PARENTS' PERCEPTIONS OF SCHOOL PSYCHOLOGISTS' USE OF SOCIAL POWER AND INTERPERSONAL INFLUENCE IN SCHOOL CONSULTATION FOR CHILDREN WITH AUTISM SPECTRUM DISORDERS

by

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ABSTRACT

PARENTS' PERCEPTIONS OF SCHOOL PSYCHOLOGISTS' USE OF SOCIAL POWER AND INTERPERSONAL INFLUENCE IN SCHOOL CONSULTATION FOR CHILDREN WITH AUTISM SPECTRUM DISORDERS

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SETH SEBOLD

Advisor: Professor Ida Jeltova

This study explored parents' attitudes towards school psychologists' use of social power and interpersonal influence in the school consultation process for children with Autism Spectrum Disorders. Previous research has examined school psychologists' perceptions, as well as teachers' perceptions, of social power and interpersonal influence in school consultation, but to date, parents' perceptions in this regard have been given limited attention in the literature. Study questions addressed (a) which social power techniques parents perceived as most effective when used by school psychologists to elicit their compliance, (b) how parents' perceptions of these techniques compared to school psychologists and teachers, whom were both studied previously, (c) whether a soft-harsh, two-factor solution among these power techniques existed among parents, and (d) whether parents' ratings on the soft power techniques predicted ratings of consultant effectiveness and ratings of satisfaction with children's consultation outcome.

One-hundred and sixty-nine parents of children diagnosed with Autism Spectrum Disorders completed measures of social power (IPI-Form CE; Erchul, Raven, & Whichard, 2001), consultant effectiveness (CEF; Erchul, 1987), and satisfaction with their children's consultation outcome (GAS; Kiresuk, Smith, & Cardillo, 1994). Results indicated that parents, like school psychologists and teachers, generally endorsed soft social power strategies, compared to those that are harsh or coercive, with the exception of impersonal reward power, a

traditionally harsh social power strategy. The results of an Exploratory Factor Analysis on the IPI-Form CE did not reveal a clear, soft-harsh, two-factor solution among the social power techniques, as parents' ratings on several of the individual strategies did not completely conform to the expected model structure. In addition, multiple regression models revealed that parents' ratings on positive expert power, one of the five soft power strategies, significantly predicted their ratings of consultant effectiveness, but that no significant relationships existed between parents' ratings on the five soft power strategies and ratings on their satisfaction with their children's consultation outcomes. Implications for school psychologists working with this unique parent population are provided, as well as study strengths, limitations, and suggestions for future research.

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I would especially like to thank every parent that participated in this study for sharing your personal experiences as consultees in the school consultation process. I do hope that this

research may be applied in the everyday practice of school psychology and that it can benefit school psychologist-parent relationships and help improve educational outcomes of children with Autism Spectrum Disorders, for years to come.

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Seth Sebold
East Rockaway, New York
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DEDICATION

This dissertation is dedicated, with love, in memory of my grandmothers, Mildred Sebold and Nan Halpern.

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CHAPTER I

INTRODUCTION

Consultation is an integral component of school psychology graduate training, research, and practice. It is a highly complex interpersonal process (Hughes & Falk, 1981), involving multiple stakeholders in students' lives, and consultants must possess strong collaborative and problem solving skills to promote and effect change (Ysseldyke et al., 2006). Consultation exists in many forms (e.g., mental health consultation, behavioral consultation, conjoint behavioral consultation, instructional consultation, organizational consultation), and two pervasive themes emerging from the different models are relationship building and the maintenance of collaborative relationships between two or more professionals (e.g., the school psychologist as the consultant and the teacher as the consultee) (Fagan & Wise, 2007). This process is unique as it represents an indirect service delivery model, illustrating the paradoxical nature of consultation in school psychology (Gutkin & Conoley, 1990). In essence, school psychologists are dependent on teachers and parents to directly implement their interventions and recommendations in the classroom and home. Accordingly, consultation is viewed as an interpersonal influence process, and school psychologists regularly attempt to influence other adults to adopt various approaches with different students (Hughes, 1992). If such attempts are unsuccessful, student outcomes may be adversely affected.

While consultation is an important job function for the school psychologist, Cummings (2002) stated that the consultant role of the school psychologist fails to be "fully actualized" because of the time demands for assessment of referred students (p. 252). Essentially, assessment practices often supersede consultation practices, particularly when there is a high student-to-school psychologist ratio (Curtis, Grier, & Hunley, 2004; Curtis, Hunley, & Grier,

2002). Survey research has indicated that school psychologists spend over 50% of their time engaging in assessment activities (Reschly & Wilson, 1995). Hosp and Reschly (2002) examined regional differences in school psychology practice and found that school psychologists spend 23% of their 40-hour week engaging in problem-solving and systems/organizational consultation, with no significant regional differences. Regarding preferred roles, these school psychologists reported wanting to spend over 33% of their time consulting, and over 29% of their time directly intervening with students. Similarly, Stoiber and Vanderwood (2008) reported that school psychologists employed in an urban school district value consultation and intervention activities more than traditional assessment activities, despite their greater involvement and higher perceived competence in traditional assessment activities. Reschly (2000) described how in the future, school psychologists will still spend over 50% of their time on assessment, but that assessment will be more intervention-oriented, and that problem solving consultation will increase accordingly. Reducing the disparity between actual time spent in consultation and preferred time spent in consultation may positively affect consultant-consultee relationships, and in effect, facilitate intervention selection, adherence, and fidelity (Telzrow & Beebe, 2002). According to Fagan and Wise (2007), consultation can strengthen the likelihood of optimal services being provided to students.

Research on consultant-consultee relationships, social/interpersonal influence, and its application to school psychology can be traced back over 40 years. Reger (1964) and Rich and Bardon (1964) outlined ways that school psychologists and teachers can build effective professional relationships through cooperation, serving as mutual sources of information, and for school psychologists, acknowledging the strengths and expertise that teachers themselves have. Regarding the importance of school psychologists learning from both teachers and students,

Reger (1964) aptly stated that if the school psychologist "assumes the posture of answer-man and all-around expert, he fails to recognize his own limitations and the wealth of experiences…in front of his eyes" (p. 18). In addition to the wealth of mental health knowledge school psychologists possess, interpersonal skills and mutual respect are imperative to facilitate parent-teacher-child relationships and help students profit most (Lambert, 1973).

The study of interpersonal influence and social power originated within the field of social psychology. French and Raven (1959) authored a seminal paper on *social power*, where they defined that term as, "the maximum potential ability of O (i.e., the social agent) to influence P (i.e., a target individual) in *a* (i.e., a system) (p. 152). *Social influence* (i.e., interpersonal influence) occurs when a social agent effects *psychological change* in a target individual, meaning that the target individual exhibits changes in behavior, opinions, attitudes, or any other relevant area of psychological functioning. In addition to defining these aforementioned terms, French and Raven delineated the following 5 power bases used by social agents: *reward power* (i.e., the promise of reward for change), *coercive power* (i.e., punishment for failure to change), *legitimate power* (i.e., the obligation to comply with the agent because of his or her status or position), *referent power* (i.e., the identification, feeling of similarity, and/or desire to identify with the agent), and *expert power* (i.e., the knowledge or expertise the agent maintains). Raven (1965) added a sixth power base, *informational power* (i.e., the information content provided by the agent itself eliciting change), to the French and Raven (1959) typology. Finally, Raven (1992, 1993) differentiated these social power bases into various forms creating a total of 14 social power bases, along with describing a power/interaction model of interpersonal influence.

The French and Raven (1959) and Raven (1965, 1992, 1993) social power base typology was first applied to school consultation by Martin (1978). In his analysis, Martin singled out

expert and referent power as the only two social power bases utilized by school psychologists to influence the consultees, because school psychologists hold staff positions, and not "line positions." (p. 50). Several studies were conducted during the 1980s and early 1990s elaborating on the usage and promise of expert and referent power specifically (Cienki, 1982; Crowe, 1982; Kinsala, 1985; Kruger 1984; Martin & Curtis, 1980; Roberts, 1985; Short, Moore, & Williams, 1991). Several of these studies were unpublished doctoral dissertations with methodological concerns, and findings were inconsistent. Martin and Curtis (1980), Roberts (1985), and Cienki (1982) found positive relationships between the use of expert and referent power and consultation outcomes. However, Kinsala (1985) found moderate correlations between only referent power and consultation outcome, and Short, Moore, and Williams (1991) found that only expert power (i.e., consultant possessing a doctorate) was linked to consultant effectiveness. The Crowe (1982) and Kruger (1984) studies found no significant connections between expert and referent power and consultation outcome.

When Raven (1992, 1993) expanded the social power base typology and created a power/interaction model of interpersonal influence, a second wave of studies were conducted examining interpersonal influence in school consultation. The impetus for this research was a noteworthy paper by Erchul and Raven (1997) that provided a contemporary view of the French and Raven (1959) and Raven (1965, 1992, 1993) social power model. Erchul and Raven (1997) indicated that additional social power bases may be available to the school psychologist in consultation. This resurgence of research was conducted to understand how school psychologists perceive social power bases in consultation (Erchul, Raven, & Ray, 2001), how both school psychologists and teachers perceive the social power bases (Erchul, Raven, & Whichard, 2001), how gender impacts consultants' perceptions of the social power bases

(Erchul, Raven, & Wilson, 2004), the likelihood of the use of the social power bases (Wilson, Erchul, & Raven, 2008), and how gender of the consultant and consultee affect consultant use of selected social power bases (Getty & Erchul, 2009). These studies answered questions on the promise of particular social power bases, consultant and consultee perceptions of these bases, and the relevance of consultant and consultee gender, but additional research was encouraged to further comprehend how the social power basis typology and interpersonal influence apply to school consultation (Erchul & Raven, 1997; Erchul, Grissom, & Getty, 2008).

While this line of research to this point has focused on perceptions of school psychologists and teachers as members of school consultation dyads, notably missing from the study of social power and interpersonal influence in school consultation is parents' perceptions of their role as consultees. Parents often play an instrumental role in school consultation. Specifically, the behavioral consultation model of conjoint behavioral consultation (CBC; Sheridan & Kratochwill, 2007) is well-known for the vital role that parents play, along with school psychologists and teachers, in all stages of the consultation process to ensure favorable academic, social, and/or behavioral outcomes for their children. The CBC model fits well with ecological approaches in school psychology, which consider the multitude of interrelated systems (e.g., school, home), within which children function (e.g., Anderson, 1983; Sheridan & Gutkin, 2000). The CBC model itself is also well accepted by both parents and teachers as an approach for academic, behavioral, and social-emotional problems (Freer & Watson, 1999), and exploratory research demonstrated school psychologists' very positive support of CBC procedures (Sheridan & Steck, 1995). In addition, research reviews have demonstrated the efficacy of CBC as a parent consultation model, with regard to school-related outcomes (Guli, 2005), as well as in home and school settings (Sheridan, Eagle, Cowan, & Mickelson, 2001).

Since parents, just like teachers, are often involved in planning, implementing, and monitoring interventions for their children, an examination of how they perceive the influence attempts of school psychologists is warranted. Parent perceptions of social power and interpersonal influence in school consultation may be different than those of teachers and school psychologists, and some strategies used by the school psychologist to elicit compliance might be viewed by parents as ineffective, while viewed as effective by teachers. Gaining a better understanding of parents' perceptions of school psychologists' influence attempts can improve collaboration and communication among consultants and consultees, and guide intervention planning and implementation. In the process, school psychologists may become more attuned to the acceptability and maintenance of interventions by parents (e.g., Reimers, Wacker, Cooper, & De Raad, 1992) in order to reduce parental resistance to consultative efforts (e.g., Campbell, 1993). Certain strategies used in influence attempts may also facilitate data collection and promote treatment integrity (e.g., Noell, 2008; Telzrow & Beebe, 2002), in line with best practices.

With this in mind, the present study is designed to contribute to the literature on interpersonal influence and social power in school consultation by examining parents' perceptions of school psychologists' influence attempts. In other words, the primary focus of this study will be on assessing parents in the role of the consultee, as opposed to teachers as consultees, which was done previously (e.g., Erchul, Raven, & Ray, 2001; Erchul, Raven, & Whichard, 2001). In this investigation, a sample of parents with children with Autism Spectrum Disorders would be utilized, as these individuals often work closely with their children's school psychologists and maintain high levels of involvement in their children's education because of their special needs.

Major goals of this study are to determine which specific power bases are reported as the strongest for eliciting this unique group of parents' compliance in school psychologists' influence attempts, and to explore how the social power base ratings correlate with those on two social validity measures (i.e., consultant effectiveness, satisfaction with consultation outcome). An important benefit of completing this investigation is that school psychologists can become aware of which social power strategies are more or less effective to use with parents of children with Autism Spectrum Disorders, to tailor their influence attempts in a more informed manner. Appropriate use of social power bases well-received by these parents may improve family-school partnership building and maintenance, intervention planning, implementation, monitoring, and treatment integrity, and most importantly, students' academic, behavioral, emotional, and/or social outcomes resulting from consultation.

The research questions this study seeks to answer are as follows:

1. Which social power bases from the French and Raven (1959) and Raven (1965, 1992) social power base typology do parents of children with Autism Spectrum Disorders perceive as effective versus ineffective in eliciting their compliance to school psychologists' influence attempts in school consultation?
2. Are these parents' ratings of the social power bases from the French and Raven (1959) and Raven (1965, 1992) social power base typology similar or different to those of school psychologists (Erchul, Raven, & Ray, 2001) and those of teachers (Erchul, Raven, & Whichard, 2001), whom were both studied previously?
3. Does a two-factor solution of soft power bases and harsh power bases exist among this sample of parents, as it did previously for samples of school psychologists (e.g.,

Erchul, Raven, & Ray, 2001) and in supervisor-subordinate samples from organizational field studies (e.g., Schwarzwald, Koslowsky, & Agassi, 2001)?

4. Do these parents perceive positive expert power more favorably than positive referent power, when used by school psychologists, in accordance with Martin's (1978) assertion that internal consultants who have little contact with consultees rely more on expert power in influence attempts, compared to referent power, which must be built up over time?
5. Do these parents' ratings of perceived effectiveness of the soft social power bases from the French and Raven (1959) and Raven (1965, 1992) social power base typology predict parents' ratings on measures of consultant effectiveness, and satisfaction with child outcomes from consultation?

CHAPTER II

LITERATURE REVIEW

This literature review focuses on several topics relevant to school consultation, social power, interpersonal influence, and consultant and consultee perceptions of this process. Definitions of consultation and collaboration are provided to lay the foundation for a description of several prominent models of school consultation. The French and Raven (1959) and Raven (1965, 1992) social power base typology, and power/interaction model of interpersonal influence (Raven, 1992, 1993) are then presented prior to discussing its application to school consultation (Erchul & Raven, 1997; Martin, 1978). Empirical studies stemming from this theoretical work are subsequently analyzed. The measurement of social power and interpersonal influence is described as well. Finally, parent-school partnerships, the acceptability and efficacy of parent consultation, and the characteristics of children with autism are discussed to illustrate the critical role parents play in effecting positive school consultation outcomes. Based on the analysis of the literature, the rationale for the current study is presented, along with research questions and hypotheses that this study will address.

Definitions of Consultation, Collaboration, and the Collaboration Debate

The terms “consultation” and “collaboration” are used by professionals in a variety of settings ranging from large, global corporations to small, non-profit mental health agencies. The following section defines both terms as they pertain to school consultation. The Collaboration Debate (Erchul, 1999; Gutkin, 1999a, 1999b) is also described, which emanated from the lack of a consensus on a unitary definition and role of collaboration in school consultation.

Consultation Defined

The term "consultation" is used widely and represents an important job function throughout many helping professions (Bramlett & Murphy, 1998). Gutkin and Curtis (2009) went so far to state that the term is "used in so many contexts and in reference to so many different types of service relationships that for some it has almost become devoid of meaning" (p. 595). Therefore, it is uncommon to find one single definition of "consultation," with its presence in various professions utilizing various methods of service delivery. Fortunately, several comprehensive definitions of school consultation were provided over the years, reflecting development of the profession and the complexity of the consultant's role (e.g., Erchul & Martens, 2002; Medway, 1979; Zins & Erchul, 2002). The Erchul and Martens (2002) definition of consultation is based on their analysis of critical historical developments from which the consultant role emerged in the human services professions. They define school consultation as follows:

> "School consultation is a process for providing psychological and educational services in which a specialist (consultant) works cooperatively with a staff member (consultee) to improve the learning and adjustment of a student (client) or group of students. During face-to-face interactions, the consultant helps the consultee through systematic problem solving, social influence, and professional support. In turn, the consultee helps the client(s) through selecting and implementing effective school-based interventions. In all cases, school consultation serves a remedial function and has the potential to serve a preventive function" (p. 12).

Key aspects of the definition include references to consultation employing a problem solving framework (i.e., problem identification, plan development, and plan implementation) (Kratochwill, Elliott, & Stoiber, 2002; Schulte & Osborne, 2003), its existence as an interpersonal influence process, and the overarching goals of providing remedial services to students, improving consultee functioning, and fostering prevention (Gutkin & Curtis, 2009). Remediation is a short-term goal that involves tackling students' difficulties in the present, while

prevention is a long-term goal, helping the consultee develop and strengthen his or her problem-solving skills (Bramlett & Murphy, 1998). Furthermore, with regard to this prevention function, the consultant serves to empower consultees, "helping…to clarify needs and locate resources, and…ensure that opportunities are available to enable consultees to engage in self-sustaining behaviors to resolve problems" (Zins & Erchul, 2002, p, 629).

It is important to consider how school consultation is an indirect service delivery model, highlighting the *paradox of school psychology* (Gutkin & Conoley, 1990). Gutkin and Curtis (2009) stated that "indirect service is the single most definitive characteristic of consultation" (p. 595). In practice, school psychologists, as consultants, work with teachers, who are consultees, and thereby help students, who are the clients, *indirectly* (Fagan & Wise, 2007). An additional defining aspect of consultation is that participation is voluntary (Gutkin & Curtis, 2009). Coercing or pressuring a consultee into consultation lessens the likelihood that a productive, collaborative problem solving relationship develops (Fagan & Wise, 2007). Finally, consultation involves working in a team atmosphere, where multiple stakeholders in students' lives contribute, to identify and prioritize students' needs in multiple contexts or systems (Sheridan & Cowan, 2004). This ecological perspective, which "conceptualizes…behavior as a function of ongoing interactions between the characteristics of individuals and the multiple environments within which they function, holds the greatest potential as an effective school psychological service delivery orientation" (Sheridan & Gutkin, 2000, p. 489). This paradigm is applicable to consultation, illustrating the need for consultation relationships to be highly collaborative, and guided by ecobehavioral principles (Zins & Erchul, 2002).

Collaboration Defined

Collaboration is similar to consultation in that there is no consensus on a single definition. In fact, collaboration lacks an operational definition and theoretical basis (Erchul, 1992). In light of this, a defining characteristic of collaboration is a consultant working *together* with a consultee in multiple phases of the problem solving process (Schulte & Osborne, 2003). Allen and Graden (1995), as cited in Bramlett and Murphy (1998), defined collaboration from a problem solving perspective, referring to parents and teachers sharing power and actively engaging in the problem solving process. Erchul (1992) described how collaboration derives its meaning from "cooperation" and "teamwork." This notion of teamwork (e.g., Sheridan & Cowan, 2004) is important to address in discussing collaboration and differentiating the term from consultation. Dougherty (2008), in comparing and contrasting the two terms, stated that "consultation is a 'hands off, helping-the-helpers-help,' indirect process, whereas collaboration is a 'hands on, helpers-helping-one-another,' process, in which the professionals involved provide both indirect and direct service to the client system" (p. 10). Responsibility for the outcome of the case is taken by all professionals involved in collaboration, as opposed to consultation, where the consultant is ultimately responsible for the outcome. This is not to say that the school psychologist, as a consultant, should *not* take on a directive or dominant role under the circumstances. Erchul (1992) concluded that consultant dominance does not necessarily limit collaboration. Still, previous studies (e.g., Wenger, 1979) have shown the promise of collaboration in consultation compared to directive/expert approaches in school consultation.

Much like consultation, collaboration is a major component within service delivery in many helping professions. West (1990) called for improving educational collaboration to

promote and improve educational planning, problem solving, and the educational work environment, and offered the following inclusive definition of educational collaboration:

> "Educational collaboration is an interactive planning or problem solving process involving 2 or more team members. The process consists of up to 8 interrelated progressive steps: goal setting, data collection, problem identification/analysis, alternative solutions development, action plan development, action plan implementation, evaluation/follow-up, and re-design. Team interactions throughout the process are characterized by: mutual respect, trust, and open communication; consideration of each issue or problem from an ecological perspective; consensual decision making; pooling of personal resources and expertise; and joint ownership of the issue or problem being addressed. The outcomes of educational collaboration may focus on changes in knowledge, skills, attitudes, or behaviors at one or more of 3 levels: child, adult, or system" (p. 29).

This definition illustrates the school psychologist and other professionals working together and assuming shared responsibility in a multistep process. Additionally, collaboration during consultation assumes that the consultant and consultee take on equal, complementary roles, where the consultant "actively seeks consultee input on problem definition and plan development" (Schulte & Osborne, 2003, p. 125). Meyers (1995) advised consultants "to implement and maintain a collaborative consultation relationship…by communicating clearly to the consultee that he or she has the freedom to accept or reject any ideas, suggestions, or recommendations…from consultation" (p. 74). This implies that active involvement among consultees increases the likelihood that they implement ideas they play a role in developing.

Collaboration is viewed as a mechanism for social influence (Erchul, Grissom, & Getty, 2008) and a necessary means to cultivate optimal school consultation and service delivery. However, several studies were published challenging the assertion of bidirectional equality and mutuality assumed to be inherent in collaboration. This spawned the Collaboration Debate discussed below.

The Collaboration Debate

Gutkin (1999a) spearheaded a debate on whether consultation is a truly collaborative endeavor versus one that is directive, prescriptive, or expert in nature. Previous commentaries (e.g., Witt, 1990) illustrated difficulties consultants encounter where collaboration is especially challenging, such as when a teacher who refers many students is unwilling to implement any interventions a school psychologist recommends in consultation. Gutkin (1999a) believed that consultants can be both directive and collaborative simultaneously, maintaining their expertise in collaborative, nonhierarchical relationships. He challenged the view that the consultant is inherently directive, using social power to wield influence in a hierarchical manner. Erchul (1999), in a response to Gutkin's (1999a) commentary, described the difficulty in operationally defining collaboration, and espoused the interpersonal nature of the consultant/consultee relationship as one marked by social influence (i.e., direct influence of the consultant). In light of their differing views, both Gutkin (1999b) and Erchul (1999) called for further study of social influence and power in consultation. Some studies at the root of this debate are briefly discussed below.

Gutkin (1996) examined the verbal interactions in consultant-consultee dyads for evidence of communication leadership in initial consultation interviews. Content and process leadership behaviors for both members of the dyad were examined. Content leadership referred to whether the members of the dyad followed the leads of their consulting partner in terms of *what* was said, and process leadership referred to whether the members of the dyad followed the leads of their consulting partner in terms of *how* the problem was discussed. For both consultants and consultees, content leadership was positively related to interview effectiveness. For consultants, but not consultees, process leadership was positively related to interview

effectiveness, with consultees accepting consultant leads more often than consultants accepted consultee leads. In addition, consultees rejected consultant leads significantly less often than consultants rejected consultee leads, while consultants were significantly more likely to reject than accept consultee process leads. The results illustrated the nature of consultation as a shared partnership, where both members of the dyad hold leadership roles jointly and separately.

However, several studies found that *consultant* control and direction during consultation (i.e., not a shared partnership) resulted in successful consultation outcomes (e.g., Erchul, 1987; Witt, Erchul, McKee, Pardue, & Wickstrom, 1991). These studies were conducted using a relational communication framework, where relational communication is defined as "the way in which a speaker defines his or her position relative to the position of another speaker" (Erchul, Grissom, & Getty, 2008, p. 305). Interactions between consultant-consultee dyads were recorded using relational communication coding systems (e.g., Relational Communication Control Coding System; RCCCS; Rogers & Farace, 1975) to analyze the content of the verbal interactions between the dyad members.

Erchul et al. (2007) examined the relationship between relational communication techniques and consultation outcomes for students with Attention Deficit Hyperactivity Disorder (ADHD). Results were in stark contrast to previous studies (e.g., Erchul, 1987), showing that teacher influence over the consultant, in problem identification interviews, was linked to positive consultation outcomes. However, the consultants in the study eventually observed low levels of treatment integrity on the consultees' part. A most recent study by Erchul et al. (2009), which followed up on the prior-mentioned study (Erchul et al., 2007), found that teachers' attempts to influence and teachers' actual influence were negatively associated with consultation outcomes.

Of importance was the authors' assertion that "it is useful to view consultation with teachers as a process, with different actions called for at different points in time" (Erchul et al., 2009, p. 35).

These studies highlighted how consultants and consultees exhibit influence over one another in consultation. Positive outcomes were found both when consultants directed the process and when consultees were actively engaged in communication with the consultant, particularly during problem identification interviews. Consultants should not aim to be strictly collaborative *or* directive, but consider *both* simultaneous goals to effect positive outcomes (Gutkin, 1999b). Mutual responsibility, participation, and agreement among consultants and consultees may yield such results.

What follows is a discussion of the major models of school consultation. School psychologists may question which particular model to use when presented with different cases (Erchul, 1999), and a consultant's choice of consultation model may impact the outcome of the consultation as well as interpersonal influence during the process (e.g., the differential use of social power bases by the consultant).

Prominent Models of School Consultation

The school consultation models described include mental health consultation, behavioral consultation and conjoint behavioral consultation, instructional consultation, and organizational consultation. Characteristics, components, strengths, and weaknesses of the different models are discussed, and they are compared and contrasted. Outcome research illustrating both the efficacy and effectiveness of the different models is reviewed.

Mental Health Consultation

Mental health consultation (MHC) was described by Henning-Stout (1993) as "the cornerstone for the development of consultation as a service delivery approach" (p. 19). The

overriding goal of MHC is to further consultees' knowledge of mental health, using a problem solving process, while fostering skills to remediate and prevent present and future mental health problems (Alpert, 1976; Meyers, 1981). Gerald Caplan (1970) developed the MHC model through his experiences working at mental hygiene and child guidance centers in Jerusalem, Israel, where referrals for diagnosis and treatment of emotional disturbance were exceedingly high. Logistically, MHC allowed few consultants to work with consultees in contact with many clients, exemplifying the indirect service delivery technique germane to school consultation. Caplan was a psychoanalytically oriented theoretician and practitioner, and much of his model is based on an intrapsychic model (e.g., focus on ego states, subconscious motivations) of behavior change (Gutkin & Curtis, 2009; Henning-Stout, 1993).

