ATTEMPTING TO DEVELOP HEALTHY SELF-ESTEEM THROUGH PUBLIC DEMONSTRATIONS OF MUSICAL COMPETENCE: DEBUNKING MISCONCEPTIONS AND CALLING FOR VALUE-BASED ENHANCEMENT PROGRAMS

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ABSTRACT

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The purpose of this study was to determine the effect of a music-based intervention program on the self-esteem levels of elementary students. All subjects in the control and treatment groups were pretested with Harter’s (1985) self-perception profile for children, *What I Am Like*. After a ten-week intervention with the treatment group, all subjects were posttested with the same survey. The quantitative results showed that mean gains in perceptions of global self-worth, scholastic competence, social acceptance, athletic competence, physical appearance, or behavioral conduct could not be explained by participation in the musical treatment group. However, in semi-structured interviews, twenty of the twenty-one members of the treatment group reported valuing their participation in the intervention, and some individuals in both the treatment and control groups experienced gains in global self-worth and/or other dimensions of self-esteem from pretest to posttest. These results suggest that self-esteem intervention programs may need to be individualized based on a person’s self-esteem strengths and weaknesses, or that interventions may need to be administered to groups with common interests and values in order to be effective.
This research is dedicated to the nurturing of children, the fostering of healthier people, the reduction of suffering, and the betterment of life quality for upcoming generations.
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CHAPTER I. INTRODUCTION

Recent scholarship has established that an authentic sense of self-esteem must be supported by competence in important domains and by positive social reinforcement and acceptance, which produce a feeling of worthiness (Dubow, Edwards, & Ippolito, 1997; Harter, 1999; Hoban & Hoban, 2004; Mruk, 2006). Specifically, Harter’s work has identified the following five important domains of the self-concept in middle to late childhood (i.e., ages eight through twelve): scholastic competence, athletic competence, physical appearance, peer acceptance, and behavioral conduct. Children’s feelings of competence in each of these areas in relation to their value judgments of each domain work together to produce a feeling of global self-worth (Harter, 1999). For example, a child who gives herself a poor rating for athletic competence but does not highly value that domain might still have a high level of global self-worth, while a child who gives herself a poor rating for physical appearance but feels that this domain is extremely important will experience lower global self-worth. If a child experiences disparities in some, but not all, domains, she will still experience lower global self-worth. If a child experiences no disparities between feelings of competence and her value judgments of the domains, then she will have a high level of global self-worth. The specific determinants of self-esteem, then, vary for each individual. Each child feels more competent in and values some domains more than others.

Because self-esteem is a common human phenomenon, most people “know” what it is. However, in defining, researching, and trying to affect self-esteem, researchers have focused on different aspects of it. In order to select the best definition of self-esteem for his work, Mruk (2006) reviewed psychological literature that defines self-esteem as
competence, worthiness, or a combination of competence and worthiness, and examined the strengths and weaknesses of each approach. This analysis led Mruk to adopt a comprehensive, two-factor definition of self-esteem, i.e., “the lived status of one’s competence at dealing with the challenges of living in a worthy way over time” (Mruk, 2006, p. 28). The effectiveness of this definition is demonstrated by the success of a self-esteem enhancement program created by Mruk, the reliability and validity of which has been empirically supported (Hakim-Larson & Mruk, 1997). Mruk’s definition of self-esteem as a relationship between competence and worthiness will be used in this study.

Many researchers have argued that there exists a link between self-esteem and behavior (e.g., Dubow, Edwards, & Ippolito, 1997; Meeks, 2001; Rosenberg, Schooler, Schoenbach, & Rosenberg, 1995; Swann, Jr., Chang-Schneider, & McClarty, 2007). For example, suicidal ideation among adolescents is correlated with poor self-concepts in particular domains, low self-worth, lack of social support, poor adjustment, and stressful life events (Dubow, Kaush, Blum, Reed, & Bush, 1989; Harter, 1999). Thus, one would expect an increase in self-esteem, when supported socially, to positively affect behavior. As noted above, authentic self-esteem may be seen as a relationship between two factors: competence in domains that are judged to be important to the individual and the internalization of positive social evaluations that contribute to a sense of worthiness. Self-esteem enhancement programs that facilitate competence in domains that are identified as important by an individual and that are guided through accurate, behaviorally-based feedback, then, should be effective in raising children’s self-esteem, thereby positively affecting their behavior.
Musical skills, of course, involve acquiring competencies in domains that are often already present in educational settings. However, the effect of developing such abilities on self-esteem, when it is defined in terms of two factors instead of one, remains relatively unexplored in such a context. The purpose of this study will be to determine the effect of a music-based intervention program on the self-esteem levels of elementary students. If the program raises the students’ self-esteem as a group or for some individuals, this study would suggest one possible course of action for increasing the likelihood of healthy behavioral patterns, particularly in children who value musical competence. If the program does not raise the students’ self-esteem as a group, this study would suggest that intervention programs may need to be individualized based on a person’s self-esteem strengths and weaknesses, or that interventions may need to be administered to groups with common interests and values. In other words, there may not be one “cure all” approach for authentically raising self-esteem in children, so interventions may need to be designed individually as Mruk (2006) and Pope, McHale, and Craighead (1988) demonstrate and Harter (1999) suggests.
CHAPTER II. REVIEW OF LITERATURE

Recent scholarship has established that an authentic sense of self-esteem must be supported by perceptions of competence in important domains, a self-evaluative component; and by positive social reinforcement and acceptance, which produce a sense of worthiness, an affective component (Dubow, Edwards, & Ippolito, 1997; Harter, 1999; Hoban & Hoban, 2004; Mruk, 2006). Specifically, Harter’s work has identified the following five important domains of the self-concept in middle to late childhood (i.e., ages eight through twelve): scholastic competence, athletic competence, physical appearance, peer acceptance, and behavioral conduct. The combination of children’s feelings of competence in each of these areas (termed the “perceived self,” by Pope, McHale, & Craighead, 1988) in relation to their value judgments of each domain (Pope, McHale, & Craighead’s “ideal self,” or the image the child wants to be) work together to produce a feeling of global self-worth (Harter, 1999).

For example, a child who gives herself a poor rating for athletic competence but does not highly value that domain may still have a high level of global self-worth, while a child who gives herself a poor rating for physical appearance but feels that this domain is extremely important will experience lower global self-worth. If a child experiences disparities in some, but not all, domains, she will still experience lower global self-worth. If a child experiences no disparities between her feelings of competence and her value judgments of the domains, then she will have a high level of global self-worth. As stated by Gibbons (1998), “when the perceived and ideal self agree, there is positive self-esteem; when there is a difference, there may be low self-esteem” (p. 2). The specific determinants of self-esteem vary for each individual; each child feels more competent in
and values some domains more than others. Global self-worth is also strongly influenced by “perceptions of the attitudes which significant others hold toward the self” (Harter, 1985), i.e., a feeling of worthiness.

Because self-esteem is a common human phenomenon, most people “know” what it is. However, in defining, researching, and trying to affect self-esteem, researchers have focused on different aspects of it. James (1983) was the first to define self-esteem in 1890, which he did in terms of “successes,” now referred to as competence. James believed that if an individual was competent enough to actively realize her aspirations, then she would have “high” self-esteem. By his way of thinking, it was not competence in every situation that mattered in self-esteem development, but competence in areas of importance to each individual. James used himself as an example, stating that since he had “staked [his] all on being a psychologist,” his self-esteem would be harmed if he were proven to be ignorant in the field, but because he did not care to be fluent in Greek, his self-esteem would not suffer if he were proven to be ignorant of the language.

Rosenberg (1965, 1979, 1986) introduced a definition of self-esteem based on a certain attitude or feeling that one is “good enough,” or a person of worth. By his definition, self-esteem did not depend at all on competence, but on an attitude toward oneself. Branden (1969, 1983, 1994) was the first to define self-esteem in terms of two aspects: personal efficacy and personal worth. Based on his philosophical foundations rather than empirical evidence, Branden purported that people need to feel worthy, but that they could only do so by acting rationally, i.e., competently in decision making. Each of these figures started a major definition of self-esteem. There have been many variations on these themes by researchers over the years.
In order to select the best definition of self-esteem for his work, Mruk (2006) reviewed psychological literature that defines self-esteem as competence (for example, James), worthiness (Rosenberg), or a combination of competence and worthiness (Branden), and examined the strengths and weaknesses of each approach. Mruk’s analysis led him to adopt a comprehensive, two-factor definition of self-esteem, i.e., “the lived status of one’s competence at dealing with the challenges of living in a worthy way over time” (Mruk, 2006, p. 28). The effectiveness of Mruk’s definition is demonstrated by the success of a self-esteem enhancement program he created, the reliability and validity of which has been empirically supported (Hakim-Larson & Mruk, 1997). Mruk’s definition of self-esteem as a relationship between competence and worthiness will be used in this study.

Many researchers have argued that there exists a link between self-esteem and behavior (e.g., Dubow, Edwards, & Ippolito, 1997; Meeks, 2001; Rosenberg, Schooler, Schoenbach, & Rosenberg, 1995; Swann, Jr., Chang-Schneider, & McClarty, 2007). For example, suicidal ideation among adolescents is correlated with poor self-concepts in particular domains, low self-worth, and lack of social support (Dubow, Kaush, Blum, Reed, & Bush, 1989; Harter, 1999). In 1997, Dubow, Edwards, and Ippolito examined the relationship of selected life stressors and resources with indications of adjustment levels in underprivileged children. In this study, each of 315 inner-city school children (grades four through six) took a number of surveys that corresponded to independent variables such as demographic information, life stressors, perceptions of neighborhood disadvantage, and perceived resources, including global self-worth, family support, and peer support. The subjects also took surveys that corresponded to the dependent measure,
adjustment, which was determined by antisocial behavior, drug use, and school grades. Results showed that stressful life events, neighborhood disadvantage, and peer support were correlated with antisocial behavior, while family support and high self-worth were correlated with lower levels of antisocial behavior and drug use. Dubow, Edwards, and Ippolito concluded that the accumulation of life stressors can be used to predict behavior and emotional adjustment (Dubow, Edwards, & Ippolito, 1997).

In 2001, Meeks set out to determine the predictive capabilities of music preference, social acceptance, athletic competence, physical appearance, behavioral conduct, and global self-worth (as measured by Harter’s 1985 *What I Am Like*) on in-school conduct. Thirty-five 12- to 14-year-old subjects were divided into groups based on their in-school conduct over the previous year and tested using Harter’s *What I Am Like* self-perception profile and the researcher’s self-developed measure of music preference. Results showed that scholastic achievement, behavioral conduct, and music preference were the strongest predictors of in-school conduct, supporting the relationship between self-esteem and behavior.

Motowidlo (1980) and Bardwell (1984) showed that students performed tasks in a manner consistent with their self-images and expectations. Korman (1970) also predicted that a person’s performance on a task would be consistent with the self-image in which he approached tasks; this hypothesis received considerable support, especially through field studies (Korman, 1976). Ulrich (2001) cited the results of Motowidlo (1980) and Korman (1970) as evidence that “self-perceptions of competence may influence subsequent achievement” (p.4). In other words, if students perceive themselves and their leaders (usually teachers and parents) to be competent, their behavior will be positively
influenced. Many researchers (e.g., Costa-Giomi, Flowers, & Sasaki, 2005; Greenberg, 1970; Gordon, 1970) have shown this relationship to exist in musical settings, where positive self-esteem or self-concept scores have been correlated with successful musical task performance and low levels of musical achievement have been attributed to negative influences including environmental influences, lack of training, and lack of motivation. In positive situations, successful music task performance results in reinforcement of the positive self-concepts, creating a “positive feedback loop” (Ulrich, 2001). Thus, one would expect an increase in self-esteem to positively affect behavior.

