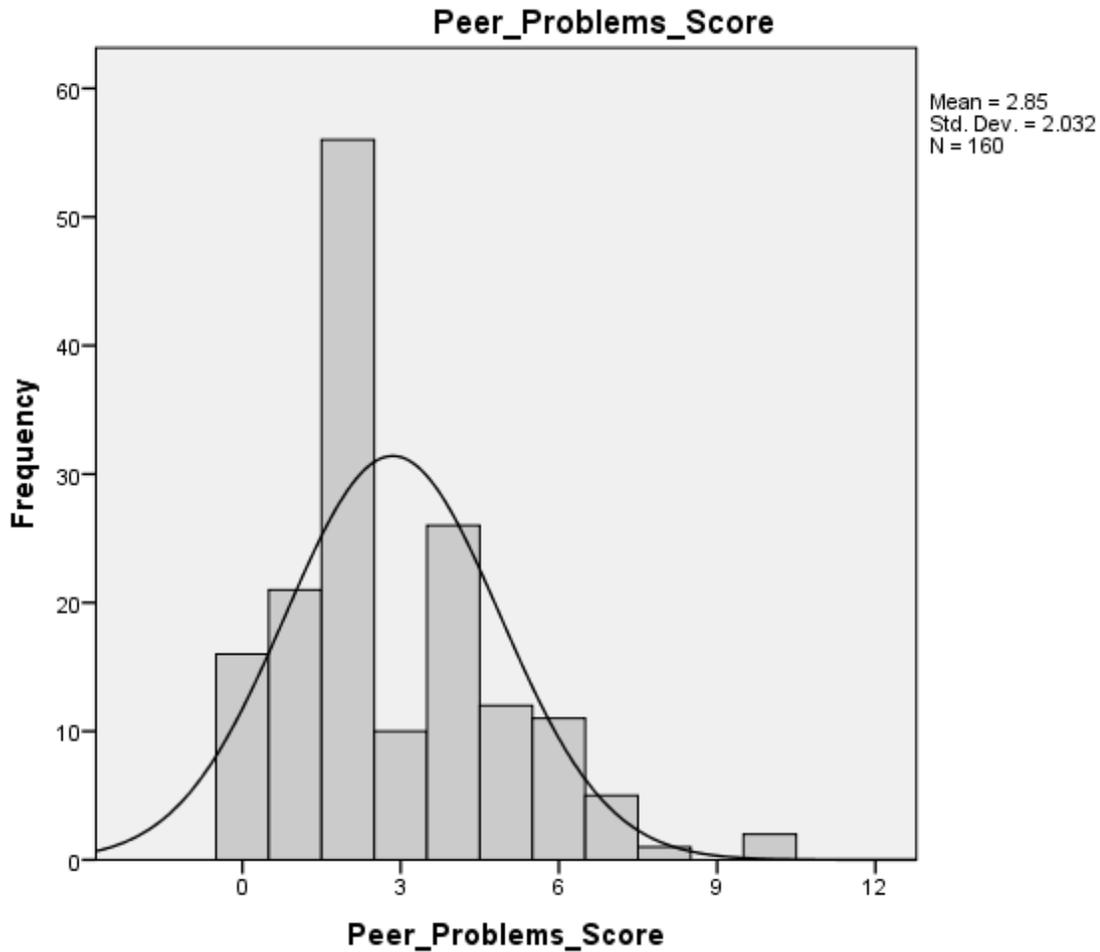
Figure 4.3 Emotional Problems Scores



Peer Problems

The study showed that in regards to peer problems faced by students 64.4% of the participants are in the normal range, 23.8% lay in the borderline band and 11.9% are in the abnormal range. The following graph shows the peer problems faced by students at Gateway High School.

Figure 4.4 Peer problems score



Internalizing Problems

As mentioned internalizing problems are the sum of emotional problems and peer problems. They score range is from 0 to 20. From the results of the study, the range of internalizing behaviours was found to be 16 meaning to say no participant had an internalizing problems score above 16. An interpretation of the internalized problems score reports that at Gateway High School 82.4% of the students do not have any internalized problems whilst only 8.1% are in the borderline range implying that they are more likely to have internalized problems and 9.5% experience emotional problems. A summary of the results of internalizing behaviours is presented below.

Table 4.4 Tabulated results of internalizing problems

Internalising Problems Score				
	<i>Frequency</i>	<i>Percent</i>	<i>Valid Percent</i>	<i>Cumulative Percent</i>
0	5	3.1	3.1	3.1
1	8	5.0	5.0	8.1
2	11	6.9	6.9	15.0
3	11	6.9	6.9	21.9
4	15	9.4	9.4	31.3
5	8	5.0	5.0	36.3
6	28	17.5	17.5	53.8
7	14	8.8	8.8	62.5
8	13	8.1	8.1	70.6
9	10	6.3	6.3	76.9
10	9	5.6	5.6	82.5
11	13	8.1	8.1	90.6
12	8	5.0	5.0	95.6
13	2	1.3	1.3	96.9
14	2	1.3	1.3	98.1
15	1	.6	.6	98.8
16	2	1.3	1.3	100.0
Total	160	100.0	100.0	

Note: Internalizing behaviours= Emotional problems+ Peer problems

4.4 SPECIFIC EXTERNALIZING BEHAVIOURS EXPERIENCING STUDENTS AT GATEWAY HIGH SCHOOL

Theoretically externalizing behaviour problems are a sum of conduct and hyperactivity scales and the score range is 20. The research instrument used for this study is able to determine specific externalizing behaviours namely conduct problems and hyperactivity problems. Descriptive statistical analysis for the conduct scale, hyperactivity scale, and externalizing behaviour scales are presented below

Table 4.5: Descriptive Statistics for externalizing problems

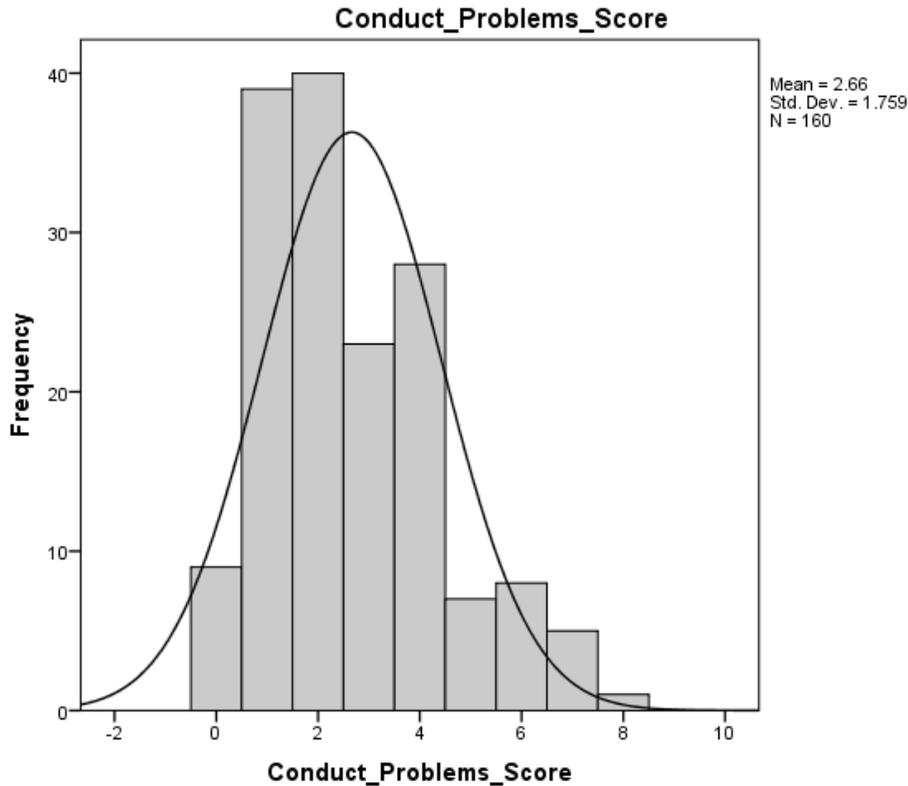
Statistics for externalizing problems.			
	<i>Conduct Problems</i>	<i>Inattention hyperactivity score</i>	<i>Externalising Problems Score</i>
Mean	2.66	4.17	6.8313
Std. Error of Mean	.139	.190	.26809
Mode	2	3	6.00
Std. Deviation	1.759	2.403	3.39111
Variance	3.093	5.776	11.500
Range	8	9	16.00
Minimum	0	0	.00
Maximum	8	9	16.00

Note: Sample size is 160

Conduct Problems

Results show that 69.4% of students at Gateway High School are considered to be in the normal range when it comes to conduct problems, whilst 17.5% are in the borderline zone for conduct problems and 13.1% experience conduct problems. Results for the conduct scale are presented by the following histogram.

Figure 4.5 Conduct problems scores.