Caplan (1970) introduced the following four types of MHC: *client-centered consultation*, *consultee-centered consultation*, *program-centered administrative consultation*, and *consultee-centered administrative consultation*. The latter two types of MHC focus on improving service delivery at the administrative level, and are similar to organizational consultation. Client-centered consultation emphasizes students' difficulties and working with consultees to remediate problems, which is similar to behavioral consultation (Meyers, 1981).

Consultee-centered consultation focuses exclusively on supporting and helping adults in students' environments, and in particular, consultees' emotional reactions and underlying conflict (Henning-Stout, 1993, Meyers, 1981). According to Caplan and Caplan (1993), the goal is "elucidating and remedying the shortcomings in the consultee's professional functioning…to increase the consultee's cognitive grasp and emotional mastery of the issues…to lead to an improvement in the consultee's professional planning and action, and hopefully to improvement in the client" (p. 101). This approach truly acknowledges teachers' feelings, their awareness of

them, and how a change in teacher behavior can bring about positive changes in current situations and those that are similar in the future (Fagan & Wise, 2007). An egalitarian relationship between the consultant and consultee is promoted, and this type of MHC is not prescriptive like behavioral consultation, where the consultant takes on an expert role, and problem solving steps are clearly delineated (Knotek & Sandoval, 2003).

Consultee-centered consultation is viable when the consultee experiences a lack of knowledge of situational psychosocial factors, a lack of skill in finding a solution to the problem, a lack of self confidence due to personal factors, and/or a lack of professional objectivity, often due to consultees' personal subjective factors (Caplan, 1970). One source of a lack of professional objectivity is *theme interference*, and the consultant looks to reduce this through "interruption and reorganization of a patterned response to…child behaviors," and in finding exceptions to the theme (Henning-Stout, 1993, p. 21). However, more recent conceptualizations of consultee-centered consultation have steered away from Caplan's (1970) psychodynamic formulation, which was originally designed for pure mental health settings (e.g., clinics), where the consultant was viewed as external to the organization, with limited case responsibility. The current model maintains a constructivist perspective, germane to schools, where the consultant is typically an internal member of the organization who is responsible for collaborating and engaging with the consultee to address the client's presenting problem (Knotek & Sandoval, 2003).

There is a lack of empirical research available on the effects of MHC as a consultation model, though it has been long used by school psychologists (Gutkin & Curtis, 2009). Still, Athanasiou et al. (2002), using a qualitative design, investigated the beliefs and practices of consultants and consultees in school consultation, and found that teachers valued how

consultants listened to them and provided emotional support, active assistance, and problem solving suggestions, all of which are germane to MHC. Future research assessing MHC outcomes is needed to demonstrate the promise of this model to improve student outcomes.

Behavioral Consultation and Conjoint Behavioral Consultation

Behavioral consultation (BC) is one of the most frequently cited and implemented school consultation models (Kratochwill, Sladeczek, & Plunge, 1995) with research demonstrating efficacious outcomes (i.e., effect sizes indicative of behavioral change) (Kratochwill, Elliott, & Busse, 1995). Scholarly debate arose regarding whether BC should be called *ecological consultation* (Henning-Stout, 1993). Gutkin and Curtis (2009) advocate using the title "ecological consultation" to describe BC "underscoring the significance of mutual and reciprocal systemic interactions between micro-, meso-, exo-, and macro-environments" (p. 611). Conjoint behavioral consultation (CBC; Sheridan & Kratochwill, 2007), a derivative of BC, is nearly identical to BC, but includes the home system and family-school partnerships in the consultation process. This enables interventions to be implemented in a consistent, systematic manner across multiple settings, allowing for generalization and monitoring of treatment effects (Sheridan & Steck, 1995). Regardless of the specific title used to denote their use, BC and CBC apply behavior modification principles and procedures and social learning theory (e.g., reciprocal determinism) to problems encountered by consultees (Fagan & Wise, 2007). Therefore, the description of BC below applies to CBC.

Bergan (1977) created the BC model and it has been further developed (Bergan & Kratochwill, 1990) and reconceptualized (Kratochwill, Sladeczek, & Plunge, 1995) due to changes and challenges over time across schools, families, and communities. Four stages are outlined in the model. First, *problem identification* involves operationally defining the problem

during a problem identification interview, developing procedures to measure the behavior to establish a baseline, recognizing the discrepancy between behavior at its current level versus desired level, and formulating a goal for behavior change. Second, *problem analysis* involves evaluating any obtained baseline data, collecting additional data to conduct a functional behavior assessment (i.e., determining the behavior antecedents and consequences), and designing an intervention to solve the identified problem. Third, *plan implementation* takes place, where the consultee implements the intervention devised in the previous step and collects relevant data. The consultant monitors data collection, and along with the consultee, the effectiveness of the plan can be ascertained. If the plan is not effective, modifications can ensue. Fourth, *problem evaluation* involves determining whether or not the goal set in the first stage was met, evaluating the effectiveness of the intervention, and determining whether additional intervention modification is needed. If goals are achieved, consultation is terminated.

Henning-Stout (1993) outlined several features of BC that differentiate it from the other consultation models. The focus on behavior modification principles and procedures implies that behaviors are learned, and that systemic interactions take place between the child and the different contexts within which he or she exists. Furthermore, behaviors must be clearly assessed, defined, measured, observed, and quantified through careful data collection in BC. This is not a significant focus of MHC with its psychoanalytic origin.

Also in contrast to MHC is the wealth of empirical research documenting positive consultation outcomes of BC and CBC. Kratochwill, Elliott, and Busse (1995) conducted a meta-analysis that addressed implementation of BC by trained graduate student consultants, where an overall effect size of .95 for behavioral and academic outcomes was obtained for students in preschool to fifth-grade. MacLeod et al. (2001) examined the use of BC under

natural school conditions (i.e., “real-world”) by having teachers evaluate a consultation case and complete measures of consultant effectiveness, intervention quality, and intervention outcome. Results were positive indicating that consultants were effective, utilizing the BC stage model, which led to improved student functioning. Sheridan et al. (2006) examined the effects of CBC in early childhood settings obtaining large effect sizes for behavioral outcomes in school and at home. Additionally, Auster, Feeney-Kettler, and Kratochwill (2006) demonstrated that CBC is effective in treating selective mutism in a 5-year-old boy, as a bridge was built between the home and school allowing both the parents and teachers to intervene successfully.

Instructional Consultation

The instructional consultation model (IC; Rosenfield, 1987) is similar in some respects to MHC and BC, but has its own unique foundations. One of the most significant differences between IC and the other types is its core focus on academic concerns and fostering academic progress (Rosenfield, 2002). The ability to exhibit control over instructional techniques, rather than solving problems outside of school control (e.g., socioeconomic status) provides the rationale for its use (Rosenfield, 1987). Therefore, learner variables that may be altered are emphasized, and of particular importance is the triangular, reciprocal relationship between the student, the academic task, and instruction/management strategies

At the root of IC is the perspective that the child’s instructional program is the cause of his or her difficulties, which represents a shift from the belief that learning problems originate within the child (Rosenfield, 1989). In addition, IC is unique in comparison to the other models in its service delivery through IC-Teams (Rosenfield & Gravois, 1996). IC-Teams are schoolwide, and include teachers, the school psychologist, administrators, and other education professionals. A teacher meets individually with an IC-Team member, called the *case manager*,

so a one-to-one collaboration takes place, rather than a group problem solving effort. In comparing and contrasting the different models discussed so far, IC and BC are similar in their use of a sequential, multistep problem solving stage process and ecological framework. IC and MHC are similar in that both stress ample collaboration, reframing the problem, and enhancing consultee work-related functioning to address current and future student problems. For IC to be most effective it is important for school psychologists to be equipped with knowledge of curriculum based assessment, and other academic and classroom-based interventions, along with avoiding a quick inclination to classify students (e.g., with a learning disability) based on teacher concerns or referrals (Rosenfield, 2002).

Studies have examined student outcomes when using the IC model. Gravois and Rosenfield (2006) examined the impact of implementing IC-Teams on the problem of disproportionate referral and placement of minority students in 22 schools (i.e., 13 used IC-Teams while 9 did not). Results were obtained using risk index, odds ratio, and composition index calculations, which are traditionally used to determine disproportionate placement. The researchers found that after 2 years, in the schools with IC-Team implementation, there were decreased risk and odds of placement in special education, compared to measurements during the baseline year, and a decrease in minority students referred and evaluated. A recent descriptive and exploratory study (Kaiser, Rosenfield, & Gravois, 2009) investigated teachers' satisfaction, skill acquisition, and perceived student outcome in IC. Results indicated teacher satisfaction with IC, as the teachers reported improved problem solving skills, acquisition in instructional and behavioral strategies, and feeling well-equipped to address similar instructional problems in the future (i.e., skill generalization).

Organizational Consultation

The premise behind organizational consultation (OC) is that optimal educational experiences for children and professionals in schools occur only when the school, or larger school system itself, is functioning optimally with available resources to solve problems and meet demands (Schmuck, 1990). It is rooted in systems theory and it "enables the school to monitor and respond to its environment, and use the human resources, ideas, and energy needed to respond to that environment" (Schmuck, 1990, p. 900). This implies productive collaboration between school personnel, students and parents, and a commitment among all stakeholders to improving the system as a whole. Schein (1969), through his own consulting work in private industry, explained the necessity of looking carefully at a client's actions, and the impact they have on other individuals, and the organization. This holds true for schools and school systems, where individual student or subsystem (e.g., classroom(s)) concerns can have broad impact. Fagan and Wise (2007) believe school psychologists are ideal candidates to engage in OC, especially when they work in multiple schools, as they are able to observe positive and negative practices in one system, and use their assessment, research design, and consultation skills to improve functioning in others.

Centra and Potter (1980) reviewed school variables that may be the target of OC. These include school or school district conditions, within-school conditions, teacher behavior, student behavior, student characteristics, and student academic outcomes. When a school psychologist understands student difficulties stemming from such variables using an OC perspective, he or she would address potential problems with staff interpersonal relationships, or environmental deficiencies, as opposed to student deficits (Schmuck, 1990). Accordingly, parallels may be drawn between OC, MHC, and IC, with the emphasis on collaboration and focus on variables not

inherent in students. Also OC and BC both underscore an ecological framework from which to view student or organization difficulties. However, as described before, OC is mainly concerned with the functioning of the organization, as opposed to individual students, which is the crux of the other models.

Nowadays, with the thrust towards school reform and school and school-system wide problem solving/Response-To-Intervention (RTI) models, OC is especially relevant with its potential to involve primary stakeholders in bringing about change (Gutkin & Curtis, 2009). Curtis, Castillo, and Cohen (2008) offered one promising model for addressing system-level issues, using systematic and structured planning and problem solving, and the collaboration of relevant stakeholders. The steps of the model include the following: (a) *problem description*, (b) *brainstorming potential resources and barriers to problem resolution*, (c) *selecting one barrier*, (d) *brainstorming strategies to reduce or eliminate the barrier*, (e) *designing multiple action plans to aid implementation of a systemic intervention*, (f) *follow-up plan development*, (g) *development of a data collection plan and monitoring procedures*, and (h) *outlining the process and timeline to use the data collected to determine satisfactory progress in solving the problem*.

Truscott et al. (2000) conducted a qualitative study to ascertain whether an OC project to facilitate the development and functioning of a school district's prereferral intervention teams (PIT) was acceptable to their members. The consultees expressed to the consultants what they viewed as ideal PIT teams compared to their present ones. Results demonstrated acceptability among PIT members, with changes made to the teams viewed favorably and still accepted 1 year later. The researchers stressed the importance of providing consultant support as consultees responded to newly presented information. The researchers stated that a "rich interplay" between consultants and consultees over time can greatly influence acceptability (p. 201).

Gutkin and Curtis (2009) acknowledged that critical special education decisions are made via team meetings, but that most school personnel lack training in group dynamics or problem solving, leading to dysfunction. Since team meetings do not always result in unanimous decisions, or optimal decisions in certain cases, the need for continued research on interpersonal influence in team meetings, and school consultation in general, cannot be understated.

The following section examines the highly-cited social power model (French & Raven, 1959), its expansion (Raven, 1965), and differentiation (Raven, 1992). Also, the power/interaction model of interpersonal influence (Raven, 1992, 1993) from the field of social psychology is outlined step-by-step.

Social Power and Interpersonal Influence

The success or failure of school consultation is largely dependent on the dynamics of the social interaction between the consultant and consultee (Tingstrom, Little, & Stewart, 1990). An assortment of well-designed interventions will be of little use to the school psychologist if the teacher exhibits resistance in consultation. Hughes (1992) drew parallels between consultation, counseling, and psychotherapy, describing them as processes relying on social influence to bring about change. How the consultee perceives the consultant and the nature of their interpersonal relationship dictates the degree of change. Accordingly, "the consultant must carefully attend to a host of interpersonal, intrapersonal, and situational variables that determine the success of the consultant's efforts to influence the teacher to adopt a particular approach with a child" (p. 270).

As noted earlier, *social influence* occurs when a target's (e.g., teacher or parent whom the school psychologist seeks to influence) behavior, attitude, or opinion has changed, as a result of the presence or actions of the agent (e.g., school psychologist), and *social power* is the potential

ability of the agent to influence the target (French & Raven, 1959). The social power bases used by agents to attempt social influence are described next.

The French and Raven (1959) Social Power Base Typology

Five social power bases were delineated by French and Raven (1959) in their model of social power. They are *reward power*, *coercive power*, *legitimate power*, *referent power*, and *expert power*. *Reward power* refers to an influencing agent's (A) control of and provision of rewards to elicit a change in the target person's (B) behavior. If B believes that he or she will receive a reward from A for a change in behavior, such as an increase in production (e.g., at a manufacturing facility), it is likely that B will subsequently change his or her behavior. Providing actual, tangible rewards, as opposed to promising rewards increases the strength of reward power. An illustration of a school psychologist using reward power would be the school psychologist informing the teacher that she will take him out for lunch because he adhered to the intervention data collection procedures for the past 2 weeks.

Coercive power involves the potential for A to punish B in the event that B does not comply with A's influence attempt, indicating B's perceived threat of punishment if he or she does not conform. The magnitude of B's perception of the threat of punishment dictates the strength of coercive power. Both reward power and coercive power are similar in that A may manipulate the potency of the reward or punishment, respectively. Also, in distinguishing between both types of power, it is important to consider the language used by A and the resources available to A (Raven & Rubin, 1983). An illustration of a school psychologist using coercive power would entail the school psychologist telling the untenured teacher that she will inform the principal that since he is unwilling to implement a behavioral momentum program for a student with noncompliance, he should not receive an adequate evaluation to be tenured.

Legitimate power is based on the status and position that A holds within an organization, and as a result of this, B's obligation to comply with an influence attempt. According to French and Raven (1959), "the notion of legitimacy involves some sort of code or standard, accepted by the individual, by virtue of which the external agent can assert his power" (p. 159). Legitimate power is clearly seen in the military, but it is also apparent in less formally organized social units, like families, where roles are prescribed for individual members (Raven & Rubin, 1983). An illustration of a school psychologist using legitimate power would be the school psychologist stating that she is responsible for the mental health needs of those in the school building, so the teachers should be obliged to follow her related recommendations.

Referent power stems from A, during an influence attempt, serving as a source that B may identify with. It is based on B's feelings of attraction to, similarity with, and/or desires to identify or join with A. A higher level of identification is indicative of a higher level of referent power on the part of A. The referent power of A, where A is either an individual or group, may be more salient at different times and in different places. With regard to an American traveler in Paris, he or she "will probably be more conscious of being an American than when he or she is at home" (Raven & Rubin, 1983, p. 414). Additionally, referent power can also be a source of influence when B has no formal affiliation or relationship with A. An example of this is a promising high school baseball shortstop purchasing the official game model glove used by Derek Jeter when he plays shortstop for the New York Yankees. An illustration of a school psychologist using referent power would be an experienced school psychologist modeling to a group of 4th grade teachers the correct way to implement a response cost system to reduce problem behaviors among some of their students in which the teachers identify with the school psychologist, want to implement it the same way, and thus, follow her example.

Finally, *expert power* occurs where A, who maintains specific knowledge or expertise in a particular area, exhibits influence over B, where B evaluates A's specific knowledge or expertise as superior. Generally, expert power as an influence attempt is limited to one's range of knowledge or expertise within a given area, where using expert power outside of that range can undermine its effect (French & Raven, 1959). Expert power is often used by physicians who showcase their diplomas, equipment, medical books, and other related paraphernalia in their offices (Raven & Rubin, 1983). An illustration of a school psychologist using expert power may involve the school psychologist recommending techniques to welcome a depressed student back to class who experienced the death of a parent or sibling. The teacher would then accept the recommendations to help reacquaint the student to the school routine on the basis of the school psychologist's extensive knowledge and expertise in mental health. In comparing expert power and referent power, it is important for A to balance his or her usage of these mutually opposing bases because the power of both can be undermined if he or she is "too knowledgeable," or "too similar" (Martin, 1978). Erchul and Martens (2002) advise that consultants not only emphasize their similarity to and mutuality with consultees, but also gently promote their expertise.

In reconciling these 5 social power bases as defined by French and Raven (1959), it is evident that they are all socially dependent (Raven & Rubin, 1983). Raven and Rubin (1983) defined socially dependent influence as "influence in which the person who has changed continues to relate the new behavior, belief, or attitude to the influencing agent" (p. 403). Additionally, reward power and coercive power are dependent on surveillance (i.e., A's awareness of B's compliance or noncompliance), while legitimate, expert, and referent power, are not dependent on surveillance. Also, Martin (1978) argued that school psychologists only utilize expert power and referent power, and that the other social power bases are not germane to

school psychologists' holding staff rather than management positions. However, Erchul and Raven (1997) challenged Martin's (1978) assertion, stating that the other social power bases are available for consultant use after reviewing the expansion of, and differentiation of the typology (Raven, 1965, 1992, 1993) and the power/interaction model of interpersonal influence (Raven, 1992, 1993). Erchul and Raven (1997) also noted that Martin (1978) did not include *informational power* in his discussion, but only used the French and Raven (1959) typology in his analysis.

Expansion of the Social Power Base Typology: Informational Power

Raven (1965) expanded the French and Raven (1959) social power base typology with his addition of a sixth social power base, *informational power*. It occurs where A communicates with B, and B gleans *only* the content from A's message as pertinent, where cognitive change independent of A takes place. The *content of the communication* and *resulting cognitive change*, which can arise in future situations as well as the present one, separates informational power from the other social power bases (Raven & Rubin, 1983).

Informational power was in fact described by French and Raven (1959) as a *source of influence*, and *not* a power base, as they believed "the content of a communication upon an opinion is presumably a secondary influence" (p. 163). However, Raven (1965) added information to the typology as a power base acknowledging the potential for information to elicit behavior change in a *socially independent manner*. Informational power is unique in comparison to the social power bases in the original typology in that respect. Socially independent influence takes place when "the resulting change continues without further reference to or dependence up on the influencing agent" (Raven & Rubin, 1983, p. 403). While an individual's behavior may no longer be dependent on an influencing agent, it may now be dependent on his or her own

cognitive change, signifying that "it is the content of the communication that is important, not the nature of the influencing agent" (Raven, 1965, p. 372). An illustration of a school psychologist using informational power might involve the school psychologist providing strategies to a 1st grade teacher for handling a student's school refusal behaviors, where the teacher understands the core message from their exchange, sees how it is a viable remedy for the problem, and possibly other students in the future.

Erchul and Raven (1997) offered some advantages and disadvantages of the informational power base versus the others. It is beneficial when a consultee utilizes what the consultant presents because the consultee truly understands the core message and can use it in the future. A disadvantage of its use can lead to consultee resistance, where the information is perceived by the consultee negatively, overshadowing its content (e.g., the consultant tells the consultee that an intervention should be implemented in some manner with no flexibility). In addition, parallels and differences have been drawn between informational power and expert power (Erchul & Raven, 1997; Raven & Rubin, 1983). When using both bases, B views A's influence attempt as the ideal way to handle a particular problem. However, when A uses expert power, B may have never grasped A's core message, taking A's recommendation because A is an expert in behavior. In the illustration at the end of the last paragraph, the teacher grasped the content of the communication and experienced resulting cognitive change, independent of the expert status held by the school psychologist. However, Raven and Rubin (1983) recognized that informational power and expert power are often viewed in conjunction with each other, as some targets pay closer attention to the messages of experts. If experts are not trustworthy, or are disliked, the effects of informational power may be undermined. That type of expert would be called a *negative expert*, which was differentiated into a separate power base on its own by

Raven (1992). In the next section, negative expert power and the 13 other social power bases that Raven (1992) outlined in his most recent conceptualization of the typology are discussed.

Differentiation of the Social Power Base Typology

Raven (1992) differentiated the social power base typology from its original forms (French & Raven, 1959; Raven, 1965), which included 6 bases, to an elaborated typology containing 14 bases. Reward power and coercive power were separated into *personal reward* (e.g., praise from a loved one), *impersonal reward* (e.g., tangible reward for compliance), *personal coercion* (e.g., disapproval from a loved one) and *impersonal coercion* (e.g., a tangible threat such as a monetary fine).

Legitimate power was separated into *legitimacy of reciprocity* (e.g., I helped you in a positive manner, you should help me back), *legitimacy of equity* (e.g., I suffered working so hard on this so you should do something to make up for it), *legitimate power of position* (e.g., a manager influences a subordinate), and *legitimate power of dependence* (e.g., an obligation to help the powerless). Expert power and referent power were separated into *positive expert* (e.g., school psychologist with expertise in education and mental health), *negative expert* (e.g., sleazy salesperson working in his or her own best interest), *positive referent* (e.g., a teacher identifies with the school psychologist because of their mutual goal for the student) and *negative referent* (e.g., one does the opposite because he does not identify with or dislikes the other person).

Finally, informational power was separated into *direct informational* (e.g., overt influence attempt) and *indirect informational* (e.g., covert attempt using casual comments, or overhearing comments). On the following page, Table 1 traces the evolution of the social power base typology from its original form (French & Raven, 1959) to its most current form (Raven, 1992) with definitions of the power bases.

Table 1

Evolution of the Social Power Base Typology with Definitions

Social Power Base	Definition
Original Typology (French & Raven, 1959)	
Reward Power	Potential for A to reward B to elicit behavior change
Coercive Power	Potential for A to punish B if B exhibits noncompliance
Legitimate Power	Potential for A to influence B because A holds status/position
Expert Power	Potential for A to influence B because A holds expertise in an area
Referent Power	Potential for A to influence B because B identifies with A
Expansion of the Typology (Raven, 1965)	
Informational Power	Potential for A to influence B due to content of A's message
Differentiation of the Typology (Raven, 1992)	
Impersonal Reward	Potential for A to influence B because of tangible reward
Personal Reward	Potential for A to influence B because of personal praise
Impersonal Coercion	Potential for A to influence B using tangible threats
Personal Coercion	Potential for A to influence B due to personal threat
Legitimacy of Position	Potential for A to influence B because of A's status/position
Legitimacy of Reciprocity	Potential for A to influence B since A acted toward B in positive way
Legitimacy of Equity	Potential for A to influence B to compensate A for his or her efforts
Legitimacy of Dependence	Potential for A to influence B since A cannot perform on his/her own
Positive Expert	Potential for A to influence B because A holds expertise in an area
Negative Expert	Lack of potential for A to influence B since A operates on own interests
Positive Referent	Potential for A to influence B because B wants to be similar to A
Negative Referent	Lack of potential for A to influence B since B does not identify with A
Direct Information	Potential for A to influence B because A's message is valuable
Indirect Information	Potential for A to influence B as A's message is covert or overheard

Note: A = Influencing Agent, B = Target Person

The Power/Interaction Model of Interpersonal Influence

With the multitude of social power bases available to an influencing agent, Raven (1992, 1993) presented the power/interaction model of interpersonal influence to illustrate the sequence of events that occurs from the beginning to end of an influence attempt. According to Erchul, Grissom, and Getty (2008), "this comprehensive model incorporates six stages describing the process and decision making an agent goes through to select, implement, and evaluate the use of social power bases to influence a target" (p. 295).

Prior to accessing the power bases, the agent typically has to prepare or set the stage for their use, and a variety of *preparatory devices* or *interpersonal tactics* (Erchul & Raven, 1997) may be available, as power bases might not be immediately employed (Raven, 1992). Some examples of preparatory devices include self-promotion and displaying diplomas (i.e., positive expert power), stating mutual goals for student success and similar backgrounds (i.e., positive referent power), and talking up one's position or status as the school psychologist (i.e., legitimate position power). Efforts to minimize the target using "put-downs" (e.g., "You don't really get this, do you?"), and efforts to minimize other potential influencing agents (e.g., "She does not know as much as I do about Asperger's Syndrome.") are also examples of preparatory devices. In addition to setting the stage for influence, the agent considers the *mode of influence*, or means in which the power base will be delivered (e.g., a forceful versus soft attempt) (Raven, 1992).