As noted above, authentic self-esteem may be seen as a relationship between two factors: competence in domains that are judged to be important to the individual and the internalization of positive social evaluations that contribute to a sense of worthiness (Mruk, 2006). The relationship between these two factors accounts for the effects of self-esteem on behavior by explaining levels of low and high competence-based and worthiness-based self-esteem that may or may not reach clinical significance. In other words, because of the interaction of the two factors of self-esteem, we need not make blanket statements about low or high overall self-esteem because we can see how the interplay between the factors results in unique lived situations for each individual. Mruk’s “Self-Esteem Meaning Matrix with Basic Types and Levels” (2006, p. 158) and his matrix of explanations for each type and level, “Integrating Types and Levels of Self-Esteem,” (2006, p. 168) illustrate this interplay (see Figure 1 and Figure 2). In Figure 1, competence is placed on the x-axis, and feelings of worthiness on the y-axis. Feelings of worthiness are what people value as being meritorious or good (Ulrich, 2001) as
developed starting in early childhood, by the amount of acceptance, love, and appreciation children receive from significant others (Gibbons, 1998).

*Figure 1.* Self-esteem meaning matrix with basic types and levels (Mruk, 2006, p. 158).

Each quadrant of the self-esteem matrix results in different feelings and behaviors, some much more desirable than others. The inner square of self-esteem types and levels is not clinically significant (ratings of competence and/or worthiness are no more than five strong in any direction), while the outer square is clinically significant
(ratings of competence and/or worthiness can be up to ten strong in any direction). For example, people with “Negativistic” self-esteem, in the bottom left quadrant, generally have a negative outlook concerning their chances of success and failure or good and bad fortune in life. They make lower expectations for their lives as a defense mechanism to keep from losing self-esteem. While this is a livable area of the matrix (i.e., not clinically significant), people in it tend to avoid risk, which causes them to miss out on many opportunities and possible increases in their qualities of life (Mruk, 2006). At a level of clinical significance, poor ratings of competence and worthiness (lower than negative five) place people in the “Classical Low Self-Esteem” area of this same quadrant. People in this area of the matrix may be susceptible to depression, eating disorders, teenage pregnancy, victimization, difficulty forming and sustaining close relationships, involvement in antisocial behavior, substance use, and suicide ideation and attempts (Mruk, 2006; see, for example, Larson, 2007). Here, individuals experience feelings of hopelessness, which Harter (1999) defines as “the perception that one is unable to control or alter painful life circumstances” (p. 200).

In the bottom right quadrant of Figure 1 are people who have a positive sense of competence but a negative sense of worthiness. People scoring within the less extreme section of this quadrant (any ratings up to -5, +5) tend to be achievement-oriented, as their self-esteem is based largely on competence. Achievement-centered individuals tend to be highly motivated hard workers, which can lead to their being very accomplished. Although possibly perceived as perfectionists, as long as they continue to achieve at high levels, they will score high on self-esteem measurements and appear to be competent and reasonably healthy to others. Because their achievements define their self-esteem,
problems can occur when these people experience failure or have their abilities or work questioned. When this happens, these individuals experience instability, causing them to attempt to push away their sense of failure through defensive reactions, which can sometimes even become aggressive. The clinically significant portion of this quadrant (ratings between -5, +5 and -10, +10), then, is for individuals whose need to feel competent has driven them to do anything to get their own way, even if the laws of society or the rights of others are violated. Thus, the label for this section is “Antisocial” (Mruk, 2006).

Approval-centered self-esteem (see the upper left quadrant in Figure 1) is worthiness-based. In other words, although individuals in this section of the matrix may be competent in a variety of ways, they do not recognize or care about their competencies as much as they care about the opinions of others. Therefore, in order to feel accepted and consequently “good” in general, these individuals may demonstrate approval-seeking behavior. When criticism arises, then, their sense of worth is diminished, and without a strong sense of competence, they become very sensitive. Although non-clinical, self-esteem for individuals in this area of the matrix is very unstable. At a clinical level, this quadrant houses the worthiness-based imbalance that results in narcissism. Individuals in this section of the matrix are fragile, as they “demonstrate a greatly exaggerated sense of their own importance,…expect others to automatically recognize their special character or abilities, [and]…react far too strongly when someone questions [their] contributions or accomplishments” (Mruk, 2006, p. 162). Mild challenges, common social shortcomings, and imagined injury can be very distressing to these individuals because they are so
vulnerable to and dependent upon their interpretations of others’ perceptions (Mruk, 2006).

Finally, in the upper left quadrant of Figure 1, there are levels of high, secure self-esteem that are based on positive feelings of both competence and worthiness. Most people have been exposed to enough positive experiences to avoid problems; therefore, they lie in the medium self-esteem section of the quadrant. This section of the matrix is more stable and adequate for living than any of the others examined so far; however, individuals in it are capable of moving up to the higher, more authentic level of self-esteem labeled in the matrix as “Authentic Self-Esteem.” Here, those with genuinely high self-esteem are secure enough to perceive and admit their own faults and limitations without the need for continual external validation of worthiness or competence. This level of self-esteem is stable, i.e., balanced over time (Mruk, 2006). The feelings and behaviors consistent with feelings of competence and worthiness that place people in each section of the matrix are summarized in Figure 2.
Self-esteem is a developmental phenomenon; it can and usually does change over time. However, the importance of developing positive self-esteem in children at an early age is emphasized by researchers such as Pope, McHale, and Craighead (1988), who found that once children develop their self-identity, it usually endures into adulthood. Gibbons (1998) further posits that around age ten, children evaluate themselves by making comparative judgments about their competencies in relation to their perceptions of their peers’ competencies, but that by about age twelve, they “develop a self-identity that endures into adulthood” (p. 2). This critical period of transition was investigated in this study.
Self-esteem enhancement programs that facilitate competence in domains that are identified as important by an individual and that are guided through accurate, behaviorally-based feedback should be effective in raising children’s self-esteem, thereby positively affecting their behavior. Musical skills, of course, involve acquiring competencies in domains that are often already present in educational settings. Some researchers have shown positive effects on self-esteem that they have attributed to music instruction (Costa-Giomi, 2004; Michel & Farrel, 1973). In 2004, Costa-Giomi wanted to determine the effects of piano instruction on children’s development. In order to fulfill this purpose, she observed 117 children from non-privileged environments (i.e., family income under $30,000 per year) for three years while the subjects in the treatment group took weekly piano lessons and were each given a piano at home. All subjects were tested yearly in musical aptitude, self-esteem, motor proficiency, and cognitive abilities. During the three years of the study, the experimental group’s self-esteem increased significantly and their school music grades remained stable, but the control group and the dropout group had no significant increases in self-esteem and their school music marks declined over the course of the study. Costa-Giomi concluded that there are specific benefits for self-esteem associated with piano instruction. However, the involvement of a significant other in the experimental group’s lives could have been another contributing factor.

Years before Costa-Giomi’s research, Michel and Farrel (1973) gave fourteen 10- to 12-year-old boys from an elementary school with exclusively African-American students a self-esteem inventory test and a behavior rating. All of these subjects were labeled by the researchers as “disadvantaged learners.” In order to determine the effect of learning musical performance skills on the subjects’ self-esteem levels and attention
spans, each subject in the treatment group was given ukulele lessons, and later, classroom music lessons with ukulele lessons used as a reinforcement tool. The control group, consisting of children of the same age who had similar self-esteem inventory scores and were enrolled in the school’s special education class, received no treatment. After the intervention, the self-esteem inventory test was re-administered, and teachers gave all subjects another behavior rating. Results showed that significant gains in self-esteem inventory scores and behavior ratings were made on an individual basis for children within the treatment group, but that this did not hold true for children in the control group. There was no significant mean gain in self-esteem scores for either group. Based on their results, the researchers concluded that musical skill development may be an important way to increase self-esteem and on-task time commitment for “disadvantaged” students, which may generalize to settings outside of the music classroom. It should be noted, however, that it is difficult to separate the possible effects of music instruction from the possible effects of involvement with a significant other in this and other music education-based self-esteem studies.

In 1998, Gibbons found that parental involvement and support was the sole predictor of music self-esteem (other predictors tested included all of Harter’s domains and global self-worth) for fourth and eighth grade students, but Gibbons reported that as children get older, their parents’ influences are replaced by influences of their peers. Ulrich (2001) tested 23 eighth grade band students in musical performance achievement, music audiation, the degree and frequency of parental involvement, and motivational factors. She found that the greatest predictors of musical achievement included self-perceptions of music aptitude (competence), a low perception of close friendship, and a
high level of parental involvement (worthiness). Ulrich (2001) cited Harter (1999), stating, “Since behavioral conduct is highly valued by parents, those students who score high in this domain usually also have a high level of parental support” (p. 22). Harter (1999) indicated that although older children are capable of experiencing personal pride without being observed, sharing their accomplishments with others enhances their positive emotions.

Making music in an ensemble is a social activity consisting of individuals contributing to a whole. Therefore, social support from not only parents, but peers as well, should be drawn from ensemble participation. Despite the existence of a vast body of self-esteem related research, the effect of developing musical abilities in large peer group settings on self-esteem, when it is defined in terms of two factors instead of one, remains relatively unexplored. The same may be said of using the acquisition of musical competence as an approach to increasing self-esteem in measurable ways for the age group addressed in this study (according to C. Mruk, personal communication, March 11, 2008, self-esteem levels generally tend to drop at ages twelve to thirteen).

The purpose of this study was to determine the effect of a music-based intervention program on the self-esteem levels of elementary students. If the program raised the students’ self-esteem as a group or for some individuals, this study would suggest one possible course of action for increasing the likelihood of healthy behavioral patterns, particularly in children who value musical competence. If the program did not raise the students’ self-esteem as a group, this study would suggest that intervention programs may need to be individualized based on a person’s self-esteem strengths and weaknesses, or that group interventions may need to be administered to groups with
common interests and values. In other words, there may not be one “cure all” approach for authentically raising self-esteem in children, so interventions may need to be designed individually as Mruk (2006) and Pope, McHale, and Craighead (1988) demonstrate and Harter (1999) suggests.
CHAPTER III. METHOD

Participants in this study were all consenting fifth- and sixth-grade students \( N = 42 \) enrolled at a rural public elementary school in a small midwestern village near a state university (see Appendix A for letters of permission and consent). By the end of the study, one subject had returned to fourth grade, but she continued her participation. The research was conducted during regularly scheduled recess and study hall periods and all subjects took part in their regular school activities, including music class. All subjects were pre-tested using Harter’s (1985) self-perception profile for children, *What I Am Like* (see Appendix B). This survey measured domains of self-concept that are important to children in this age group, including scholastic competence, athletic competence, physical appearance, peer acceptance, and behavioral conduct, as well as global self-worth.