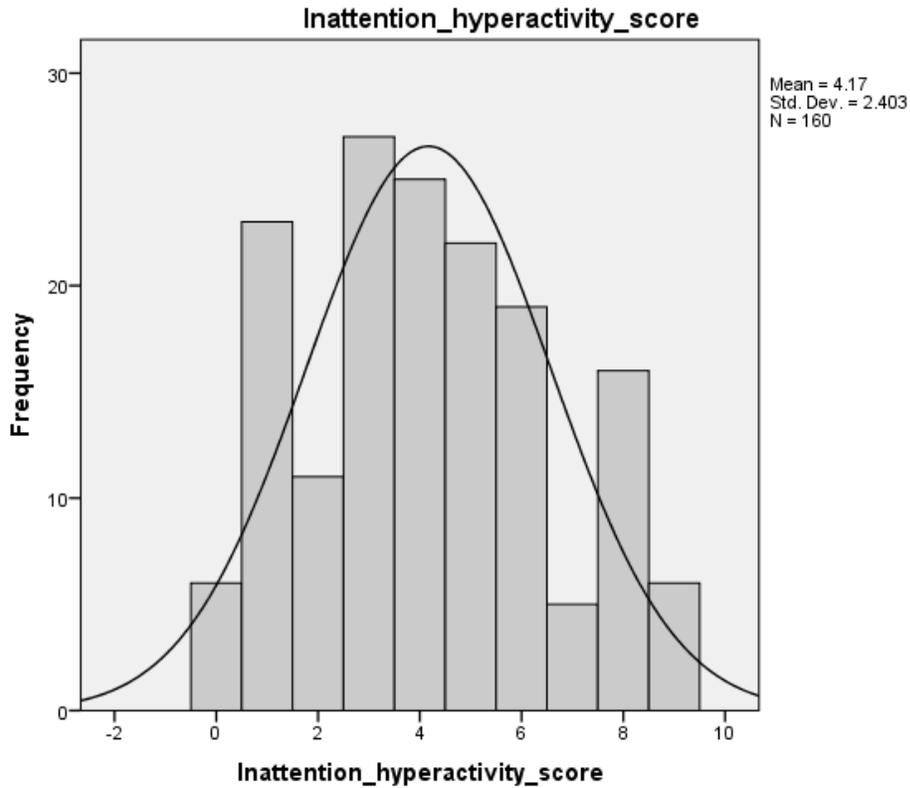


Attention/ Hyperactivity problems

According to the results of the study, 71.2% of students at Gateway High School do not have attention/ hyperactivity problems, 11.9% are more likely to develop attention or hyperactivity problems. 16.9% of the students have attention or hyperactivity problems

The following Histogram reports the Attention/ Hyperactivity problems faced by students at Gateway High School.

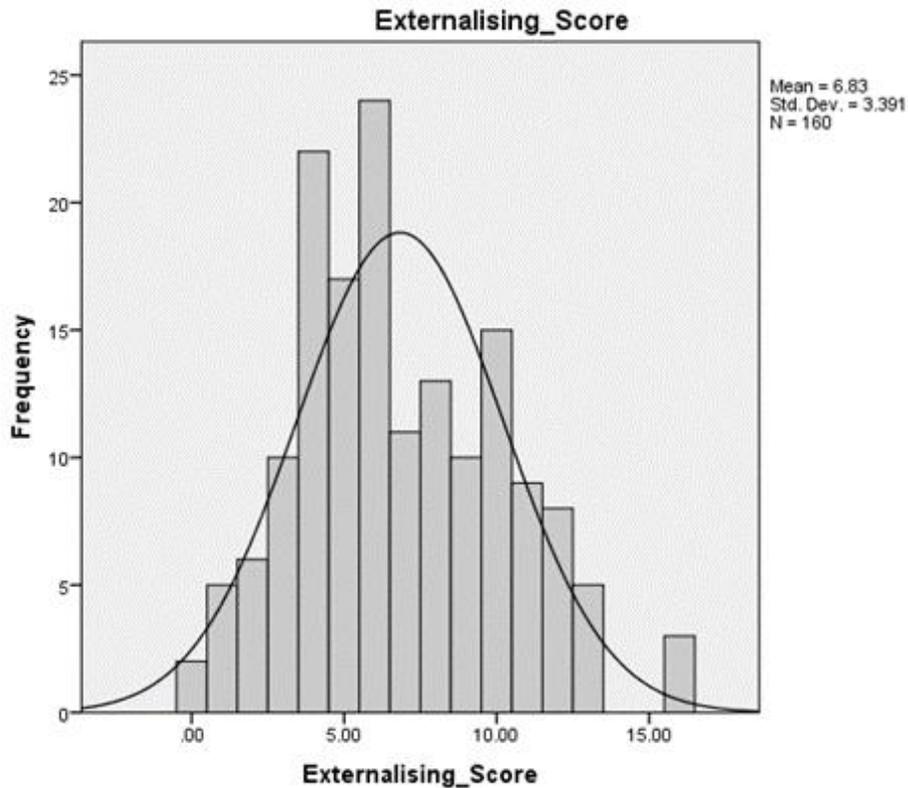
Figure 4.6 Attention/ Hyperactivity problems scores



Externalizing Behaviours

According to results of this survey, the general externalizing problems of students at Gateway High school is in the normal range. In fact, findings from this survey study suggest that 84.4% do not have any externalizing behaviour problems, 5.6% are likely to have externalizing problems and only 10% of the students have externalizing problems. These findings are summarized in the following Histogram.

Figure 4.7: Externalizing problems scores



4.5 IMPACT OF INTERNALIZING AND EXTERNALIZING BEHAVIOURS ON STUDENTS AND ANY RISKS ASSOCIATED WITH THE IMPACT.

The version of the SDQ used for this study has an impact supplement that measures the overall distress and impairment whilst generating a score of 0 to 10. Predictions to whether a student is at risk of any other problem are generated automatically by the SDQ scoring software from the total difficulties score and the impact score. The total difficulties score is a rating to determine the severity of internalizing and externalizing behaviours and is derived by summing all subscales of the SDQ except the prosocial scale. The score range ranges from 0 to 40. Descriptive statistics was calculated for the impact and total difficulties score in Table 4.1

Table 4.6: Descriptive statistics for impact score and total difficulties score

	Impact Score	Total difficulties Score
Mean	1.46	12.99
Std. Error of Mean	.159	.454
Mode	0	7
Std. Deviation	2.006	5.739
Variance	4.024	32.931
Range	9	26
Minimum	0	1
Maximum	9	27

Note: The measures of central tendency presented in the table infer that generally the participants have a normal impact and total difficulties score as seen by the mean of both variables.

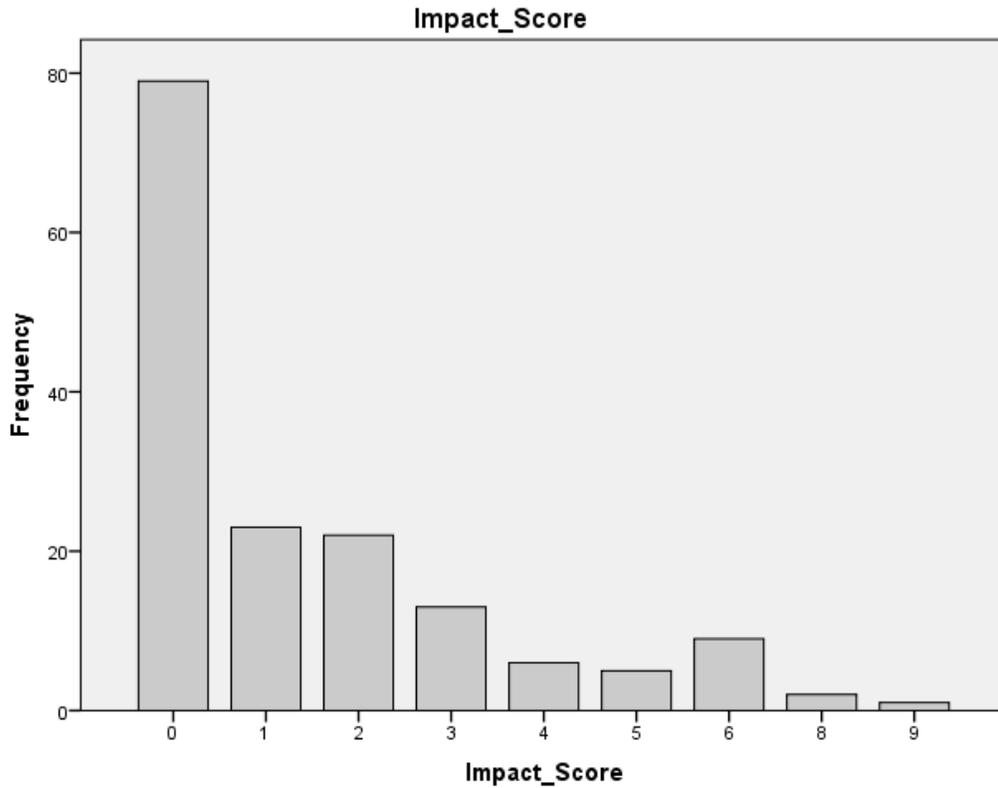
The study found out that 63.7% of the participants did not have any negative impacts related to internalizing or externalizing behaviours whilst 13.8% had a high negative impact due to internalizing and externalizing behaviours and 22.5% experience a tremendous negative impact due to internalizing and externalizing behaviours.

Findings derived from the Total difficulties score also suggest that 61.4% of the students experience no general difficulties in school and are well adjusted whilst 19.4% experience mild to no difficulties in school and 19.2% experience high to very high difficulties in school.

The study was also able to predict students who were at risk of developing any psychiatric disorder, emotional disorder, conduct disorder or any Attention/ Hyperactivity disorder.