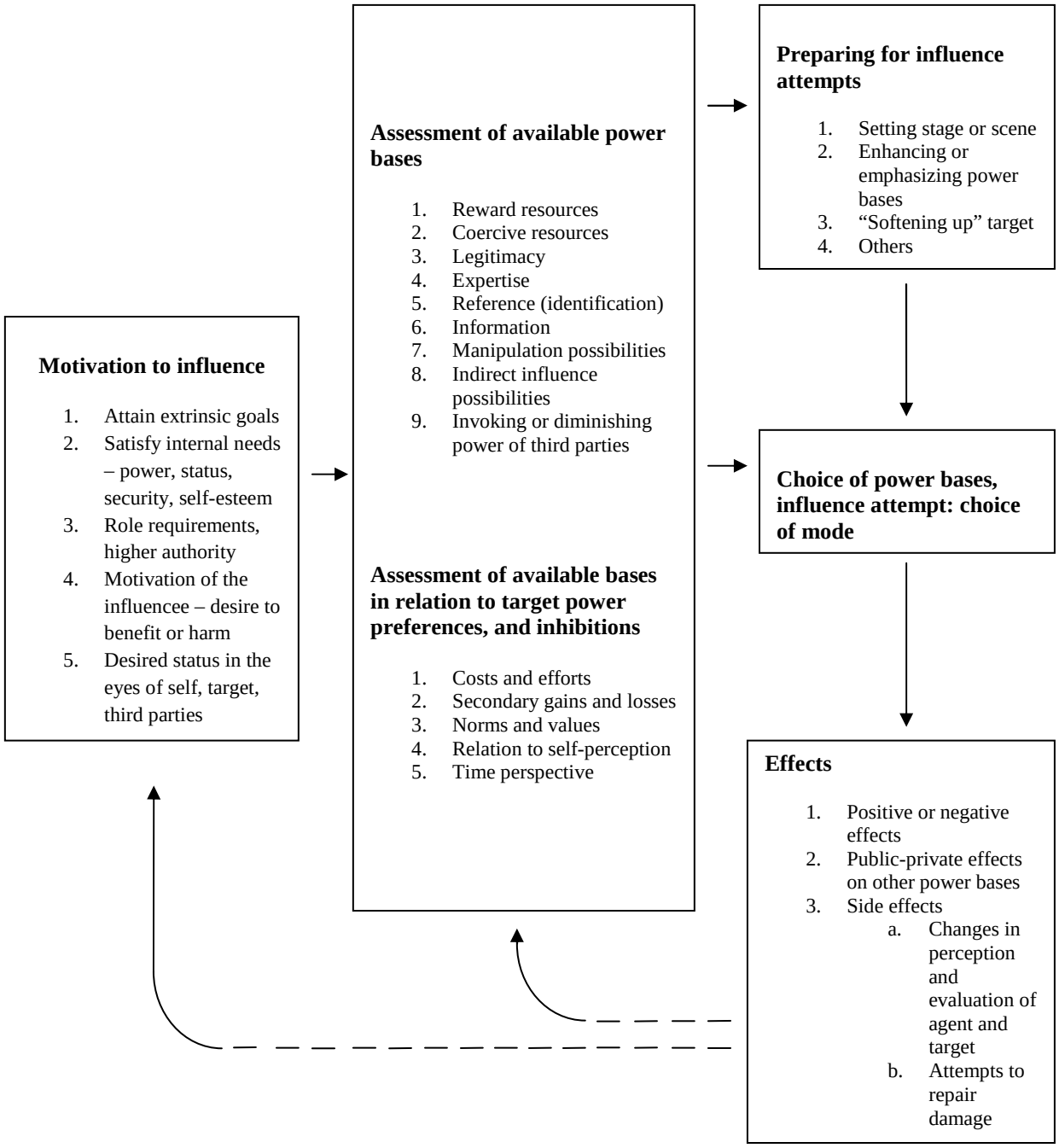
The first stage of the power/interaction model of interpersonal influence is *motivation to influence*. The agent is motivated to influence because he or she seeks a particular goal or outcome and he or she will select the most appropriate power basis to attain that goal or outcome (Raven, 2008). Motivations include attaining extrinsic goals, satisfying internal, personal needs, role requirements, a desire to adhere to social norms, pressure from higher authorities,

motivations relating to the target of influence, or a concern for image. In the second stage, *assessment of available power bases,* the agent determines which bases are available and potentially successful versus unsuccessful. The third stage of the model is *assessment of available bases in relation to target, power, preferences, and inhibitions*. The agent considers the costs and benefits of the influence attempt in this stage and possible risks involved with using individual bases. The fourth stage, *preparing for the influence attempt,* involves the agent employing the preparatory devices described previously. *Choice of power bases, influence attempt: choice of mode* is the fifth stage, where the agent considers his or her mode of influence, as mentioned before. The sixth and last stage, *assessing effects of influence* entails the agent looking at whether the target accepted the influence attempt and changed his or her behavior to align with the agent's desired outcome. The agent may also consider whether the target's change is socially dependent, where surveillance is needed to maintain change, or socially independent, where cognitive change occurred. In assessing the effects of the influence attempt, the resulting outcome serves as feedback for the agent, "quite likely changing his/her self-perceptions and perceptions of the target, thereby changing the agent's perception of the effectiveness, costs, and desirability of various social power and influence strategies" (Raven, 1993, p. 241).

Figure 1 depicts the power/interaction model of interpersonal influence from the perspective of the influencing agent. The Raven (1992) model may also be understood from the perspective of the target, where the stages run parallel to those of the agent, including motivation and assessment stages, perception of the agent's power bases and likelihood of their implementation, the anticipation of the influence attempt, and an evaluation of the influence attempt and its effects. Normally, the agent and target are both affected by influence attempts,

Figure 1

The Power/Interaction Model of Interpersonal Influence from the Perspective of the Influencing Agent (Raven, 1992, 1993)



where both parties' perceptions of each other can change along with usage of the bases, and in many instances, mutual influence attempts can take place.

In summary, the French and Raven (1959) and Raven (1965, 1992, 1993) model is one of the most widely cited and popular conceptualizations of social power and interpersonal influence (Mintzberg, 1983; Podsakoff & Schriesheim, 1985). Studies examining this model of social power have focused on teacher and student relationships (Jamieson & Thomas, 1974), supervisor and subordinate relationships (Hinkin & Schriesheim, 1990), gender role and marital satisfaction (Schwarzwald, Koslowsky, & Izhak-Nir, 2008), doctor and patient relationships (Rodin & Janis, 1982), and, of course, school psychology consultation (Erchul & Raven, 1997; Martin, 1978). However, Podsakoff and Schriesheim (1985) reviewed studies using the French and Raven (1959) and Raven (1965) social power base typology and raised concerns regarding inconsistencies in the definitions of the individual bases and problems inherent in the scales used to measure them (e.g., single items to measure each basis).

In the following section, the development of the Interpersonal Power Inventory (IPI; Raven, Schwarzwald, & Koslowsky, 1998), a psychometrically sound measure of the social power bases, is discussed. Selected studies outside the field of school consultation used the IPI to test the French and Raven (1959) and Raven (1965, 1992, 1993) model, demonstrating its reliability, validity, and utility as a measure of social power. Several of these studies are described below. The modification of the IPI for usage in studies of social power and influence in school consultation (e.g., Erchul, Raven, & Ray; 2001) is addressed in detail later.

The Interpersonal Power Inventory: A Measure of the Social Power Bases

Raven, Schwarzwald, and Koslowsky (1998) created the Interpersonal Power Inventory (IPI) in response to criticism pertaining to the empirical study of the social power base typology

(French & Raven, 1959; Raven, 1965, 1992, 1993). Numerous experimental and field studies were conducted over the years, but problems existed in operationally defining the bases and measuring them, exacerbating the interpretation of findings (Podsakoff & Schriesheim, 1985). The IPI was created in part as a response to subsequent efforts to improve the measurement of the social power base typology (e.g., Hinkin & Schriesheim, 1989) and to reflect the expansion and differentiation of social power base typology (Raven, 1965, 1992).

The IPI measures 11 of the 14 social power bases. Negative expert power, negative referent power, and indirect informational power were excluded from the IPI because they are difficult to conceptualize concretely and are thereby more difficult to measure (Erchul, Grissom, & Getty, 2008). The IPI in its original state contained 44 items, with 4 items presented for each social power base; separate forms were available for subordinates (i.e., one who is asked to follow a request) and supervisors (i.e., one who presents a request to a subordinate). Items were derived from previous scales measuring the social power bases (e.g., Hinkin & Schriesheim, 1989) and items were piloted through open-ended interviews and trial questionnaires. The subordinate form instructions asked the respondent to consider a time when supervised in completing a task, where the supervisor asked for the task to be completed differently and the subordinate was reluctant to do so. The respondent completed the 44 items, which are reasons for why he or she complied with the supervisor request, and was asked to rate each on a 7-point scale (i.e., 1 indicates the item is *definitely not a reason* for complying and 7 indicates the item is *definitely a reason* for complying). The supervisor form instructions asked the respondent to consider a time where he or she functioned as a supervisor and the 44 items were rated, using the 7-point scale, on the likelihood that each was a reason for why the subordinate would comply.

In order to examine the overall factor structure and psychometric qualities of the IPI, Raven, Schwarzwald, and Koslowsky (1998) conducted 2 studies. Study 1 used a sample of 317 college students at California universities who responded in groups to the IPI, completing either the subordinate or supervisor forms. Intercorrelations were obtained among the 4 items belonging to each of the 11 power bases and the item from each factor that weakened reliability the most was eliminated, yielding a 33 item IPI. A principal components analysis yielded the following 7 factors: *impersonal sanctions* (i.e., combines impersonal reward and impersonal coercion), *credibility* (i.e., combines expert and information), *legitimate equity* (i.e., combines legitimate equity and legitimate reciprocity), *reference*, *personal sanctions* (i.e., combines personal reward and personal coercion), *legitimate position*, and *legitimate dependence*.

A factor analysis revealed a two-factor solution, where Factor I included "soft" power bases and Factor II included "harsh" power bases. Soft power bases rely on an agent's personal assets and typically leave the decision to comply with the target, while harsh power bases rely on the agent's status as an advantage, through reward or punishment (Schwarzwald, Koslowsky, & Ochana-Levin, 2004).

Discriminant analysis found results not significantly different for males and females, but that for the subordinate group and supervisor group, significant differences were found on expertise, information, and reference (i.e., soft power bases). Supervisors viewed expert, informational, and referent power as tactics that would lead to compliance more than the subordinates did.

Study 2 (Raven, Schwarzwald, & Koslowsky, 1998) was conducted using a sample of Israeli hospital workers who completed the subordinate form of the IPI and the short form of the Minnesota Job Satisfaction Questionnaire (MSQ; Weiss, Dawis, England, & Lofquist, 1967).

The researchers looked to examine the IPI's generalizability and the relationship between power and job satisfaction in a field setting. Results indicated similar internal consistency of items within each factor to the college student sample in Study I, and a factor analysis of the 11 power bases yielded a similar two-factor solution to Study I. Discriminant analysis revealed greater compliance to soft power bases, and was significantly related to greater job satisfaction, demonstrating concurrent validity of the IPI. In addition, the IPI exhibited construct validity as the social power bases were conceptualized similarly across culture, position, and gender in both Study 1 and Study 2.

Koslowsky, Schwarzwald, and Ashuri (2001) used the IPI to study nurse compliance to the 11 power bases, and its relationship to job satisfaction, organizational commitment, and professional distance between supervisor and subordinate. Results showed that the IPI demonstrated construct validity, and as with the prior studies (Raven, Schwarzwald, & Koslowsky, 1998), a two-factor solution of soft and harsh power bases was found. Compliance to soft power bases was positively related to job satisfaction, while for organizational commitment, it was positively associated with both the soft (e.g., expertise) and harsh power bases (e.g., legitimate position, personal reward). Objective (i.e., education and experience) and subjective (i.e., gap in ability and knowledge) professional distance between the supervisor and subordinate were correlates of reported compliance. For harsh and soft bases, the nurses, similar to their supervisors on objective professional criteria, reported lower compliance, and for subjective professional distance, lower compliance was reported for only the soft bases.

Other field studies have utilized the IPI, illustrating the two-factor structure of soft and harsh power bases and their relationship with organizational variables. Schwarzwald, Koslowsky, and Agassi (2001) studied the relationship between social power and leadership type

(i.e., transactional, meaning contingent reward and coerced compliance, and transformational, meaning instilling confidence in others and promoting voluntary acceptance) and compliance using a sample of Israeli police captains and police officers. Police officers were more likely to comply with police captains who were transformational leaders versus transactional leaders, when soft and harsh power bases were used.

Elias (2007) examined the use of social power in academia, namely between the university professor and student. Results indicated that male and female students found soft power bases more appropriate than the harsh ones for professor use to gain compliance, with the informational and expert bases rated the highest. Overall, the students reported that with exception to the use of informational power (i.e., an explanation for why students should comply), it is inappropriate for professors to use social power techniques in university classrooms to elicit compliance, and females were more strongly opposed to their use. No significant differences were found between lowerclassmen and upperclassmen regarding their perceptions towards appropriateness of the use of the bases.

To summarize, the IPI is a psychometrically sound instrument to measure the social power base typology with evidence of concurrent and construct validity in its use across different samples. Two-factor solutions revealing soft and harsh power base structures were also found in different types of power relationships, ranging from those between nurses and nurse supervisors (Koslowsky, Schwarzwald, & Ashuri, 2001) to college students and their professors (Elias, 2007), where in both instances, soft power bases were perceived more favorably by the nurses and the college students, respectively. While these studies did yield important information on the IPI's validity, additional analyses of social power perceptions among individuals in non-hierarchical relationships, including school personnel (i.e., school psychologist and teachers in

non-administrative/supervisory positions), were needed to further assess the generalizability of this instrument.

As was briefly noted earlier, the IPI was eventually modified for use in school consultation research (e.g., Erchul, Raven, & Ray, 2001). The following section examines several school consultation studies that utilized modified forms of the IPI, as well as a limited number of studies pertaining to social power and interpersonal influence prior to the development of the IPI. Before discussing these studies, the two seminal papers that set the stage for empirical study of social power and interpersonal influence in school consultation (i.e., Erchul & Raven, 1997; Martin, 1978) are reviewed.

Social Power and Interpersonal Influence in School Consultation

The influential role of the school psychologist and techniques for enhancing school psychologist-teacher relationships are well-established in the literature (e.g., Bardon, 1986; Lambert, 1973; Reger, 1964). However, Martin (1978) was the first to explore school consultation as a social influence process using the French and Raven (1959) social power base typology. Almost 20 years later, Erchul and Raven (1997) expanded on Martin's (1978) analysis by accounting for the expansion and differentiation of the French and Raven (1959) typology (Raven, 1965, 1992) and introduction of Raven's (1992, 1993) power/interaction model of interpersonal influence. While Martin (1978) and Erchul and Raven (1997) maintained different viewpoints on the availability and use of the different social power bases among school consultants, they acknowledged that the appropriate use of the strategies can help school psychologists maximize their effectiveness in their role as consultants (i.e., successful influence attempts).

Expert and Referent Power

Martin (1978) examined the French and Raven (1959) typology and concluded that expert and referent power were the only two power bases available for use by school psychologists, and that reward, coercive, and legitimate power are not conducive to the practice of school psychology. Martin argued that school psychologists are staff members, just like teachers, and that school psychologists cannot reward, coerce, or express legitimate power over other school professionals. With regard to using expert power, school psychologists, as a function of their training, are skilled, knowledgeable experts in education and mental health. A consultee would seek the assistance of a consultant because he or she perceives the consultant as being more skilled or knowledgeable in selected areas. The identification or compatibility of teachers with school psychologists, based on feelings of similarity or oneness illustrates referent power, and this is accrued by the school psychologist over the course of time through formal and informal exchanges. Here, a consultee feels that the consultant has similar attitudes, feelings, or perceptions similar to his or her own, and/or qualities that he or she would like to possess.

In his analysis, Martin (1978) indicated the unique relationship that exists between expert power and referent power. Both power bases are not independent of one another, and in actuality, they are mutually oppositional. For instance, a consultant that engages in an influence attempt using expert power, where he stresses his vast, superior knowledge in the area of reading interventions in comparison to other educators, may be off-putting to a consultee. Also, consultants who have limited contact with consultees (e.g., coming from outside the school system) may have unsuccessful influence attempts, using expert power. With this in mind, the use of expert power must be balanced out with the use of referent power, and increased contact with consultees, or a track record of successful outcomes with consultees, in light of a

consultant's expertise, helps ensure successful use of expert and/or referent power. According to Martin, school psychologists that are in frequent contact with consultees, such as those employed in an individual school or school district (i.e., the consultant has already accumulated significant referent power), often need to build and/or maintain their expertise to maximize their influence. In order to prevent both power bases from undermining one another, the consultant can emphasize his similarity and with the consultant, but note his expertise in a gentle, nonthreatening manner to achieve balance and success (Erchul & Raven, 1997; Martin, 1978).

Several researchers studied expert and referent power in school consultation in response to the Martin (1978) article. Most of these studies were unpublished doctoral dissertations of varying methodologies with limitations (e.g., analogue designs, convenience samples) (Cienki, 1982; Crowe, 1982; Kinsala, 1985; Kruger 1984; Roberts, 1985). Roberts (1985) and Cienki (1982) found positive relationships between the use of expert and referent power and consultation outcomes, while Kinsala (1985) found moderate correlations between only referent power and consultation outcome. However, the Crowe (1982) and Kruger (1984) studies found no significant connections between expert and referent power and consultation outcome. Martin and Curtis (1980), in a published study, examined the effects of age and experience of consultants and consultees on consultation outcome among 164 school psychologists. The researchers found that consultee age and experience were significant factors dictating consultation outcome. Consultees similar in age and professional experience had the most successful consultation outcomes, emphasizing the utility of referent power. Consultation outcomes among older teachers and younger consultants was reported as less successful, and the study thereby demonstrated the potential importance of expert power (i.e., presumably utilized by more experienced school psychologists) to teachers.

Short, Moore, and Williams (1991) looked at the utility of expert power in consultation using a sample of 153 teachers who watched videotaped consultation sessions and completed a questionnaire measuring dimensions of expertness, trustworthiness, and social attractiveness. In line with Martin's (1978) assertions, the researchers hypothesized that teachers would find consultants higher in status (i.e., with more credentials and experience) as more credible than those lacking in such qualities. Consultants having a doctoral degree were rated high on expertness, and those with several years of experience were rated high on both expertness and trustworthiness, but not on social attractiveness. Therefore, the results indicated the utility of expert power in this study, but not referent power, as shown by Martin and Curtis (1980). The researchers did note though that the sample of teachers was from a rural school system with one school psychologist, questioning the external validity of this research.

In light of the methodological limitations and varying results, the aforementioned studies were instrumental in developing an initial understanding of social power and interpersonal influence in school consultation. Erchul and Raven (1997) sparked a renewed interest in this area by applying the expanded and differentiated social power base typology and power/interaction model of interpersonal influence to school consultation (Raven, 1965, 1992, 1993). A detailed discussion of the Erchul and Raven (1997) paper and the recent wave of studies that followed it are found in this next section.

The Availability of Additional Social Power Bases in Consultant Influence Attempts

Erchul and Raven (1997) presented an updated analysis of the French and Raven (1959) and Raven (1965, 1992, 1993) model of social power and interpersonal influence. In their paper they provided examples of school psychologists utilizing power bases that Martin (1978) stated were *not* at the consultant's disposal (e.g., personal reward power, legitimate position power).

They also provided a case study example and interpretation using the Raven (1992, 1993) power/interaction model of interpersonal influence, and questions for future research. Erchul and Raven (1997) observed that Martin (1978) did not include informational power in his application of the social power base typology to school consultation even though it was recognized at the time of publication as one of the social power bases. However, it was their position that this social power base, along with the others, can be accessed by the consultant. Erchul and Raven (1997) explained how the permanent effects of direct and indirect informational power can be advantageous, meaning that the consultee gleans useful content from the consultant's message, causing change in the consultee. However, information that is presented in a manner that challenges the consultee (i.e., a young consultant works with a teacher with many years of experience), or where indirect informational power is used, but the relationship between consultant and consultee is unpleasant, use of this power base in influence attempts is ill-advised.

A consultant might employ personal reward power in an influence attempt with a consultee who meticulously collects data in the problem identification or analysis stages of BC (Bergan, 1977; Bergan & Kratochwill, 1990). Erchul and Raven (1997) noted that a supportive relationship between the consultant and consultee would preclude the successful use of that power base, or personal coercive power, where the consultee has neglected to collect data. They also provided illustrations of negative expert and referent power, which contrast with Martin's (1978) analysis of both bases. Negative outcomes can result when consultants act in a manner that the consultee feels threatened and subsequently rejects the consultant's recommendations (i.e., reactance) (Hughes, 1992; Hughes & Falk, 1981).

Erchul and Raven (1997) provided examples of consultants using the 4 forms of legitimate power to influence consultees. They believed that consultants may diplomatically utilize legitimate position power, where a consultee may feel obligated to comply with their recommendations because as a consultant, his or her role involves providing indirect services for students. However, the explicit use of legitimate position power might exacerbate the relationship between consultant and consultee. Legitimacy of reciprocity and legitimacy of equity may be successfully employed under circumstances where the consultant designs an intervention for the consultee to implement. With the former power base, a consultee would then oblige and implement the plan in return for the consultant's work in creating the intervention. With the latter power base, a consultee would implement the intervention because the consultant worked hard to design it, so the consultee by implementing it would make up for the consultant's efforts. Legitimate power of dependence might be used by the consultant when a particular intervention must be implemented because of certain circumstances out of his control (e.g., only general education classes, but no available inclusion class for a 3rd grader who would benefit from it). The consultant would indicate to the consultee that since the school is structured in that manner, he must work with the consultee to best meet the student's educational needs.

In addition to the availability of the individual social power bases, change could be induced through invoking or reducing the power of third parties, the mode of influence used by the consultant, and preparatory devices used by the consultant in advance of influence attempts (Erchul & Raven, 1997; Raven, 1992, 1993). Examples of third parties could be principals or other teachers, whom the consultant might allude to in a positive or negative manner to persuade the consultee. As discussed earlier, mode of influence refers to means in which the power base will be delivered, while preparatory devices prepare or set the stage for use of the bases. Erchul

and Raven (1997) advised the use of polite, nonthreatening techniques, or humor as opposed to harsh or threatening modes of influence, for optimal influence attempts and tactful, self-promotional strategies (e.g., the consultant informs the consultee that she is well-informed in techniques to reduce students' test anxiety) in the early stages of consultation.

Finally, Erchul and Raven (1997) outlined the steps of the power/interaction model of interpersonal influence (Raven, 1992, 1993) and presented a case study where a consultant proceeded through each step of the model (i.e., motivation to influence, assessment of available power bases, assessment of the bases in relation to target, power preferences, and inhibitions, preparing for influence attempts, choice of power bases, influence attempt: choice of mode, and assessing the effects of influence). In interpreting the case study, Erchul and Raven (1997) showed that a consultant might need to use different social power bases if previous influence attempts are unsuccessful. For this reason, the final step of the model where the consultant assesses the effects of influence is especially important in light of consultation failure or success.

The Erchul and Raven (1997) analysis offered a comprehensive update to the Martin (1978) paper by expanding the study of social power and influence in school consultation. One of the strengths of the Erchul and Raven (1997) review was the agenda for future research they provided. Recently, this agenda was updated (Erchul, Grissom, & Getty, 2008), but in the years that followed the Erchul and Raven (1997) paper, several empirical studies were published addressing the questions they posed, and the applicability of this model in school consultation.

Recent Investigations on the Perception and Usage of Social Power Bases in School Consultation among Consultants and Teacher Consultees

The first of the recent empirical studies on social power and interpersonal influence in school consultation examined how school psychologists perceive the different social power bases

in influence attempts with teachers (Erchul, Raven, & Ray, 2001). Specifically, the researchers looked to determine which bases school psychologists viewed as most likely to help initially reluctant teachers comply with their suggestions, and how the bases are ranked in the school psychologist-teacher consultation relationship versus other relationships already studied (e.g., supervisor-subordinate). Their principal hypothesis was that psychologists would view soft power bases as more effective in inducing teacher compliance. In order to acquire consultant perceptions, the researchers used a modified version of the IPI (Raven, Schwarzwald, & Koslowsky, 1998). Like the original IPI, this modified version measured 11 of the power bases (i.e., 4 items per base) from the most recent conceptualization of the social power base typology (Raven, 1992), but the directions to respondents and items themselves were restructured to align with school consultation. This resulting measure was called the IPI-Form CT (i.e., consultant).

The 101 respondent consultants from the North Carolina School Psychology Association were asked to consider a time when they consulted with a teacher and the teacher was initially reluctant to comply with their requests. They were then asked to rate the items as how likely (i.e., 1 = *much more likely to comply* through 7 = *much less likely to comply*) they would be to influence the teacher to comply with their requests. Erchul, Raven, and Ray (2001) followed the methodology used by Raven, Schwarzwald, and Koslowsky (1998) by examining the intercorrelations obtained for the 44 items, and dropping 1 item from each power base with the lowest correlation, resulting in a 33-item instrument. Results indicated that direct informational power and expert power were the 2 bases mostly likely to result in perceived teacher compliance, followed by impersonal reward power and referent power. A principal components analysis yielded a four-factor structure, labeled the following: *position power* (i.e., combines legitimate equity, legitimate position, and personal coercion), *impersonal sanctions* (i.e., combines

impersonal reward and impersonal coercion), *personal power* (i.e., combines personal reward, referent, legitimate dependence, and legitimate reciprocity), and *credibility* (i.e., combines expert and information). Also, the researchers found a two-factor solution of soft power bases (i.e., legitimate dependence, direct informational, referent, personal reward, expert, and legitimate position power) and harsh power bases (i.e., impersonal coercion, impersonal reward, legitimate equity, personal coercion, and legitimate reciprocity). While this two-factor solution was similar to the findings of Raven, Schwarzwald, and Koslowsky (1998), legitimate position power loaded higher as a soft power base for Erchul, Raven, and Ray (2001).

The results supported the hypothesis as school psychologists perceived soft power bases as more effective in consultation, as evidenced by their high rankings and the two-factor solution obtained. School psychologists in this sample endorsed the use of soft power bases as opposed to harsh power bases. Additionally, findings supported the assertions by Martin (1978) who ascribed the availability of expert and referent power to school consultants, and those by Erchul and Raven (1997), who argued that the other power bases are available and potentially applicable in school consultation. Results also indicated that certain social power bases function differently in the school psychologist-teacher consultation relationship versus supervisor-subordinate relationships, as was shown by respondents' low ratings of legitimate position power, compared to higher ratings on that power base in other studies (e.g., Raven, Schwarzwald, & Koslowsky, 1998). Finally, Erchul, Raven, and Ray (2001) acknowledged that their study shed more insight on the Collaboration Debate, as soft power bases may be effectively used in influence attempts by school psychologists, without coming off as "directive-prescriptive-expert," or "heavy-handed" to teachers.