In this survey, each domain is addressed through six statements. For example, a statement measuring scholastic competence reads, “Some kids feel that they are very good at their school work BUT other kids worry about whether they can do the school work assigned to them.” The children are asked to decide whether they are more like the kids on the “left side,” i.e., in the first part of the statement, or whether they are more like the kids on the “right side,” i.e., the second part of the statement. Once the children have decided which kind of kid is most like them, they must decide whether that statement is only “sort of true for them” or “really true for them,” placing a check in the appropriate box. If a child marks that the strong side of the statement (in this case, the left) is really true for them, they are given four points. If the strong side of the statement is sort of true for them, they are given three points. If the weak side of the statement (in this case, the
right) is sort of true for them, they are given two points, and if the weak side of the statement is really true for them, they are given only one point. Scores for the statements in each domain are added and divided by six, yielding mean scores for each child in each domain, which can be from one to four. In the event that a child failed to answer every question in a subscale, the sum of the scores for that subscale was divided by the number of answers the child did provide.

According to the results of this pretest, the participants were systematically assigned to one of two groups on the basis of their global self-worth scores, which ranged from 2.17 to 4.0 on a four-point scale. The participants were placed in order from lowest to highest global self-worth scores and put into pairs with the participants directly following them on the list. In other words, the participants with the lowest score and the second-lowest score became a pair, the participants with the third and fourth scores became a pair, and so on. From the two participants with the lowest scores, a coin was tossed to randomly assign one to the treatment group and one to the control group. In this coin toss, the participant with the lowest self-worth score was assigned to the treatment group, and the second participant in the pair was assigned to the control group. In order to control for global self-worth differences at outset, in the next pair, the participant with the lower score of the two was assigned to the control group and the participant with the higher score was assigned to the treatment group. This method continued throughout the rest of the group assignments. In the event that a participant assigned to the treatment group declined the invitation to participate in the treatment, the other member of their pair was assigned to the treatment group and that participant switched to the control group. Once the treatment was under way, some participants had difficulty disciplining
themselves to stay involved when the tasks proved challenging. In the instance that these participants wanted to quit the intervention, their pair group was completely dropped from the study. In most cases, though, the participants overcame their obstacles and tendencies to give up or act out when frustrated, looking forward to successful performances, t-shirts, and a field trip.

The method of group assignment resulted in a treatment group \((n = 21)\) and a control group \((n = 21)\) that were balanced for global self-worth. To assure this balance, establishing that the groups were not different at outset, an independent t-test was conducted to compare the pretest means for control and treatment groups. An alpha level of 0.05 was used for all statistical tests. The mean global self-worth score for the control group was 3.39 \((SD = 0.57)\). The mean global self-worth score for the treatment group was 3.33 \((SD = 0.58)\). Because the participants were systematically paired, the t-test showed no significant difference between groups according to global self-worth at outset, \(t = -0.05, \text{df} = 40, p = 0.96\). Because the error variance in groups due to the global self-worth domain was thereby systematically reduced, statistical power was therefore increased (M. H. Gromko, personal communication, September 26, 2007).

The control group received no treatment. Instead, they took part in regularly scheduled school activities including recess, study hall, and for some students, student council and/or teacher helping. The treatment group became members of a musical, percussion-based ensemble called “D.R.U.M. Club”: Discipline, Respect, and Unity through Music. D.R.U.M. Club met for ten weeks at a frequency of two 35- to 40-minute rehearsals per week. Pedagogical strategies and approaches used to lead the ensemble were aligned with the Orff-Schulwerk approach to music instruction. This approach,
which emerged in the United States during the 1960s, emphasizes “exploratory experiences in rhythmic speech, song, instrumental performance, and movement, [and is] seen as another viable tool for developing music creativity at the elementary level” (Campbell, 1991, p.75). The Orff system of instruction is concerned with the direct experience of music, as Orff defined ideal music for children as “never music alone, but music connected with movement, dance, and speech…meaningful only in active participation” (Frazee, 1987, p. 14; New, 1983). Thus, during D.R.U.M. Club rehearsals, participants actively spoke, moved, and played their instruments (see Appendix C for a sample lesson plan). Repertoire for the ensemble was taken primarily from D.R.U.M.: Discipline, Respect, and Unity through Music (Solomon, 1998) and The Body Rondo Book (Solomon, 1997), both written by Jim Solomon, a composer and master of the Orff-Schulwerk approach to teaching elementary music. Other repertoire included a piece from African Songs and Rhythms for Children: A Selection from Ghana (Amoaku, 1971), and an unpublished piece for hand drums by Jean Wilmouth titled “Ben’s Bolts” (see Appendix D for samples of music).

During the ten-week intervention, participants in the percussion ensemble gave four public performances at their elementary school for audiences including all of the other students in the elementary school, teachers, administrators, and parents (see Appendix E for concert programs). To provide further opportunity for participants to share their accomplishments and progress with their parents (in accordance with Harter, 1999), the participants were given periodic newsletters (see Appendix F). Because feeling good about oneself without being able to demonstrate competence in important areas can lead to narcissism (Collins, 2007), a critical objective of the intervention was to provide
useful competencies to participants. To ensure that competence was being addressed as well as worthiness, each participant performed Solomon’s (1997) “Dolphinarts” body rondo individually during a music testing session. Footage of these performances was reviewed and scored by two judges (reliability between judges = 0.91, $p < 0.0001$) and each participant was given a musical competency score (the sum of both judges’ scores) based on their coordination, musicality, and memory. The panel judged coordination based on each child’s ability to perform all of the physical acts of the body rondo with grace (one participant suffered a physical disability, but he compensated by revising the body rondo on his own in a way that did not disturb the group, but accommodated his needs; of course, his score did not suffer because of this accommodation). Musicality was judged based on each child’s adherence to phrasing and their chosen tempo. Memory was judged based on each child’s ability to go through the piece at a steady tempo without having to pause to remember an upcoming motion, measure, or section.

Each participant in the treatment group received a t-shirt in the color of their choice. Participants had five colors to choose from, and in order for the group to look as desired during performances, only five participants could be wearing each color. Therefore, when more than five participants had signed up for one color, the participants with the highest physical appearance scores were given their second color choice. The t-shirts said “DRUM CLUB” on the back. These shirts were worn as uniforms during the final two concerts.

The culmination of the treatment was a trip to a nearby elementary school to perform for and listen to music performed by the students there. While at the host school, D.R.U.M. Club members performed “Ben’s Bolts” (Wilmouth, unpublished) while the
other students performed a complementary piece, “Alpha Three,” (Solomon, 1997) and at
the opening and conclusion of the visit, D.R.U.M. Club and host school students
performed pieces that they had each prepared separately as one ensemble, sharing
instruments and common musical experiences with one another. Before visiting the
elementary school, students from the host school wrote individual letters welcoming
D.R.U.M. Club members (see Appendix G for instructions to host students and sample
letters). During the school visit, the D.R.U.M. Club members got to meet and sit next to
their own “pen-pal.” All concerts were taped using digital video cameras, and during the
week following the final performance, the participants in the treatment group were
presented with their own CD-Rom performance portfolio.

Through participation in their rehearsals and performances, the participants in the
treatment group addressed both the competence and worthiness aspects of self-esteem by
building musical competence and social interactions. Musical competence might
encompass scholastic competence through the need to encode rhythmic patterns and
performance forms, athletic competence through the need for coordination, physical
appearance through the uniformity of the ensemble, and behavioral conduct. Social
interactions might encompass peer acceptance and again, behavioral conduct. These
transfers from music learning to valued competencies were explained to students and
parents in the final newsletter, which was read by the participants before posttesting.

Having personally studied the Orff-Schulwerk pedagogical strategies outlined
above with Jim Solomon and authentic self-esteem enhancement strategies with
Christopher Mruk, I served as the director of the treatment group. Mruk’s (2006) two-
factor self-esteem enhancement program is designed for adult groups that come to at least
five two-hour meetings. Throughout the weeks, they participate in discussions, keep journals, find sources of support, and do assignments that are designed to help them become aware of and come to appreciate self-esteem, determine their own problems, increase worthiness, increase competence, and maintain, or manage, their own self-esteem. In accordance with both the Orff-Schulwerk approach to music instruction and Mruk’s (2006) two-factor approach to self-esteem enhancement, I guided D.R.U.M. Club participants through accurate, behaviorally-based feedback (e.g., “You played the rhythm of the words!” instead of, “You’re wonderful!”; see Clayton, 2007).

In accordance with the Orff-Schulwerk approach to classroom music instruction, the members of the D.R.U.M. ensemble actively imitated (e.g., echoed my speaking and mirrored my motions), explored (e.g., chose and used a variety of percussion instruments and choreographed their own motions), and improvised (e.g., took turns performing solo improvisations on conga and bongo drums with other percussion instruments keeping the steady beat). The participants in D.R.U.M. were actively engaged in singing, moving, speaking, instrument playing, and rhythmic training (Solomon, 2007). Throughout the treatment, no auditions were held. Participants were allowed to choose their instruments for each piece and they were all given the opportunity to perform solo improvisations if desired.

Following the ten-week treatment, all participants in the control and treatment groups were posttested with Harter’s (1985) *What I Am Like* self-perception profile for children. Data were analyzed to determine the effectiveness of a musical, percussion-based intervention on participants’ perceptions of their own global self-worth. After the posttests, all participants took part in semi-structured, written interviews. Through these
interviews, I explored the reasons for changes in self-esteem levels (see Appendix H for interview questions). This combination of a qualitative component with primarily quantitative methodology, suggested by Scheff and Fearon (2004) and Mruk (2006), allowed me to gain a deeper understanding of the unique lived experiences of competence, worth, and self-esteem in my participants.
CHAPTER IV. RESULTS

The purpose of this study was to determine the effect of a music-based intervention program on the self-esteem levels of elementary students. Because the control and treatment groups were matched in terms of global self-worth at outset, I was most interested in that particular domain, making my research question: Did gains in global self-worth differ by musical treatment? Mean pretest and posttest scores for each group appear in Table 1. On the posttests, the control group scored lowest on scholastic competence ($M = 2.88$, $SD = 0.66$) and highest on global self-esteem ($M = 3.44$, $SD = 0.48$). The treatment group also scored lowest on scholastic competence ($M = 2.79$, $SD = 0.57$) and highest on global self-esteem ($M = 3.37$, $SD = 0.57$) on the posttests.

Table 1

Means and Standard Deviations of Pretests and Posttests

<table>
<thead>
<tr>
<th></th>
<th>ScPr</th>
<th>ScPo</th>
<th>SoPr</th>
<th>SoPo</th>
<th>AtPr</th>
<th>AtPo</th>
<th>PhPr</th>
<th>PhPo</th>
<th>BePr</th>
<th>BePo</th>
<th>GlPr</th>
<th>GlPo</th>
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<tr>
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<td>2.89</td>
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<td>3.14</td>
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<td>3.11</td>
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<td>2.91</td>
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<td>3.44</td>
<td></td>
</tr>
<tr>
<td>Control SD</td>
<td>0.77</td>
<td>0.66</td>
<td>0.60</td>
<td>0.69</td>
<td>0.67</td>
<td>0.66</td>
<td>0.84</td>
<td>0.81</td>
<td>0.70</td>
<td>0.54</td>
<td>0.57</td>
<td>0.48</td>
</tr>
<tr>
<td>Treatment M</td>
<td>2.81</td>
<td>2.79</td>
<td>3.24</td>
<td>3.24</td>
<td>3.13</td>
<td>3.06</td>
<td>3.17</td>
<td>3.30</td>
<td>3.18</td>
<td>3.04</td>
<td>3.33</td>
<td>3.37</td>
</tr>
<tr>
<td>Treatment SD</td>
<td>0.54</td>
<td>0.57</td>
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<td>0.50</td>
<td>0.70</td>
<td>0.71</td>
<td>0.76</td>
<td>0.74</td>
<td>0.51</td>
<td>0.58</td>
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<td>0.57</td>
</tr>
</tbody>
</table>

Note. C = Control Group; T = Treatment Group; $M =$ Mean; $SD =$ Standard Deviation; ScPr = Scholastic Competence Pretest; ScPo = Scholastic Competence Posttest; SoPr = Social Acceptance Pretest; SoPo = Social Acceptance Posttest; AtPr = Athletic Competence Pretest; AtPo = Athletic Competence Posttest; PhPr = Physical Appearance Pretest; PhPo = Physical Appearance Posttest; BePr = Behavioral Conduct Pretest; BePo = Behavioral Conduct Posttest; GlPr = Global Self-Worth Pretest; GlPo = Global Self-Worth Posttest
Figure 3 shows comparisons of pretest and posttest means for each of the domains for the control group. The most obvious gain was in the domain of social acceptance ($M = 0.21$).