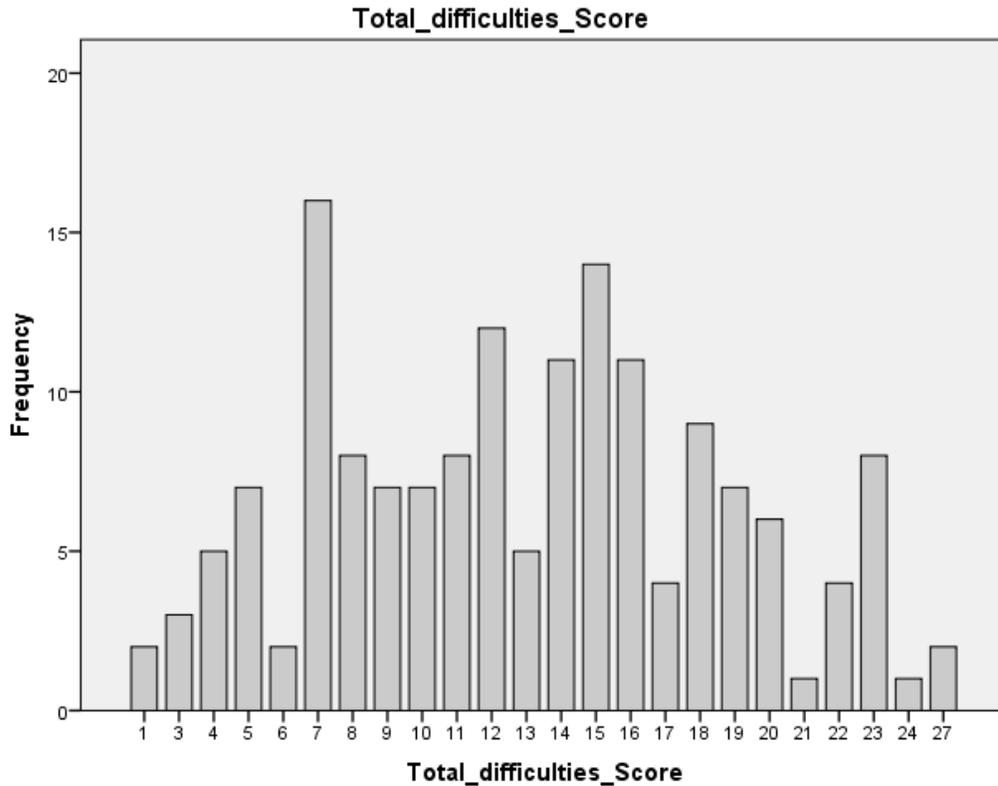
The following diagrams represent the impact scores and Total difficulties score generated from the study.

Figure 4.8: Impact score results.



Note: 148 participants have no negative impact related to internalized and externalized behaviours. 9 participants had high a negative impact resulting from internalized and externalized behaviours and 3 participants had a very high negative impact resulting from internalizing and externalizing behaviours

Figure 4.9 Total difficulties score results



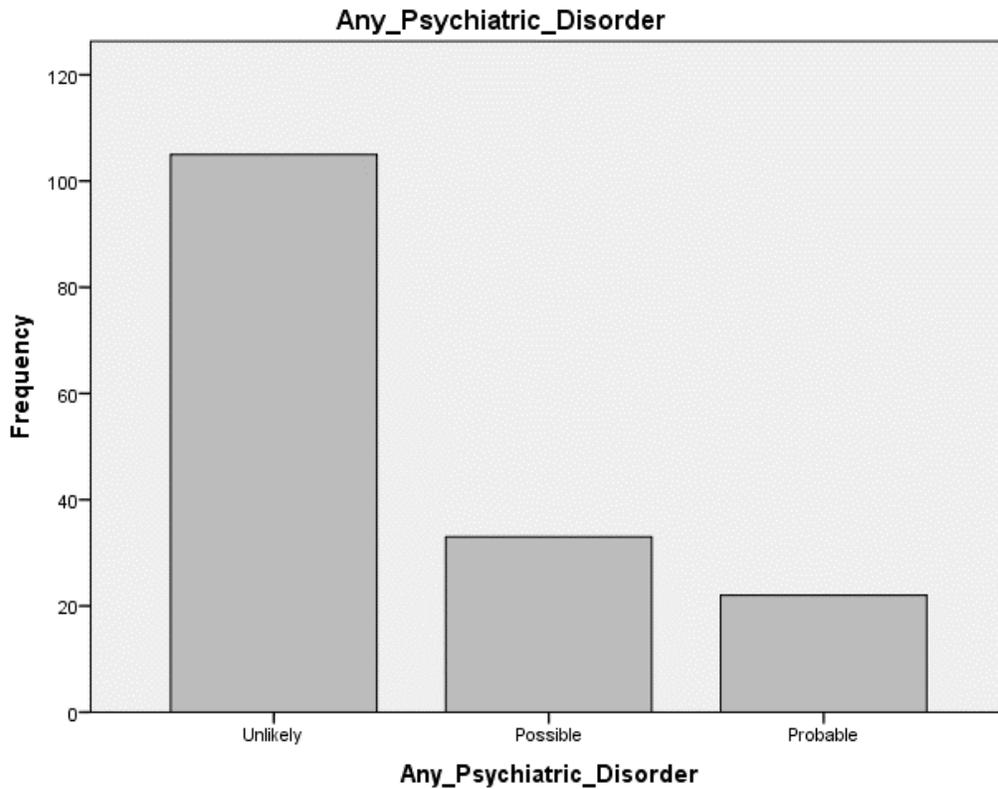
Note: 107 of the participants reported to have no difficulties 31 of the participants had mild difficulties and 22 reported to have difficulties due to internalizing and externalizing behaviours

Predictions of students at risk

At risk of Psychiatric disorder

The research also answered this research question by estimating the frequencies of students at risk of other severe problems related to internalizing and externalizing behaviour. Inferences from the results seem to point out that 65% of students at Gateway High School are unlikely to develop any psychiatric disorder, whilst there is a possibility that 20.6% may develop a psychiatric disorder and there is a high probability that 13.8% of the students may develop a psychiatric disorder. Descriptive Data in this regard is presented below

Figure 4.10: Predictions of students at risk of any Psychiatric disorder.

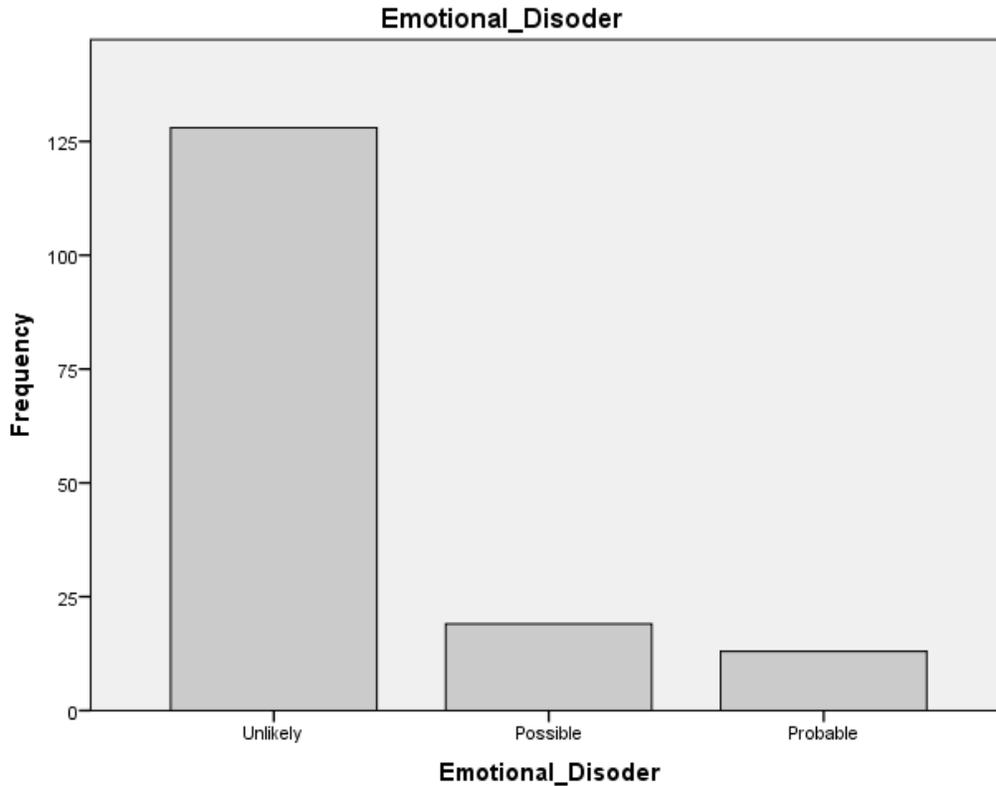


At risk of Emotional Disorder

It was also found out that 80% of the students at Gateway High School were unlikely to be diagnosed with an emotional disorder. However, 11.9% possibly are at risk of having an emotional disorder and probably 8.1 % are at a high risk of having an emotional disorder.

Finding are diagrammatically reported in *figure 4.11*.

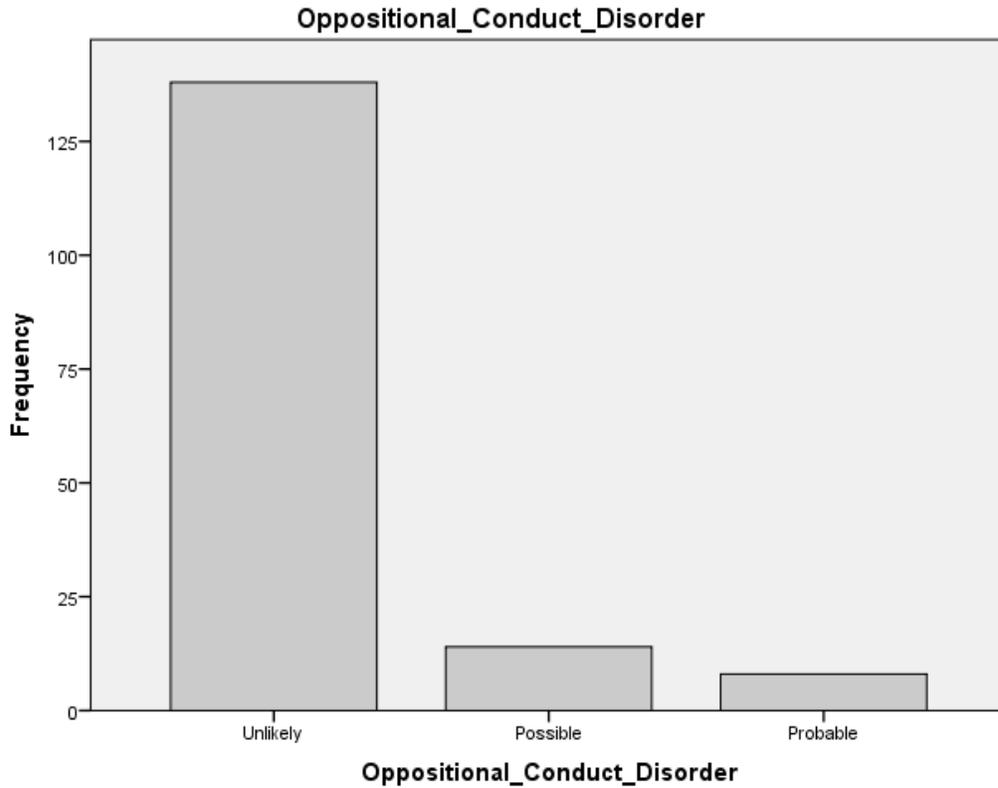
Figure 4.11: Predictions of students who are at risk of emotional disorders.



