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ABSTRACT

This report compiles data on three 5-year federally sponsored dropout prevention programs: ALAS (Achievement for Latinos through Academic Success), the Belief Academy, and Check & Connect. The introduction to the report presents background information on the dropout problem and related issues that face youth with learning and emotional disabilities. The incidence, outcomes, and risk factors (such as poverty and ethnicity) of dropping out of school are discussed. Each project is described, with information provided on who the youth are and why they are at risk, the type of intervention that occurred, evidence for the intervention's effectiveness, an analysis of the findings, and recommendations for the future. The ALAS program developed and tested promising approaches for educating and graduating high-risk youth (including those with disabilities) of Mexican descent who live in urban neighborhoods with high concentrations of poverty. The Belief Academy consisted of five major components: (1) program stability over time; (2) intensive academic and behavior intervention in grades 7 and 8; (3) family case management services; (4) social support to students; and (5) provision of program options and ongoing support at the high school level. Check & Connect addressed the interacting systems of family, school, and community using continuous assessment of the student's level of engagement with school and monthly strategies to foster this engagement. (Individual chapters contain endnotes.) (CR)

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Staying in School

*A Technical Report of Three Dropout
Prevention Projects for Middle School
Students with Learning and Emotional
Disabilities*

Technical Report 1990 – 1995

Minneapolis Public Schools
 Seattle Public Schools
 University of Minnesota
 College of Education and Human Development
 University of California at Santa Barbara
 Graduate School of Education
 University of Washington
 College of Education

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*Part of the ABC Dropout Prevention
and Intervention Series*



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Technical Report

1990 – 1995

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College of Education and Human Development

University of California at Santa Barbara
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College of Education



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Introduction

Overview

In 1990, three projects received funding to develop and assess interventions for junior high school age students with learning disabilities or serious emotional disabilities at high risk for dropping out of school. At the time, research on the nature of dropping out in relation to youth with disabilities was just beginning to emerge. Empirical evidence indicated that youth with disabilities dropped out at disproportionately higher rates than other youth. While the general purpose of the three projects was the same, they adopted varied approaches toward promoting school completion. The three projects - ALAS, Belief Academy, Check and Connect, hence referred to as the ABC Projects - worked together over the years to provide a comprehensive picture of possible approaches to dropout prevention. During the five years of funding, project personnel met on a regular basis, attempted to collect comparable information on student, school, family, and community marker variables, and identified common outcomes on which to evaluate successful interventions.

This **Technical Report** represents some of the accumulated knowledge of the ABC Projects. It provides the supporting details for information presented in other reports of the ABC Dropout Prevention and Intervention Series.

ABC Dropout Prevention and Intervention Series.

- *Staying in School: Strategies for Middle School Students with Learning and Emotional Disabilities*
- *Staying in School: A Technical Report of Three Dropout Prevention Projects for Middle School Students with Learning and Emotional Disabilities*
- *Tip the Balance: Practices and Policies that Influence School Engagement for Youth at High Risk for Dropping Out*
- *Relationship Building and Affiliation Activities in School-Based Dropout Prevention Programs*
- *PACT Manual: Parent and Community Teams for School Success*

This report does not attempt to integrate information, but rather is designed to present detailed information on each of the three projects. The four additional reports in the series are an integration of information across all the projects.

This introduction to the Technical Report presents pertinent background information and a brief description of each project. The background section focuses on the dropout problem and related issues that face youth with learning and emotional disabilities. Specifically, dropping out of school is addressed in terms of:

- Incidence and Outcomes
- Risk Factors

Each of these is treated very briefly. The reader is encouraged to go to identified resources for further information.

The Introduction is followed by three separate *project evaluations*. The evaluations are presented in alphabetical order and follow a common outline, which includes:

- Who the students are and how they are at risk.
- How we intervened.
- How well the interventions worked.
- What it all means.

In the last section of each project evaluation is a discussion of intervention efficacy and reflections of the project directors, recommendations for middle school administrators and for further research in the area of dropout prevention and intervention.

Background Information on Dropping Out

■ Incidence and Outcomes

Students exiting school prior to graduation has become a national problem of great social and educational significance. Evidence of high drop out rates among certain populations of students and the associated consequences are cause for concern.