*Figure 3. Pretest and posttest means for control group.*

![Bar chart showing pretest and posttest means for control group]

Note: PRE = Pretest; POST = Posttest; SC = Scholastic Competence; SO = Social Acceptance; AT = Athletic Competence; PH = Physical Appearance; BE = Behavioral Conduct; GL = Global Self-Worth

Figure 4 shows comparisons of pretest and posttest scores on each of the domains for the treatment group. The most noticeable changes were in physical appearance ($M = 0.13$) and behavioral conduct ($M = -0.14$).
After calculating pretest and posttest means for each domain by group, I calculated mean gains (posttest – pretest) for each domain by group. The null hypothesis that I tested was that the difference between the mean gains for groups was zero. This hypothesis was tested with the test statistic, t. I used the independent samples t-test. Mean gains by group and the results of the comparison are shown in Table 2. The mean gain for scholastic competence for the control group was -0.01 and for the treatment group was -0.02. This difference was not significant ($t = 0.04, df = 40, p = 0.97$). The mean gain for social acceptance for the control group was 0.21 and for the treatment group was -0.00. This difference was not significant ($t = 1.38, df = 40, p = 0.18$). The mean gain for athletic competence for the control group was -0.06 and for the treatment group was -0.06. This difference was not significant ($t = 0.36, df = 40, p = 0.72$). The mean gain for physical appearance for the control group was 0.01 and for the treatment group was 0.13.
This difference was not significant ($t = -0.64, df = 40, p = 0.53$). The mean gain for behavioral conduct for the control group was -0.01 and for the treatment group was -0.14. This difference was not significant ($t = 0.83, df = 40, p = 0.41$). The mean gain for global self-worth for the control group was 0.06 and for the treatment group was 0.03. This difference was not significant ($t = 0.17, df = 40, p = 0.87$). In other words, gains in perceptions of global self-worth or any of the other five dimensions of self-esteem could not be explained by participation in the musical treatment group, D.R.U.M. Club.

Table 2

*Mean Gains by Group*

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Control</th>
<th>Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scholastic Competence</td>
<td>-0.01</td>
<td>-0.02</td>
</tr>
<tr>
<td>Social Acceptance</td>
<td>0.21</td>
<td>-0.00</td>
</tr>
<tr>
<td>Athletic Competence</td>
<td>-0.001</td>
<td>-0.06</td>
</tr>
<tr>
<td>Physical Appearance</td>
<td>0.01</td>
<td>0.13</td>
</tr>
<tr>
<td>Behavioral Conduct</td>
<td>-0.01</td>
<td>-0.14</td>
</tr>
<tr>
<td>Global Self-Worth</td>
<td>0.06</td>
<td>0.03</td>
</tr>
</tbody>
</table>

*Note.* Underlined means are not significantly different.

During the month following the administration of post-tests, all subjects took part in semi-structured, written interviews. The purpose of these interviews was to allow for exploration of the reasons for the positive and negative changes and the maintenance of the individual self-esteem levels of subjects. Content analysis revealed emergent themes
in the data, making it possible to group the subjects by common interests and values (see Appendix H for interview questions).

Of all of the subjects in the treatment group \( (n = 21) \), only one did not report something positive about involvement in the intervention. This subject said simply, “I couldn’t get my homework done,” which shows that he valued working directly toward scholastic competence more than he appreciated the indirect approach to scholastic competence and other competencies that were targeted through D.R.U.M. Club. Another subject in the treatment group gave D.R.U.M. Club a mixed review, stating, “I liked it because you get to do lots of performances. But I didn’t like that I had to skip half my lunch time [recess] to do it. It sometimes was fun but not always.” This subject seemed to value a different type of social interaction than D.R.U.M. Club facilitated during rehearsals. This subject may not have valued musical competence highly either.

The remaining treatment group members \( (n = 19) \), reported valuing D.R.U.M. Club for many combinations of reasons. Four subjects’ responses showed underlying values regarding the musical content (e.g., “There were a lot of interesting things to do…You can have fun and learn about percussion instruments at the same time,” “I have always wanted to play the konga [sic] drums and other instruments [sic],” and “I’m in band and, [sic] it might help me with rhythms [sic] and beats.”). One of these students cited social acceptance as a secondary value by stating, “I get to help others and spend time with a cool teacher.”

Twelve subjects from the treatment group seemed to value social acceptance most highly (e.g., “I made friends Ill [sic] never forget,” “I made a friend at [the host school]…I felt very lucky to be picked for drum club [sic],” “I got to see my friends,”
and “I thought it was fun going to [the host school] and seeing all the kids.”). Of these twelve, musical competence emerged as a value secondary to social acceptance in six subjects’ responses (e.g., “I never played drums before and my grandma really [sic] wanted to see me play…My Grandma [sic] and I accomplished some goals. Now I can teach my Bro. [sic] how to play,” “[Being in D.R.U.M. Club] meant to me that its [sic] ok to try new things and to meet new people,” and “…when we whent [sic] to a different school we could see that even deph [sic] people could play what we could.”). Behavioral conduct emerged as a secondary value for one subject who valued social acceptance, as indicated in her response, “[Being in D.R.U.M. Club meant] Being a person that acts the way they should…and still have FUN!!”

The remaining subjects in the treatment group reported appreciating the experience of being in D.R.U.M. Club, but their reasons were not specific enough to be congruent with any of Harter’s (1999) domains of the self-concept. For example, one subject thought involvement in the intervention was special because “it got me off the subject of school,” another because he had “never really been Involved [sic] in something like this before,” another because it was “cool,” and finally one thought it was “happy, [and] sweet.” Whether they were appreciative of the novelty of the group or the diversion they perceived it as offering, these subjects seemed to agree that involvement in the intervention was “fun.”

Although it would be seemingly impossible for a child to fully appreciate that which she does not know or is not exposed to, six of the subjects in the control group reported that they would have liked to be involved in the intervention. Two of these subjects gave general reasons for wanting to be included (e.g., “I thought it would be
fun…”). Three reportedly appreciated the musical content, one with social undertones (e.g., “I wish I was in Drum Club [sic]…because I want to learn about different drums,” “…you get to learn new thing [and] helping others [sic],” and “I want to play drums. [Not being in the club meant] Sad.”). The remaining subject from this group wanted to be in the intervention for social reasons (e.g., “…some of my friends were in it and I wasn’t. I felt a little left out.”).

The fifteen remaining subjects in the control group were reportedly not sacrificing competence- and worthiness-building opportunities by not being in D.R.U.M. Club. These subjects cited reasons that they did not mind not being in the intervention. These reasons lent themselves to coding by Harter’s (1999) domains. Four subjects cited reasons related to social acceptance (e.g., “I [would] get inbarest [sic],” and “…I didn’t have to skip resesse [sic].”). Three subjects valued scholastic competence more than involvement in the intervention (e.g., “I wanted to get my homework done,” “[I didn’t mind not being in it] Because you missed class time and it was just an extra thing,” and “I have homework to finish”). Two subjects did not mind not being in the intervention because of their feelings on musical competence (e.g., “i [sic] didn’t want to beat on a drum for a while that’s boring [sic],” and “I didnt [sic] have to miss any of my Band [sic] lessons…being in D.R.U.M. Club wasn’t a big deal for me because I already play Drums [sic].”). The remaining six subjects gave reasons for not minding their exclusion from the intervention that were too general to clearly identify with any of Harter’s valuable domains (e.g., “I don’t like it,” “I did not care,” “In drum club [sic] would take more time,” and “It didn’t bother me!”).
CHAPTER V. DISCUSSION

Major Findings

The purpose of this study was to determine the effect of a music-based intervention program on the self-esteem levels of elementary students. My results showed that gains in perceptions of global self-worth or any of Harter’s (1999) other five dimensions of self-esteem, including scholastic competence, social acceptance, athletic competence, physical appearance, and behavioral conduct, could not be explained by participation in the musical treatment group, D.R.U.M. Club. However, some individuals in both the treatment and control groups experienced gains in global self-worth and/or other dimensions of self-esteem from pretest to posttest. For members of the control group, these gains may have been due to regular school activities. For members of the treatment group, these gains may have been due to intervention involvement, making the intervention program effective for certain students. Moreover, in semi-structured interviews, twenty of the twenty-one members of D.R.U.M. Club reported valuing their participation in the intervention. Twelve of those members reportedly valued D.R.U.M. Club for a reason congruent with one or more of Harter’s (1999) dimensions of self-esteem.

The emergent themes in the interview responses from members of the treatment group included values aligning with musical content, scholastic competence, social acceptance, behavioral conduct, and “fun” due to multiple factors including the novelty of the group and the diversion that it offered. Other than musical content and “fun” due to unidentified sources, each of these themes fits into Harter’s (1999) six domains of the self-concept, strengthening her claim that these areas are highly valued by children at this
age level. One might infer that each individual in the study who valued a domain whose competence was developed through D.R.U.M Club participation either gained some component leading to authentic self-esteem through involvement or felt that she lost a component of self-esteem by not being involved. By the same logic, participants who did not recognize or value any of the competencies that were being apparently strengthened through D.R.U.M. Club participation would not have made gains in self-esteem due to involvement nor losses in self-esteem as a result of not being asked to join the ensemble.

The data from this study revealed the possibility that for each individual or group, different dimensions of self-esteem may have more of an impact on global self-worth than others, which indicates a need for individualized intervention plans. This study suggests, therefore, that self-esteem intervention programs may need to be individualized based on a person’s self-esteem strengths and weaknesses, or that interventions may need to be administered to groups with common interests and values in order to be effective. Harter (1999) highlights the need for intervention facilitators to identify subgroups of subjects at outset, catering to the needs of these subgroups rather than expecting whole-group achievements to yield self-esteem gains for all members. Had I interacted with individuals in this treatment group according to each member’s personal self-esteem strengths and weaknesses as evidenced by pretest scores, the overall group results may have been different. Individual, or at least smaller group interventions, would be more conducive to this type of interaction.

This study also shows that the nature of self-esteem is apparently quite robust, which, when combined with lived experiences during human development that determine
one’s feelings about oneself, makes it difficult to alter, regardless of its place in Mruk’s (2006) matrix (Figure 1). Harter (1999) explains this difficulty, stating:

Even in the face of a careful analysis of particular causes,…certain self-evaluations may be resistant to change if images of self have become deeply entrenched, particularly from a very early age;…resistance to change will be exacerbated to the extent that representations of the self reflect unconscious processes of which one has little awareness, and therefore…minimal control; [and]…there [may also be] personal motives to preserve the stability of one’s self-evaluations that…make change difficult (p. 330).