At risk of Oppositional/ Conduct Disorder

The diagram below is a descriptive summary of the predictions of students who are at risk of developing oppositional or conduct disorder. If Statistical analysis is applied to these findings it is found out that 86.3% of students are less likely to develop conduct disorder, whilst 8.8% are at risk of developing conduct disorder and 5.0% have a high probability of developing conduct disorder.

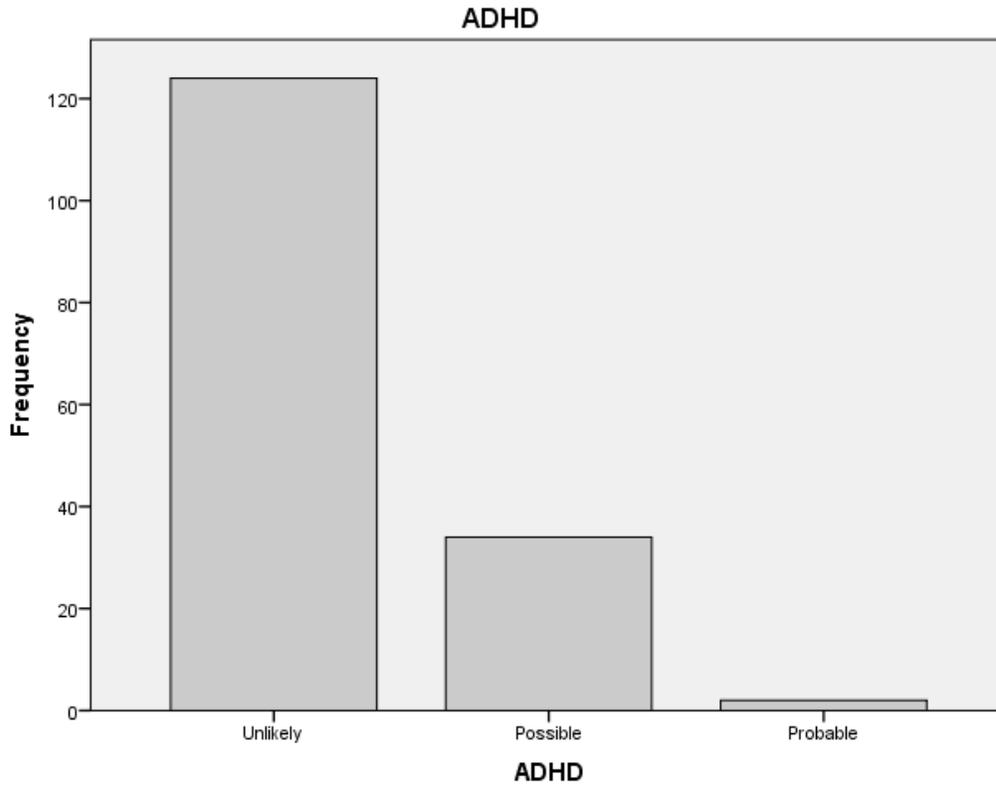
Figure 4.12 Predictions of students who are at risk of Oppositional / Conduct Disorder



At risk of ADHD

Results, however, report that 77.5 % of students at Gateway High School are not at risk of Attention or Hyperactivity disorders. 21.3% face a possible risk of developing attention or hyperactivity disorders and 13% are at a great risk of probably developing attention or hyperactivity disorders. Detailed results are outlined in the following bar graph.

Figure 4.19 Predictions of students at risk of ADHD.



4.6 RELATIONSHIP OF INTERNALIZING BEHAVIOURS, EXTERNALIZING BEHAVIOURS AND ACADEMIC SELF-CONCEPT.

Academic Self-Concept Scores

One of the objectives of this study was to assertion the relationship that exists between internalizing behaviours, externalizing behaviours, and ASC. Before the relationship of these variables is explored it is important to first present findings of the Academic self-concept derived from the study. The study made use of an adapted version of the Academic Self-Concept Scale. 14 questions were drawn from each subset of the Likert scale. These questions all in all generated a score of 28. It was assumed in this research that a higher score reflected a higher ASC in a student. From a sample population N 160, the minimum score was 6 and a maximum score of 28 was derived. The following table presents a central tendency analysis made on the obtained data.

Table 4.7 Summary of Measures of Central Tendency for ASC

Statistics	
<u>Academic Self-Concept</u>	
Mean	17.58
Median	17.00
Mode	14 ^a
Std. Deviation	5.268
Skewness	.254
Std. Error of Skewness	.192
Range	22

Note: a. Multiple modes exist. The smallest value is shown

Data yielded from the Academic Self-Concept deduced from the research instrument was analysed as categorized data. The results were that an estimated 3.4% of students have a low ASC of raw scores ranging from (0-9), 18.2% are in the borderline category of scores ranging from 1(0-13). 36.9% of the participants were categorized in the average range of scores ranging from (10-13). The high score band of scores ranging from (19-25) was made up of 30.1% of the participants and the remaining 11.4 % was in the very high category of scores ranging from 25-28. The following table presents a data set of the frequencies of scores of ASC and their relative percent and cumulative percent.

Table 4.8: Summary results for Academic Self-Concept

Academic Self-Concept				
<i>Academic self- Concept</i>	<i>Frequency</i>	<i>Percent</i>	<i>Valid Percent</i>	<i>Cumulative Percent</i>
6	2	1.3	1.3	1.3
8	4	2.5	2.5	3.8
10	7	4.4	4.4	8.1
11	4	2.5	2.5	10.6
12	10	6.3	6.3	16.9
13	8	5.0	5.0	21.9
14	15	9.4	9.4	31.3
15	15	9.4	9.4	40.6
16	12	7.5	7.5	48.1
17	5	3.1	3.1	51.3
18	12	7.5	7.5	58.8
19	7	4.4	4.4	63.1
20	14	8.8	8.8	71.9
21	10	6.3	6.3	78.1
22	7	4.4	4.4	82.5
23	5	3.1	3.1	85.6
24	5	3.1	3.1	88.8
25	2	1.3	1.3	90.0
26	3	1.9	1.9	91.9
27	2	1.3	1.3	93.1
28	11	6.9	6.9	100.0
Total	160	100.0	100.0	

4.7 RELATIONSHIP BETWEEN EXTERNALIZING PROBLEMS AND ACADEMIC SELF-CONCEPT.

To ascertain the relationship that exists between externalizing behaviours and ASC a Pearson correlation coefficient was calculated. In the calculation of the correlation, the following considerations were put in mind, a mean for Externalizing problems of 6.313 and a mean for ASC of 17.58. An std Deviation of 3.39111 and 5.268 for externalizing problems and ASC respectively were used. The calculations are presented in the following table.

Table 4.9 Pearson Correlation between Externalizing problems and ASC

		Correlations		
		Externalising Score	Academic Concept	Self-
Externalising Problems	Pearson Correlation	1	-.447**	
	Sig. (2-tailed)		.000	
	N	160	160	
Academic Self-concept	Pearson Correlation	-.447**	1	
	Sig. (2-tailed)	.000		
	N	160	160	

Note: **. Correlation is significant at the 0.01 level (2-tailed).

As indicated in the table above a negative medium correlation of $r = -0.447$ was found to exist between externalizing behaviours and Academic Self-Concept. This translates that the association between externalizing behaviours and ASC is such that as externalizing problems increase ASC decreases. The correlation results also suggest there is a variation between externalizing behaviours and ASC, calculations reflect that externalizing problem have a covariance of 11.500 and ASC has a covariance of 7.978.

4.9 RELATIONSHIP BETWEEN INTERNALIZING BEHAVIOURS AND ACADEMIC SELF-CONCEPT.

To determine the relationship between internalizing and academic self-concept data yielded from the research was manipulated using the Pearson correlation coefficient. In the calculation of the correlation the following factors were considered the mean for internalizing problems was 6.5813 and a standard deviation 3.62464 and for ASC the mean used was 17.58 and an std Deviation of 5.268. The following table shows a summary the calculation of the Pearson correlation for internalized problems and ASC.

Table 4.10 Pearson Correlation between internalizing problems and ASC

		Correlations		
		Internalising Score	Academic Concept	Self-Concept
Internalising Problems	Pearson Correlation	1	-.510**	
	Sig. (2-tailed)		.000	
	N	160	160	
Academic Self Concept	Pearson Correlation	-.510**	1	
	Sig. (2-tailed)	.000		
	N	160	160	

Note: **. Correlation is significant at the 0.01 level (2-tailed).

From the table above the correlation between internalizing problems and ASC is $r = -0.510$. This translates that there is a large strength of association between internalizing problems and externalizing problems. The results also suggest that students who have low scores of internalizing problems have a high ASC.

4.6 PREVALENCE OF INTERNALIZING AND EXTERNALIZING BEHAVIOURS IN STUDENTS AT GATEWAY HIGH SCHOOL.

The study also sought to present findings of the prevalence of internalizing and externalizing problems. In this section prevalence's are going to be presented in the following categories, Form, Gender, Race, and Age.