Erchul, Raven, and Whichard (2001) followed the previous study by not only examining school psychologists' perceptions of the social power bases, but also teachers' perceptions of them. This logical extension of the Erchul, Raven, and Ray (2001) research investigated the differences in perceptions among both members of the consultation dyad, their views of the effectiveness of the social power bases, and whether or not teachers view soft power bases as more effective than the hard power bases. The sample of 134 school psychologists in the study was derived from a NASP membership list, in comparison to the Erchul, Raven, and Ray (2001) study, whose sample came from the North Carolina School Psychology Association. The 118 teachers in the study were sampled from the National Association for the Education of Young Children (NAEYC) membership list and a separate list of teachers obtained from a database management company. The school psychologists completed the IPI-Form CT and the teachers (i.e., K-5) completed the IPI-Form CE (i.e., consultee), which is a modified version of the former instrument, with directions and items tailored for teachers. It should be noted that the researchers used the IPIs with 44 items, not dropping any of the items, as bivariate correlations and intercorrelation matrices showed that all 4 items for each power base were consistent and "hung together" (p. 489).

Teachers reported that direct informational, positive expert, legitimate dependence, and positive referent were the four highest-rated social power bases perceived as most effective to increase their compliance to consultant requests. With regard to both school psychologists and teachers having similar perceptions of power base effectiveness, they viewed direct informational and positive expert power as most likely to lead to teacher compliance. Both groups viewed soft bases as more effective in eliciting compliance to teacher requests than harsh bases. However, the teachers rated legitimate position, direct informational, and legitimate

dependence as highly effective, compared to the school psychologists who rated impersonal and personal reward power as highly effective. The school psychologists rated legitimate position power lowest of all bases assessed by the IPI-Form CT. In interpreting these findings, Erchul, Raven, and Whichard (2001) believed that teachers might expect school psychologists to utilize these power bases in consultation with initially resistant teachers more than the school psychologists indicated they would.

This study and the one conducted by Erchul, Raven, and Ray (2001) were limited in terms of the low response rates, and in the latter study, it was particularly low for the teachers (i.e., 14.4% to 37.8%). Additionally, use of self report instruments like the IPI-Form CT and IPI-Form CE might be biased and/or not reflect actual, real-time consultation sessions. However, Erchul, Raven, and Whichard (2001) were the first to examine consultees' perceptions of social power bases, and they substantiated the findings from previous research in this domain. One variable they advised researchers to examine in the future was gender, and its potential effect on consultant and/or consultee views of social power base effectiveness.

A study by Erchul, Raven, and Wilson (2004) was designed to determine whether male and female school psychologists perceive the effectiveness of the social power bases differently from one another. Using the 134 school psychologists from the Erchul, Raven, and Whichard (2001) investigation, the researchers hypothesized that female school psychologists would perceive soft power bases as more effective in school consultation in comparison to their male counterparts. Their primary research question focused on how male and female consultants compare in terms of their perceptions of the individual power bases.

In comparing the effectiveness ratings of the social power bases according to gender, results were statistically significant with female school psychologists rating both soft and harsh

power bases as more likely to result in teacher compliance than male school psychologists. Additional effect size analyses led the authors to conclude that soft power bases were regarded as more effective by the female school psychologists versus the male school psychologists (i.e., effect size of 0.50 for soft power bases; effect size of 0.42 for harsh power bases). These findings were obtained from analyses of the power bases when grouped in the soft and hard categories. This study and the others discussed previously, from school consultation and organizational field studies, all pointed to the presence of a two-factor solution or distinction between soft and harsh power bases. To answer the initial research question, the authors compared the effectiveness ratings of the 11 bases measured by the IPI by gender and their analysis did not yield significant results. Female and male school psychologists did not perceive the individual social power bases as differentially effective to a significant degree based on gender.

A limitation of this study, based on the obtained sample, was the lack of male respondents (i.e., $N = 48$). Erchul, Raven, and Wilson (2004) alluded to the fact that the most common dyadic relationship in school consultation includes a female consultant and female consultee, and this has been supported by research on demographic trends in the field of school psychology (Curtis, Grier, & Hunley, 2004). In turn, they advised that future research focus more on this dyadic relationship. They also advised researchers to delve further into ways consultants perceive the different social power bases in influence attempts.

Wilson, Erchul, and Raven (2008) moved beyond looking at school psychologist and teacher reports of perceived effectiveness of the social power bases by examining perceived *likelihood of use* of the social power bases. Schwarzwald, Koslowsky, and Ochana-Levin (2004) examined likelihood of use among supervisor-subordinate dyads in an organizational field study,

partially forming the rationale for this Wilson, Erchul, and Raven (2008) investigation. They explained that studying likelihood of use might inform researchers and practitioners which social power bases are likely to be used in school consultation, versus examining which social power bases would most likely lead to compliance with consultant requests, as looked at in previous studies (Erchul, Raven, & Ray, 2001; Erchul, Raven, & Whichard, 2001; Erchul, Raven, & Wilson, 2004).

It was hypothesized that consultants would report being more likely to use soft power bases rather than harsh power bases, female consultants would report being more likely to use soft power bases than male consultants, and that female and male consultants would report being more likely to use direct informational, positive expert, and positive referent power more than the other 8 bases. In order to test these hypotheses, a further modified IPI was used. The IPI-Form CT-U (i.e., U = usage) was created with instructions changed so consultants would rate each item in accordance with their likelihood of using the respective social power bases. Furthermore, the IPI-Form CT-U contained 33 items (i.e., 3 items per power base) rather than the 44-item IPI-Form CT used previously. Items having the lowest correlations with the others for each base were removed, thus enhancing the internal consistency of the revised instrument. Recruitment from a NASP list of Nationally Certified School Psychologists (NCSPs) yielded 352 respondents who completed the IPI-Form CT-U. The sample was predominantly female (i.e., 71%) and Caucasian/White (i.e., 93.8%).

Results strongly supported the first hypothesis, but not the second. A principal components analysis yielded a soft-harsh power base distinction, and the factor composition showed personal reward power loading more highly on the harsh factor, and legitimate position power loading more highly on the soft factor. Consultants reported greater likelihood to use soft

power bases instead of harsh power bases in influence attempts. Regarding the second hypothesis, no interaction was found between gender of consultant and the power bases. Wilson, Erchul, and Raven (2008) believed that this finding may be attributed to school psychology practice and possible similarities in personality and/or temperament found across gender. The third hypothesis was partially supported, with consultants more likely to use direct informational power more than the other 10 power bases assessed by the IPI-Form CT-U. Second in rank order was positive expert power, which respondents reported being more likely to use than the remaining 9 power bases, while positive referent power and legitimate power of dependence were third in rank order, reported as more likely to be used than the remaining 7 power bases. There was not a statistically significant difference in positive referent power and legitimate power of dependence, and this finding was similar to that of Schwarzwald, Koslowsky, and Ochana-Levin (2004), who found that legitimate dependency was ranked as third most used by supervisors.

This study was an important contribution to the literature on social power and interpersonal influence in school consultation as it demonstrated how consultants would be more likely to use soft power bases in addition to previous findings on power bases perceived as most effective. Still, some noted limitations of this study were the measurement of the *likelihood of use* of the power bases, as opposed to the *actual use* of them, and the subjective, self-report nature of this research, compared to objective measurement of the power bases during actual consultation sessions. Nonetheless, the researchers concluded that further study of the likelihood of use of the social power bases, specifically in terms of gender differences, was warranted.

The final, most recent study in this line of research on social power and interpersonal influence in school consultation looked at consultants' likelihood of use of soft power strategies

and gender differences between the consultant and consultee (Getty & Erchul, 2009). Specifically, the authors first hypothesized that in consultation dyads containing a female consultant and female consultee, mean consultant ratings on the IPI-Form CT-U for referent power would be higher than the mean IPI-Form CT-U rating for the remaining four soft power bases (i.e., expert, direct informational, legitimate dependency, and legitimate position power). Their second hypothesis was that in consultation dyads containing a male consultant and female consultee, mean consultant ratings for expert power would be higher than the mean for the remaining four soft bases. The rationale for focusing on soft bases in the study was derived from Wilson, Erchul, and Raven (2008) who suggested excluding harsh power bases from this line of research due to their limited likelihood of use and/or inapplicability based on the findings discussed before.

The 352 school psychologists from the Wilson, Erchul, and Raven (2008) study were used in the Getty and Erchul (2009) study. As was mentioned before, a principal components analysis yielded a soft-harsh power base distinction, and the subsequent analyses focused on the soft power bases. Preliminary findings indicated that males were more experienced than females, which led to the inclusion of years of experience as a covariate for testing both hypotheses. Hypothesis 1 was not supported as the researchers found that female consultants were significantly more likely to use the other four soft power bases combined, but not referent power as was originally predicted. It was believed that the results may have differed if interactions between female school psychologists and male teachers were studied, or if the female consultants did not view referent power as one they would be likely to use in an influence attempt. Hypothesis 2 was supported with male consultants reporting greater likelihood of using expert power compared to the other four soft power bases combined. In interpreting this finding,

the authors alluded to research on gender and communication style (e.g., Johnson, 1976), which found expert power attributed more often to men than women. Getty and Erchul (2009) noted that not investigating the actual use of soft power strategies during consultation sessions, and that school psychologists in the sample were reflecting mostly on consultation experiences with female and not male teachers, were limitations of their study and avenues for future research.

Summary of the Research on Social Power and Interpersonal Influence in School Consultation

To summarize, the empirical study of social power and interpersonal influence in school consultation was undertaken in response to the theoretical analyses presented by Martin (1978) and Erchul and Raven (1997). The earliest research focused exclusively on the availability of expert and referent power, and while study results were sometimes inconsistent, some researchers found that both power bases were perceived as viable in influence attempts. The more recent wave of research demonstrated the existence of a soft-harsh power base distinction, with both school psychologists and teachers perceiving soft power bases more effective than harsh power bases. Modified forms of the IPI (Raven, Schwarzwald, & Koslowsky, 1998) tailored for school consultation were used to measure perceived effectiveness and likelihood of use of the power bases. Informational power and expert power were perceived by consultants as most likely to be used in influence attempts. No significant gender differences were found in terms of consultants' perceived likelihood of use of soft power bases over harsh power bases.

In general, results indicated that consultants and consultees do perceive the social power bases as potential means to gain compliance in consultation and improve student outcomes. While additional questions about perceived effectiveness, likelihood of use, and other variables linked to social power and interpersonal influence in school consultation can still be answered, this most current line of research has not examined parents as consultees. Would investigations

of parents of children with autism as consultees, using a modified IPI, yield similar findings to recent research using teachers as consultees? Since these parents play an integral role in school consultation, it would be helpful to consider their perspective on social power and interpersonal influence similarly. In the following section, family-school partnerships, the importance of parent involvement in schooling, and parents as partners in consultation are addressed.

Parents and Schools as Partners in Education and Consultation

An ecological approach within the field of school psychology maintains that child development occurs within multiple interrelated systems (e.g., school, home) and that individual systemic influences must be looked at in conjunction with one another. Anderson (1983) advocated for school psychologists to incorporate a family orientation when providing services, with professional activities (e.g., assessment, intervention, research) tailored to acknowledge students' family developmental contexts. Thus, school psychologists then obtain a better understanding of the reciprocal relationships between family and school systems and their role in students' functioning and outcomes. Minke (2006) stated that educators and families must have shared goals, bidirectional communication, productive working relationships, and joint problem solving methods in collaborating to promote and maintain parental involvement.

According to Sheridan and Kratochwill (2007), positive and constructive relationships between both the school and family systems can be fostered through developing family-school partnerships for prevention and intervention. They defined partnership as "a relationship involving close cooperation between parties that have clearly specified and joint rights and responsibilities," noting that partnerships recognize how "there are mutual, bidirectional shared influences that affect learning and as such, are jointly determined" (pp. 1-2). For this reason, effectively creating and maintaining family-school partnerships is imperative to improve

students' academic, behavioral, and social-emotional outcomes. No decisions pertaining to students are reached solely by parents or professionals, and the presence of this family-school support network allows for individual members of the network to bring their own individual strengths to the partnership. Furthermore, optimal conditions for student success include collaborative, interdependent relationships, shared responsibility, accountability, and empowerment.

While the consultation research reviewed in the previous sections mainly focused on teachers consulting with school psychologists, it is important to take into account the role of the parent in the consultation relationship and efforts of the consultant to get parents to be active participants. Regarding parents and consultation, Christenson and Cleary (1990) asserted that school psychologists must be cognizant of viewing students' behavior from a developmental-systems orientation and maintaining an unwavering focus on the consultant-parent partnership. This is especially important during the problem identification phase of consultation, where a mutual commitment to students' success can be solidified. If this occurs, parent consultees may become more involved, since there are shared goals and a mutual commitment among the parent and the consultant to the chosen intervention. Also, the consultant and consultee understand that environmental changes are often needed to improve students' functioning, and that the responsibility to make such changes is shared amongst those in the partnership.

Salient family factors that have been shown to enhance student achievement include parent expectations and attributions, structure for learning in the home, positive affective home environment, authoritative parenting style, and parent involvement in the home and at school (Christenson, Rounds, & Gorney, 1992). When initiating consultation with parents, it can benefit the school psychologist to obtain information on these family factors in order to aid in the

design of appropriate home-based interventions. Parents would likely welcome such advances in order to become more involved and benefit their children. Christenson, Hurley, Sheridan, and Fenstermacher (1997) conducted a study to obtain parents' and school psychologists' perspectives on parent involvement for enhancing students' success. One noteworthy finding was that parents reported their desire to utilize individual meetings or consultation with school psychologists in the top third of activities or services surveyed. For most of the activities or services presented, there was high concordance between the ratings of the parents and school psychologists.

It is evident that many parents want to be involved in school activities that benefit their children, one of which is consultation. Service delivery using an ecological approach with a family orientation is helpful for building effective partnerships. Moreover, empirical studies have demonstrated that consultation with parents is both acceptable to the parties involved and efficacious in terms of students' outcomes. Key findings are discussed in the next section.

Acceptability, Efficacy, and Satisfaction in Parent Consultation

The parent consultation model of conjoint behavioral consultation (CBC) has been deemed acceptable by consultants and consultees in both the United States and abroad. The CBC model thrives when home-school relationships are strong, enhancing intervention planning, implementation, and monitoring and positive client outcomes (Sladeczek et al., 2006). Since CBC, BC, and other consultation models have individual steps, components, and procedures, it is important that they are carried out as intended, so acceptability is crucial.

Sheridan and Steck (1995) conducted a study to gauge the acceptability of CBC procedures among 409 Nationally Certified School Psychologists by examining specific variables linked to acceptability, including consultant characteristics, logistical barriers, problem

types, and alternative modes of service delivery. Findings showed that CBC situational acceptability ratings were higher than ratings for other modes of intervention (e.g., teacher-only consultation), and that ratings were highest for academic, behavioral, and social-emotional problems. Procedural acceptability was favorable, but respondents indicated that logistical barriers, including the time involved to implement CBC, were significant concerns. It was reported that organizational support and prioritization of CBC would be beneficial to alleviate such obstacles.

Subsequent research assessed consultee acceptability of CBC, focusing on parents and teachers (Freer & Watson, 1999). The researchers surveyed 111 parents of elementary school students and elementary and 61 secondary school teachers in a Northeastern city and found similarities among the parents' and teachers' assessment of CBC. For academic, behavioral, and social-emotional problems, both parents and teachers consistently indicated that CBC was their most preferred approach for consultation. Regarding overall acceptability, both parents and teachers rated CBC as the most acceptable type of BC (i.e., more than teacher-only consultation and parent-only consultation). Sladeczek et al. (2006) investigated acceptability of CBC using an international sample of Canadian parents and school psychologists using the Sheridan and Steck (1995) study questionnaire for the practitioners, and a measure of treatment acceptability for the parents. Data was obtained from 106 school psychologists and 12 parents that participated in CBC. Similar to Freer and Watson (1999), results showed that CBC was rated as the most preferred consultation model for academic, behavioral, and social-emotional problems. Therefore, the perceptions of CBC were similar among both practitioners and parents in both the United States and Canada. Freer and Watson (1999) suggested that while CBC has been deemed acceptable, research supporting its efficacy was needed.

A number of recent studies have addressed the efficacy of CBC. An early investigation in this area by Sheridan, Eagle, Cowan, and Mickelson (2001) examined CBC behavioral outcomes, home-school effects, and dimensions of acceptability, satisfaction (i.e., consultant), and treatment integrity in consultation for 52 child-clients. One strength of the study was its use of behavioral and naturalistic data as outcome measures, where parents and teachers engaged in continuous, direct observation of students' behaviors. Parent and teacher ratings were obtained on measures of goal attainment, acceptability, and satisfaction with consultation. Large effect sizes were obtained for both home and school settings (M = 1.10), and parent and teacher ratings of acceptability and satisfaction were similar, with teacher ratings slightly higher. Consultee self-reports were used to obtain documentation of treatment integrity in the home and school, and 71% of the treatment plans had documentation of treatment integrity. The researchers also designed a regression model fitting client age, case complexity and symptom severity, and found that older clients with less severe systems or younger clients with more severe symptoms (i.e., forging early family-school partnerships) would have higher predicted effect sizes as a result of CBC in the school, compared to the home.

Guli (2005) followed the Sheridan et al. (2001) study by conducting a meta-analysis to examine the efficacy of evidence-based parent consultation models including CBC, but focused only on studies where consultation was geared towards children's school problems. Eighteen studies were analyzed, and the majority of them utilized CBC or structured versions of BC and target problems included homework completion and accuracy, anxiety, social skills, and non-compliance. Guli (2005) observed that most studies used methodologically strong designs (e.g., manualized interventions, evaluating outcomes beyond statistical significance), but few comparison groups were used and limited follow-up data were obtained. Moderate to large

reported effect sizes showed that CBC received the strongest overall ratings in terms of study methodological rigor and evidence of a significant change in clients' target behaviors. The author suggested that while these results were promising, additional studies that investigate the outcomes of parent consultation with diverse populations were warranted.

Sheridan, Eagle, and Doll (2006) performed one of the earliest studies of CBC efficacy in the home and school using a diverse sample. The primary variable of interest to the researchers was the cumulative effect of diversity, which they defined as the number of ways in which the client differed from the mainstream population. Diversity characteristics were ethnicity, income, adults in home, maternal education, and language. The researchers explored 125 child-clients' behaviors or academic performance using direct observations or permanent products of target behaviors, and parents' and teachers' acceptability, effectiveness of, and satisfaction with CBC. Study results showed that for clients with 2 or more of the above-mentioned diversity characteristics, CBC yielded the highest effect sizes in both home and school. Interestingly, in the home, the effect size was highest for clients experiencing none of the diversity characteristics. Still, effect sizes for CBC interventions were high regardless of the number of diversity characteristics (i.e., above 1.2). In terms of perceptions of effectiveness, goal attainment, satisfaction, and acceptability, parents and teachers both rated CBC favorably, though parents rated effectiveness of CBC procedures and goal attainment higher than teachers, and teachers rated satisfaction higher than parents.

In summary, the results of this study and those previously reviewed indicate the efficacy of parent consultation for home and school problems, and its social validity, when CBC is utilized as the consultation model. Parents are essential partners in the consultation process, serving as consultees along with teachers, and the family-centered, ecological approaches

inherent in CBC attest to its success in terms of positive student outcomes. When building parent-school partnerships, and throughout the consultation process, school psychologists engage in influence attempts where they utilize the social power and interpersonal influence techniques reviewed at length earlier. Thus, it would be beneficial to study how parents perceive these techniques, as well as the effectiveness of the consultant and resulting child outcomes. Studying these perceptions among populations of parents who are especially in need of consultation services is warranted. One such population is described below.

Autism, Schools, and Families

Children and adolescents with Autism Spectrum Disorders have unique challenges, in the areas of communication (e.g., expressive language), social interaction (e.g., difficulty in establishing peer relationships), and behavior (e.g., stereotyped and/or restrictive patterns) (Wilczynski et al, 2009). The Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, Text Revision (APA, 2000) outlines the criteria for the following five spectrum disorders: Autistic Disorder, Asperger's Disorder, Pervasive Developmental Disorder, Not Otherwise Specified, Rett's Disorder, and Childhood Disintegrative Disorder. According to Cole and Arndt (1998), it is sometimes difficult to diagnose autism because of symptom overlap with other disabilities, symptom variation based on age, as well as variable functioning with regard to intelligence and language. As a result, early assessment and diagnosis of autism can alleviate future outcomes among affected children and provide tailored approaches for treatment.

Children with autism are often first exposed to the educational process through early intervention programs when they are of preschool age (Kundert & Trimarchi, 2006). Children who are higher functioning along the spectrum are often successful in inclusive, general education classrooms, when early intervention services are provided (Cole & Arndt, 1998).

While it is important for these children to receive such services, parents are also in need of assistance and support to ensure optimal outcomes. Some parents lack information or connections with other parents or service providers, particularly after their child's initial diagnosis. Osborne and Reed (2008) conducted a qualitative focus group study with a sample of English parents, who indicated that they would have benefitted from having more information on remediation programs, training, and guidance to address their children's special needs. The study authors also noted that while autism is generally diagnosed within medical settings, subsequent help is primarily offered in schools and other educational contexts.

Since children spend much of their formative years in schools, it is important for school psychologists to consistently promote parent involvement for this special needs population. Two key factors in addressing the needs of individuals with Pervasive Developmental Disorders are family involvement and support, because of the wealth of information about their children that parents bring to the consultation relationship, and their role in implementing interventions (Wilczynski et al, 2009). With much needed parent involvement, consultants can provide better-informed systematic training and mentoring to families in need, including developing a structured environment at home, or designing a behavior modification plan to be used in the home (Lopez et al. 2007).

Rationale for the Present Study

There are a number of reasons for why parents' of children with Autism Spectrum Disorders perceptions of social power, interpersonal influence, and dimensions of social validity should be studied. One important reason for the continued study of social power and interpersonal influence in school consultation is the fact that consultation, like counseling and psychotherapy, is a helping process that relies on interpersonal influence (Hughes, 1992). In

spite of not holding positions of authority or management over subordinates, school psychologists are in a unique position serving as a source of influence as knowledgeable advocates for all students, with their power to effect educational change (Lambert, 1973). A school psychologist must rely on this ability to influence teachers and parents to help bring about such change. Consultants who are unsuccessful in doing so will be unsuccessful in eliciting change among consultees and clients. In line with the paradox of school psychology (Gutkin & Conoley, 1990), which refers to the need to focus on working with adults to provide the best services to students, Erchul, Grissom, and Getty (2008) advanced the *second paradox of school psychology*. They stated that "although school psychologists have the potential to influence and thereby change the behavior of consultees, many are reluctant to recognize and exercise this influence, and as a result the effectiveness of consultation is not maximized" (p. 318). In addition to studying student outcomes in consultation, there is a pressing need for continued study of adults in consultation, especially parent consultees, who maintain significant responsibility for consultation outcomes.

Martin (1978) acknowledged that consultation is by no means a unidirectional influence process, so when consultants and consultees do not see eye-to-eye in terms of meeting the consultees' needs, modifications must be made to the consultation relationship, or it should be terminated. Greater assessment and understanding of consultees' attitudes toward the client, consultant, and other factors, as well as what leads to their acceptance or non-acceptance of influence attempts, is necessary for the consultant to meet the needs of the parties involved (Hughes, 1992; Raven, 1992). As it is more difficult to establish productive consultation relationships with some consultees in some settings (Martin & Curtis, 1980), continued research

should focus on the different mechanisms that lead to consultees' acceptance and change in the process (Short, Moore, & Williams, 1991).

Since the study of social power and interpersonal influence in consultation looking at parents' perceptions has not been undertaken, that is the primary objective of this research. Further knowledge in this area will help school psychologists better recognize their potential for influencing parent consultees, and therefore work more effectively with these adults in children's lives. In particular, parents of children diagnosed with Autism Spectrum Disorders often work closely with school psychologists. School psychologists who consult in this capacity with this student population are typically responsible for developing behavior intervention plans and providing positive behavior supports, adapting curricula and implementing systematic instruction, developing and maintaining structured environments, and fostering family involvement in this process (Lopez, Hill, Shaw, & Gabriels, 2007).

To highlight the utmost importance and need for family involvement among families of children with autism, Kelley and Samuels (1977) recognized that "carry-over of the school program into the home setting is vital, and family members can become efficient in using methods that school personnel develop for working with the child" (p. 540). With this in mind, the present study will utilize a sample of parents of children with Autism Spectrum Disorders. It is especially important to determine which techniques used by school psychologists in consultation lead to enhanced "carry-over" and family involvement, among these unique consumers of school psychological services, who may lack the resources or requisite skills to help their children address their academic, behavioral, emotional, and/or social challenges.

A second reason for conducting this research is that consultants sometimes encounter resistance among teachers and parents, potentially as a result of their influence attempts.

Wickstrom and Witt (1993) consider resistance a natural process that impedes problem solving and resolution processes. Campbell (1993) stated that resistance is inherent in the consultation process among parents in particular, and that it is often due to parents having to change some aspect of their own behavior, or home environment, to best help their children. The idea of change is viewed as daunting to parents, so consultants need to be cognizant of this, prevent it, and/or reduce it to the fullest extent. By studying how this group of parents views school psychologists' influence attempts, school psychologists can better assist parents with dealing with potential changes in their own lives and the lives of their children, and also determine whether certain power strategies or approaches are linked with more favorable outcomes, and less resistance.

A third reason for examining social power and interpersonal influence using a parent sample pertains to intervention design, implementation, and treatment integrity. School psychologists must be aware of whether or not parents are committed to interventions created in consultation. High probability interventions focus on keystone behaviors, are empirically supported, accepted by those implementing them, and are most likely to be used, potentially enhancing treatment integrity (Telzrow & Beebe, 2002). While treatment integrity has been defined in various ways, Noell (2008), referring to teachers, parents, or other consultees, described it as "the degree to which the consultee delivers the treatment to the client" (p. 324). Since consultation is a process of interpersonal influence, school psychologists need to use strategies to ensure parents adhere to interventions and monitor their effectiveness to determine whether they have their intended effect. How parents perceive such strategies and whether they deem them as effective in eliciting their compliance is in need of further study.

Finally, a related fourth benefit of continuing this line of research with parents pertains to the social validity of consultation and intervention. Intervention goals and procedures must be deemed socially important by consumers and their effects must be clinically significant (Wolf, 1978). Previous studies have neither looked at parents' perceptions of social power and interpersonal influence, nor looked at such findings in conjunction with their ratings of consultant effectiveness, and satisfaction with consultation outcomes. Exploring the strength and direction of relationships between social power and interpersonal influence and the aforementioned dimensions of social validity would be useful when examining consultation outcomes and in structuring future influence attempts. Treatments that are more acceptable to interventionists are more likely to be implemented correctly (i.e., treatment integrity) (Finn & Sladeczek, 2001). Determining how parents of children with autism perceive school psychologists' influence attempts in consultation can enable school psychologists and parents to design and implement more acceptable interventions, such as those that exist in the home environment (i.e., ecologically friendly interventions), and thus increase treatment integrity (Riley-Tillman & Chafouleas, 2003).