This finding supports conclusions drawn by Shields (2001), who found that although musical competency and importance can increase with intervention, these skills and values are not always closely related to global self-esteem, so differences in global self-worth scores will not necessarily follow music interventions. Shields’ findings, like my own, suggest that individuals must be addressed in terms of the areas that matter to them for interventions to increase self-esteem; there is not one approach that will be effective for everyone.

Furthermore, this study shows that just because a program is “good,” it may not raise students’ self-esteem. It would be difficult to argue that this study’s intervention program was seriously lacking in any areas of critical importance, since the group was comprised of children from different grade levels with varying academic, physical, social, and musical capabilities who regularly and successfully came together to actively create and enjoy music as a community (which is valuable and significant musically) and because, in their interview responses, nearly every member of the treatment group gave
positive feedback that connected to important dimensions of their self-esteem. Yet, this intervention did not raise the self-esteem levels of all of the participants. Not every child, then, can be expected to respond to involvement in any intervention that seeks to enhance self-esteem through means that are not directly related to their own values, strengths, and weaknesses, musical or otherwise. For example, although music educators would agree that performance is an important part of instruction, to a child, performance anxiety could cause losses in self-esteem rather than gains. Any similarly small detail of involvement, alone or combined with others, could explain why not every child responded to this musical intervention (e.g., treatment group participants whose data was dropped from this study because they quit the intervention reported that rehearsals were “boring” and “weird” and that they had “enough stuff going on already,” showing that they simply did not value participation).

Limitations of Design

It is possible that this treatment failed to authentically raise students’ self-esteem as measured by the What I Am Like scale (Harter, 1985) because of design choices rather than flaws in the logic. One possible experimental design problem could have resulted from the general trend in education to want children to experience “high” self-esteem. If operating under this desire, teachers and administrators may be affecting positive changes in competence and/or worthiness every day. This possible problem is rather unlikely, as not all children who are in school experience authentic self-esteem. Another unlikely experimental design problem (that affects most research) is experimenter bias. This was addressed in my design, and while I was perhaps more committed to the treatment group in this study, no extra effect on self-esteem seemed to result.
Perhaps the most important aspect of the design to consider in terms of understanding the lack of significant changes in self-esteem found in this study is that the intervention program used in it was not individualized. In trying to find out whether a musical intervention program would be effective in raising self-esteem for a random group of participants, as was the goal of this study, the design was necessary. However, successful self-esteem intervention programs focus on individual interests, which were not provided for through this intervention. The “one-size-fits-all” approach to self-esteem enhancement that was tested in this study is contradicted by modern research on self-esteem (Harter, 1999; Mruk, 2006; Pope, McHale, & Craighead, 1988); this study validates those positions.

Limitations of Dependent Measure

Quantitative. Although the What I Am Like surveys (Harter, 1985) were given during pretesting and posttesting as directed and confidentiality was promised, participants may have had trouble accurately representing themselves through the surveys. The surveys do not leave much room for variance, as the rating system for each question only goes from one to four. Many students seemed to be undecided, playing it safe, or not really thinking about their answers, as few students committed to strong answers of one or four. Most subjects answered questions in the middle range of two or three, which they saw as representing that the statement at hand was “sort of like” them rather than “a lot like” them. In future studies, researchers should continue to encourage students to commit to survey answers that accurately describe themselves by ensuring them that their answers will be confidential and not read by anyone who knows them. Although I ensured my participants that the only person who saw their survey answers
would be me (not their teachers, parents, or peers), by the end of the treatment, some students may have known me well enough to be embarrassed at the thought of disclosing how they felt about themselves to me. Finding a survey or devising qualitative questions that would yield answers that are as reliable as Harter’s may be impossible presently, but if researchers could determine a way to use such a reliable measurement while allowing for more variance in the answers, the resulting study might be ideal.

Even if Harter’s surveys did yield scores with more variance, though, they still would not be ideal. In her surveys, Harter does not provide a defensiveness scale to prevent the ceiling effect, which is a well-known problem in self-esteem work. While some children may suffer from self-esteem problems, they may be hesitant to share those problems with anyone or even to admit them to themselves, resulting in inaccurate self-reporting. In other words, because of a desire to please others or to appear to be healthy, children may produce high scores that do not provide accurate representations of their self-esteem. Defensiveness scales guard against such inaccurate representations by including questions in self-esteem measurements that produce answers showing whether someone is being honest or defensive.

Currently, the ceiling effect and the possibility of inaccurate self-representations are chronic problems in self-esteem work, as there are no self-esteem measurement tools that provide defensiveness scales and are appropriate for use with children. In this study, then, to guard against inaccurate self-reports, interview techniques and scoring procedures would have been necessary to devise at outset in order to make sure the control and treatment groups were truly matched. This study highlights the need for production of self-esteem measurements for children that include defensiveness scales,
especially so that self-esteem can be accurately screened for problems while children’s self-esteem is still forming and their self-concepts still developing.

*Qualitative.* The open-ended, written interviews may have been less revealing than one-on-one spoken interviews could have been. Some of the participants may have had difficulty knowing how to answer the questions provided (see Appendix H for prompts), and, had they expressed this difficulty in conversations with me personally, I could have rephrased or changed the questions and asked more questions based on their responses to make the data richer. Some students did not choose to carry out their ideas very fully when asked to write answers and others focused on one side of their feelings more than others, offering an imbalanced representation. For example, one member of D.R.U.M. Club who always seemed to enjoy himself, whose parents confirmed his enjoyment, and whose global self-worth scores increased from pretest to posttest, reported on the written response sheet that he simply “had to wast [his] recese” [sic]. Although he may have felt this way, he probably also felt that he gained some things by being involved in the club. Had I been interviewing him in person, I would have asked about these things too, in order to make his answer more complete and accurate.

*Limitations of Intervention*

The fact that this treatment failed to raise self-esteem significantly more than the control group (as measured quantitatively) should not be taken as a sign that all music-based intervention programs will have similar results, especially when targeting individuals who value musical involvement. In fact, the qualitative component of this study showed that the children in the treatment group valued their experiences in D.R.U.M. Club, but that they were perhaps failing to connect the competencies gained
through involvement to situations in the rest of their lives. For example, the participant who reported appreciating D.R.U.M. Club involvement because “it got me off the subject of school” apparently did not recognize that the competencies addressed through D.R.U.M. Club could be related to those needed for scholastic competence (e.g., memorization of rhythmic patterns and performance forms may exercise some of the same skills that are used to make sense of other school subjects). Transfer is not automatic. Teachers must plan instruction that helps students connect important ideas from one setting to the support of values or goals in other settings (Duke, 2005), which is something I tried to do in my final newsletter to the students and parents (see Appendix F), but did not focus on throughout the instructional process. The lack of transfer made by the D.R.U.M. Club participants could be one of many possible explanations for the lack of changes in mean scores from pretest to posttest and the disconnect between the quantitative and qualitative results in this study.

Despite the quality of the intervention, the subjects’ participation in the treatment was probably not central to their lives (i.e., the number of hours spent in D.R.U.M. Club per week was relatively small when compared with the time participants spent in other social and competence-demanding situations involving siblings, peers, parents, and teachers), but instead a minor influence in the way they felt about themselves. The goal for music educators may be to positively affect student self-esteem within the treatment (i.e., classroom) setting, in which case, treatments similar to this one may be effective. However, for self-esteem related strides made within this treatment setting to be far-reaching, the participants would have had to identify themselves with their “D.R.U.M. Club self” more than any of the selves lived out in other situations. This may have
required a more intense treatment that started at an earlier age and lasted throughout the years in which self-esteem is developed. In other words, although individualized interventions in a group setting can be effective even for adults (Mruk, 2006), self-esteem may be more difficult to change through a school-based group intervention once children have reached upper elementary. Therefore, the treatment may need to begin at an earlier age, when self-esteem is less fully developed. In future research studies, then, treatments of different lengths and intensities should be devised to determine the possible changes in effects on self-esteem.

I directly observed what might have been the ramifications of the “D.R.U.M. Club self” not being central to my participants lives. After a successful performance, for example, a D.R.U.M. Club member who had the overall lowest global self-worth score of any of the subjects at pretesting was helping me clean up when his older sibling came into the room and made typical, sophomoric comments about his younger brother. D.R.U.M. Club was reportedly especially important to this student. In conversation, his parent, who was very involved in the lives of both children, spoke of evidence of his eagerness to perform, including his extraordinarily early waking time and his choice of professional attire on performance days. This participant’s individual global self-worth score increased from pretest to posttest. Despite how competent and worthy this participant had felt minutes before his interaction with a sibling, though, such simple negative remarks from someone in a position of influence could tear down any strides that had just been made in the subject’s self-esteem. Similar situations were undoubtedly taking place in the lives of nearly all of my subjects. Other examples include a participant who, although keeping up in D.R.U.M. Club, was making failing marks in school and the
possibility of negative interactions with peers or authority figures in and out of school (even during involvement in other musical settings or during unstructured D.R.U.M. Club time, such as the travel time to or from the host school for our celebration day). Perhaps instead of an enhancement program, then, D.R.U.M. Club served as a maintenance program or a small bright spot in each week of these young people’s lives.

The faculty at this treatment school enjoyed D.R.U.M. Club performances. They showed that they valued what the participants were accomplishing by taking pictures and making positive comments and observations to the students themselves and to me. They were especially excited by the involvement and high quality of participation that was enjoyed by a participant with a physical handicap, which normally might decrease his chances of involvement in such physically oriented tasks. However, understandably, faculty members valued the structure and content of their school days without D.R.U.M. Club so much that they became hesitant to let go of their students even during study hall and recess times, which are also important. This attitude of reluctance from the teachers could not have been lost on the students in the club, who because of their age have heightened sensitivity to how they think they are being perceived. In the future, teachers’ attention could be drawn to the less obvious benefits of musical interventions by asking them to look for differences in student attitudes and behaviors. Their responses could also be used to enhance qualitative data.

Any variable, albeit similarly small, could have influenced the survey scores and interview responses. By changing any of this intervention’s variables alone or in any combination in future research designs, or by recognizing other factors that may contribute to self-esteem development and including provisions for those, different
findings may result. More clarity may also be shed on these findings in the future by replicating the method used in this study, but then determining whether treatment group members show increased scores in any domains that they report caring about individually. These findings would allow researchers to make more certain recommendations about the possible usefulness of group interventions. Finally, since the results of this study suggest that self-esteem intervention programs may need to be individualized based on a person’s self-esteem strengths and weaknesses, or that interventions may need to be administered to groups with common interests and values in order to be effective, the next step in determining this possibility through research might simply be to set up a study similar to this one in every way except assigning children to the control and treatment groups, which should be done on the basis of whether they are interested in music or not.

Implications for Music Education

Despite the support this study offered for the null hypothesis, that D.R.U.M. Club involvement would not significantly enhance students’ self-esteem as measured by the mean global self-worth scores of Harter’s (1985) *What I Am Like* self-esteem profile for children, this treatment may have been effective in raising the self-esteem levels of some individuals. Furthermore, despite any challenges caused by participation in D.R.U.M. Club that might usually have negative effects on self-esteem (e.g., musical involvement was not valuable to every member of the treatment group, participants may have had negative perceptions of feedback from influential people in their lives such as jealous peers who joked about “Dumb Club” involvement, and participants missed recess and study hall time), the treatment group’s mean scores did *not* significantly drop from pretest
to posttest. Thus, the treatment may have been responsible for raising self-esteem enough to compensate for these negative influences, maintaining the self-esteem levels of the treatment group as a whole. An implication for music education, then, is that even if students are asked to miss other important parts of their school day like recess and study hall, participation in an ensemble like D.R.U.M. Club should not negatively affect group self-esteem, and it may have a positive effect on the self-esteem levels of some students.