4.6.1 Prevalence according to Form or class.

The participants were either in form 2, 3, 4 and 5. Students from Special needs education programs also took part in the study. The data was categorized into 3 categories namely the no problems range (0-10) mild problems range (11) and Serious Problems (12-20)

Special Needs Class

Table 4.11 Prevalence results for Special needs class

Data Category	Externalizing Problems	Internalizing Problems
No problems (0-10)	57.2%	92.2%
Mild problem (11)	21.4%	7.1%
Serious problems (12-20)	21.4%	0%
Total	100	100

Note: This class had N=14 and made up 8.8 %of the sample

Form 2 class

Table 4.12 Prevalence results for Form 2 students

Data Category	Externalizing Problems	Internalizing Problems
No problems (0-10)	84.4%	79.9%
Mild problem (11)	13.4%	4.5%
Serious problems (12-20)	2.2%	15.6%
Total	100	100

Note: N=45 and 28.1% of the sample

Form 3 Class

Table 4.13 Prevalence results for Form 3 students

Data Category	Externalizing Problems	Internalizing Problems
No problems (0-10)	89.7%	89.5%
Mild problem (11)	0%	6.3%
Serious problems (12-20)	10.4%	4.2%
Total	100	100

Note N=48, and made up 30% of the sample

Form 4 Class

Table 4.14 Prevalence results for Form 4 students

Data Category	Externalizing Problems	Internalizing Problems
No problems (0-10)	82.9%	91.5%
Mild problem (11)	0%	8.5%
Serious problems (12-20)	17.1%	0%
Total	100	100

Note: N=35 and represented 21.9% of the sample

Lower 6 Class

Table 4.24 Prevalence results for lower 6 students

Data Category	Externalizing Problems	Internalizing Problems
No problems (0-10)	94.4%	44.4%
Mild problem (11)	0%	22.2%
Serious problems (12-20)	5.6%	33.4%
Total	100	100

Note N=18 and made up 11.3% of the sample

4.6.2 Prevalence according to Gender

The following tables present prevalence of internalized and externalized problems according to gender.

Male Students

Table 4.17 Prevalence results for Male students

Data Category	Externalizing Problems	Internalizing Problems
No problems (0-10)	81.8%	91.3%
Mild problem (11)	8.2%	6.3%
Serious problems (12-20)	9.6%	2.4%
Total	100	100

Note: N males= 83 female N=77

Female students

Table 4.17 Prevalence results for Females students

Data Category	Externalizing Problems	Internalizing Problems
No problems (0-10)	87.1%	72.8%
Mild problem (11)	2.6%	10.4%
Serious problems (12-20)	10.4%	16.9%
Total	100	100

Note: Females 48.1% Males 51.9%

4.6.3 Prevalence according to Ethnic Background

African Ethnic students

Table 4.24 Prevalence results for African ethnic students

Data Category	Externalizing Problems	Internalizing Problems
No problems (0-10)	90.2%	82.2%
Mild problem (11)	5.4%	6.8%
Serious problems (12-20)	4.1%	10.8%
Total	100	100

Note: N=74 , 46.3% of the whole sample

European & American Ethnic Students

Table 4.19 Prevalence results for Euro-American ethnic students

Data Category	Externalizing Problems	Internalizing Problems
No problems (0-10)	75.8%	75.6%
Mild problem (11)	12.0%	19.5%
Serious problems (12-20)	12.2%	4.9%
Total	100	100

Note: N=41, 21.6% of the sample

Other Ethnic groups

Figure 4.20 Prevalence results for students from other ethnic groups

Data Category	Externalizing Problems	Internalizing Problems
No problems (0-10)	82.2%	89%
Mild problem (11)	0%	0%
Serious problems (12-20)	17.8%	11%
Total	100	100

Notes: students from other ethnic group includes students from mixed ethnic groups 75.3%, from Asian Ethnic groups 9% and Indian Ethnic groups 15.7%. N=45 and made up 28.1% of the sample

4.7 CHAPTER SUMMARY

This chapter presented the research findings of this study, and how data was analysed. Overall this study sought to examine internalizing and externalizing problems and how they relate to ASC. Results showed that 10% of the student population have externalizing problems, whilst 9.5 % have internalizing problems. The relationship between externalizing behaviours and ASC was found to have a mild correlation of $r=-0.447$. The relationship between internalizing problems and ASC was found to have a high correlation of $r= -0.510$

CHAPTER 5

DISCUSSIONS, CONCLUSIONS AND RECCOMENDATIONS.

5.1 INTRODUCTION

The literature surrounding internalizing and externalizing behaviours and ASC is inconclusive. The current research literature is almost silent in regards to the relationship that exists when it comes to internalizing behaviours, externalizing behaviours and ASC in a Zimbabwean cultural setup. This study has filled this gap in the literature by exploring internalizing and externalizing behaviours and how they relate to academic self-concept of students at Gateway High School. This chapter will outline a discussion of the research findings, give reasonable conclusions and offer feasible recommendations on the questions answered by the study.

5.2 DISCUSSION

This study was a descriptive survey to explore the internalizing and externalizing problems and how they relate to ASC. The study also aimed to examine the prevalence, level of severity and impact of internalizing and externalizing problems. The study also sought to inspect the relationship when it comes to ASC and internalizing and externalizing problems.

Local literature in Zimbabwe has started recognising the importance of cultural factors and how they have an effect on internalizing problems, externalizing problems and ASC, noteworthy is a research by Mpofu (1998) that explored the nature of externalizing behaviours from a cross-cultural psychology perspective paying particular attention to the Zimbabwean culture. The researcher was motivated to carry out this research because he wanted to investigate the meaning of internalizing, externalizing and ASC from a Zimbabwean cultural standpoint. Culture has an important role in the production and exhibition of internalizing and externalizing problems which influence a student's ASC. The conceptualization of internalizing and externalizing problems and their correlation with ASC in Zimbabwean cultural set up is largely unknown, as western findings in regards to this aspect cannot be generalized to none-western cultures such as Zimbabwe. Hence, this study has contributed to the current literature by filling the gap.

5.3 SPECIFIC INTERNALIZING PROBLEMS IN STUDENTS AT GATEWAY HIGH SCHOOL.

In general, the results purport that a large number of 82.4% of students at Gateway High School have no internalizing problems, whereas 8.1 % of the students are most likely to have internalizing problems and only 9.5% do have internalizing problems. This, however, seems to suggest that only a few students at Gateway High School have internalizing behaviour problems. These results can be explained from a cross-cultural perspective in that, culture through principles of the social learning theory enables individuals to model certain behaviours. As mentioned before in the Zimbabwean culture one does not fully have to express their negative emotions, this principle is learnt by students from the environment. In other words, students learn effective coping strategies from the school environment which enable them not to have internalizing problems, thus explaining why the majority of students at Gateway High School do not have internalizing problems.

Part of the research objective was to determine the specific internalizing problems in students at Gateway High School. The two specific internalizing problems measured by this study were emotional problems and peer problems. It was found out that more students did not have emotional problems as compared to the number of students who have peer problems. Fewer students were likely to have emotional problems as compared to peer problems. However, what was interesting was that the study revealed that the number of students with emotional and peer problems was the same which was 11.9%. The assumption of the research was that students at Gateway High school mostly experience emotional problems. However, the findings are divergent to assumptions of the research as they reflect that peer problems are the most common internalizing problems in students at Gateway High school with an estimated 23.8% students who are likely to have peer problems. Indeed, it is widely accepted that in the adolescent period friendship ties are important as they gain acceptance and emotional support from their peers. This may imply that high school students have a strong need to form and sustain meaningful friendships and in doing so may encounter problems. The PBT, however, explains this phenomenon by emphasizing the importance of the environmental structure system which is made up of a student's peers who are in proximity and form a support network, this could explain why peer problems are more common to emotional problems. The researcher strongly feels there is a need for more research to explain the effect of peer relations and internalizing problems.

5.4 SPECIFIC EXTERNALIZING PROBLEMS IN STUDENTS AT GATEWAY HIGH SCHOOL.

This study assumes that the major externalizing problems faced by students at Gateway High School are conduct problems and attention/hyperactivity problems. Deducing, from the results the average student at Gateway High School out of a conduct rating of 10 has 2.66 conduct problems and 4.7 out of an inattention/hyperactivity rating of 10. In general, the average student out of an externalizing score rating of 20 has a score of 6.8 in externalizing behaviours. If the results are viewed from a different angle conduct problems are the most common specific externalizing behaviours faced by students at Gateway High school with an estimated 13% of the students already exhibiting externalizing problems and a feared 17.5% likely to exhibit conduct problems and only 69.4% of the students without any conduct problems. This can be explained from the SLT stand point, in that as students/ adolescents grow older, they widen their social circle and coming in contact with other peers at school they mimic and reproduce conduct problem behaviours such as cheating, or substance abuse. An extension of this standpoint would possibly be explained by the PBT behaviour system. The assumption of this theory is that problem behaviours which are behaviours that go against the norm such as conduct problems are a result of a clash between a student's personality structure and the environment system.

The other specific externalizing problem the study focused on was attention/hyperactivity problem. The results proved that 16.9% had attention/ hyperactivity problems whereas 11.9 % were more likely to have attention/hyperactivity problems. Although not much in literature is known on the prevalence rates of ADHD in Zimbabwe the outcomes of this aspect of the study are in line with research by Kashala et al.. (2003) that report that attention-related problems in developing countries are increasing with approximately 6-10%. The researcher, however, is the idea that they could be more students with attention/ hyperactivity problems than what is suggested by this study. The researcher basis his argument on the idea that a lot of attention/ hyperactivity problems in students often go undiagnosed.