Research Questions

Based on the literature reviewed, the present study seeks to answer the following questions:

1. Which social power bases from the French and Raven (1959) and Raven (1965, 1992) social power base typology do parents of children with Autism Spectrum Disorders perceive as effective versus ineffective in eliciting their compliance to school psychologists' influence attempts in school consultation?

2. Are these parents' ratings of the social power bases from the French and Raven (1959) and Raven (1965, 1992) social power base typology similar or different to those of school psychologists (Erchul, Raven, & Ray, 2001) and those of teachers (Erchul, Raven, & Whichard, 2001), whom were both studied previously?
3. Does a two-factor solution of soft power bases and harsh power bases exist among this sample of parents, as it did previously for samples of school psychologists (e.g., Erchul, Raven, & Ray, 2001) and in supervisor-subordinate samples from organizational field studies (e.g., Schwarzwald, Koslowsky, & Agassi, 2001)?
4. Do these parents perceive positive expert power more favorably than positive referent power, when used by school psychologists, in accordance with Martin's (1978) assertion that internal consultants who have little contact with consultees rely more on expert power in influence attempts, compared to referent power, which must be built up over time?
5. Do these parents' ratings of perceived effectiveness of the soft social power bases from the French and Raven (1959) and Raven (1965, 1992) social power base typology predict parents' ratings on measures of consultant effectiveness, and satisfaction with child outcomes from consultation?

Hypotheses

Based on the literature reviewed, and the research questions posed, the hypotheses of the present study are as follows:

1. The social power bases from the French and Raven (1959) and Raven (1965, 1992) social power base typology that will be rated as most effective in eliciting parents' compliance are positive expert power, positive referent power, personal reward

power, direct informational power, and legitimacy of dependence, which will be similar to findings from previous research on social power and interpersonal influence in school consultation using teacher consultees (Erchul, Raven, & Whichard, 2001).

2. Parents will rate the soft power bases as more effective in eliciting their compliance in influence attempts compared to the harsh power bases. This was found previously in a sample of school psychologists (Erchul, Raven, & Ray, 2001) and among teachers as well (Erchul, Raven, & Whichard, 2001).
3. As found previously in this line of research with school psychologists (e.g., Erchul, Raven, & Ray, 2001) and in supervisor-subordinate samples from organizational field studies (e.g., Schwarzwald, Koslowsky, & Agassi, 2001), a two-factor solution of soft power bases and harsh power bases will exist among this sample of parents surveyed.
4. Parents will attribute higher levels of positive expert power to school psychologists than positive referent power. This is in accordance with Martin's (1978) assertion that internal consultants who have little contact with consultees rely more on expert power in influence attempts, compared to referent power, which must be built up over time. Presumably, school psychologists have greater contact with teacher consultees on a daily basis than they do with parent consultees, and parents are therefore expected to rate positive expert power higher than positive referent power.
5. Strong, positive relationships will exist between parents' ratings of the soft social power bases and their ratings on measures of consultant effectiveness and satisfaction with child consultation outcomes. Higher ratings of perceived effectiveness of the social power bases will be more strongly correlated with ratings on these measures.

CHAPTER III

METHODOLOGY

This chapter describes the methodology of this study, which assessed parents' attitudes on the use of social power strategies by school psychologists, and dimensions of social validity, in school consultation for children with Autism Spectrum Disorders. First, the participants and their recruitment process are described. Sample characteristics are also discussed. Second, the questionnaire, which is comprised of five separate measures, is described. Third, the study procedures are outlined. Finally, the study design and methods for statistical analysis of the data are described.

Participants

Parents that participated in this study were recruited, using convenience sampling, from local, regional, national, international advocacy and support organizations, and parent groups for families with children who have autism. The Internet was the primary tool used to sample participants, as the investigator contacted many of the organizations by email, through social networking websites (e.g., Facebook), and Internet parent group websites and forums. The parents that participated were required to have a child with autism, and the parents must have participated in the school consultation process at some juncture with a school psychologist, or school psychologists.

A total of 400 parents accessed the Internet questionnaire. However, most of those parents did not answer all of the questionnaire items. A total of 277 parents completed at least one questionnaire item, while 238 parents completed all items pertaining to background and demographic variables (i.e., parent and child items). A total of 169 parents completed all items comprising the primary measures on the questionnaire (i.e., IPI-Form CE, CEF, and GAS rating

item). Finally, 149 parents completed every item on the questionnaire. A summary of parents' response rates may be found in Table 2 below.

Table 2

Summary of Parents' Response Rates

Description	**Total**
Number of Parents who Accessed the Internet Questionnaire	400
Number of Parents who Completed at Least One Questionnaire Item	277
Number of Parents who Completed all Background and Demographic Items	238
Number of Parents who Completed all Items on the Primary Measures (i.e., IPI-Form CE, CEF, GAS)	169
Number of Parents who Completed all Items on the Questionnaire	149

Regarding characteristics of this sample, 89.1% of parents who completed the survey were female. Their mean age was 41.3 at the time they completed the questionnaire. This was a predominantly White/Caucasian sample in terms of ethnicity (i.e., 87.4%). Latino/Hispanic and Black/African American parents were second and third highest in terms of percent of sample representation at 4.6% and 3.8%, respectively. Parents in this sample were well-educated with 71.4% of parents having a minimum of a two to four year college degree or higher.

The school psychologists considered when completing the questionnaire were 73.5% female, as was reported by this parent sample. Only 26.5% of the parents had consulted with male school psychologists. Regarding consultation experience, 67.6% of the parents indicated that they first initiated consultation, while 32.4% indicated that the psychologist was the one to initiate consultation. Consultation was *not* a new experience for many of the participants, as

39.1% of the sample had previously consulted with their children's school psychologists, or the psychologist consulted with them, 5 or more times over the course of their children's schooling.

Regarding the background and demographic variables of the children of the parent participants, 83.6% of the children were males and 81.5% of them were White/Caucasian. The children's mean age at the time of parents' completion of the questionnaire was 10.4. Mixed race children were ranked second highest at 6.3% and Black/African American Children were ranked at 4.2%. Children were diagnosed at the age of two 21.8% of the time, according to this sample of parents, and 70.2% were diagnosed by the age of five. The mean age of diagnosis was 4.5.

In terms of the breakdown of children's autism spectrum diagnosis, 42% were diagnosed with Autistic Disorder, 31.5% were diagnosed with Asperger's Disorder, 24.4% were diagnosed with Pervasive Developmental Disorder, Not Otherwise Specified, 1.7% were diagnosed with Rett's Disorder, and 0.4% were diagnosed with Childhood Disintegrative Disorder. Primary reasons for consultation with the school psychologist were as follows: 45.8% for academic reasons, 70.2% for behavioral reasons, 43.7% for emotional concerns, and 55% for social concerns. Table 3 below provides an extensive list of comorbid disabilities and/or chronic illnesses experienced by children of the parents that completed the questionnaire.

Measures

The questionnaire was comprised of the following measures: (a) a measure of personal background and demographic information with questions about the parents themselves, and their children who are the basis for consultation, (b) a measure of parents' perceptions of the effectiveness of school psychologists' social power strategies used to elicit their compliance in consultation, (c) a measure of parents' perceptions of the effectiveness of the respective school psychologists that served as consultants to them, (d) a measure of parents' perceptions of their

Table 3

List of Comorbid Disabilities and/or Chronic Illnesses Experienced by Children of the Study Participants (*n* = 238)

Apraxia	ADHD
Skin Disorders	Oppositional Defiant Disorder
Alopecia	Malapsorption Disorder
Sensory Integration Disorder	Hypotonia
Anxiety Disorders	Down Syndrome
Depression and Mood Disorders	PANDAS and Strep Infections
Mental Retardation	Cerebral Foliate Deficiency
Asthma	Food Allergies
Explosive Disorder	Hypothyroidism
Sensory Processing Disorder	Seizure Disorder
Epilepsy	Fine and Gross Motor Skills Deficits
Tics and Tic Disorder	PTSD
Sleep Disorders	Chronic Sinusitis
Conduct Disorder	Kidney Problems
Learning Disabilities	Arrskog Syndrome
Constipation	Selective Mutism
Hyperthyroidism	Gastrointestinal Problems
Cerebral Palsy	Meniere's Diesease
Atopic Dermatitis	Auditory Processing Disorder
Retinopathy and Legal Blindness	Pragmatic Language Disorder
Sinus Infections	Obesity
Headaches	Dyspraxia
PICA	Celiac Disease
Ear Infections	Speech and Language Disabilities
Enlarged Tonsils	Chronic Heart Disease
Feeding Disorder	Vomiting Syndrome
Croup	Brain Injury
Chronic Back and Neck Pain	Bell's Palsy
Visual Processing Disorder	Diabetes
CMTC	Brain Hemorrhage
Reflux	Nocturnal Enuresis
Dysmnesia	Seasonal Allergies
Dysnomia	BTD Deficiency
Bioptic Dysfunction	Restless Leg Syndrome

children's outcomes resulting from consultation, and finally (e) a measure of parents' perceptions of their broad engagement in the consultation process. Overall, the questionnaire contained 87 items.

Parent and Child Background and Demographic Information. Parents were asked to provide personal background and demographic information, including gender, ethnicity, age, highest level of education completed, number of children in the household, gender of the school psychologist that served as the consultant to the parent, approximate number of times in which the parent has consulted with the school psychologist for their child previously, and whether it was the parent or school psychologist that initiated the consultation being considered for completing the questionnaire.

Parents were also asked to provide personal background and demographic information pertaining to their child, including the following: their child's gender, ethnicity, age, birth order, autism spectrum diagnosis (i.e., Autistic Disorder, Asperger's Disorder, Rett's Disorder, Childhood Disintegrative Disorder, or Pervasive Developmental Disorder – Not Otherwise Specified (i.e., PDD-NOS), age when diagnosed, other diagnosed comorbid disabilities and/or chronic illnesses, educational level (i.e., grade level or ungraded), and primary reason(s) for consultation (i.e., academic, behavioral, emotional, social). A copy of the questionnaire introduction and consultation experience items may be found in Appendix A. A copy of the parent background and demographic items may be found in Appendix B. A copy of the child background and demographic items may be found in Appendix C.

Interpersonal Power Inventory – Consultee Form (*IPI-Form CE*). Parents' perceptions of social power and interpersonal influence were measured using a modified version of the Interpersonal Power Inventory Form for Teacher Consultees (IPI-Form CE; Erchul, Raven, & Whichard, 2001). The IPI-Form CE is a modified version of the Interpersonal Power Inventory (IPI; Raven, Schwarzwald, & Koslowsky, 1998), a psychometrically sound critical incident measure of the social power base typology originally utilized with samples of supervisors and

subordinates in organizational field studies (French & Raven, 1959; Raven, 1965, 1992). The IPI-Form CE was created by Erchul, Raven, and Whichard (2001) to assess teachers' perceptions of social power and interpersonal influence in school consultation. The instructions for the IPI-Form CE are as follows:

> When consulting, school psychologists may ask teachers to do their jobs somewhat differently, and teachers may be initially reluctant to change. In such cases, teachers tend either to resist making the changes or to do as requested. We are interested in understanding when teachers are *more likely* or *less likely* to do what the school psychologist asks in consultation. Think about a time when a school psychologist was consulting with you about a particular classroom situation and you were initially reluctant to follow his/her suggestions or comply with his/her requests. Asking you to collect baseline data or to start an intervention plan on a particular day are two examples of these types of situations.

Respondents are then asked to rate 44 items (i.e., 4 items for each of the 11 social power bases assessed by the original IPI) on a 7-point Likert scale, with anchors of 1 (i.e, *much more likely to comply*) and 7 (i.e., *much less likely to comply*). The 11 power bases are as follows: impersonal and personal forms of reward and coercive power, positive forms of expert and referent power, direct informational power, legitimate power of position, legitimate power of reciprocity, legitimate power of equity, and legitimate power of dependence.

The individual items are specific reasons for which a teacher would or would not comply with a school psychologist's requests, recommendations, or suggestions in school consultation. On this modified version, scores are obtained for each of the 44 items, where low item scores (i.e., those closer to 1) are indicative of *lower perceived effectiveness of the strategy* for eliciting compliance, while high item scores (i.e., those closer to 7) are indicative of *higher perceived effectiveness of the strategy* for eliciting compliance. Two examples of items are "Once the consultant points it out, I can see why the change is necessary" and "The consultant probably knows more about this particular situation than I do."

In order to make the IPI-Form CE suitable for *parents* to provide their perceptions of school psychologists' social power and interpersonal influence in school consultation, as opposed to teachers, changes were made to the instructions and individual items. Specifically, the word "teacher" was replaced with the word "parent" in the instructions of the IPI-Form CE. Additional changes in the wording throughout the 44 items were made when needed in order to tailor it for parent completion and in response to suggestions from parents with whom the questionnaire was administered in a pilot study. The individual items for this present study represented specific reasons for which a *parent* would or would not comply with a school psychologist's requests, recommendations, or suggestions in school consultation. A copy of the IPI-Form CE may be found in Appendix D. In addition, a listing of the individual items that are specific to each of the eleven social power bases is provided in Appendix E.

Also included on the IPI-Form CE were 11 items designed to make the survey more balanced, obtain more credible responses from parents, and not provide a "slanted view" of a consultation relationship dominated by the school psychologist. As was discussed earlier, active collaboration and engagement with parents are important aspects of school consultation that should be maintained for it to be effective. Since the IPI-Form CE items strictly inquire about the school psychologist getting parents' compliance, the addition of items that ask the parent how he or she feels about strategies useful for getting the school psychologist to comply with *he or she, the parent,* was deemed appropriate under these circumstances. These items were intertwined with the 44 IPI-Form CE items as every fifth item (i.e., 5, 10, 15, 20, 25, 30, 35, 40, 45, 50, 55). A copy of these 11 balancing items may be found in Appendix F.

Like the IPI, the IPI-Form CE has been shown to be a psychometrically sound instrument for measuring social power and interpersonal influence. Erchul, Raven, and Whichard (2001)

gave the IPI-Form CE to a national sample of teachers. Principal components analyses were conducted to examine the factor structure of the IPI-Form CE, and the researchers found alpha coefficients among the individual factors of 0.82 to 0.92 (M = .87), suggesting sufficient reliability.

While additional information on the validity of the IPI-Form CE is needed, the Interpersonal Power Inventory for Consultants (IPI-Form CT; Erchul, Raven, & Ray, 2001), a similar instrument to the IPI-Form CE, that was used to assess *school psychologists'* perceptions of social power and interpersonal influence in school consultation, exhibited adequate construct validity. This was evidenced by the consistent findings of a harsh-soft power base two-factor solution across multiple studies in school consultation when using the instrument with school psychologists as participants (Erchul, Raven, & Ray, 2001; Erchul, Raven, Whichard, 2001). This harsh-soft power base two-factor solution was also found in organizational field research with supervisors and subordinates with the original IPI (e.g. Raven, Schwarzwald, & Koslowsky, 1998).

Consultant Evaluation Form (CEF). The Consultant Evaluation Form (CEF; Erchul, 1987) was used to measure parents' perceived satisfaction with the school psychologists, who served as consultants to them, whom they considered when completing the questionnaire. The CEF consists of 12 items, where consultees rate on a 7-point Likert scale (i.e., anchors of *strongly disagree* and *strongly agree*), which reflect the helpfulness of the consultant and the effectiveness of the consultation process. The total score can range from a minimum of 12 to a maximum of 84. The ratings on the 12 items are averaged, yielding an overall CEF score, ranging from a minimum of 1 to a maximum of 7. Higher scores are more favorable, indicating greater perceived satisfaction, helpfulness, and/or effectiveness, while lower scores indicate the

opposite. Two examples of items are "The consultant was generally helpful" and "I would request services from this consultant again, assuming that other consultants were available." A copy of the CEF is provided in Appendix G.

Erchul (1987) studied relational communication and control among consultants and consultees in school consultation and used the CEF to measure female consultees' perceptions of their consultants' effectiveness. Alpha coefficients from this research indicated strong internal consistency (i.e., .94) among the teacher respondents. The CEF has been used with parents as a measure of "consumer satisfaction" (e.g., Sheridan et al. 2001, p. 368) in school consultation research. For parents, an alpha coefficient of .89 was found in the Sheridan et al. (2001) study, which examined teacher and parent perceptions of students' behavioral outcomes and social validity dimensions of CBC.

Goal Attainment Scaling (GAS). Goal Attainment Scaling procedures (GAS; Kiresuk, Smith, & Cardillo, 1994) were used to measure parents' reports of whether they felt their child's consultation goals were met. This technique is individualized and criterion-referenced, and is appropriate for illustrating and documenting student progress (Roach & Elliott, 2005). Specifically, two items were presented, where the first asked the parents what specific goal they had for their child in the consultation they considered to complete this questionnaire, and the second asked the parents to indicate on a 1 to 5 scale how close their child came to meeting that goal (i.e., 1, indicating the situation got significantly worse through 5, indicating the goal was fully met). A copy of the two GAS items may be found in Appendix H.

Engagement Item. An item created by this researcher was included in the questionnaire to assess parents' level of engagement throughout their consultation experience. A 1 to 5 scale was provided, where 1 reflected the parent felt "completely" unengaged in the overall process, 2

reflected the parent felt “somewhat unengaged in the overall process, 3 reflected the parent “felt neither engaged nor unengaged in the overall process, 4 reflected the parent felt “somewhat” engaged in the overall process, and 5 reflected “completely engaged” in the process. A copy of this engagement item may be found in Appendix I.

Procedures

The local advocacy and support organizations were contacted individually. When permission was granted to disseminate the research advertisement, which is located in Appendix J, parents who were interested, or potentially interested, in participating were sent an Internet link to the questionnaire. The link directed them to a Consent Form outlining the background of the study and the procedure for completing the questionnaire. A copy of the Consent Form may be found in Appendix K along with a list of local community mental health resources. Parents were asked to provide their consent to participate if they chose to complete this study by checking a box indicating they understand the study information provided and the procedures they will follow. Participation was anonymous, and at no point were parents asked to provide any identifying information about themselves, their children, or their families. Under some circumstances, the link was posted several times to Internet forums, parent support groups, and organizational groups (e.g., Autism Speaks) on their Facebook page. A list of organizations and groups provided with information about the study, including a link to the Internet questionnaire, may be found in Appendix L. For instance, this researcher reposted the Internet Script, found in Appendix M, several times over the course of several weeks on the Autism Speaks Facebook Page, in order to find new parents who might be interested in participating.

If they agreed to participate, the parents were then directed to the questionnaire, which was designed to take approximately 30 minutes to finish. In completing the questionnaire, the

parents were instructed to consider a recent consultation experience with their child's school psychologist to complete all items on the questionnaire. Parents were allowed to terminate their participation in the study at any point if they felt uncomfortable as they completed the questionnaire containing the measures described previously. Their option to terminate participation without any consequences was explained on the Consent Form.

In addition, participants were advised on the Consent Form that they may enter a random drawing for a chance to win one of 50 Amazon.com Gift Cards valued at $25 each for their involvement in the study. To be entered into that drawing, the parents were advised that they needed to be one of the first 150 parents to have a chance to win one of the Gift Cards. At a later date, after the investigation is completed, those 50 participants randomly selected out of the first 150 participants were provided with the gift card by email (i.e., if they chose to provide their email address). Even if parents do not complete the survey, they were allowed to enter their email addresses to participate in the random drawing.

All data collected were securely encrypted over the Internet. As mentioned earlier, all data obtained from all parents remained anonymous with access only provided to this researcher and his dissertation advisor.

Study Design and Data Analysis

A passive observation design was utilized in this study in order to examine the strength and direction of the relationships among the variables addressed in the research questions. Passive observation designs are generally used by researchers who collect data on a single occasion, where no experimental manipulation of the data obtained takes place (Conroy, Kaye, & Schantz, 2008). In addition to calculating descriptive statistics where applicable, multivariate

correlational statistics were utilized in this study to analyze the data obtained. The specific statistical methods for the individual research questions are as follows:

1. To determine which social power bases from the French and Raven (1959) and Raven (1965, 1992) social power base typology parents perceive as more effective versus less effective in eliciting parent compliance to school psychologists' influence attempts in school consultation, descriptive statistics (e.g., means and standard deviations) were calculated and ANOVA with repeated measures were utilized.
2. To determine whether parents ratings of the social power bases from the French and Raven (1959) and Raven (1965, 1992) social power base typology similar or different to those of school psychologists (Erchul, Raven, & Ray, 2001) and those of teachers (Erchul, Raven, & Whichard, 2001), descriptive statistics and ANOVA with repeated measures were utilized.
3. To determine whether a two-factor solution of soft power bases and harsh power bases exist in a sample of parents, as it did previously for samples of school psychologists (e.g., Erchul, Raven, & Ray, 2001) and in supervisor-subordinate samples from organizational field studies (e.g., Schwarzwald, Koslowsky, & Agassi, 2001), an Exploratory Factor Analysis (EFA) was conducted to determine the overall factor structure of the parents' ratings.
4. To determine whether parents' ratings of social power and interpersonal influence (i.e., on the soft social power bases), obtained using the IPI-Form CE (Erchul, Raven, & Whichard, 2001) predict parents' perceptions of consultant effectiveness, obtained using the CEF (Erchul, 1987), and satisfaction with child outcomes from consultation, obtained using the GAS rating item (GAS; Kiresuk, Smith, & Cardillo, 1994), separate multiple

regression analyses were used to assess the significance of the relationships among these variables.

CHAPTER IV

RESULTS

This chapter presents the results of this study as well as the statistical procedures used to conduct the analyses. A discussion of challenges faced due to missing data is provided, followed by descriptive statistics for the primary measures included on the questionnaire. Inferential statistics used to address the research questions and test the study hypotheses are then presented. The SPSS statistical package, Version 20, for Microsoft Windows (IBM, 2011), the Comprehensive Exploratory Factor Analysis program, Version 3.04 (CEFA; Browne et al., 2009), and the Amelia II Program for Missing Data (AMELIA II; Honaker, King, & Blackwell, 2011) were used to evaluate the study data.

Missing Data

In analyzing the study data, it was apparent that data were missing. Specifically, missing values were observed among the primary study measures, including the IPI-Form CE, CEF, and the GAS rating item. In considering remedies for coping with missing data, one must assess the extent of the problem, sample size, reasons for why the data are missing, and the number of users of the data set (Cohen et al., 2003). Schlomer, Bauman, and Card (2010) indicated that best practices for addressing missing data include reporting the extent and nature of the missing data as well as the procedures used to manage the missing data, including the rationale for the decisions made. The missing data in this study were thoroughly examined using diagnostic techniques in order to best determine how to proceed with the analyses.

There are several types of missing data. When considering data that are missing on a variable, those that are missing at random (MAR) are not related to participants' responses on that variable, after controlling for other study variables (Acock, 2005). In other words, some

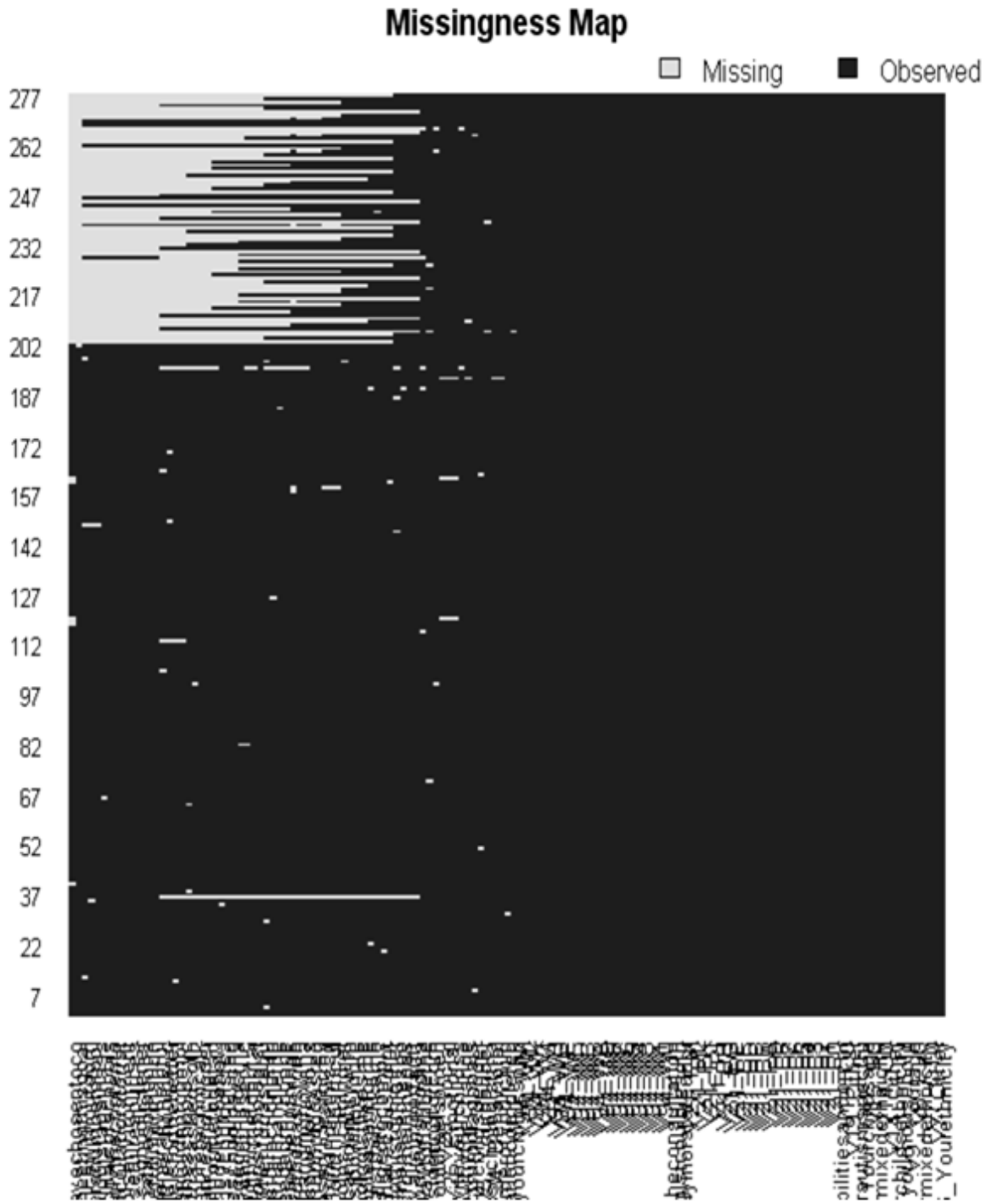
other variable or variables provide a mechanism that explains the missing data. Data that are missing completely at random (MCAR) are unrelated to other variables in the data set. Collins, Schafer, and Kam (2001) emphasized that whatever is generating the missing data is statistically *unrelated* to other variables under investigation. Data that are missing not at random (MNAR) exhibit a pattern where the likelihood of data missing is linked to the tendency to not respond. The data observed cannot account for the relationship between non-response and the variables under which it occurs.