As Harter (1999) posits, “a focus on the relationship between self-evaluations and the importance of corresponding domains can provide critical insights into precisely where and how one should intervene to enhance the self-worth of individuals lacking a sense of personal esteem” (p. 155). If music is an area of importance to students who do not feel highly competent in it, then interventions like this one could be effective in authentically enhancing those students’ self-esteem by reducing the discrepancy between their musical aspirations and their perceived adequacy. Future studies could test the effectiveness of an intervention similar to this one when used with individuals who value musical achievement as compared to those who do not. The present study suggests that unless individualized, the intervention would not lead to group gains in self-esteem. More effective approaches would be tailored to individuals and their expressed interests.

Another implication for music education is that a focus on self-esteem enhancement should be apparent to children involved in musical interventions. As discussed previously, transfer of skills (not only those developed in this intervention, but many that align with goals of the National Standards for Music Education) from the music classroom to other situations of importance can take place, but these opportunities may need to be made explicit to children. After performing a meta-analysis of self-esteem
intervention programs for children and adolescents, Haney and Durlak (1998) concluded that it is possible to improve self-esteem levels and other areas of adjustment, but that treatments were significantly more effective in doing so when they were clearly focused on self-esteem enhancement rather than other aspects of life. This conclusion supports Mruk’s (2006) intervention design for adults, in which it is no secret that self-esteem enhancement is the goal of participation.

Educational interventions, musical and otherwise, have only recently begun to shift from one-factor to two-factor approaches to defining self-esteem. In years past, educational intervention programs may have been limited in effectiveness due to the lack of a comprehensive understanding of self-esteem or to reliance on assumptions about the positive effects of music involvement that were not empirically tested (see, for example, Trusty & Oliva, 1994 and Warner, 1999). In other words, educational researchers may have provided interventions full of feel-good activities, rather than working to build actual competence. If exclusively worthiness-based, these feel-good activities could result in what looks to be increased self-esteem, when really, both factors of self-esteem have not been enhanced. To overcome these limitations, the educational intervention would need to address competence and worthiness, a process that might yield more promising results in educational self-esteem research (see, for example, Hoban & Hoban, 2004; Miller & Daniel, 2007; and Shields, 2001).

This focus on the two factors of self-esteem combined with the understanding that individual attention is key to self-esteem intervention explains why using music education, or any other single modality, to enhance self-esteem is more complex than music education literature suggests. In the future, when working to enhance self-esteem
in children who are struggling (as determined by Harter’s self-esteem measure and interviews for defensiveness), facilitators should consider involvement in an ensemble such as D.R.U.M. Club as an intervention only if the children value music or desire structured interaction with others. School personnel should take responsibility to identify individual children’s values and guide them toward involvement in relevant activities based on those values. This process might result in more effective fostering of authentic self-esteem development in the educational setting.
REFERENCES


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Solomon, J. (2007, July). *Orff-Schulwerk level I certification course: Goals and


Dear Parents,

I am a second year graduate student at BGSU, majoring in music education. I teach elementary music methods to undergraduate students at BGSU and elementary music at the Montessori School of Bowling Green. This fall, I am working on my thesis and your principal and teachers have agreed to let me ask permission from you for your child’s participation in my study. The purpose of my project will be to determine whether participation in a musical ensemble will prompt changes in children’s answers to a self-perception survey.

Your consent will allow me to survey your child using Harter’s (1985) *What I Am Like*, a self-perception profile for children. This measurement has no right or wrong answers, and your child’s scores will be kept confidential. Following this initial survey, I will invite select students to join D.R.U.M. Club (Discipline, Respect, and Unity through Music), which will meet twice a week during the students’ study hall time. Students in this club will gain musical competence by learning a variety of percussion ensemble pieces, which they will regularly demonstrate in performances for family, friends, and peers. Information about the club and consent forms for parents and students will be sent out in two weeks. After nine weeks, I will administer the *What I Am Like* survey again to all students whether or not they took part in D.R.U.M. Club. All subjects will take part in their regular school activities including music class, and deciding to participate in my study or not will not impact grades, class standing, or relationships with ________ Elementary or BGSU. Data from the pre- and post-surveys will be analyzed to determine whether participation in D.R.U.M. Club prompts changes in children’s responses to the survey. No children will be named in my actual thesis and all children are free to withdraw from the study at any time.

My research will be carried out under the supervision of Dr. Joyce Gromko. You can feel free to direct questions about this study to me at jmarlin@bgsu.edu or by calling (419)494-9317, or to Dr. Gromko at jgromko@bgsu.edu or by calling (419)372-2005. You may also contact the Chair of BGSU’s Human Subjects Review Board at (419)372-
7716 with any questions or concerns about participant rights. Thank you for your support and your child’s participation.
Sincerely,
Jennifer Lucas
Graduate Student in Music Education

We approve of our child’s participation in the research study that will be completed at _______ Elementary School in Fall 2007 with Jennifer Lucas. We have been informed that data used in analyses will be confidential. We have been informed that our child’s participation in the research study is purely voluntary and free. We have been informed that we or our child may decide to stop our involvement at any time without consequence. We have been informed that we can ask questions at any time and that Mrs. Lucas will meet with us privately if we would like.

Signature of Parent:________________________________________________________
Date:_____________________________
Name of Child:___________________________________________________________
Dear Fifth and Sixth Graders,

I am Mrs. Jenni Lucas, a student at BGSU—you can call me “Miss Jenni.” I am an elementary music teacher in Bowling Green and this fall, I am going to be doing a project at your school. I want to find out how being involved in music makes students like you feel.

If you sign up to be in my project, I will be giving you a survey during study hall one day. This survey asks questions about what you are like, and there are not any right or wrong answers. I will be the only person who knows how you answer the survey. After this survey, I’ll invite some of you to join my D.R.U.M. Club (Discipline, Respect, and Unity through Music), which will meet twice a week during your study hall time. In this club, you’ll get better at music and you’ll get to put on performances for your family and friends. If you’re selected for the club, you’ll get another letter in two weeks. After our club is over, whether or not you were in it, I’ll give you the survey again.

If you decide to be in my study, you’ll still be in all of your classes (including music) and if you decide not to be in it, you won’t be punished at all. In the paper I write about my project, I will not use any of your names, and if you join, you are free to quit any time you want.

If you have any questions, your parents know how to contact me. Thank you for helping me with my project—I look forward to meeting and working with you!

Sincerely,

Jennifer Lucas
Graduate Student in Music Education
Dear Parents,

Your child has been chosen to be in an elite musical ensemble for ten weeks! In this club, called “D.R.U.M.,” students will get to know and make music with other 5th and 6th graders. They will practice on Mondays and Thursdays from 2:30 to 3:05 (during their regular study hall), and they will take part in three performances. Practices begin on Monday, October 1. Students who sign up for our club are encouraged to attend every rehearsal and performance possible, but don’t hesitate to sign your child up because of a few time conflicts. Participation in the club is free of charge!

Performance Schedule:
November: _______ High School Auditorium
December: Field Trip
Transportation information and performance details will be sent home before each performance.

Thank you for your continued support of my graduate work!
Sincerely,

Jenni Lucas
Graduate Student in Music Education

Yes! My child will be in D.R.U.M. Club!
Signature of Parent: _____________________________________________________
Date: ________________________________________________________________
Name of Child: ________________________________________________________
Telephone Number: ____________________________________________________
Congratulations! You’re Invited to Join

D.R.U.M. Club!

Director: Miss Jenni Lucas

Who? Selected 5th and 6th Grade Students

What? Percussion Practices and Performances

Where? _______ High School Auditorium

When? Mondays and Thursdays During Study Hall

Cost? Free!

What do I get to keep? CD-Rom with video footage of our club!

The name of our group is D.R.U.M.

D stands for Discipline. People with self-discipline are stronger.

R stands for Respect. People with self-respect make good decisions. People who respect others and themselves make the world a better place.

U stands for Unity. We work together. Say “we,” not “I.”

M stands for MUSIC!

Yes! Sign me up for D.R.U.M. Club!

Signature of Student: _____________________________________________________

Date: ___________________________________________________________________
APPENDIX B. WHAT I AM LIKE SURVEY SCORING GUIDE

What I Am Like

<table>
<thead>
<tr>
<th>SCORING KEY</th>
</tr>
</thead>
</table>

**SELF-PERCEPTION PROFILE FOR CHILDREN**  
(Revision of the Perceived Competence Scale for Children)  
*Susan Harter, Ph.D., University of Denver, 1985*