The meaning of externalizing problems and how they are handled varies from culture to culture. Culture has a huge effect on the development of externalizing problems. In the Zimbabwean culture which also influences the educational system of the country externalizing behaviours are not tolerated this probably explains why only 10% of the student population was found to be having externalizing problems whilst only 5.6% are likely to have externalizing problems. Another reason

to explain these findings could be that externalizing problems are easily identifiable in the school system.

5.5 GENERAL IMPACT AND SEVERITY LEVEL OF INTERNALIZING AND EXTERNALIZING PROBLEMS AND HOW THEY PREDICT STUDENTS AT RISK OF OTHER PSYCHOLOGICAL PROBLEMS.

The results, point out that the average students at Gateway High School will score an impact score of 1.46 and an average total difficulties score which measures the severity level of 12.99. About 22.5 % of students have been negatively impacted by internalizing and externalizing behaviours ,whilst 13.8% face a mild impact of distress due to internalizing and externalizing problems and 63.7% have not being impacted by internalizing and externalizing problems. The majority of the students at Gateway high school do not have any negative impact of internalizing and externalizing behaviour problems because of the mental health support they receive from an on school counselling department offering mental health services to student and referring severe cases to external mental health professionals such as clinical psychologists, psychiatrists etc. This study reported the impact of internalizing and externalizing problems from a private school set up point of view and it seeks to stimulate more research on the impact of internalizing and externalizing problems from a Zimbabwean government high school set up with no mental health support department.

The severity level of internalizing and externalizing problems can be inferred from the Total difficulties score. The majority of the student population 61.4% do not have any severe internalizing and externalizing problems whereas 19.4% have moderate externalizing problems and 19.2 % have severe internalizing and externalizing problems. The level of severity donates to the level of difficulty and school adjustment problems students experience on a daily basis. The results, however, seem to point out that the level of severity is not as disturbing as had previously assumed by the researcher. A possible explanation to this would be that students in a private school set up who are identified to be experiencing difficulty in school are often put in a school support learning program such as homework training, or they approach the guidance and counselling department for assistance.

The results of the research also predicted if students were at risk of having any serious psychological problems. The predictions predict that 8.1% have a high probability of having an emotional disorder, whilst 11.9 are likely to have an emotional disorder and 80% are unlikely to

have an emotional disorder. The results also suggest that there is a probability that 13.8% of the students are at risk of developing a psychiatric disorder and 20.6% have a possibility of developing a psychiatric disorder. 5% of the students were found to be at risk of developing oppositional or conduct disorder, whilst 8.8 have a possibility of developing oppositional or conduct disorder. The results also predict that 13% have a high risk of developing ADHD and 21.3% could possibly develop ADHD. In most cases students who score high in both internalizing and externalizing problems are the ones who are at risk of developing other psychological problems. Other researchers confirm that externalizing and internalizing problems consequently result in more serious psychological problems (Mpofu, 1998). This study has proved this hypothesis.

Initially, at the start of the research the researcher had the assumption that the impact and severity level of internalizing and externalizing behaviours are high in high school students. In light of key studies such as the study by, Hodges and Plow (1990) internalizing and externalizing problems negatively affect a student's academic performance. However, this study was determined to examine not only the impact and severity of internalizing and externalizing behaviours but also predict students who are at risk of developing other psychological problems.

5.6 THE RELATIONSHIP BETWEEN ASC WITH INTERNALIZING AND EXTERNALIZING PROBLEMS.

According to the results a moderate correlation of -0.447 exists between externalizing problems and ASC. This, in other words, entails that as externalizing problems decrease ASC increases. This means that students with a low score of externalizing problems have a high ASC. The association between internalizing problems and ASC was found to be -0.510. This means that there is a strong correlation between internalizing problems and ASC. Also, this suggests that as internalizing problems decrease ASC increases.

A lot of literature has either centred on the correlation of ASC with specific subjects such as math. This study has filled the gap by centring on the overall ASC of students in a Zimbabwean private school setup. Not much has being researched on the relationship between internalizing problems and externalizing problems and how they relate to ASC. Many studies on internalized and externalizing problems explore the how they relate to academic achievement for example studies by Hodges and Plow (1990). This study has added to the existing literature by reporting how internalizing and externalizing problems relate to ASC in a Zimbabwean private school set up.

The research was of the assumption that there is a close relationship that exists amongst ASC and internalizing and externalizing problems. The results from the study seem to confirm this assumption.

5.7 PREVALENCE OF INTERNALIZING AND EXTERNALIZING BEHAVIOURS IN STUDENTS AT GATEWAY HIGH SCHOOL

Key researches in terms of internalizing and externalizing problems have reported several factors affecting the prevalence of internalizing and externalizing problems. Notably, Zhang, Hsu, Barret and Ju (2011) found out that the prevalence of internalizing and externalizing behaviours varies across cultural ethnic groups, these findings were based on a comparative study of Asian children and American children. Wiesz et al... (1998) in a cross-cultural study reported that African ethnic children had a high prevalence rate of internalizing problems and a low prevalence rate of externalizing problems compared to North American students. However according to the results of this research, it was found out that students from mixed ethnic groups and the Asian ethnic groups had a the highest prevalence rate of serious externalizing problems of about 17.8%, students from a Euro-American ethnic group had the second highest prevalence rate of approximately 12.2% and students from an African ethnic group had a 4.1% of externalizing behaviours. These findings seem to be in line with previous studies, for example, the one carried out by Wiz et al.. (1998).

Frick et al...(1991) have confirmed that gender affects the prevalence of internalizing and externalizing behaviours. The study, however, found out that, at Gateway High School, females have the highest prevalence rate of serious externalizing behaviours than males. In fact about 10.4% females have serious externalizing problems, where as 9.4% have serious internalizing problems. Contrarily, more male students have mild externalizing problems compared to females, about 8.2% of males have mild externalizing problems whereas only 2.6% females have mild externalizing problems. Generally, what this means is that if the prevalence of mild and serious externalizing behaviours is summed it would be found that males have a higher prevalence of externalizing problems compared to females.

Prevalence of internalizing and externalizing problems was also examined according to the form or class of students. Several scholars have noted that internalizing and externalizing problems are more widespread in students from special needs classes. This study also, confirmed this hypothesis by reporting the special needs class recorded the highest rate of externalizing problems with an

estimated 21.4% of students in the class having serious externalizing problems, the form 4 class was second with about 17.9% of the students in the class having externalized problems, the form 3 class recorded 10.4% and lastly the form 2 class had an estimated 2.2% of students with externalizing problems. These results were not surprising to the researcher because it was probable that most students in the special needs department have ADHD-related disorders and would therefore score higher in the externalizing score. On the other had the lower 6 class had the highest prevalence of internalizing problems whilst the special needs class had a 0% rate of internalizing problems. A possible explanation for these findings could be that students at lower 6 face a lot of school related anxiety and at their age in puberty they experience a lot of emotional problems.

5.6 CONCLUSIONS

To conclude, the specific internalizing problems faced by students are emotional and peer problems. Peer problems seem to be the most common problem faced by the majority of students. Generally, the majority of the students have no internalizing problems.

Conclusively, conduct problems and inattention problems were presumed to be the specific externalizing problems affecting students. The most common externalizing problem affecting students was found to be conduct problems. More than half of the student problems reported not to have internalizing problems.

To sum up, the impact of both internalizing and externalizing problems was found to be moderate among students at Gateway High School. The severity level was found to be average in students. Predictions were made from statistical inferences of the impact and severity levels. It was predicted that some students faced a risk of possibly or probably having either a psychiatric disorder, emotional disorder, attention hyperactivity disorder or oppositional/conduct disorder.

In conclusion, the association between internalizing problems and ASC was found to be that of a mild negative correlation whereas the relationship between externalizing problems and ASC was found to be a strong negative correlation. In general, the relationship between these variables can be described as one where the variables affect each other in that if one variable increases the other variable decreases.

Lastly prevalence of internalizing and externalizing problems was found to be affected by form/class, gender, and ethnicity. The special needs class had the highest prevalence of externalizing problems and lowest prevalence of internalizing problems. The lower 6 class recorded the highest prevalence of internalizing problems. Boys had the highest prevalence rate of

externalizing problems whereas girls had the highest prevalence rate of internalizing problems. The ethnicity of students also influenced the prevalence of internalizing and externalizing problems.

In summary, internalizing and externalizing problems are common in students and they have an effect on a student's ASC which determines a student's academic functioning. Students at Gateway High School experience mostly peer problems and conduct problems. The most affected group was found to be that of students in special needs class with learning difficulties. The general ASC of students at Gateway High School was found to be average and this implies that students are mentally healthy and have a good school adjustment.

5.7 RECOMENDATIONS

The researcher recommends the following to Gateway High School, in management of students with internalizing and externalizing problems as well as improve the ASC of students:

- Include more topics that teach students on important life skills on how positive peer relations and topics that help minimize conduct problems.
- Embark on School-based behaviour and Cognitive programs to reduce internalizing problems such as depression and anxiety and externalizing problems such as conduct and aggression problems.
- Psychopharmacology monitoring programs. Medication has a huge impact on behaviour. Some students with internalizing and externalizing problems are under medication for example medication of ADHD and bipolar. Such programs will monitor if students are adhering to their medication when they come to school.
- On School mental health screening. This involves mental health assessments being carried out on the school for students who are suspected to be having either internalizing and externalizing problems. School counsellors can use easy to use psychometric tests such as the SDQ used in this research. This will ensure no problems go untreated and improve the school referral system.
- School-based peer identification and response training program. This involves training students to be able to identify if their peers are facing any internalizing or externalizing problems and training them the basic skills of persuading their peers to seek help.
- On School Mental health seeking campaign to promote help-seeking behaviours in students.