The present study data were dummy coded throughout all 87 items of the questionnaire to explore patterns of pervasiveness, and correlations of non-responding among the different variables. In looking at individual item frequencies one-by-one, and through grouping the cases together by total missing data per case, much of the missing data appeared to be due to participants stopping responding to the questionnaire. Figure 2 below contains a missing data matrix generated using the Amelia II Program (AMELIA II; Honaker, King, & Blackwell, 2011), illustrating the pattern of missing data just described. The vertical axis indicates the number of cases, where every participant responded to at least one questionnaire item (i.e., $n = 277$). The horizontal axis lists the individual questionnaire items, where from left to right, the questions are listed in descending order from last to first (e.g., the final item is the first item listed and has the most missing data). Observed data are light-shaded while missing data are dark-shaded.

In addition to examining item frequencies, correlations were calculated between the dummy codes for missingness among the variables and cases, as well as for the dummy codes for missingness with the original variables themselves. This was done to determine whether there were any mechanisms present for explaining patterns of missingness between different items as well as whether the missingness on certain variables was linked to responses on other variables.

Figure 2

Missing Data Matrix



This was also helpful to see whether parents that responded in one particular manner were more likely to stop participating compared to parents who responded in another manner. Low correlations were observed in both analyses indicating that no clear mechanism was present for explaining any systematic bias due to the missing data. Proportions of missing data were also calculated for each case and pairwise correlations were carried out with the other variables. Low correlations were observed again, indicating no clear association between the variables and when a parent chose to stop responding.

From these diagnostic procedures, it was determined that the missing data patterns were due to parents stopping their participation on the questionnaire early. In this situation, the parents' ceasing participation was not associated with the way they responded to the individual items. The pattern of missing data here could be classified as MCAR, because the pattern responsible for the missingness is not statistically or systematically related to the variables under study. It is possible that the length of the questionnaire itself and time required to finish it deterred many of the parents from completing it.

Two common remedies for missing data that are MCAR are listwise deletion and multiple imputation. Listwise deletion is the most common solution for missing data problems (Acock, 2005) and it involves deleting cases with missing values on at least one of the study variables. One clear downside of using listwise deletion is that you may lose plenty of data in the process, which can also lead to a reduced sample size and reduced statistical power. However, with data that are MCAR, if the sample size is large enough where power is not an issue and unbiased estimates are provided, it is a useful remedy. Multiple imputation (MI) is a complex procedure which involves creating several data sets with values imputed for those data that are missing. According to Schlomer, Bauman, and Card (2010), analyses are completed on

the individual data sets, with their own unique parameter estimates and standard errors saved for each individual set. Then, the parameter estimates are averaged across the analyses, creating an unbiased parameter estimate. Standard errors obtained from the parameter estimates are based on both the standard errors from the analysis of the individual data sets and from the dispersion of the parameter estimates across the data sets. Since the standard errors are combined, and random fluctuations from each analysis are accounted for, multiple imputation allows for pooling the parameter estimates (Acock, 2005), which provides more accurate standard errors, and therefore, stronger inferential conclusions (Schlomer, Bauman, & Card, 2010). While MI is a flexible technique and provides better estimates of the missing values, it is multi-step and complex, especially for large amounts of data (e.g., numerous variables), where computational errors can occur, even with modern software for carrying it out (McKnight et al., 2007).

Under these circumstances, listwise deletion was used to address the missing data. In using G*Power 3.1 software to determine appropriate sample size (Faul et al., 2009), 143 cases were recommended with a medium effect size of 0.15 selected, and 0.80 statistical power. There were 169 complete cases on all of the primary measures (i.e., IPI-Form CE, CEF, GAS rating item). So, no significant loss of statistical power occurred when the sample size was reduced, despite the loss of data from partially completed questionnaires. Also, as was mentioned before, the data were MCAR, and listwise deletion is considered acceptable when diagnostic procedures reveal minimal bias due to missingness. The analyses described below include the 169 participants who completed the primary measures on the questionnaire.

Descriptive Statistics

The means, standard deviations, reliability estimates for each individual social power base (i.e., Guttman's Lambda-3 coefficient), and the overall rankings of the eleven social power

bases are provided in Table 4. The data were collected from the 169 parent respondents who completed all IPI-Form CE items. Questionnaires with partially completed IPI-Form CE items (i.e., 1 or more items omitted out of the 44) were not included in this analysis.

Table 4

Means, Standard Deviations, Reliability Estimates, and Rankings of Parents' Social Power Base Ratings (*n* = 169)

Social Power Base	***M*[a]**	**SD**	**Guttman's Lambda-3**	**Rank**
Impersonal Reward	4.86	0.95	0.72	1
Direct Information[b]	4.79	0.97	0.70	2
Legitimate Equity	3.84	0.91	0.77	9
Legitimate Reciprocity	4.12	0.88	0.68	6
Positive Expert[b]	4.08	1.09	0.77	7
Positive Referent[b]	4.50	1.02	0.74	4
Legitimate Position	3.64	0.94	0.62	10
Personal Reward [b]	4.16	0.84	0.71	5
Legitimate Dependence[b]	4.75	0.90	0.69	3
Personal Coercion	3.58	0.89	0.71	11
Impersonal Coercion	4.00	0.94	0.69	8

Note: [a]The rating scale for each of the IPI-Form CE items ranged from 1 to 7, with lower numerical ratings indicative of lower perceived effectiveness of the social power base for eliciting compliance. [b]This indicates a soft social power base.

Parents reported that impersonal reward (*M* = 4.86, *SD* = 0.95), a harsh social power base, would be most effective to elicit their compliance to school psychologists' requests in school consultation. Direct information (*M* = 4.79, *SD* = 0.97) and legitimacy of dependence (*M* = 4.75, *SD* = 0.90), both soft social power bases, were the second and third most likely to elicit parents' compliance, respectively. The four lowest ranked social power bases were harsh in nature, and included impersonal coercion (*M* = 4.00, *SD* = 0.94), legitimate equity (*M* = 3.84, *SD* = 0.91), legitimate position (*M* = 3.64, *SD* = 0.94), and personal coercion (*M* = 3.58, *SD* = 0.89), respectively. Such "heavy-handed" (Erchul, Raven, & Ray, 2001) influence techniques were not perceived by parents in this sample as successful to secure their compliance.

Table 5 contains the means and standard deviations of the CEF and GAS rating item. Similar to the IPI-Form CE, the data were obtained from the 169 of the parent respondents who completed all twelve items on the CEF and the GAS rating item. In examining the results, the mean rating on the CEF was 4.26 (*SD* = 1.75). Cronbach's alpha for the CEF in this study was 0.97. A CEF rating of 4 on any single item, or as the average of all CEF item scores, is qualitatively described as "Neutral," as 4 is the midpoint on the scale. This indicates that this sample of parents that completed the CEF did not view their children's school psychologists as highly effective or highly ineffective, when considering their consultation experiences.

Table 5

Means and Standard Deviations of Parents' Ratings on the CEF and GAS (*n* = 169)

Measure	***M***	**SD**
Consultation Evaluation Form (CEF)	4.26[a]	1.75
Goal Attainment Scaling (GAS)	3.49[b]	1.21

Note: [a]The rating scale for each of the CEF items ranged from 1 to 7, with lower numerical ratings indicative of lower perceived consultant effectiveness. [b]The GAS item was rated by parents on a scale ranging from 1 to 5, with a score of 1 indicating the child's concerns became significantly worse (i.e., did not meet consultation goal) up to a score of 5 indicating satisfaction with the child's consultation outcome (i.e., the goal was fully met).

Parents' overall mean rating on the GAS item was 3.49 (*SD* = 1.21). A GAS item rating of 3, the midpoint of the scale, is qualitatively described as "No Progress" being made by the child, where the parent was asked how close their son or daughter came to meeting his or her consultation goal. A GAS item rating of 4 is qualitatively described as "Goal Partially Met." This demonstrates that as an overall sample, parents reported that their children made some progress in meeting their reported consultation goal or goals.

Primary Analyses

The study research questions and hypotheses are addressed in further detail below. Inferential statistics used to test the study hypotheses are provided when applicable.

The Social Power Base Typology

ANOVA with repeated measures was used to test whether significant differences existed between the different social power base means, reported earlier. Since a significant result was obtained for Mauchly's Test of Sphericity (χ^2 (54) = 401.910, $p < 0.05$), the Greenhouse-Geisser correction was utilized to proceed with the analysis. Overall, there was a statistically significant difference observed across the mean power base scores, F (6.143, 1032.108) = 79.543, $p < 0.05$.

Pairwise comparisons with Bonferroni post-hoc adjustments were used to address whether significant differences between the individual power base pairs occurred. The first and third study hypotheses indicated that the five soft social power bases (i.e., direct information, legitimacy of dependence, positive referent, personal reward, and positive expert) would be more effective in eliciting parent compliance in school consultation. Results partially supported both related hypotheses.

Direct information, legitimacy of dependence, and positive referent were all rated as significantly different compared to five of the six harsh power bases (i.e., legitimate reciprocity, impersonal coercion, legitimate equity, legitimate position, and personal coercion). However, direct information, the second-ranked power base, and legitimacy of dependence, the third-ranked power base, were not significantly different from the remaining harsh power base, impersonal reward power (M = 4.86, SD = 0.95), the number-one ranked social power base by parents.

Personal reward power was rated as significantly different from four of the six harsh social power bases (i.e., impersonal reward, legitimate equity, legitimate position, and personal coercion). Personal reward power was not significantly different when compared to the harsh power bases of legitimate reciprocity (M = 4.12, SD = 0.88) and impersonal coercion (M = 4.00,

SD = 0.94) and positive expert power (*M* = 4.08, *SD* = 1.09), a soft power base. Regarding positive expert power, it was rated as significantly different to three of the six harsh power bases (i.e., impersonal reward, legitimate position, and personal coercion). It was not significantly different when compared to personal reward power (*M* = 4.16, *SD* = 0.84), a soft power base, and legitimate reciprocity (*M* = 4.12, *SD* = 0.88), impersonal coercion (*M* = 4.00, *SD* = 0.94), and legitimate equity (*M* = 3.84, *SD* = 0.91), the three remaining harsh power bases.

The fourth study hypothesis stated that parents would attribute higher levels of positive expert power to school psychologists than positive referent power, in accordance with Martin's (1978) view that school psychologists need to build up referent power over the course of time. This hypothesis was not supported as parents' mean rating for positive referent power (*M* = 4.50, *SD* = 1.02) was higher than the mean rating for positive expert power (*M* = 4.08, *SD* = 1.09). Both means were significantly different from each other according to the pairwise comparison, though in the opposite direction in terms of what the hypothesis predicted.

Factor Structure of the Modified IPI-Form CE

An Exploratory Factor Analysis (EFA) was performed on the IPI-Form CE using the Comprehensive Exploratory Factor Analysis program, Version 3.04 (CEFA; Browne et al., 2009). The second study hypothesis stated that a two-factor solution of soft power bases and harsh power bases would be evident in the sample of parents administered the questionnaire. The EFA was conducted using the Maximum Likelihood extraction procedure as well as an Oblique Varimax rotation on the IPI-Form CE results. While a specified two-factor solution was entered into the CEFA software, three factors with eigenvalues greater than 1.00 emerged from the data (i.e., Factor 1 = 6.18, Factor 2 = 1.33, Factor 3 = 1.01). Furthermore, in determining whether the model reached statistical significance, the Root Mean Square Error of

Approximation (RMSEA) value for the specified factor structure was 0.16, indicating a weak model fit. No clear two-factor solution was apparent among the study data and the second study hypothesis was not supported. However, regarding the specified two-factor solution, the first factor, which accounted for 52.85% of the variance of the IPI-Form CE scores, was labeled "Harsh," while the second factor, which accounted for 8.85% of the variance of the IPI-Form CE scores was labeled "Soft." This specified two-factor solution accounted for 61.70% of the cumulative variance. Table 6 presents the results of the EFA below.

Table 6

Summary of Exploratory Factor Analysis Results for the IPI-Form CE (*n* = 169)

Factor	**Social Power Base**	**Factor 1 Loadings[a]**	**Factor 2 Loadings[b]**	**90% Confidence Interval (Factor 1)**	**90% Confidence Interval (Factor 2)**
Harsh					
	Impersonal Reward	0.37	0.36	(0.249; 0.492)	(0.243; 0.485)
	Legitimate Position	0.37	**0.45**	(0.255; 0.482)	**(0.335; 0.556)**
	Legitimate Equity	**0.72**	0.10	**(0.639; 0.808)**	(0.004; 0.203)
	Legitimate Reciprocity	**0.69**	0.28	**(0.608; 0.765)**	(0.191; 0.368)
	Personal Coercion	**0.77**	0.06	**(0.694; 0.851)**	(-0.033; 0.154)
	Impersonal Coercion	**0.80**	-0.13	**(0.714; 0.879)**	(-0.226;-0.036)
Soft					
	Positive Referent	0.23	**0.73**	(0.144; 0.318)	**(0.659; 0.808)**
	Direct Information	-0.16	**0.86**	(-0.238;-0.074)	**(0.793; 0.936)**
	Personal Reward	**0.51**	**0.47**	**(0.423; 0.600)**	**(0.376; 0.555)**
	Legitimate Dependence	0.38	**0.46**	(0.268; 0.489)	**(0.348; 0.564)**
	Positive Expert	0.04	**0.82**	(-0.045; 0.129)	**(0.749; 0.894)**
Percent of Variance		52.85	8.85		

Note: [a]Denotes Harsh Factor, [b]Denotes Soft Factor, Factor loadings and Confidence Intervals over 0.40 are in bold. Extraction Method: Maximum Likelihood, Rotation: Oblique Varimax

In examining the Harsh factor, four of the six traditional harsh social power bases had factor loading scores above 0.40. They were legitimate equity, legitimate reciprocity, personal coercion, and impersonal coercion, and they correlated strongly with the aforementioned Harsh

factor. Impersonal reward, a traditionally-labeled harsh social power base, had a Harsh factor loading of 0.37, which was slightly higher than its loading on the Soft factor, 0.36, but still relatively low. In fact, impersonal reward did not load particularly high on either of the specified factors, despite it being the highest rated of the social power bases in eliciting parents' compliance (M = 4.86). Legitimate position power, also a traditionally-labeled harsh social power base, loaded higher on the Soft factor (0.45) than it did on the Harsh factor (0.37). Also, personal reward power loaded slightly higher on the Harsh factor (0.51) compared to its loading on the Soft factor (0.47). Impersonal coercion and personal coercion had the highest Harsh factor loadings, at 0.80 and 0.77, respectively.

Regarding the Soft factor, all five of the traditional soft power bases had factor loading scores above 0.40. Positive referent, direct information, personal reward, legitimate dependence, and positive expert power correlated strongly with the Soft factor. As was previously mentioned, personal reward power had a slightly higher factor loading on the Harsh factor (0.51) compared to the Soft factor (0.47). Direct information and positive expert power had the highest Soft factor loadings, at 0.86 and 0.82, respectively.

Multiple Regression Analysis 1

The first multiple regression analysis was conducted to examine whether parents' ratings on the five soft social power bases (i.e., individually entered into the model) have a predictive relationship with their ratings of consultant effectiveness. The first part of the fifth study hypothesis stated that strong, positive relationships would exist between parents' ratings on the social power bases and their ratings on the CEF. The multiple regression results indicated that the overall model was statistically significant (R^2 = .295, F (5, 163) = 13.461, $p < 0.05$). It was apparent that positive expert power was the only predictor that significantly predicted ratings of

consultant effectiveness ($\beta = .391$, $p < 0.05$). The other four soft social power bases did not significantly predict parents' ratings on the CEF. Therefore, the first part of the fifth study hypothesis was partially supported, as only personal reward power reached significance. Table 7 below shows the results of this multiple regression analysis.

Table 7

Multiple Regression Analysis for the Relationship between Soft Social Power Bases and Consultant Effectiveness (CEF Score)

	Unstandardized Coefficients		*Standardized Coefficients*		
Model	B	Std. Error	Beta	t	Sig.
(Constant)	-.515	.733		-.703	.483
Positive Expert	.391	.178	.244	2.197	.029*
Positive Referent	.308	.202	.179	1.522	.130
Direct Information	.205	.177	.115	1.158	.248
Personal Reward	.106	.212	.051	.499	.619
Legitimate Dependence	.078	.175	.040	.446	.656

Note: *Indicates significance at the $p < 0.05$ level

Multiple Regression Analysis 2

The second multiple regression analysis was conducted to examine whether parents' ratings on the five soft social power bases (i.e., individually entered into the model) have a predictive relationship with their ratings of satisfaction with child consultation outcomes (i.e., children's consultation goal attainment). The second part of the fifth study hypothesis stated that strong, positive relationships would exist between parents' ratings on the social power bases and their ratings on the GAS rating scale item. The multiple regression results indicated that the overall model was not statistically significant ($R^2 = .047$, F (5, 163) = 1.604, $p = .162$). None of the five soft social power bases significantly predicted parents' ratings on the GAS rating item,

and each one individually was not close to reaching significance. Therefore the second part of the fifth hypothesis was not supported by the study data. Table 8 below shows the results of this multiple regression analysis.

Table 8

Multiple Regression Analysis for the Relationship between Soft Social Power Bases and Satisfaction with Children's Consultation Outcome (GAS Rating Item Score)

	Unstandardized Coefficients		*Standardized Coefficients*		
Model	B	Std. Error	Beta	t	Sig.
(Constant)	2.238	.588		3.804	.000
Positive Expert	.065	.143	.059	.457	.648
Positive Referent	.128	.162	.108	.787	.432
Direct Information	.032	.142	.025	.221	.825
Personal Reward	.113	.170	.079	.663	.508
Legitimate Dependence	-.045	.141	-.034	-.320	.749

Hypothesis Testing

A summary of results for each study hypothesis tested is presented below.

HO1: The first hypothesis stated that the social power bases that would be rated as most effective in eliciting parents' compliance would be positive expert power, positive referent power, direct informational power, and legitimacy of dependence. Analyses of the results indicated that this hypothesis was partially supported. With exception to impersonal reward power, a traditionally harsh social power base, which was ranked number one by parents as most effective to elicit their compliance, the next four highest-ranked social power bases were, in fact, soft power bases (i.e., direct information, legitimate dependence, positive referent, and personal reward, respectively). Positive expert power, the remaining soft power base, was ranked seventh

out of the eleven power bases indicating that it was not perceived as especially effective in eliciting compliance, as was hypothesized. ANOVA with repeated measures indicated that there was a statistically significant difference observed across the mean power base scores overall, F (6.143, 1032.108) = 79.543, $p < 0.05$. Pairwise comparisons revealed that direct information, legitimacy of dependence, and positive referent were all rated as significantly different compared to five of the six harsh power bases, that personal reward power was rated as significantly different to four of the six harsh social power bases, and that positive expert power was rated as significantly different to three of the six harsh power bases.

HO2: The second hypothesis stated that a two-factor solution of soft power bases and harsh power bases would exist in this sample of parents surveyed. This hypothesis was not fully supported. While a specified two-factor solution was utilized to run the EFA, three distinct factors were revealed containing eigenvalues above 1.00. Furthermore, goodness-of-fit statistics (e.g., RMSEA) indicated that the specified model was inadequate. However, regarding the specified two-factor structure, strong factor loadings were observed on the Harsh factor for four of the six traditional harsh power bases (i.e., legitimate equity, legitimate reciprocity, personal coercion, and impersonal coercion) and strong factor loadings were observed on the Soft factor for all five of the traditional soft power bases (i.e., positive referent, direct information, personal reward, legitimate dependence, and positive expert). Impersonal reward, a traditionally harsh power base did not load strongly on either of the two factors, and legitimate position power, a traditionally harsh power base loaded strongly on the Soft factor. Finally, personal reward, a traditionally soft power base loaded strongly on the Harsh factor and not the Soft factor.

HO3: The third hypothesis stated that parents would rate the soft power bases as more effective in eliciting their compliance in influence attempts compared to the harsh power bases.

Similar in content to the first hypothesis, this hypothesis was also partially supported. Impersonal reward, a traditionally harsh social power base, which was ranked number one by parents as most effective to elicit their compliance, while the next four highest social power bases were soft social power bases (i.e., direct information, legitimate dependence, positive referent, and personal reward, respectively). Positive expert power, the remaining soft power base, was ranked seventh out of the eleven power bases. ANOVA with repeated measures indicated that there was a statistically significant difference observed across the mean power base scores overall, F (6.143, 1032.108) = 79.543, $p < 0.05$. Again, pairwise comparisons revealed that direct information, legitimacy of dependence, and positive referent were all rated as significantly different compared to five of the six harsh power bases, that personal reward power was rated as significantly different to four of the six harsh social power bases, and that positive expert power was rated as significantly different to three of the six harsh power bases.

HO4: The fourth hypothesis stated that parents would attribute higher levels of positive expert power to school psychologists than positive referent power. This hypothesis was not supported, as parents' mean rating for positive referent power (M = 4.50, SD = 1.02) was higher than the mean rating for positive expert power (M = 4.08, SD = 1.09). Both means were significantly different from each other based on the adjusted pairwise comparison, though in the opposite direction of what the hypothesis predicted.

HO5a: The first part of the fifth hypothesis stated that strong, positive relationships would exist between parents' ratings of the soft social power bases and their ratings on measures of consultant effectiveness. This hypothesis was partially supported, as the multiple regression results indicated that the overall model was statistically significant (R^2 = .295, F (5, 163) = 13.461, $p < 0.05$). Positive expert power was the only soft social power base that significantly

predicted parents' ratings of consultant effectiveness ($\beta = .391$, $p < 0.05$). The other four soft social power bases did not significantly predict parents' ratings on the measure of consultant effectiveness.

HO5b: The second part of the fifth hypothesis stated that strong, positive relationships would exist between parents' ratings of the soft social power bases and their ratings on a measure of parents' satisfaction with their children's attainment of consultation goals. This hypothesis was not supported, as the multiple regression results demonstrated that the overall model was not statistically significant ($R^2 = .047$, F (5, 163) = 1.604, $p = .162$). None of the five soft social power bases significantly predicted parents' ratings of satisfaction with their children's attainment of consultation goals.

CHAPTER V

DISCUSSION

This chapter provides an interpretation of the study results, along with study strengths and implications for school psychologists, study limitations, and directions for future research. While previous research on social power and interpersonal influence in school consultation explored the perceptions of school psychologist consultants and teacher consultees, this study is one of the first, if not the first, to investigate the attitudes of parent consultees, who are essential partners in the educational process. Parents are often the recipients of influence attempts from school psychologists regarding important educational decisions for their children. This is especially the case among parents of children with autism because of their extensive, ongoing involvement with school professionals and unwavering advocacy for their children. This study is both important and unique in that it shed light on how parents feel about the use of power and influence in this unique, dyadic consultation relationship, and investigated the relationships between parents' perceptions of different influence techniques, perceived consultant effectiveness, and children's goal attainment from consultation.

Parents Perceptions of the Social Power Base Typology

The first research question sought to determine whether certain social power bases from the French and Raven (1959) and Raven (1965, 1992) social power base typology were perceived by parents as effective or ineffective to elicit their compliance in school consultation. Previous studies in this research area clearly demonstrated that school psychologist consultants endorse the use of soft power bases, over harsh power bases, to elicit consultee compliance (Erchul, Raven, & Ray, 2001), and that teacher consultees prefer that school psychologists utilize soft power bases when attempting to influence them (Erchul, Raven, & Whichard, 2001).

Similarly, the present study revealed that parents endorsed four of the five soft power bases as most effective in eliciting their compliance (i.e., direct information, legitimacy of dependence, positive referent, and personal reward, from highest rated to lowest rated, respectively). This demonstrates that parent consultees, like teacher consultees, perceive soft power strategies more favorably. The four lowest ranked social power bases in this study (i.e., impersonal coercion, legitimate equity, legitimate position, and personal coercion, from highest rated to lowest rated respectively) were harsh power bases, which actually matched the four lowest ranked social power bases among school psychologist consultants in the Erchul, Raven, and Whichard (2001) study.

In examining the social power bases for statistically significant differences, the soft power bases of direct information, legitimacy of dependence, and positive referent were all rated as more effective for eliciting their compliance compared to five of the six harsh power bases (i.e., legitimate reciprocity, impersonal coercion, legitimate equity, legitimate position, and personal coercion). Personal reward power was rated as significantly more effective for eliciting compliance when compared to the harsh power bases of legitimate equity, legitimate position, and personal coercion. While the difference between personal reward power and impersonal reward power reached statistical significance, impersonal reward had the highest mean score (M = 4.86), as the number one ranked social power base. Regarding positive expert power, it was rated as significantly more effective for eliciting compliance when compared to legitimate position, and personal coercion. It was surprising to see that positive expert power was ranked seventh out of the eleven power bases, especially since school psychologists are arguably the most knowledgeable professionals in schools when it comes to intervention and remediation with children with autism. However, referent power, which was ranked fourth highest in eliciting

compliance, appeared to be more slightly more salient, which demonstrates that expertise may be less important to parents versus both members of the dyad mutually identifying with one another when addressing children's concerns.

Interestingly, a traditionally harsh power base, impersonal reward, was rated the highest among the participants, out of all the social power bases, with a mean of 4.86. This was a particularly unique and unexpected finding as no prior study indicated that a harsh power base would be the most likely of the eleven social power bases to elicit consultee compliance. In fact, the Erchul, Raven, and Whichard (2001) study, which was the only one to examine teachers' perceptions of the social power bases (i.e., the only published study to examine consultee perceptions, and not those of consultants), found that impersonal reward was ranked eighth out of the eleven social power bases. This indicated that among that particular consultee population, use of that particular influence technique by a school psychologist, on them as teachers, would not be very likely to elicit their compliance.