<table>
<thead>
<tr>
<th>Item</th>
<th>Score 1</th>
<th>Score 2</th>
<th>Description</th>
<th>Score 3</th>
<th>Score 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>4</td>
<td>3</td>
<td>Some kids feel that they are very good at their school work</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><em>BUT</em> Other kids worry about whether they can do the school work assigned to them.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>1</td>
<td>2</td>
<td>Some kids find it hard to make friends</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><em>BUT</em> Other kids find it's pretty easy to make friends.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>4</td>
<td>3</td>
<td>Some kids do very well at all kinds of sports</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><em>BUT</em> Other kids don't feel that they are very good when it comes to sports.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>4</td>
<td>3</td>
<td>Some kids are happy with the way they look</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><em>BUT</em> Other kids are not happy with the way they look.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>1</td>
<td>2</td>
<td>Some kids often do <em>not</em> like the way they behave</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><em>BUT</em> Other kids usually <em>like</em> the way they behave.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>1</td>
<td>2</td>
<td>Some kids are often <em>unhappy</em> with themselves</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><em>BUT</em> Other kids are pretty <em>pleased</em> with themselves.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>4</td>
<td>3</td>
<td>Some kids feel like they are <em>just as smart as</em> as other kids their age</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><em>BUT</em> Other kids aren't so sure and <em>wonder</em> if they are as smart.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td>4</td>
<td>3</td>
<td>Some kids have <em>a lot of</em> friends</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><em>BUT</em> Other kids <em>don't have</em> very many friends.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Really True for me</td>
<td>Sort of True for me</td>
<td>BUT Other kids feel they are good enough at sports.</td>
<td>Sort of True for me</td>
<td>Really True for me</td>
</tr>
<tr>
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<tr>
<td>9</td>
<td>1</td>
<td>2</td>
<td>Some kids wish they could be a lot better at sports</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>10</td>
<td>4</td>
<td>3</td>
<td>Some kids are happy with their height and weight</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>11</td>
<td>4</td>
<td>3</td>
<td>Some kids usually do the right thing</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>12</td>
<td>1</td>
<td>2</td>
<td>Some kids don’t like the way they are leading their life</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>13</td>
<td>1</td>
<td>2</td>
<td>Some kids are pretty slow in finishing their school work</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>14</td>
<td>1</td>
<td>2</td>
<td>Some kids would like to have a lot more friends</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>15</td>
<td>4</td>
<td>3</td>
<td>Some kids think they could do well at just about any new sport activity they haven’t tried before</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>16</td>
<td>1</td>
<td>2</td>
<td>Some kids wish their body was different</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>17</td>
<td>4</td>
<td>3</td>
<td>Some kids usually act the way they know they are supposed to</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>18</td>
<td>4</td>
<td>3</td>
<td>Some kids are happy with themselves as a person</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>19</td>
<td>1</td>
<td>2</td>
<td>Some kids often forget what they learn</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>20</td>
<td>4</td>
<td>3</td>
<td>Some kids are always doing things with a lot of kids</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Really True for me</td>
<td>Sort of True for me</td>
<td>BUT</td>
<td>Other kids don’t feel they can play as well.</td>
<td>Really True for me</td>
</tr>
<tr>
<td>---</td>
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<td>---------------------------------------------</td>
<td>-------------------</td>
</tr>
<tr>
<td>21.</td>
<td>4 3</td>
<td></td>
<td></td>
<td>Some kids feel that they are better than others their age at sports</td>
<td>2 1</td>
</tr>
<tr>
<td>22.</td>
<td>1 2</td>
<td></td>
<td></td>
<td>Some kids wish their physical appearance (how they look) was different</td>
<td>3 4</td>
</tr>
<tr>
<td>23.</td>
<td>1 2</td>
<td></td>
<td></td>
<td>Some kids usually get in trouble because of things they do</td>
<td>3 4</td>
</tr>
<tr>
<td>24.</td>
<td>4 3</td>
<td></td>
<td></td>
<td>Some kids like the kind of person they are</td>
<td>2 1</td>
</tr>
<tr>
<td>25.</td>
<td>4 3</td>
<td></td>
<td></td>
<td>Some kids do very well at their classwork</td>
<td>2 1</td>
</tr>
<tr>
<td>26.</td>
<td>1 2</td>
<td></td>
<td></td>
<td>Some kids wish that more people their age liked them</td>
<td>3 4</td>
</tr>
<tr>
<td>27.</td>
<td>1 2</td>
<td></td>
<td></td>
<td>In games and sports some kids usually watch instead of play</td>
<td>3 4</td>
</tr>
<tr>
<td>28.</td>
<td>1 2</td>
<td></td>
<td></td>
<td>Some kids wish something about their face or hair looked different</td>
<td>3 4</td>
</tr>
<tr>
<td>29.</td>
<td>1 2</td>
<td></td>
<td></td>
<td>Some kids do things they know they shouldn’t do</td>
<td>3 4</td>
</tr>
<tr>
<td>30.</td>
<td>4 3</td>
<td></td>
<td></td>
<td>Some kids are very happy being the way they are</td>
<td>2 1</td>
</tr>
<tr>
<td>31.</td>
<td>1 2</td>
<td></td>
<td></td>
<td>Some kids have trouble figuring out the answers in school</td>
<td>3 4</td>
</tr>
<tr>
<td>32.</td>
<td>4 3</td>
<td></td>
<td></td>
<td>Some kids are popular with others their age</td>
<td>2 1</td>
</tr>
<tr>
<td></td>
<td>Really True for me</td>
<td>Sort of True for me</td>
<td></td>
<td>Really True for me</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>-------------------</td>
<td>---------------------</td>
<td>---</td>
<td>-------------------</td>
<td></td>
</tr>
<tr>
<td>33.</td>
<td>1 2</td>
<td>Some kids don't do well at new outdoor games</td>
<td>BUT</td>
<td>Other kids are good at new games right away.</td>
<td></td>
</tr>
<tr>
<td>34.</td>
<td>4 3</td>
<td>Some kids think that they are good looking</td>
<td>BUT</td>
<td>Other kids think that they are not very good looking.</td>
<td></td>
</tr>
<tr>
<td>35.</td>
<td>4 3</td>
<td>Some kids behave themselves very well</td>
<td>BUT</td>
<td>Other kids often find it hard to behave themselves.</td>
<td></td>
</tr>
<tr>
<td>36.</td>
<td>1 2</td>
<td>Some kids are not very happy with the way they do a lot of things</td>
<td>BUT</td>
<td>Other kids think the way they do things is fine.</td>
<td></td>
</tr>
</tbody>
</table>
### APPENDIX C. SAMPLE LESSON PLAN

<table>
<thead>
<tr>
<th>Learner Objective</th>
<th>Teaching Procedure</th>
<th>Materials</th>
<th>Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Students will:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Perform pat-clap-snap-snap ostinato; speak chorus in rhythm; perform own name in a unique way, and listen to and imitate others' performances.</td>
<td>1. Greeting: “Tell Me Do” name game. T begins pat-clap-snap-snap ostinato and echo teaches the chorus, “Tell me, tell me do, tell me your name and I’ll say it too!” T invites students to join in the ostinato and chorus, then to introduce themselves with creative inflection, timbre, rhythm, or dynamics, which everyone will imitate exactly. After every five students, repeat the chorus. D.R.U.M. Club Lessons (1998)</td>
<td>Teacher will assess: 1. Visually and aurally for ostinato, vocal creativity, and imitation.</td>
<td></td>
</tr>
<tr>
<td>3. Identify rhythmic differences, clap the rhythm of m. 4, chant the words with clear pronunciation in rhythm.</td>
<td>3. Preparation: (sitting in pretzel shape) T asks Ss to identify the measure that has a rhythm different than the other measures, then speaks Peter, Peter in rhythm. Ss identify m. 4 and T echo claps that rhythm, then echo speaks that rhythm. T echo teaches words in rhythm to all of Peter, Peter, phrase by phrase. When words are learned, T and Ss chant together, patting the way the words go.</td>
<td>3. Visually for coordination in clapping and patting; aurally for rhythmic precision and clear pronunciation of the rhyme.</td>
<td></td>
</tr>
<tr>
<td>4. Chant rhyme in rhythm with clear pronunciation, clap on bass beats, pat the way the words go, emphasizing bass beats with hands and voices.</td>
<td>4. Presentation: T and Ss chant rhyme, T claps on bass beats. Ss join in, clapping on bass beats. T and Ss go back to patting the way the words go, but move from thighs to knees on bass beats. 5. Conga drums</td>
<td>4. Visually and aurally for clapping and patting accurately; aurally for speaking in rhythm with clear pronunciation.</td>
<td></td>
</tr>
<tr>
<td>5. Chant rhyme in rhythm continuously, using body percussion while in line and playing tones and basses in rhythm on the congas four times through when it’s their turn.</td>
<td>5. Practice: Ss line up behind conga drums, transferring the pots on thighs to tones and the pots on knees to basses. After playing and speaking four times, Ss switch spots with the players behind them. When not at an instrument, Ss continue using body percussion and speaking. T will lead the rhyme, body percussion or steady beat, and call for partners to switch spots until everyone has had a turn at a conga drum.</td>
<td>5. Visually and aurally for coordination of body and conga percussion, rhythmic speaking, and turn taking.</td>
<td></td>
</tr>
<tr>
<td>6. Read four new rhythms in ta language, perform at least two different instrumental parts in relation to the rest of the ensemble, improvise or choreograph musically, accurately adhere to form.</td>
<td>6. Representation: T shows a chart with the conga pattern that we know in relation to unpitched percussion parts. Ss speak maraca, cowbell, guiro, and bass drum parts in ta language before choosing the instruments of their choice and performing. T cues Ss to create form: Intro—layer in 2 m. intervals, A—everyone plays 4 times, B—conga improvisations with accompanying parts, A—repeat, B—repeat, A—repeat. Ss are allowed to trade instruments with a friend before running the musical event again; unpitched instrument players choreograph motions for final rehearsal. 6. Conga drums, bass drum, shakers, cowbell, guiros, and claves</td>
<td>6. Visually and aurally for coordination and accuracy of percussion, accuracy of music reading and form performance, and musicality of improvisation and</td>
<td></td>
</tr>
</tbody>
</table>

**D.R.U.M. Lesson Plan**

Name: Miss Jenni  
Grade level: 5 & 6  
Concept of focus: Rhythms happen in relation to a steady beat.  
Demonstrations of concept formation: Students will demonstrate their abilities to keep steady beats with body and instrumental percussion; to imitate, echo, read, and perform rhythms; and to play independent parts as an ensemble in relation to a steady beat.
7. Perform the arc motion with the right arm to the steady beat, moving the rocks from their own left knees to their neighbor’s left knees, then pick up a clapping pattern that compliments the song.

8. Rhythmically echo the goodbye while keeping a steady stomp-clap ostinato.

7. Familiar Activity: Tu! Tu! Gbovi. Ss will sit in a single line, passing rocks to the steady beat of the song. When they are out of rocks, Ss will clap one of two rhythms that compliment the ongoing song.


8. Visually and aurally for steady ostinato, body coordination, and rhythmic echoing.

7. Visually for coordination; aurally for passing and clapping as an ensemble.

choreography.
III. Alpha Three

Jim Solomon

A  \[4/4\]

\[\text{SN} \hspace{1cm} \text{CL} \hspace{1cm} \text{P} \]

\[\text{To B} \hspace{1cm} \text{To C} \hspace{1cm} \text{Fine} \]

B

C

Form: ABACA

A section: Establish the meter and tempo by moving in threes before beginning the A section. Have students take a step on beat one of each measure of the music that you play for them. Then practice the \[\text{clap panch panch \underline{panch}}\] pattern. Perform the A section and have students identify how many times that pattern occurs. Ask them to perform only that pattern with you the four times it occurs. After they can do this, they can easily add the rest.
IV. Dolphinaris Rondo

Jim Solomon

A

CL
\[ \frac{3}{4} \]
P
\[ \frac{4}{4} \]

To B

To C

Fine

B

CL

P

To A

C Walk forward and back or in a circle.

CL

ST

To A

Form: ABACA

A section: Practice the pattern in measure three. Perform A section for students and have them identify where it occurs. Then proceed to learn the whole A section from the beginning.

C section: Perform for students, then have them walk \( \uparrow \uparrow \uparrow \), etc., while you echo speak the rhythm. Add the rest of the body percussion measure by measure.
An Ewe Cradle Song with rhythmic accompaniment

Tu! Tu! Gbôvi

Tu! Tu! Gbôvi.
Tu! Tu! Gbôvi.
Da-da me! a-fea me o.
Na-na me! a-fea me o.

A-o, ḍe-ḱe- vi, nyo bo nu bo nu kpo'o.
Ve-ka fo wo?
Po-lu-vi, yea?
Tu ta ne mu-fui rawô.
A-o vi nye me-ga-fa vi o.
A-o ḍe-de- vi, nyo bo nu bo nu kpo'o.

Tu! Tu! Gbôvi.
Tu! Tu! Gbôvi.
Da-da me! a-fea me o.
Na-na me! a-fea me o.
Ao, ḍe-devi yye, bo-nu, bo-nu kpo'o.
Meka fa wô?
Po-lu-vi, yea?
Tu ta, ne mu-fui rawô.
Ao, vi nye me-ga-fa vi o.
Ao, ḍe-devi, bo-nu, bo-nu kpo'o.