- Workshops that train that train students on how to deal with internalizing and externalizing problems.
- Systematic professional learning in mental health for teachers and school counsellors.
- Learning support programs for students with severe internalizing and externalizing problems as well as a low ASC so that they can improve their academic performance.
- Form support groups supervised by school counsellors to help students with internalizing problems and externalizing problems.
- Integrate where possible into mainstream schooling with resources provided for success such as psychological counselling services and therapies available to individual throughout the schooling life.
- Incorporate various counselling approaches and techniques in counselling students with internalizing and externalizing problems. Such approaches may include Rogerian Therapy which emphasizes on unconditional Acceptance. Principles of Cognitive Behaviour Therapy can be applied to help students with internalizing problems. Positive reinforcement of the behaviour that needs to be encouraged in dealing with students with externalizing problems as according to Skinnerian Therapy.
- Classroom management techniques by teachers should ensure students are constantly motivated intrinsically and extrinsically so as to improve their ASC.
- Parental counselling services should be made available to reinforce schooling priorities and engage parental involvement in creating a home environment that effectively deals with both internalizing and externalizing problems.
- Resilience counselling available to student and parents. Academic buoyancy and resilience is a construct defined as “students ability to successfully deal with academic setbacks and challenges that are typical of the ordinary course of school life”(e.g., poor grades, competing deadlines, examination pressure, difficult schoolwork and homework). This not only reduces internalizing problems such as anxiety but also improves a student’s ASC. (Martin and Marsh 2008).
- Strategic classroom grouping of students according to academic aptitude to increase ASC.

5.8 CHAPTER SUMMARY

The main focus of the final chapter was to discuss the results and make notable conclusions to the research questions. An outline of recommendations to address the problems was given in this chapter

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Appendix A: Questionnaire SDQ+ ASCS

Standardized Administration Procedure for SDQ & ASCS.

Instructions Adapted from the SDQ manual and ASC manual

What to say to students

I am Christopher Nyathi, a student from Midlands State University and I am carrying out a research

Today I have a questionnaire to learn about internalized and externalized behaviours you face at school and how they relate to your academic self-concept. It is important for you to know that this questionnaire is completely independent from any school course, and that there is not a correct or incorrect answer. I only want to know the frequency of certain activities you do. The information you provide is strictly confidential.

Your responses will be confidential and you are allowed to use pseudo names so long you provide your accurate date of birth, age, and gender. Please indicate your ethnicity at the back of the questionnaire

Your honest answer will be used to help me in my desertion for Midlands State University and teachers and staff of Gateway High School to serve you better. Please do not begin filling in the questionnaire until we discuss the directions and I have read out the questions aloud. Thank you!!

Administration procedure

1. All items to be read aloud with 3-5second pauses between items depending on the reading level of the students.
2. Explain all choices (Not true, somewhat true, certainly true, Agree, Neither, Disagree) then after that read the questions aloud.
3. Inform students to use only pencil to fill in the questionnaire.
4. Tell students that if they make any mistake they should erase and fill in the answer they feel is suitable.
5. Give students a maximum of 45 minutes to complete both questionnaires
6. When students are done collect questionnaires facing down and put them in an envelope or folder.

**instructions adapted from the SDQ and ASCS manuals*

Strengths and Difficulties Questionnaire

S 11-17

For each item, please mark the box for Not True, Somewhat True or Certainly True. It would help us if you answered all items as best you can even if you are not absolutely certain or the item seems daft! Please give your answers on the basis of how things have been for you over the last six months.

Your Name

Male/Female

Date of Birth.....

	Not True	Somewhat True	Certainly True
I try to be nice to other people. I care about their feelings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am restless, I cannot stay still for long	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I get a lot of headaches, stomach-aches or sickness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I usually share with others (food, games, pens etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I get very angry and often lose my temper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am usually on my own. I generally play alone or keep to myself	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I usually do as I am told	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I worry a lot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am helpful if someone is hurt, upset or feeling ill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am constantly fidgeting or squirming	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have one good friend or more	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I fight a lot. I can make other people do what I want	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am often unhappy, down-hearted or tearful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other people my age generally like me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am easily distracted, I find it difficult to concentrate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am nervous in new situations. I easily lose confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am kind to younger children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am often accused of lying or cheating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other children or young people pick on me or bully me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I often volunteer to help others (parents, teachers, children)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I think before I do things	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I take things that are not mine from home, school or elsewhere	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I get on better with adults than with people my own age	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have many fears, I am easily scared	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I finish the work I'm doing. My attention is good	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Do you have any other comments or concerns?

Please turn over - there are a few more questions on the other side

Overall, do you think that you have difficulties in one or more of the following areas:
emotions, concentration, behaviour or being able to get on with other people?

No	Yes- minor difficulties	Yes- definite difficulties	Yes- severe difficulties
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you have answered "Yes", please answer the following questions about these difficulties:

• How long have these difficulties been present?

Less than a month	1-5 months	6-12 months	Over a year
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

• Do the difficulties upset or distress you?

Not at all	Only a little	Quite a lot	A great deal
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

• Do the difficulties interfere with your everyday life in the following areas?

	Not at all	Only a little	Quite a lot	A great deal
HOME LIFE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FRIENDSHIPS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CLASSROOM LEARNING	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LEISURE ACTIVITIES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

• Do the difficulties make it harder for those around you (family, friends, teachers, etc.)?

Not at all	Only a little	Quite a lot	A great deal
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Your Signature

Today's Date

Thank you very much for your help

Academic Self- Concept Questionnaire

		Disagree	Neither	Agree
1	I often get discouraged about school			
2	No matter how hard I try I do not do well in school			
3	I often expect to do poorly in exams			
4	I have a hard time getting through school			
5	I sometimes feel like dropping out of school			
6	At times I feel like high school is difficult for me			
7	I feel teachers' standards are too hard for me			
8	It is hard for me to keep up with my class work			
9	All in all , I feel I am a capable student			
10	I have a fairly clear sense of my academic goals			
11	Being a student is a very rewarding experience			
12	I enjoy doing my homework			
13	I consider myself a very good student			
14	Others consider me a good student			

**Questions adapted from the Academic Self-Concept Scale*

What ethnic group do you belong to?

Appendix B: Scoring instructions ASC & SDQ

Scoring Academic Self-Concept Questionnaire

For questions 1-8: *Disagree* 3
Neither 0
Agree 1

For questions 9-14: *Disagree* 1
Neither 0
Agree 3

The scores are summed up for a total score. A higher score indicates a good academic self-concept.

PTO

06 October 2015

1

Scoring the Strengths & Difficulties Questionnaire for age 4-17

The 25 items in the SDQ comprise 5 scales of 5 items each. It is usually easiest to score all 5 scales first before working out the total difficulties score. 'Somewhat True' is always scored as 1, but the scoring of 'Not True' and 'Certainly True' varies with the item, as shown below scale by scale. For each of the 5 scales the score can range from 0 to 10 if all items were completed. These scores can be scaled up pro-rata if at least 3 items were completed, e.g. a score of 4 based on 3 completed items can be scaled up to a score of 7 (6.67 rounded up) for 5 items.

Table 1: Scoring symptom scores on the SDQ for 4-17 year olds

	Not True	Somewhat True	Certainly True
Emotional problems scale			
ITEM 3: Often complains of headaches... (<i>I get a lot of headaches...</i>)	0	1	2
ITEM 8: Many worries... (<i>I worry a lot</i>)	0	1	2
ITEM 13: Often unhappy, downhearted... (<i>I am often unhappy...</i>)	0	1	2
ITEM 16: Nervous or clingy in new situations... (<i>I am nervous in new situations...</i>)	0	1	2
ITEM 24: Many fears, easily scared (<i>I have many fears...</i>)	0	1	2
Conduct problems Scale			
ITEM 5: Often has temper tantrums or hot tempers (<i>I get very angry</i>)	0	1	2
ITEM 7: Generally obedient... (<i>I usually do as I am told</i>)	2	1	0
ITEM 12: Often fights with other children... (<i>I fight a lot</i>)	0	1	2
ITEM 18: Often lies or cheats (<i>I am often accused of lying or cheating</i>)	0	1	2
ITEM 22: Steals from home, school or elsewhere (<i>I take things that are not mine</i>)	0	1	2
Hyperactivity scale			
ITEM 2: Restless, overactive... (<i>I am restless...</i>)	0	1	2
ITEM 10: Constantly fidgeting or squirming (<i>I am constantly fidgeting....</i>)	0	1	2
ITEM 15: Easily distracted, concentration wanders (<i>I am easily distracted</i>)	0	1	2
ITEM 21: Thinks things out before acting (<i>I think before I do things</i>)	2	1	0
ITEM 25: Sees tasks through to the end... (<i>I finish the work I am doing</i>)	2	1	0
Peer problems scale			
ITEM 6: Rather solitary, tends to play alone (<i>I am usually on my own</i>)	0	1	2
ITEM 11: Has at least one good friend (<i>I have one good friend or more</i>)	2	1	0
ITEM 14: Generally liked by other children (<i>Other people my age generally like me</i>)	2	1	0
ITEM 19: Picked on or bullied by other children... (<i>Other children or young people pick on me</i>)	0	1	2
ITEM 23: Gets on better with adults than with other children (<i>I get on better with adults than with people my age</i>)	0	1	2
Prosocial scale			
ITEM 1: Considerate of other people's feelings (<i>I try to be nice to other people</i>)	0	1	2
ITEM 4: Shares readily with other children... (<i>I usually share with others</i>)	0	1	2
ITEM 9: Helpful if someone is hurt... (<i>I am helpful if someone is hurt...</i>)	0	1	2
ITEM 17: Kind to younger children (<i>I am kind to younger children</i>)	0	1	2
ITEM 20: Often volunteers to help others... (<i>I often volunteer to help others</i>)	0	1	2

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Total difficulties score: This is generated by summing scores from all the scales except the prosocial scale. The resultant score ranges from 0 to 40, and is counted as missing if one of the 4 component scores is missing.