It should be noted that Erchul, Raven, and Ray (2001) found that school psychologists ranked impersonal reward power as the third most likely power base out of the eleven to elicit teacher compliance to their requests. That particular sample of school psychologist consultants viewed impersonal reward power as a potentially useful influence technique. Surprised to an extent with that finding, those researchers highlighted the possibility that the IPI-Form CT items designed to measure impersonal reward may have been worded too ambiguously. They also noted that high standard deviations were obtained for that social power base, indicating limited agreement on its role as an influence technique in consultation, because of widely distributed ratings. Among this sample of parents studied, low standard deviations were observed for the ratings on this power base, and piloting of the questionnaire prior to data collection yielded no

specific comments about ambiguity among the impersonal reward power modified IPI-Form CE items. Still, it is evident that one sample of school psychologists and the sample of parents from this present study both recognized the utility of the impersonal reward power base in school consultation, even if teacher consultees previously did not.

In the current study, one particular reason for the high impersonal reward power rating stands out. As was alluded to previously, the IPI-Form CE items were modified for use in this study with a population of parents, because the prior version was designed for completion by teachers. Changes in item wording varied among the different items for each of the power bases. For the four items reflecting impersonal reward power, the changes in wording were significant. For instance, item 22 on the original IPI-Form CE states, "The consultant can help me receive special benefits." Item 22 on the IPI-Form CE modified for use with parents states, "The school psychologist can help me obtain unique services for my child." Items were modified in a manner that would preserve their original intended meaning (i.e., reflect the true definition of the social power bases), but it is not surprising that the respondent group as a whole would rate an item like this modified one highly. Again, when piloting the modified IPI-Form CE, prior to conducting this study, there was little confusion about the wording for the four items representing this social power base.

In the original item 22 completed by the teachers from the Erchul, Raven, and Whichard (2001) study, reference is made to the psychologist potentially being able to obtain "special benefits" for the teacher. Martin (1978) indicated that hierarchical relationships do not exist between school psychologists and teachers, and therefore, a school psychologist would generally not be able to get a teacher "special benefits" for complying with them. Therefore, the teacher would not perceive impersonal reward as a strategy that would easily elicit their compliance.

However, parents completing the present study questionnaire may have interpreted item 22 and the other three items for the impersonal reward power base, as an avenue to get their children unique or better services, which lies outside the realm of the professional, non-hierarchical relationship between a teacher and school psychologist. This may help explain why impersonal reward was rated highest, as parents may have felt that if compliance could lead better services for their children, they would comply since it would help their child first and foremost. In fact, when piloting the IPI-Form CE prior to running this study, one parent expressed that she is only concerned about her child and does not care so much about the school psychologist as long as her child gets what he needs.

While these may be reasons for the unexpected findings, results from the EFA bring into question whether or not impersonal reward power is truly a traditionally harsh social power strategy among this specific group of parents sampled. As was stated previously, impersonal reward power did not load particularly high on either of the specified factors, despite it being the highest rated of the social power bases in eliciting parents' compliance. Accordingly parents did not endorse impersonal reward power as definitively soft or harsh, as evidenced by the similar factor loadings and overlapping confidence intervals on each factor, so when interpreting these results, it is apparent that further study must take place to determine whether or not it is proper to deem impersonal reward a traditionally harsh social power base. The same may be said for legitimate position power and positive reward, whose EFA loadings were unexpected, based on their traditional labels as solely harsh and soft strategies, respectively.

Also, on a broader level, it is extremely important to note that all eleven social power base means fell within 1.5 scale points (i.e., on the 7-point IPI-Form CE Likert scale) of one another, and that all eleven social power base standard deviations were close to 1.00. Therefore,

there was limited variation in terms of parents' ratings of effectiveness among all eleven social power bases. In the study conducted by Erchul, Raven, and Whichard (2001), which looked at teachers' perceptions, the range of mean differences between the highest and lowest rated social power bases was over 2 scale points (i.e., direct informational power rated highest and personal coercion rated lowest). In this study, despite the fact that parents rated impersonal reward power highest, where parents would be most compliant if it would offer their child the most in terms of services, the mean ratings of all the strategies were generally consistent with one another. As a result, when looking at the data on their face value, it is questionable whether parents truly regard these social power bases differently from one another, from a practical standpoint, when used by school psychologists.

The fourth study hypothesis stated that parents will attribute higher levels of positive expert power to school psychologists than positive referent power, based on Martin's (1978) suggestion that referent power must be built up over time. This study hypothesis was not supported, with parents' rating positive referent power higher than positive expert power. Positive expert power was actually ranked seventh out of the eleven (M = 4.08) power bases, though the standard deviation was highest for this social power base. While this finding was not expected, it does make sense that positive referent power was rated higher, when considering that 39.1% of the parent respondents had consultation experience with school psychologists five or more times over their children's years of schooling. While the study data did not reveal specifics on how much experience parents had consulting with individual school psychologists and for how long in months or years it took place, it is possible that many participants had established relationships with their consultants, and saw "eye-to-eye" regarding their children's needs.

So while Martin (1978) states that consultants who have little contact with consultees rely more on expert power in influence attempts, it appears that referent power among the parents surveyed had been built up over time. In other words, many of the parents had ongoing relationships with mutual involvement and agreement regarding their children's decisions. Since children with autism can have extensive academic, behavioral, emotional, and/or social needs, it is likely that some of the parents were in contact with school psychologists on a weekly or even daily basis, where the psychologists' standalone expertise was less important than both members of the dyad identifying with one another.

The Soft Power Base-Harsh Power Base Dichotomy

Prior studies (Erchul, Raven, & Ray, 2001; Raven, Schwarzwald, & Koslowsky, 1998; Wilson, Erchul, & Raven, 2008) conducted factor analyses on data obtained utilizing the IPI and IPI-Form CT as primary measures. This study was the first to factor analyze IPI data obtained from a sample of parent consultees. It was predicted that a two-factor Soft-Harsh power base solution would exist in the present study, but Exploratory Factor Analysis did not yield such results. Despite specifying that a two-factor solution be extracted from the data, three distinct factors had eigenvalues above 1.00, and goodness-of-fit statistics were unacceptable. As a result, it cannot be assumed that a dichotomous relationship exists with a clear Harsh factor and a clear Soft factor because the data did not clearly align with the hypothesized two-factor structure.

A thorough examination of the factor loadings demonstrated that all six traditionally harsh factors did not strongly load on Factor 1 (i.e., Harsh) and that all five traditionally soft factors did not strongly load on Factor 2 (i.e., Soft). Specifically, personal reward power, a soft social power base, loaded high on the Harsh factor, while legitimate position power, a harsh social power base, loaded high on the soft factor. The findings regarding both of these social

power bases are actually similar to an extent to those from previous literature that factor-analyzed the IPI. Personal reward power loaded high as a Harsh power base in the studies conducted by Raven, Schwarzwald, and Koslowsky (1998) (i.e., with the Israeli sample), and Wilson, Erchul, and Raven (2008). It did not load strongly as a Harsh power base in the study conducted by Erchul, Raven, and Ray (2001), which was the first to factor analyze the IPI, where it was applied to school consultation.

Legitimate position power actually loaded higher on the soft factor in the Principal Components Analysis (PCA) conducted by Erchul, Raven, and Ray (2001), in the PCA conducted by Wilson, Erchul, and Raven (2008), as well as in the factor analysis conducted by Raven, Schwarzwald, and Koslowsky (1998) (i.e., with the Israeli sample). This all indicates that previous samples of school psychologist consultants and individuals in supervisor-subordinate relationships, and parent consultees in this study viewed legitimate position power as a soft influence technique. However, this also makes it clear that the traditional soft and harsh labels for the individual power bases do not necessarily hold true as previously stated by Raven, Schwarzwald, and Koslowsky (1998), based on their original IPI factor analysis. Data from previous consultant, consultee, and supervisor-subordinate samples, and this current one, provide limited evidence for one clear soft-harsh dichotomy.

Nonetheless, several reasons may account for the similarities and differences in the results from the present study when compared to prior IPI factor analyses. The three studies that previously factor analyzed the IPI (Erchul, Raven, & Ray, 2001; Raven, Schwarzwald, & Koslowsky, 1998; Wilson, Erchul, & Raven, 2008) used PCA as the means of dimension reduction, while this present study utilized EFA. Results may have differed had the present study data been examined using PCA. Also, it must be noted that in the study conducted by

Wilson, Erchul, and Raven (2008), the construct they examined was *perceived likelihood of use* of the social power bases, and not the power bases' *perceived effectiveness to elicit compliance*, as was the case in the other two studies (Erchul, Raven, & Ray, 2001; Raven, Schwarzwald, & Koslowsky, 1998). Since the nature of the task given to respondents was slightly different, and the construct examined by the modified IPI-Form CE was *perceived effectiveness to elicit compliance*, the results should be considered with caution. Still, when specifying a two-factor solution, several of the traditionally soft social power bases were summarized under a "Soft" factor, while several of the traditionally harsh social power bases were summarized under a "Harsh" factor. This demonstrates that many parents perceived the IPI items similarly to school psychologists (Erchul, Raven, & Ray, 2001; Wilson, Erchul, & Raven, 2008), and individuals in supervisor-subordinate relationships (Raven, Schwarzwald, & Koslowsky, 1998).

Soft Power Bases and Consultant Effectiveness

While it was predicted in the first part of the fifth study hypothesis that strong positive relationships would exist between parents' ratings on the soft social power bases and their ratings on measures of consultant effectiveness as per the CEF, this component of the hypothesis was only partially supported. Only one social power base, positive expert, reached statistical significance, demonstrating a substantial link between parents' attitudes towards consultants' expertise and their perceptions of consultants' effectiveness. Teacher consultees ranked positive expert power second highest of the eleven power bases as an influence technique that would elicit their compliance in previous research (Erchul, Raven, & Whichard, 2001), and school psychologist consultants ranked this power base as second highest as well in previous research (Erchul, Raven, & Ray, 2001).

Interestingly, parents in this study ranked positive expert power seventh out of the eleven power bases. It is apparent though that when consultant effectiveness is a criterion variable, the consultant's expertise in mental health and education is strongly correlated with parents' satisfaction with the school psychologist, in this population. The fact that only one of the five soft social power bases significantly predicted ratings of consultant effectiveness may not be surprising when also considering there was limited variability among all social power base means and their standard deviations, as well as the lack of a soft-harsh two-factor solution from the EFA.

Influence Attempts and Children's Outcomes in Consultation

It was also predicted in the second part of the fifth study hypothesis that strong positive relationships would exist between parents' ratings on the soft social power bases and their ratings of satisfaction with their children's consultation outcomes. This component of the hypothesis was not supported, with none of the soft social power bases significantly predicting scores on the GAS measure. This particular sample of parents did not report any predictive links between soft social power base usage and their satisfaction with their children's consultation outcomes. While individual soft power bases were viewed as likely to elicit compliance, it is possible that the particular soft power base used by the consultant has limited bearing, in the parent's mind, on whether the child reaches his or her consultation goal. The GAS rating item is a measure of parents' satisfaction based on the degree to which their child meets his or her consultation goal, and none of the individual soft influence techniques stuck out as being significantly more predictive than any other in this multiple regression model. Once again, the limited variability among the social power base ratings (i.e., the soft techniques specifically here) and the lack of a

clear soft-harsh factor solution with respect to the EFA, provide potential evidence for the weakness of this second regression model.

Social Power, Collaboration, and Parents' Perceptions: Revisiting the Collaboration Debate

As was described earlier, the Collaboration Debate (Gutkin, 1999a) brought much attention to whether consultation is a truly collaborative endeavor versus one that is directive, prescriptive, or expert in nature. In examining the results of this present study, it is important to consider how parents' perceptions fit within the context of this ongoing Debate, and assess whether they viewed their consultants as true collaborators, or "directive-prescriptive-experts" (Erchul, Raven, & Ray, 2001, p. 16), who maintain majority control over the process. When examining the parents' ratings on the individual social power bases, it is evident that soft power bases were generally preferred over harsh power bases. This indicates that parents' are not enamored by school psychologists' use of coercive strategies (e.g., personal coercion), which are harsh and imply a one-sided consultation relationship, lacking collaboration. Parents' endorsement of soft power strategies, in this study aligns, with a collaborative approach to consultation, due to characteristics inherent in consultants exercising soft strategies, which include relying on the consultee's skills and leaving the decision for compliance in the consultee's hands Schwarzwald, Koslowsky, & Ochana-Levin, 2004).

When the modified IPI-Form CE was piloted with parents, none of the parents who completed the items stated that they felt the items were completely one-sided or directive (i.e., the school psychologist has sole ownership of the consultation process), but rather, their feelings were that some items were repetitive. The balancing items that were added to the modified IPI-Form CE after piloting were designed to limit any potentially "slanted views" of a consultation relationship dominated by the school psychologist. Erchul, Raven, and Ray (2001) found that

school psychologists endorsed soft power strategies in adopting a social power perspective to understanding their consultation relationships, demonstrating they feel that a directive relationship dominated by them would not useful for obtaining consultee compliance. From examining the current study data, it seems that parents have a similar mindset to that of school psychologists, where each member of the consultation dyad is aware that some level of collaboration is a necessary component to ensure a positive consultation relationship and outcome.

Study Strengths and Implications for School Psychologists

This is one of the first research studies to examine the perceptions of parents as members of the consultant-consultee dyad, with regard to social power and interpersonal influence in school consultation. The Erchul and Raven (1997) model of social power and interpersonal influence in school consultation had previously been studied utilizing school psychologists as consultants (e.g., Erchul, Raven, & Ray, 2001) and teachers as consultees (e.g., Erchul, Raven, & Whichard, 2001), but not parents as consultees. In addition, the IPI-Form CE (IPI-Form CE; Erchul, Raven, & Whichard, 2001) was previously adapted for use with teacher consultees, but to date, limited efforts were made to adapt it for administration to parent consultees. Accordingly, this present study expands the literature base on social power and interpersonal influence in school consultation by including parents in this line of research, and in doing so, collecting data from a sample of parents, with representation from the United States and abroad. Studies previously alluded to surveyed regional samples and were restricted to the United States.

This study is also unique in that a specific parent population was targeted. Parents of children with autism work closely with teachers, staff, school psychologists, and other professionals to ensure their children's educational programs are most appropriate.

Understanding how social power and interpersonal influence are salient in the parent-school psychologist relationship, consultants should consider using particular influence techniques to get parents more involved in generating solutions and interventions. This current study and much of the previous research examined the perceptions of influence techniques, like referent power, to elicit compliance, but not the longitudinal utility of that particular power base in leading a school psychologist and parent to work together over an extended time period. In essence, school psychologists should not only try to get parents to initially comply, using social power bases, and stop there. As was noted previously regarding The Collaboration Debate (Erchul, 1999; Gutkin, 1999a), positive study outcomes were found both when consultants maintained some semblance of a directive role in the consultation process and when consultees actively engaged in communication with the consultant. The strategic use of particular influence techniques can serve as a springboard for frequent communication and increased parent engagement.

The importance of the social power bases as tools for influence on their own should not be understated, but the process and context in which they are used are more important. Wilson, Erchul, and Raven (2008) described how consultation should be viewed as an active process, from a social power perspective, and not involve the consultant overly dominating the interactions. School psychologists can also become more aware of what influence strategies are especially effective for ensuring parent compliance in consultation, whether it is during the initial outreach stage, or when tweaking a particular intervention strategy after several consultation sessions.

Furthermore school psychologists can tailor their influence attempts when working with particular parents. Certain power bases may be used while others are downplayed or not used at

all. For instance, a parent of a child with autism who has not worked previously with any school psychologist might respond more strongly to influence attempts using positive expert power, because the parent feels the school psychologist is especially knowledgeable about the needs of children with autism. Another parent might respond better to influence attempts involving legitimacy of dependence as a power strategy, where the parent feels an obligation to help the school psychologist, who needs assistance in collecting data outside of school, because it may be contingent on carrying out the intervention as planned when the child is at school. Incorporating the results from the present study and previous research into the practice of school psychology may not only benefit school psychologist-parent partnerships through consultation, but it may also improve children's consultation outcomes on a broader level. Trainers and supervisors of future school psychologists can even benefit from applying and incorporating these current results and previous findings in school consultation course material with their graduate student trainees and with interns in the field as well.

Study Limitations

While the present study enhances and expands the literature base on social power and interpersonal influence in school consultation, several limitations were observed. Certainly, the missing data on the survey, which was discussed in detail previously, is a significant limitation of this study that must be considered in evaluating and interpreting the results and formulating independent conclusions. Beyond this, aspects of the study methodology itself may weaken its external validity. The fact that a correlational, passive observation design was used, where data were collected from the study population on a one-shot basis, makes it difficult to demonstrate causality between the different variables. This study was not a true experiment, with a control group, or the active manipulation of study variables, where group differences could have been

established. Also, it is always a possibility that factors not directly explored by the Internet survey (e.g., consultee family-systemic, personal biases, consultant factors) may account for participants' responses. In addition, convenience sampling, rather than random sampling, was used to obtain study participants. While this made it easier for this researcher to locate participants who fit the purpose of the study, results should not be generalized to other parent populations, and particularly those with children who have special needs other than autism. Replication of the study findings can improve generalizability under these circumstances (Gall, Gall & Borg, 2007), but the possible presence of sampling bias should not be ignored.

Characteristics of the study population itself must be addressed with regard to interpreting the results. The parent respondents were predominantly Caucasian/White females, and the children for whom the parents were responding were predominantly Caucasian/White males. Alternatively, there were few male parents who participated, few female children with autism on whom data was collected, and few respondents from non-Caucasian/White ethnic backgrounds, included in the study results. While all efforts were made to disseminate the study advertisement to both female and male parents (e.g., posting the link to the Internet survey on online support groups specifically for fathers with children with autism, as well as those for mothers), the majority of respondents were female. Therefore, it cannot be definitively stated that the study results would be similar for fathers and for daughters with autism, as the data collected may be very different. The same may be said for parent respondents and their children with autism who come from multicultural backgrounds. Furthermore, the Internet survey used to collect the study data was created in English and only made available in English. This is another study limitation as parents from a variety of ethnic groups, who have children with autism, but

do not have English reading comprehension skills, were likely unable to participate and share their attitudes and perceptions.

The Individuals with Disabilities in Education Improvement Act (2004) recognizes autism as only one of fourteen disability categories under which children may receive special education services in the schools. This research only targeted parents of children who have an autism diagnosis. Of course, it is possible that parent respondents' children who have autism diagnoses are not always receiving services under the disability classification of autism. However, there are over 6 million infants, toddlers, children, and youth in the United States that meet special education eligibility (U.S. Department of Education, 2012), along with their parents who are active participants in the school consultation process with school psychologists, teachers, and other school staff. Accordingly, the results from this study cannot necessarily be generalized to parents with children who do not have autism, but have engaged in consultation with school psychologists. Parents of children who do not have autism, who do receive services under one of the other 13 IDEA (2004) disability categories, may have different perceptions of social power and interpersonal influence in the school consultation process, as well as varying levels of contact with their children's school psychologists.

This study utilized a self-report Internet survey to gather study data. Inherent in using self-report data is the tendency for individuals to respond in a manner that appears favorable to researchers or clinicians, creating social desirability response sets (Gall, Gall & Borg, 2007). While parents were initially informed that all study data would remain anonymous, with no identifying information, one cannot completely rule out the presence of social desirability sets, or ignore that some parents may not have responded truthfully to survey items, in terms of their feelings toward, or perceptions of their children's school psychologists. In this vein, a related

limitation of the study is the fact that the observations of actual consultation sessions between parents and school psychologists were not observed or considered in this study. According to Erchul, Raven, and Wilson (2004), "data collected with a self-report instrument…may result in biased conclusions, in that perceptions of social power are unlikely to mirror the actual exercise of social power" (p. 588). Had the study included such a component, the results might differ, where a school psychologist, for example, uses referent power with a parent, in real-time, to obtain compliance with an intervention recommendation.

Directions for Future Research

Additional research is needed to address several of the aforementioned study limitations and expound on the current findings. Future studies should continue to apply and explore the Erchul and Raven (1997) model of social power and interpersonal influence in school consultation, with parents. Specifically, parents of children who have other disabilities and health problems (e.g., learning disabilities, ADHD), but not autism, should be surveyed in future research. Replicating this study, not only with parents of children with autism, but with other parent populations can enhance the generalizability of the current results and provide information on whether parents' perceptions of school psychologists' influence attempts differ, depending on their child's educational disability or health diagnosis. Since this was the first time this adapted IPI-Form CE was used with parents, further use of this instrument for related studies will be beneficial. In addition, greater efforts to target parent respondents who are fathers would be useful, because of their limited representation in this study sample. Unfortunately, the school psychology literature base as a whole is limited in terms of fathers' participation in published research, in light of the significant impact they have on their children's education (Greif & Greif, 2004).

Much of the research base on social power and interpersonal influence has not investigated children's consultation outcomes, and whether the use of particular power bases with parents is predictive of the child meeting his or her consultation goal. This study was if not the first, one of the first within this specific research area to examine whether such a relationship exists. While in this study, there was no statistically significant relationship between the use of soft social power bases and the child meeting his or her consultation goal (i.e., GAS score), it would be advantageous to further examine among other samples of parents and school psychologists, whether or not there is an explicit relationship between social power, interpersonal influence, and children's consultation outcomes.

Future research should also utilize direct observation of actual consultation sessions involving the school psychologist and parent. Whether using a structured system designed to quantitatively record or code consultation session exchanges involving the school psychologist and parent, or obtaining narrative or descriptive consultation session data in a qualitative manner, the addition of data from actual consultation sessions will strengthen this literature base. Future studies that assess how parents respond to school psychologists' actual exercising of social power in real-time, or shortly after the consultation session takes place, are imperative. For instance, Erchul, Raven, and Whichard (2001) suggested having psychologists and teachers complete IPIs at the end of an actual consultation session. Having a parent complete the IPI-Form CE after an actual consultation would enable behavioral data (e.g., parent verbal responses to the consultant) to be examined and correlated with their perceptions or ratings of the consultant. Future studies that include such behavioral data from actual consultation sessions will enhance the wealth of data that has already been obtained via self-reports from school

psychologists (e.g., Erchul, Raven, & Ray, 2001), teacher consultees (e.g., Erchul, Raven, & Whichard, 2001), and parents from this present study.

The study questionnaire consisted of 87 items, and numerous background and demographic variable items, as well as an outcome item (i.e., engagement in school consultation), were not used in the data analysis. Additional exploration of this unused study data would yield additional study results, including predictive relationships between other study variables (e.g., the relationship between parents' engagement in school consultation and parents' perceptions of consultant effectiveness, whether parents' perceptions differ depending on the school psychologists' gender, etc.). Specifically, engagement may be further examined among future study participants. Beyond recording the frequency and duration of meetings between parents and school psychologists (i.e., as one indicator of engagement levels), other quantitative measures of engagement, beyond the one item that was included on this survey, may be utilized. These include modifications of existing rating scales that measure engagement, and qualitative interviews to ascertain why parents feel they are or are not engaged in the consultation process.

Other statistical techniques, including path analysis, might be useful in future studies to examine potential complex causal relationships between additional study variables. To address the problem of missing data, efforts may be undertaken to restructure the questionnaire, reposition the items, or remove items few participants responded to, while keeping the primary measures (e.g., IPI-Form CE, CEF) intact. In the short-term, the participant data used in this study can be reexamined using a missing data technique like multiple imputation. Reanalyzing a larger sample, with imputed data for those parents who left out very few questionnaire items, may yield results slightly different from those reported here.

Finally, translating the study questionnaire, or future adaptations of it, into languages other than English, would make it more accessible. This may attract a wider cross-section of parents of children with autism, and thereby provide additional data for future analyses.

Conclusion

This study was designed to investigate social power and interpersonal influence in school consultation utilizing a population of parent consultees with children diagnosed with autism. To date, parents as consultees in the school consultation process have been understudied with regard to their attitudes towards school psychologist consultants and the consultation process, even though they serve a fundamental role in their children's schooling as members of consultation teams. The specific goals were to examine parents' perceptions of school psychologists' use of social power bases when consulting for their children with Autism Spectrum Disorders, as well as the predictive relationships between their ratings of soft social power base usage, consultant effectiveness, and children's outcome from consultation.

Results from this research signify the presence and importance of social power and interpersonal influence in school consultation, not only with school psychologist consultants and teacher consultees, but with parents as well. Specifically, soft and harsh social power influence techniques resonate with parents of children with autism in eliciting their compliance throughout the consultation process. School psychologists should be cognizant of the role these techniques play when carrying out influence attempts with parents on a daily basis, particularly in the early stages of communication and relationship building. Through using appropriate social power influence techniques tailored towards individual parents' needs, school psychologists and parents can establish and maintain positive and constructive partnerships, which may provide optimal conditions for improving children's short-term and long-term educational outcomes.

Appendix A

Questionnaire Introduction and Consultation Experience Items

INTRODUCTION:

School consultation involves a school psychologist helping a teacher or parent address and solve student problems. During this process, school psychologists offer recommendations, suggestions, or interventions to parents for their children.

Consider one school consultation experience (current or in previous years) where **you worked with your child's school psychologist** (short-term or ongoing) to address any difficulties your child has experienced. You will be asked to think about this experience when completing the questionnaire that follows.