Away, away, little goat,
Away, away, little goat.
Grandma is not at home.
Oh, my little child, keep quiet.
Who spanked you?
Is it little Paul?
S Pitt and let me spank him for you,
Oh, my child, don't cry.
Oh, my poor child keep quiet.
MONKEY MONKEY MOO
Traditional
Arranged by Jim Solomon

Recommended grade level: 2nd, 3rd

\[ \text{\textit{d}} = 92 \sim 108 \quad \text{\textit{T}} = \text{\textit{Tone}} \ (\text{\textit{Open tone}}) \quad \text{\textit{B}} = \text{\textit{Bass}} \]

\[ \text{\textit{T}} \text{ \textit{T}} \text{ \textit{T}} \text{ \textit{T}} \text{ \textit{B}} \quad \text{\textit{T}} \text{ \textit{T}} \text{ \textit{T}} \text{ \textit{T}} \text{ \textit{B}} \]

\text{Conga}

\text{Mon-\-key mon-\-key moo!}

\text{Shall \ we \ name \ a \ few?}

\[ \text{\textit{T}} \text{ \textit{T}} \text{ \textit{T}} \text{ \textit{T}} \text{ \textit{T}} \text{ \textit{T}} \text{ \textit{T}} \text{ \textit{T}} \text{ \textit{T}} \text{ \textit{T}} \text{ \textit{T}} \text{ \textit{T}} \text{ \textit{B}} \]

\text{Yellow \ mon-\-keys, \ purple \ mon-\-keys, \ mon-\-keys \ red \ and \ blue!}

**FORMS:**

A Section - Play all parts 1x
B Section - Only accompanying parts play
(use "inner hearing" to know when Ratchet, Vibraslap, and Cymbal play)
A Section - Play all parts 1x

Another option for the form is to have all parts played 2x or 4x, then use accompanying parts 1x as an interlude before repeating all parts again.

**ACCOMPANYING PARTS:**

- **Ratchet**
- **Vibraslap**
- **Cymbal**
- **Bass Drum**

**TEACHING SUGGESTIONS:**

Rhythm of Rhyme: 1) Ask students what colors they hear, then speak the rhyme. 2) Show a chart. Mark words where bass is played with a "\textit{B}." Speak rhyme again and clap on basses. 3) Students speak rhyme and clap on basses. 4) Patsch rhythm of entire rhyme. 5) Play on drums.

Play Ratchet on first rest in the rhyme, Vibraslap on the second rest, and Cymbal on the last rest.

When students are secure with the rhythm, teacher can add Cowbell: \textit{\textbullet} \textit{\textbullet} \textit{\textbullet} \textit{\textbullet}
**TINY SURFER**
Traditional
Arranged by Jim Solomon

Recommended grade level: 2nd, 3rd, and 4th

\[ \text{Tempo: } 100 - 112 \]

T = Tone (Open tone)  B = Bass

Tiny surfer, bold and brave, surfed up on a microwave.

---

**FORM:**
A Section - Play 2x
B Section - Accompanying parts 2x
A Section - Repeat

Have students suggest their own form.

---

**ACCOMPANYING PARTS:**

- Maracas
- Cowbell
- Hand Drum
- Bass Drum
PETER, PETER IF YOU'RE ABLE

Traditional
Arranged by Jim Solomon

Recommended grade level: 4th and older

\[ \begin{array}{c}
\text{T = Tone (Open tone) } B = \text{ Bass} \\
\end{array} \]

\[ \begin{array}{c}
\text{Conga} \\
\text{Peter, Peter, if you're able, get your elbows off the table.} \\
\text{This is not a horse's stable, but a riz-y din-ing ta-ble.} \\
\end{array} \]

FORM:
A Section - Play 4x
B Section - Improvise with accompanying parts
A Section - Repeat
B Section - Repeat
A Section - Repeat with Cowbell pattern #2

ACCOMPANYING PARTS:

Maracas

Cowbell

Guiro

Bass Drum

Cowbell pattern #2:

TEACHING SUGGESTIONS:

Rhythm of Rhyme: 1) Teach rhythm of 4th measure first. All instruments will play in unison on 4th measure.
APPENDIX E. CONCERT PROGRAMS

**DRUM Club Performance**
November 1, 2007
Kindergarten Audience

-Program-
Alpha 3
Tu! Tu! Gbovi
Pass the Stick
Dolphinarts

**DRUM Club Performance**
November 15, 2007
First and Second
Grades

-Program-
Alpha 3
Tu! Tu! Gbovi
Dolphinarts
Tiny Surfer
DRUM Club Performance
November 26, 2007
Third and Fourth
Grades

-Program-
Alpha 3
Stick Game
Tu! Tu! Gbovi
Tiny Surfer
Monkey Moo
Peter, Peter
Dolphinarts

DRUM Club Performance
December 6, 2007
Family and Friends

-Program-
Alpha 3
Stick Game
Tu! Tu! Gbovi
Tiny Surfer
Monkey Moo
Peter, Peter
Ben's Bolts
Dolphinarts
DRUM Club Field Trip
December 7, 2007
Community Building and
Celebrating Music

-Program-
Tell Me Do
Alpha 3
Alpha 3 in Canon
Stick Game
Obwisana
Tu! Tu! Gbovi
Tiny Surfer
Monkey Moo
Mixolydian Piece
Canon
Ben's Bolts
Peter, Peter
Dolphinarts in Canon
D.R.U.M. Club is up and running! I would like to thank you again, parents, for allowing your children to participate in our club, and students, for giving up your recess time and for your hard work. It is paying off!

During our rehearsals, which last for about 40 minutes on Mondays and Thursdays, we have been gaining focus and working on our coordination by playing passing games in a circle with rocks and sticks. We have learned two percussion ensemble pieces so far, called “Peter, Peter” and “Soda Pop.” We also know a rondo called “Alpha Three,” which uses body percussion, and we’re in the process of learning another body rondo called “Dolphinarts.” Each student plays a different percussion instrument for each piece. Parents, ask your children to demonstrate what they’ve learned so far! They should be proud of their accomplishments!

Our first performance will be this Thursday, November 1, during the students’ study hall time. We will perform for Mrs. ______ kindergarten class! Students, remember to arrange your SPARKS schedules so you can be at the performance. At our last rehearsal, we voted on performance attire, and we decided that we should all wear blue jeans with solid, bright colored shirts. If you don’t have a bright shirt, any solid one will do. I will bring a few extras on Thursday, but try to remember to bring your own. Congratulations on everything you have learned so far!
Our first performance was a success! The club worked hard to prepare, and we were able to show the kindergarteners four of our pieces. Parents, ask your children to show you their programs! Because we enjoyed performing so much, we’ve decided to do it again next week. Thursday, November 15, we will be performing for the first and second grades in the high school auditorium during the students’ study hall time. Club members should again wear bright, solid colored shirts with jeans. Congratulations, DRUM Club!
Our final event will take place on Friday, December 7. At 8:15 a.m. Immediately following Doughnuts for Dads, our D.R.U.M. Club will load a bus and head to the __________ School of __________, where we will make music with and perform for the fourth, fifth, and sixth graders at the school. The __________ students will perform music for the D.R.U.M. Club as well. Mrs. _____ will be attending this performance with us. We will be back to Old Fort in time for the students' regular lunch at 11:00. Everyone is looking forward to this time of sharing.

For our final performances, students will wear D.R.U.M. Club shirts that will be provided for them. Students should wear blue jeans to school on these days and the shirts will be passed out before we perform. It has been a joy to work with your children. Thank you again, parents, students, and teachers, for making D.R.U.M. Club a success! I look forward to seeing you next Thursday!
I was impressed by the sense of community that developed in our club. The students were respectful and helpful to one another, and I hope that the friendships that they built and strengthened will continue to grow. Parents, encourage your children to transfer the skills that they developed in D.R.U.M. Club to other areas of their lives—the qualities that I've mentioned are valuable in many situations. I think the students deserve to be pleased with themselves overall—they truly demonstrated discipline, respect, and unity through music!

Each club member is bringing home a CD-Rom today, which contains footage from our five performances. In watching the first and last performances, the growth of the club is obvious and impressive. To view this footage, QuickTime must be installed on your computer. For instructions on downloading QuickTime for free, go to http://quicktime.softwarecenterz.com/. Thank you again for the privilege of working with the wonderful students at your school. Happy holidays!

Jenni Lucas
Dear Students,

Thank you for being willing to write welcoming letters to the students who will be visiting us on Friday. I know they will appreciate hearing from you and having a friend to look for when they come will help them to feel less nervous. Our goal for Friday is for us to all celebrate music making as a community with the visiting students. Music is special because it is something we can have in common with people we don’t even know.

In your letters, please let the students know that you’re looking forward to their visit and to hearing their drum ensemble pieces. Tell them something about yourself (what grade you’re in, your name, what you look like, or what instrument you like to play) so they can look for you in the circle and find a friendly face. The visiting students are all in 4th, 5th, or 6th grade, like you. They have only been playing instruments with me for ten weeks. Being a welcoming host or hostess is a very mature job, and I know you will be great at it.

There are seven more _________ students than _________ students, so some of you should sign up to write two letters. Put your name in the box beside the person you will write to. I will pick your letters up tomorrow, Wednesday, between 1:30 and 2:00. I will deliver them to the visiting students on Thursday.

Sincerely,

Miss Jenni
December 4, 2007

Dear,

Hi, my name is
I am a fifth grader. I am looking
forward to meeting you on Friday. I
have blond hair and blue eyes. I think
I am tall. I love to play sports. I am
in the front row and in the back row
during the performance. Thanks again
for coming. I hope you enjoy it.

Sincerely.
December 4, 2007

Dear [Name],

Hi, my name is [Name]. I am looking forward to meeting you on Friday. I am a 4th Year student and I am in the first and third row. I have blonde hair and blue eyes and silver earrings. I have my hair in a ponytail and about 4 feet 11 inches in height. When I am not at school, I play piano, ice skate, and rock climb. Oh, and I am a girl. I hope you have fun at our school and you feel welcome. Sincerely,
Dear

Hi, my name is
looking forward to meeting you this bridge.
I am a 4th grader and I play in the
back row. I have light brown hair and
brown eyes. And I have white skin. My
hobbies are dancing and cross country, and
I love animals. Thank you for coming.
And I hope you enjoy it!!

Sincerely,

\[\smiley\]

P.S. hope you feel welcome
and I am a girl.
Dear,

Hi! My name is [Name], and I am in 6th grade. I am looking forward to meeting and hearing your group on Friday.

You will see me directing Alpha 4 and also being in rows one and two for our musical pieces. I have dark brown hair, hazel eyes, and do not have glasses.

Thanks again for coming to our school and can't wait to meet you on Friday.

Sincerely,

[Signature]
APPENDIX H. SEMI-STRUCTURED INTERVIEW QUESTIONS

Name (first and last)_______________________________________________________

Teacher____________________________________ D.R.U.M. Club Member: no

Directions: Think carefully about the answers to these questions, and then write what you think in the spaces provided. If you need more space, you may use the back or add more paper. Please write neatly and answer the questions completely. There are no right or wrong answers, so just be honest. Due Thursday morning, January 17.

1. Did not being in D.R.U.M. Club seem special (extra important or interesting) for you? Circle one: YES or NO

2. If not being in the club was special for you (you circled yes for number one), what made it special for you? If not being in the club was not extra special for you (you circled no for number one), why wasn’t it special for you?

3. What did not being in D.R.U.M. Club mean to you?
Name (first and last)_______________________________________________________

Teacher____________________________________ D.R.U.M. Club Member: yes

Directions: Think carefully about the answers to these questions, and then write what you think in the spaces provided. If you need more space, you may use the back or add more paper. Please write neatly and answer the questions completely. There are no right or wrong answers, so just be honest. Due Thursday morning, January 17.

1. Did being in D.R.U.M. Club seem special (extra important or interesting) for you? Circle one: YES or NO
2. If being in the club was special for you (you circled yes for number one), what made it special for you? If being in the club was not extra special for you (you circled no for number one), why wasn’t it special for you?

3. What did being in D.R.U.M. Club mean to you?