'Externalising' and 'internalising' scores: The externalising score ranges from 0 to 20 and is the sum of the conduct and hyperactivity scales. The internalising score ranges from 0 to 20 and is the sum of the emotional and peer problems scales. Using these two amalgamated scales may be preferable to using the four separate scales in community samples, whereas using the four separate scales may add more value in high-risk samples (see Goodman & Goodman, 2009 *Strengths and difficulties questionnaire as a dimensional measure of child mental health. J Am Acad Child Adolesc Psychiatry* 48(4), 400-403).

Generating impact scores

When using a version of the SDQ that includes an 'impact supplement', the items on overall distress and impairment can be summed to generate an impact score that ranges from 0 to 10 for parent- and self-report, and from 0 to 6 for teacher-report.

Table 2: Scoring the SDQ impact supplement

	Not at all	Only a little	A medium amount	A great deal
Parent report:				
Difficulties upset or distress child	0	0	1	2
Interfere with HOME LIFE	0	0	1	2
Interfere with FRIENDSHIPS	0	0	1	2
Interfere with CLASSROOM LEARNING	0	0	1	2
Interfere with LEISURE ACTIVITIES	0	0	1	2
Teacher report:				
Difficulties upset or distress child	0	0	1	2
Interfere with PEER RELATIONS	0	0	1	2
Interfere with CLASSROOM LEARNING	0	0	1	2
Self-report report:				
Difficulties upset or distress child	0	0	1	2
Interfere with HOME LIFE	0	0	1	2
Interfere with FRIENDSHIPS	0	0	1	2
Interfere with CLASSROOM LEARNING	0	0	1	2
Interfere with LEISURE ACTIVITIES	0	0	1	2

Responses to the questions on chronicity and burden to others are not included in the impact score. When respondents have answered 'no' to the first question on the impact supplement (i.e. when they do not perceive themselves as having any emotional or behavioural difficulties), they are not asked to complete the questions on resultant distress or impairment; the impact score is automatically scored zero in these circumstances.

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Cut-points for SDQ scores: original three-band solution and newer four-band solution

Although SDQ scores can be used as continuous variables, it is sometimes convenient to categorise scores. The initial bandings presented for the SDQ scores were 'normal', 'borderline' and 'abnormal'. These bandings were defined based on a population-based UK survey, attempting to choose cutpoints such that 80% of children scored 'normal', 10% 'borderline' and 10% 'abnormal'.

More recently a four-fold classification has been created based on an even larger UK community sample. This four-fold classification differs from the original in that it (1) divided the top 'abnormal' category into two groups, each containing around 5% of the population, (2) renamed the four categories (80% 'close to average', 10% 'slightly raised', 5% 'high' and 5% 'very high' for all scales except prosocial, which is 80% 'close to average', 10% 'slightly lowered', 5% 'low' and 5% 'very low'), and (3) changed the cut-points for some scales, to better reflect the proportion of children in each category in the larger dataset.

Table 3: Categorising SDQ scores for 4-17 year olds

	Original three-band categorisation			Newer four-band categorisation			
	Normal	Borderline	Abnormal	Close to average	Slightly raised (/slightly lowered)	High (/Low)	Very high (very low)
Parent completed SDQ							
Total difficulties score	0-13	14-16	17-40	0-13	14-16	17-19	20-40
Emotional problems score	0-3	4	5-10	0-3	4	5-6	7-10
Conduct problems score	0-2	3	4-10	0-2	3	4-5	6-10
Hyperactivity score	0-5	6	7-10	0-5	6-7	8	9-10
Peer problems score	0-2	3	4-10	0-2	3	4	5-10
Prosocial score	6-10	5	0-4	8-10	7	6	0-5
Impact score	0	1	2-10	0	1	2	3-10
Teacher completed SDQ							
Total difficulties score	0-11	12-15	16-40	0-11	12-15	16-18	19-40
Emotional problems score	0-4	5	6-10	0-3	4	5	6-10
Conduct problems score	0-2	3	4-10	0-2	3	4	5-10
Hyperactivity score	0-5	6	7-10	0-5	6-7	8	9-10
Peer problems score	0-3	4	5-10	0-2	3-4	5	6-10
Prosocial score	6-10	5	0-4	6-10	5	4	0-3
Impact score	0	1	2-6	0	1	2	3-6
Self-completed SDQ							
Total difficulties score	0-15	16-19	20-40	0-14	15-17	18-19	20-40
Emotional problems score	0-5	6	7-10	0-4	5	6	7-10
Conduct problems score	0-3	4	5-10	0-3	4	5	6-10
Hyperactivity score	0-5	6	7-10	0-5	6	7	8-10
Peer problems score	0-3	4-5	6-10	0-2	3	4	5-10
Prosocial score	6-10	5	0-4	7-10	6	5	0-4
Impact score	0	1	2-10	0	1	2	3-10

Note that both these systems only provide a rough-and-ready way of screening for disorders; combining information from SDQ symptom and impact scores from multiple informants is better, but still far from perfect.

Appendix C: Clearance form

**Midlands State
University**

Established 2000



**P BAG 9055
GWERU**

**telephone: (263) 54 260404 ext 261
Fax: (263) 54 260233/260311**

**FACULTY OF SOCIAL SCIENCES
DEPARTMENT OF PSYCHOLOGY**

14 MARCH 2016

To whom it may concern

Dear Sir/Madam

Re: Christopher Nyathi R124342J

This letter serves to introduce to you the above named student who is studying for a Psychology Honours Degree and is in his/her 4th year. All Midlands State University students are required to do research in their 4th year of study. We therefore kindly request your organisation to assist the above-named student with any information that they require to do their dissertation.

Topic: A survey of internalizing and externalizing behaviours in students at Gateway High School.

For more information regarding the above, feel free to contact the Department.

Yours faithful

F.Ngwenya
Chairperson

Appendix D : Research Confirmation letter



GATEWAY HIGH SCHOOL

P. O. Box E.H. 120, Emerald Hill, Harare Tel./Fax: 308083/4
E-mail: headmaster@gatewayhigh.co.zw
enrolmentsec@gatewayhigh.co.zw
schoolsec@gatewayhigh.co.zw
bursar@gatewayhigh.co.zw

23 March 2016

Dear Sir/Madam

re: Christopher Nyathi R124342J

This is to confirm that **CHRISTOPHER NYATHI** carried out his research at Gateway High School from the 16th of March to the 23rd of March 2016. His research was titled **internalizing and externalizing behaviour problems and how they relate to academic self-concept in students at Gateway High School.**

Christopher was allocated life skills lessons to administer his questionnaire. The school kindly requests for the final copy of the research to be sent to careers@gatewayhigh.co.zw.

Should you have any questions please feel free to contact us.

Your Sincerely

for and behalf of Gateway High School.

E. Siyachitema (Ms)

School Counsellor.



Appendix E

Midlands State University
Department of Psychology

Audit Sheet

R124342J Christopher Nyathi

Date	Activity	Supervisor Comment		Supervisor's Signature	Student's Signature
		Rework	Proceed		
1/3/2016	Proposal	✓			
2/3/2016	Proposal		✓		
4/3/2016	Chapter 1		✓		
8/3/2016	Chapter 2	✓			
9/3/2016	Chapter 2		✓		
11/3/2016	Chapter 3		✓		
16/3/2016	Data Collection	-	-		
31/3/2016	Chapter 4	✓			
6/4/2016	Chapter 4		✓		
8/4/2016	Chapter 1,3,4 (rework on Chapter 2)		✓		
14/4/2016	Chapter 5 and Chapter 2 corrected version	✓			
19/4/2016	Chapter 5		✓		

Appendix F : Turnitin Report



Turnitin Originality Report

INTERNALIZING AND EXTERNALIZING PROBLEMS AND HOW THEY RELATE TO ACADEMIC SELF-CONCEPT
IN STUDENTS AT GATEWAY HIGH SCHOOL. by Christopher nyathi

From dissertation (bushdoktorz)

- Processed on 19-Apr-2016 9:05 PM SAST
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Supervisor Mr. Matiya

MIDLANDS STATE UNIVERSITY
FACULTY OF SOCIAL SCIENCES
DEPARTMENT OF PSYCHOLOGY
 A GUIDE FOR WEIGHTING A DISSERTATION

NAME OF STUDENT CHRISTOPHER T. NYATHI REG NO. R124342J

	ITEM	POSSIBLE SCORE	ACTUAL SCORE	COMMENTS
A	RESEARCH TOPIC AND ABSTRACT : Clear and concise	5		
B	PRELIMINARY PAGES Title page, approval form, release form, dedication, acknowledgement, appendices, table of contents	5		
C	AUDIT SHEET/PROGRESSION Clearly shown on the audit sheet	5		
D	CHAPTER 1 Background, statement of the problem, significance of the study, research questions, hypothesis, assumptions, purposes of the study, delimitations, limitations, definition of terms	10		
E	CHAPTER 2 Address major issues and concepts of the study. Findings from previous work, relevancy of literature to the study. Identifies knowledge gap, subtopics	15		
F	CHAPTER 3 Appropriateness of approach, design, target population, population sample, research tools, data collection procedures, presentation and analysis	15		
G	CHAPTER 4 Findings presented in a logical manner, tabular data properly summarised and not repeated in the text.	15		
H	CHAPTER 5 Discussion (10) Must be a presentation of generalisations shown by results: how results and interpretations agree with existing and published literature, relates theory to practical implications Conclusions (5) Ability to use findings to draw conclusions Recommendations (5)	20		
I	Overall presentation of dissertation	5		
J	References	5		
	Total	100		

MARKER.....SIGNATURE.....DATE.....
 MODERATOR.....SIGNATURE.....DATE.....