INSTRUCTIONS:

Please indicate the following:

The gender of the school psychologist *whom you are considering for completing this questionnaire*:

Male / Female

Please indicate whether it was you or the school psychologist that *first initiated the consultation experience you are considering for completing this questionnaire*:

I initiated consultation / The school psychologist initiated consultation

The approximate number of times *over the years of your child's schooling* in which you have previously consulted with your child's school psychologist(s), or your child's school psychologist(s) consulted with you (*NOTE: YOUR ANSWER SHOULD INCLUDE THE CONSULTATION EXPERIENCE YOU WERE ASKED TO CONSIDER FOR THIS QUESTIONNAIRE PLUS ANY OTHER CONSULTATION EXPERIENCES WITH YOUR CHILD'S SCHOOL PSYCHOLOGIST(S) OVER THE YEARS)*:

1 / 2 / 3 / 4 / 5 or more times

Appendix B

Parent Background and Demographic Information

INSTRUCTIONS:

Please circle/indicate the following about *yourself*:

Your gender: Male / Female

Your ethnicity: Asian and Pacific Islander / American Indian and Alaska Native / Black/African American / White/Caucasian / Latin/Hispanic / Mixed (Please specify) _____ / Other (Please specify) _____

Your age: _____

Your highest level of education completed:

High School Diploma / Some College / 2 or 4 Year College Degree / Graduate Degree

The number of children in your household:

_____

Appendix C

Child Background and Demographic Information

INSTRUCTIONS:

Please circle/indicate the following about *your child* for whom you consulted with the school psychologist (or for whom the school psychologist consulted with you):

Your child's gender: Male / Female

Your child's ethnicity: Asian and Pacific Islander / American Indian and Alaska Native / Black/African American / White/Caucasian / Latin/Hispanic / Mixed (Please specify) _____ / Other (Please specify) _____

Your child's age: _____

At what age was your child diagnosed with his or her autism spectrum diagnosis? _____

The birth order of your child: First Child / Second Child / Third Child / Fourth Child / Fifth Child / Sixth Child / Seventh Child / Eighth Child / Ninth Child / Tenth Child / Other (Please specify) _____

Your child's autism spectrum diagnosis:

Autistic Disorder / Asperger's Disorder / Rett's Disorder / Childhood Disintegrative Disorder / Pervasive Developmental Disorder – Not Otherwise Specified (i.e., PDD-NOS)

Please list any other diagnosed comorbid disabilities and/or chronic illnesses your child is diagnosed with:

_____
_____
_____
_____

Please indicate the grade your child is currently in, or state "ungraded" if your child is ungraded:

_____

Indicate the primary reason(s) for consultation with your child's school psychologist that *you are considering for completing this questionnaire*. Circle *all* that apply:

Academic / Behavioral / Emotional / Social

Appendix D

Interpersonal Power Inventory - Form CE (IPI-Form CE)

INSTRUCTIONS:

As mentioned before, **school consultation** involves a school psychologist helping a teacher or parent address and solve student problems. During this process, school psychologists offer recommendations, suggestions, or interventions. Parents tend either to resist making changes or to do as requested. ***We are interested in understanding when parents are more likely or less likely to do what the school psychologist asks in consultation.***

Continue to think about the time you chose earlier, where the school psychologist was consulting with you (or where you initiated consultation with the school psychologist) about a problem your child experienced. Asking you to collect data on your child inside or outside your home, or to start an intervention plan on a particular day are two examples of what may occur in these types of situations.

On the following pages, there are a number of considerations that might have influenced your decision to do or not to do as you were requested. ***Read each statement carefully, and decide how likely it would be that for each of these considerations you would tend to comply or not comply. Use the following scale in estimating how you believe you would react:***

A. Much less likely to comply.
B. Less likely to comply.
C. A bit less likely to comply.
D. Would not affect your tendency to comply.
E. A bit more likely to comply.
F. More likely to comply.
G. Much more likely to comply.

Remember that you are indicating the likelihood that you would or would not tend to comply given the specific circumstances.

Thank you for your cooperation.

****

REMINDER:

The school psychologist has made recommendations, suggestions, and/or designed interventions for your child. Using the following scale, indicate the likelihood that you would comply for each of the following items.

A. Much less likely to comply.
B. Less likely to comply.
C. A bit less likely to comply.
D. Would not affect your tendency to comply.
E. A bit more likely to comply.
F. More likely to comply.
G. Much more likely to comply.

Please indicate the degree to which the following considerations would have made you more or less likely to comply.

You have realized that:

1. Being viewed positively by the school psychologist could lead to the enhancement of services my child receives.

2. After all, he/she is the school psychologist, and I should feel some obligation to go along.

3. The school psychologist probably knows the best way to handle the situation.

4. Once the school psychologist points it out, I can see why the change is necessary.

5. I admire or respect the school psychologist and do not wish to disagree.

6. The school psychologist can give me undesirable home-based responsibilities pertaining to my child's services.

7. The school psychologist has done some nice things for me in the past and so I do this in return.

8. I like the school psychologist and his/her approval is important to me.

9. The school psychologist really depends on me to do this for him/her.

10. I do not want the school psychologist to dislike me.

11. By doing so, I can make up for some difficulties I may have caused in the past by not complying.

12. For past considerations I have received, I feel obliged to comply.

13. The school psychologist can make things unpleasant for me.

14. It makes me feel better to know the school psychologist likes me.

15. I see the school psychologist as someone I can identify with.

16. I know that unless I do so, the school psychologist's job will be more difficult.

17. The school psychologist has carefully explained the basis for this request.

18. It would be disturbing for me to know that the school psychologist disapproves of me.

19. The school psychologist probably knows more about this particular situation than I do.

20. It is the school psychologist's job to tell me how to handle this situation.

21. Complying helps make up for things I have not done so well previously.

22. The school psychologist can help me obtain unique services for my child.

23. The school psychologist may be cold and distant if I do not do as requested.

24. The school psychologist gave me good reasons for changing how I handled the situation.

25. I understand that the school psychologist really needed my cooperation on this.

26. I trust the school psychologist to give me the best direction on this.

27. We are both part of the same team and should see eye to eye on things.

28. The school psychologist has the right to request that I handle the situation in a particular way.

29. The school psychologist makes me feel more valued when I do as requested.

30. I have made some mistakes in working with the school psychologist before, so this time I feel I owe it to him/her.

31. The school psychologist can make it more difficult for me to obtain improved services for my child.

32. The school psychologist can help me obtain for my child the services he/she needs most.

33. The school psychologist has previously done some good things that I have requested.

34. It makes me feel personally accepted when I do as the school psychologist asks.

35. As a parent, I have an obligation to do as the school psychologist says.

36. I look up to the school psychologist and generally model my behavior accordingly.

37. I have not always done what the school psychologist has asked, so this time I feel I should.

38. I feel that the school psychologist probably has more technical knowledge about this than I do.

39. The school psychologist can make it more difficult for me to get additional services for my child.

40. I realize that a school psychologist needs assistance and cooperation from parents.

41. I expect to get some favorable consideration from the school psychologist for going along on this.

42. I now understand why the recommended change is for the better.

43. The school psychologist previously accepted when I did not comply, so I feel obliged to comply now.

44. I would be upset knowing that I was on the bad side of the school psychologist.

Appendix E

Listings of Individual Items within Their Respective Social Power Bases

Impersonal Reward

1. Being viewed positively by the school psychologist could lead to the enhancement of services my child receives.

22. The school psychologist can help me obtain unique services for my child.

32. The school psychologist can help me obtain for my child the services he/she needs most.

41. I expect to get some favorable consideration from the school psychologist for going along on this.

Impersonal Coercion

6. The school psychologist can give me undesirable home-based responsibilities pertaining to my child's services.

13. The school psychologist can make things unpleasant for me.

31. The school psychologist can make it more difficult for me to obtain improved services for my child.

39. The school psychologist can make it more difficult for me to get additional services for my child.

Positive Expert

3. The school psychologist probably knows the best way to handle the situation.

19. The school psychologist probably knows more about this particular situation than I do.

26. I trust the school psychologist to give me the best direction on this.

38. I feel that the school psychologist probably has more technical knowledge about this than I do.

Positive Referent

5. I admire or respect the school psychologist and do not wish to disagree.

15. I see the school psychologist as someone I can identify with.

27. We are both part of the same team and should see eye to eye on things.

36. I look up to the school psychologist and generally model my behavior accordingly.

Direct Information

4. Once the school psychologist points it out, I can see why the change is necessary.

17. The school psychologist has carefully explained the basis for this request.

24. The school psychologist gave me good reasons for changing how I handled the situation.

42. I now understand why the recommended change is for the better.

Formal Legitimacy

2. After all, he/she is the school psychologist, and I should feel some obligation to go along.

20. It is the school psychologist's job to tell me how to handle this situation.

28. The school psychologist has the right to request that I handle the situation in a particular way.

35. As a parent, I have an obligation to do as the school psychologist says.

Legitimacy of Dependence

9. The school psychologist really depends on me to do this for him/her.

16. I know that unless I do so, the school psychologist's job will be more difficult.

25. I understand that the school psychologist really needed my cooperation on this.

40. I realize that a school psychologist needs assistance and cooperation from parents.

Legitimacy of Reciprocity

7. The school psychologist has done some nice things for me in the past and so I do this in return.

12. For past considerations I have received, I feel obliged to comply.

33. The school psychologist has previously done some good things that I have requested.

43. The school psychologist previously accepted when I did not comply, so I feel obliged to comply now.

Legitimacy of Equity

11. By doing so, I can make up for some difficulties I may have caused in the past by not complying.

21. Complying helps make up for things I have not done so well previously.

30. I have made some mistakes in working with the school psychologist before, so this time I feel I owe it to him/her.

37. I have not always done what the school psychologist has asked, so this time I feel I should.

Personal Reward

8. I like the school psychologist and his/her approval is important to me.

14. It makes me feel better to know the school psychologist likes me.

29. The school psychologist makes me feel more valued when I do as requested.

34. It makes me feel personally accepted when I do as the school psychologist asks.

Personal Coercion

10. I do not want the school psychologist to dislike me.

18. It would be disturbing for me to know that the school psychologist disapproves of me.

23. The school psychologist may be cold and distant if I do not do as requested.

44. I would be upset knowing that I was on the bad side of the school psychologist.

Appendix F

Eleven Additional IPI-Form CE Items

These items were intertwined with the 44 IPI-Form CE items as every fifth item (i.e., 5, 10, 15, 20, 25, 30, 35, 40, 45, 50, and 55).

INSTRUCTIONS:

On this item, rate below on the 1 to 5 scale the extent to which **you disagree or agree** with the following quote:

"My child's school psychologist sees me, the parent, as someone she identifies with. She admires or respects me and does not wish to disagree with my requests. Both of us are members of the same team and see eye to eye on matters relating to my child. My child's school psychologist looks up to me and models her behavior with this in mind."

____ 1; I completely disagree with the quote

____ 2; I somewhat disagree with the quote

____ 3; I neither disagree nor agree with the quote

____ 4; I somewhat agree with the quote

____ 5; I completely agree with the quote

On this item, rate below on the 1 to 5 scale the extent to which **you disagree or agree** with the following quote:

"I, as the parent, help my child's school psychologist obtain special benefits for my child, including unique services that she would benefit from. My child's school psychologist would expect to be viewed favorably by me because he cooperates with me in whatever I do to get these services for my child."

____ 1; I completely disagree with the quote

____ 2; I somewhat disagree with the quote

____ 3; I neither disagree nor agree with the quote

____ 4; I somewhat agree with the quote

____ 5; I completely agree with the quote

On this item, rate below on the 1 to 5 scale the extent to which **you disagree or agree** with the following quote:

"I'm a parent and I give my child's school psychologist unwanted school-based responsibilities that pertain to the services my child is receiving. I make things unpleasant for my child's school psychologist by making it difficult for her to get improved services, or extra services, that she feels my child should receive."

____ 1; I completely disagree with the quote

____ 2; I somewhat disagree with the quote

____ 3; I neither disagree nor agree with the quote

____ 4; I somewhat agree with the quote

____ 5; I completely agree with the quote

On this item, rate below on the 1 to 5 scale the extent to which **you disagree or agree** with the following quote:

"I'm the parent so I know more about what my child is going through, and the best way to handle my child's situation. My child's school psychologist feels I have more technical knowledge about how to help my child than he does. With all this in mind, my child's school psychologist trusts me as a parent to give him the best direction for helping my child."

____ 1; I completely disagree with the quote

____ 2; I somewhat disagree with the quote

____ 3; I neither disagree nor agree with the quote

____ 4; I somewhat agree with the quote

____ 5; I completely agree with the quote

On this item, rate below on the 1 to 5 scale the extent to which **you disagree or agree** with the following quote:

"When I point it out and carefully explain the basis for it to my child's school psychologist, he sees why it is necessary to make changes to my child's intervention. I also gave my child's school psychologist good reasons for handling the situation in a different way, and I think he understands why the changes I recommended will make things better for my child."

____ 1; I completely disagree with the quote

____ 2; I somewhat disagree with the quote

____ 3; I neither disagree nor agree with the quote

____ 4; I somewhat agree with the quote

____ 5; I completely agree with the quote

On this item, rate below on the 1 to 5 scale the extent to which **you disagree or agree** with the following quote:

"After all, I'm the parent, and my child's school psychologist would feel some obligation to go along with my recommendations. It's my job as a parent to tell my child's school psychologist how to address my child's needs, and I have the right to request that he handles my child's needs in a particular way. He has an obligation to do what I say."

____ 1; I completely disagree with the quote

____ 2; I somewhat disagree with the quote

____ 3; I neither disagree nor agree with the quote

____ 4; I somewhat agree with the quote

____ 5; I completely agree with the quote

On this item, rate below on the 1 to 5 scale the extent to which **you disagree or agree** with the following quote:

"My child's school psychologist knows that unless he does this to help my child, my job as a parent will be even harder. I really depend on my child's school psychologist to do this for me and I need his assistance and cooperation."

____ 1; I completely disagree with the quote

____ 2; I somewhat disagree with the quote

____ 3; I neither disagree nor agree with the quote

____ 4; I somewhat agree with the quote

____ 5; I completely agree with the quote

On this item, rate below on the 1 to 5 scale the extent to which **you disagree or agree** with the following quote:

"I've done some nice things for my child's school psychologist previously, so he would do this for me in return, since I'm the parent. I complied in the past when my child's school psychologist made requests. In fact, I previously accepted when my child's school psychologist did not comply with my request so he would feel obliged to comply with me now."

____ 1; I completely disagree with the quote

____ 2; I somewhat disagree with the quote

____ 3; I neither disagree nor agree with the quote

____ 4; I somewhat agree with the quote

____ 5; I completely agree with the quote

On this item, rate below on the 1 to 5 scale the extent to which **you disagree or agree** with the following quote:

"By now complying with my request, my child's school psychologist will make up for some difficulties she may have caused me previously, when she didn't comply. Since she has not always done what I have asked regarding my child, she should this time. If she complies, it will make up for those things she has not done so well previously when working to help my child. She has made some mistakes when consulting with me previously, so this time she owes it to me."

____ 1; I completely disagree with the quote

____ 2; I somewhat disagree with the quote

____ 3; I neither disagree nor agree with the quote

____ 4; I somewhat agree with the quote

____ 5; I completely agree with the quote

On this item, rate below on the 1 to 5 scale the extent to which **you disagree or agree** with the following quote:

"My child's school psychologist likes me as a parent and how I approve of her. It makes her feel better to know that I like her. When my child's school psychologist works to help my child when I request it, I make her feel more valued. As the parent, It makes her feel personally accepted when she does what I ask."

____ 1; I completely disagree with the quote

____ 2; I somewhat disagree with the quote

____ 3; I neither disagree nor agree with the quote

____ 4; I somewhat agree with the quote

____ 5; I completely agree with the quote

On this item, rate below on the 1 to 5 scale the extent to which **you disagree or agree** with the following quote:

"My child's school psychologist does not want me, the parent, to dislike her. It would disturb her to know that I disapprove of her and she would be upset knowing that she was on my bad side. Also, I would be cold and distant if my child's school psychologist does not comply with my requests."

____ 1; I completely disagree with the quote

____ 2; I somewhat disagree with the quote

____ 3; I neither disagree nor agree with the quote

____ 4; I somewhat agree with the quote

____ 5; I completely agree with the quote

Appendix G

Consultant Evaluation Form (CEF)

INSTRUCTIONS:

For each of the following statements, circle the number that most accurately reflects ***your perceptions of the school psychologist***. Use the scale below as a guide:

1	2	3	4	5	6	7
Strongly Disagree			**Neutral**			**Strongly Agree**

Please circle the appropriate number to the right of each item.

1. The school psychologist was generally helpful.	1	2	3	4	5	6	7
2. The school psychologist offered useful information.	1	2	3	4	5	6	7
3. The school psychologist's ideas as to the primary goals of schools were similar to my own ideas.	1	2	3	4	5	6	7
4. The school psychologist helped me to find alternative solutions to problems.	1	2	3	4	5	6	7
5. The school psychologist was a good listener.	1	2	3	4	5	6	7
6. The school psychologist helped me identify useful resources.	1	2	3	4	5	6	7
7. The school psychologist fit well into the school's environment.	1	2	3	4	5	6	7
8. The school psychologist encouraged me to consider a number of points of view.	1	2	3	4	5	6	7
9. The school psychologist viewed his/her role as a collaborator rather than an expert.	1	2	3	4	5	6	7
10. The school psychologist helped me find ways to apply the content of our discussions to situations involving my child at home.	1	2	3	4	5	6	7
11. The school psychologist was able to offer assistance without completely "taking over" the management of problems.	1	2	3	4	5	6	7
12. I would request services from this school psychologist again, assuming that other school psychologists were available.	1	2	3	4	5	6	7

Appendix H

Goal Attainment Scaling Items (GAS)

INSTRUCTIONS:

Please answer the following questions:

What specific goal did you have for your child in the consultation you considered to complete this questionnaire?

_____
_____
_____
_____

How close did your child come to meeting this goal?

____ 1; situation got significantly worse

____ 2; situation got somewhat worse

____ 3; no progress

____ 4; goal partially met

____ 5; goal fully met

Appendix I

Engagement Item

INSTRUCTIONS:

Please answer the following question:

Parental **engagement** in education is described as parents' drawing upon their experiences, resources, and relationships established with key individuals (e.g., *their child's school psychologist*) to define the role they play in their child's education.

In considering the consultation experience you have chosen to complete this questionnaire, rate your **engagement** throughout the process using the following scale:

____ 1; I felt completely unengaged in this consultation relationship.

____ 2; I felt somewhat unengaged in this consultation relationship.

____ 3; I felt neither engaged nor unengaged in this consultation relationship.

____ 4; I felt somewhat engaged in this consultation relationship.

____ 5; I felt completely engaged in this consultation relationship.

Appendix J

Study Advertisement

Research Study for Parents of Children with Autism

Have you ever worked with your child's school psychologist to address your child's academic, behavioral, emotional, and/or social challenges?

Has he or she ever planned interventions for your child and asked you to implement them in your home, and monitor your child's progress?

Have you ever been hesitant to utilize his or her suggestions, recommendations, and/or interventions?

This study will examine parents' attitudes towards their children's school psychologists in the school consultation process for their child diagnosed with an autism spectrum disorder.

Participation will take about 30 minutes and involves completing an anonymous online survey.

******The first 150 Parents who participate will have the opportunity to enter a random drawing for a chance to win 1 of 50 $25 Amazon.com Gift Cards (a 1 in 3 chance of receiving a Gift Card)******

If you have any questions, contact Seth Sebold, doctoral student at the City University of New York (CUNY) Graduate Center, at (516) 343-6155, or by email at SSebold@gc.cuny.edu

Thank You!

https://www.psychdata.com/s.asp?SID=140682

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Appendix K

Consent Form for Parents and Community Resources

My name is Seth Sebold and I am a student in the Educational Psychology Ph.D. Program at the Graduate Center of the City University of New York (CUNY), and the Principal Investigator of the project described below.

Background and Purpose

There is limited research on parents' attitudes towards their children's school psychologists. Specifically, how parents view strategies used by school psychologists to get them to comply with their recommendations, or implement interventions they design for their children, has not been studied extensively. Parents' perceptions of school psychologists' effectiveness and their children's academic, behavioral, emotional, and/or social outcomes have also not been studied extensively. The purpose of this project is to examine parents' attitudes in these areas when consulting with school psychologists for their children with Autism Spectrum Disorders.

Participants will be recruited over the Internet through autism spectrum disorder message boards and forums, networking websites (e.g., Facebook, Craigslist), from local and regional advocacy and support organizations (e.g. Special Education Parent-Teacher Associations) for families of children with Autism Spectrum Disorders, and by word of mouth. Approximately 150 parents are needed for this study.

To participate, you must have a child diagnosed with an autism spectrum disorder (e.g., Autistic Disorder, Asperger's Disorder), and you must have current or past experience working with your child's school psychologist. Involvement in this study is voluntary and refusal to participate will result in no penalty or loss of benefits to which you are entitled.

Procedures

You will be asked to complete an 87-item Internet survey that will take approximately 30 minutes to finish.

Potential Discomfort and/or Risk

This study may raise difficult or stressful issues in your life. In the event that this happens, a list of resources has been attached for you to contact if you wish to. You can choose not to answer any particular questions in the survey and you may also stop the survey anytime.

Benefits

There are no direct benefits from participating in this study. However, participation may contribute to existing knowledge about the relationships between parents and school psychologists.

Financial Considerations

If you are one of the first 150 parents to participate, you will be eligible to enter a random drawing for one of 50 Amazon.com Gift Cards valued at $25 each. After completing the survey, you will be offered the opportunity to enter your email address to enter the random drawing. At a later date after survey data collection is complete, the Principal Investigator will randomly select 50 participants' email addresses from the first 150 survey participants, and these individuals will be contacted to present the Gift Cards via email (i.e., one out of every three participants will receive a Gift Card). Even if you do not complete the entire survey, you may still participate in this random drawing.

Privacy and Confidentiality

No identifying information (e.g., your name or your child's name) will be collected on the survey at any point. All data collected will be secured using encrypted software on password protected computers in which only the Principal Investigator and his advisor will have access to. This data will be kept for a minimum of 1 year and after that all data will be deleted.

The information obtained will be used to produce a doctoral dissertation. Eventually, I may publish the results of this project, but no identifying characteristics will be used in any publications. If you would like a copy of any publication in the future, please email your name and address to SSebold@gc.cuny.edu.

If you have any questions about this study, please contact me, Seth Sebold, at (516) 343-6155, or at SSebold@gc.cuny.edu. You may also contact my advisor, Ida Jeltova, Ph.D., Professor in the Educational Psychology Program at the Graduate Center of the City University of New York (CUNY), at (212) 817-8288, or at IJeltova@gc.cuny.edu. If you have any questions about your rights as a participant in this study, you can contact Kay Powell, IRB Administrator at the Graduate Center of the City University of New York (CUNY), at (212) 817-7525, or at KPowell@gc.cuny.edu.

Thank you for your participation.

____ I have read the consent form and agree to participate in this research study.

____ I have read the consent form and will not participate in this study.

Local Community Mental Health Resources

Nassau

Peninsula Counseling Center
Outpatient Mental Health Center
50 West Hawthorne Avenue
Valley Stream, NY 11580
Phone: (516) 569-6600

Westchester

Northern Westchester Counseling Center
The Mental Health Association of Westchester
344 Main Street, Suite 301
Mount Kisco, NY 10549
Phone: (914) 666-4646

Queens

Steinway Child and Family Services, Inc.
22-15 43rd Avenue
Long Island City, NY 11101-3852
Phone: (718) 389-5100

Brooklyn

Flatlands Guidance Center
Catholic Charities Brooklyn and Queens
2000 Flatbush Avenue
Brooklyn, NY 11234
Phone: (718) 377-5755

Suffolk

Family Service League of Suffolk County, Inc.
County-Wide Counseling Program-Middle Island (CWCP)
522 Middle Country Road
Middle Island, NY 11953
Phone: (631) 345-5645

Bronx

Fordham-Tremont Community Mental Health Center
2021 Grand Concourse, 7th Floor
Bronx, NY 10453
Phone: (718) 960-0348

Manhattan

Alan and Kathryn Greenberg Counseling Center, Manhattan West Office
Jewish Board of Family and Children's Services, Inc.
120 West 57th Street
New York, NY 10019
Phone: (212) 397-4250

Appendix L

List of Organizations, Agencies, Internet Forums, Parent Groups, Special Education Parent-Teacher Associations, and Social Networking Groups Parents Were Recruited From

Autism Speaks
The Autism Society of America
World Autism Awareness Day
Autism Support Network
World Autism Awareness Day
Autism Mothers
Autism Speaks - Greater Charlotte Chapter
Autism New Jersey
Virginia Autism Project
Autism Speaks - Los Angeles
Autism Speaks - National Capital Area
AEIOU Foundation for Children with Autism
Autism Society of Acadiana
Parents Helping Parents
Parenting Autism
Puzzle Piece Princess
For Autism Families: Because You Are Worth It
Rainbowland Autism Services
Autism Related Wandering Safety and Prevention
Give Autism a Chance
Autism Treatment Center of America
Artists and Autism
ASD Support Network
Healing Autism
Talk About Curing Autism
Autism: Spectrum Support
Rethink Autism
Join if you know someone with autism
Autism
Autism Spectrum Quarterly Magazine
A Regular Guy: Growing Up With Autism
Autism Society of Alaska
American Autism Association
Families of Autism and Asperger's Standing Together (F.A.A.S.T.)
Asperger Moms
Asperger Connection
Asperger's Support Page
ASAP = Asperger's Syndrome Around the Planet
Autism, Asperger's and more, oh my!
East Central Iowa Autism Society

Arkansas Autism Network
New Mexico Autism Mothers
New Mexico Autism Society
Autism Awareness in North Texas
Autism Support of Southeast Texas
California Autism Foundation
New York Families For Autistic Children
Sumner County Parents of Children With Autism or Special Needs
Parents of Children with Autism, Ohio
Parents, Family, and Friends of those affected by Autism
How Our Children with Autism Raised us as Parents
Autism Parents Association
Autism United... Uniting Parents, Peers & Professionals
Parents Defeating Autism
Autism Speaks Canada
National Autism Association - New York Metro Chapter
Friends On The Spectrum
Association for Science in Autism Treatment
Autism Speaks Greater Pittsburgh Chapter
Autism Speaks - Chicagoland Chapter
Autism Speaks - Georgia Chapter
ASCONN
NYPAAC
NSASA
DS-Autism
Oceanside SEPTA
Sachem SEPTA
North Shore Autism Circle
Westchester-Putnam PTA
Longwood SEPTA
Asperger Syndrome and High Functioning Autism Association (AHA) Inc.
Plainedge SEPTA
Hudson Valley Special Education Parent Center
Cherry Hill Special Education PTA
SPAN NJ
Greater Lewisville Special Ed PTSA
Dallas autism listserve (DFW-MAFEA)
SNAFU, Ripon CA
START
The Autism Society of Greater Cleveland
Bridgeway House
HEART

Appendix M

Internet Questionnaire Link Script for Posting on Internet Forums and Social Networking Websites

Parents: Here's a link to a university approved research study examining parents' attitudes towards their children's school psychologists in the school consultation process for their child diagnosed with an Autism Spectrum Disorder (Autistic Disorder, Asperger's Disorder, etc.). The survey is anonymous, takes about 30 minutes, and the first 150 parents that participate will be entered into a drawing to win one of fifty $25 Amazon.com Gift Cards (1 in 3 chance to win a Gift Card!). Here is the link to the survey:

https://www.psychdata.com/s.asp?SID=140682

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