National Issues. Increasing the high school completion rate is one of our national education goals -- Goal 2. The most recent reports from the U.S. Department of Education indicate that dropout rates are disproportionately higher for some American children. For example, status dropout rates are 45% for low income Hispanic American youth and 24% for low income African American youth, compared to the national average of 11 percent.¹ The dropout problem in large urban school districts is a much more shocking problem, and it reflects a real multiplicity of factors that constitute a "festering social problem."² Status dropout rates in 1992 were 13.4% in central cities versus 9.6% in suburbs and 10.6% in non-metropolitan areas.³

The urgency associated with this goal reflects two concerns. First, there are significant economic repercussions of dropping out of school, both for the individual and for society. Viable employment options no longer exist for individuals without a high school diploma. Dropouts experience higher rates of unemployment, receive lower earnings, and are more likely to require social services during their lifetimes than high school graduates.⁴ In 1992, dropouts earned about \$6,000 less per year than did high school graduates, who earned \$12,809 on average.⁵ One year's cohort of dropouts from a major metropolitan school district was estimated to cost \$3.2 billion in lost earnings and more than \$400 million in social services.⁶ The estimated annual cost of providing for dropouts and their families is approximately \$800 annually per taxpayer.⁷ The social costs of failing to complete high school could rise in the future as the demands for low-skilled labor are reduced.

Another concern is related to demographic trends. Changes in the demographic characteristics of children in the United States suggest that the numbers of students most at risk for dropping out are increasing. These include children in poverty, children of color, and children from single family households, as well as children with disabilities.⁸ Thus, we can assume that the national goal to increase graduation rates will become more difficult to achieve in future generations.

Disability Issues. The National Longitudinal Transition Study (NLTS) has presented challenging new information regarding the secondary school outcomes of students with disabilities, reporting that nationally about 37% of students with disabilities drop out of school.⁹ NLTS found, further, that the dropout rates were highest for students with serious emotional disabilities (55%) and students with learning disabilities (36%).

Other studies have documented that youth with disabilities have greater dropout rates than youth without disabilities. For example, the following four-year dropout rates from urban school districts have been reported:¹⁰

	With	vs.	Without Disabilities
Chicago	65%		43%
Miami	40%		30%
New York	23%		13%
Pittsburgh	54%		33%

Moreover, only 27% of students with disabilities who drop out return to education to obtain a secondary completion equivalent or vocational certificate, and fewer than 10% of youth with learning and emotional/behavioral disabilities actually obtain such diplomas. Nearly 60% of students without disabilities return to obtain these kinds of completion documents. The NLTS data show also that dropping out of school puts students with disabilities at far greater risk for significant negative life outcomes three to five years after high school. Specifically, dropouts with disabilities are more likely

to be unemployed than graduates with disabilities (65% vs 47%), and nearly four times more likely than graduates with disabilities to be arrested (56% vs 16%).

■ Risk Factors

The multiplicity of risk factors associated with adolescents and the contexts in which they live is a powerful predictor of negative life outcomes, more so than any single risk factor. A recent follow-up of students in eighth grade indicates that dropping out of school occurred nearly eight times more often among students with multiple risk factors compared to their peers with no risk factors.¹¹ As information describing the characteristics of students who drop out of school accumulates, students with disabilities stand out as at greater risk of early school withdrawal than those without disabilities. Demographic characteristics that are associated with dropping out among youth without disabilities (e.g., lower socioeconomic status, urban settings, large schools) are also related to exiting prior to graduation for youth with disabilities, as are more amenable risk factors (e.g., absenteeism, poor academic performance, and problem behaviors).¹² Among the project directors, risk factors were perceived as a function of student, family, school and community characteristics that influenced student outcomes.¹³ Consider the following scenario:

Chronic absenteeism, course failure, and out-of-school suspensions are behaviors that often precede school withdrawal. Students who drop out are likely to attend schools that enroll a large portion of youth with similar school performance patterns and schools that have punitive discipline policies and limited parent outreach programs. While parents of students who drop out have high aspirations for their children to graduate, they often do not have the skills, knowledge, or experience to provide the necessary educational support. The communities and neighborhoods in which dropouts live are often fragmented and struggling to promote residential stability, economic viability, and an appreciation of cultural diversity.

During the past two decades, for more and more young people, there has been a catastrophic decline in the ability of schools, families, and communities to provide adequate resources, support, and opportunities that are fundamental for growth and development into productive adulthood. Some of the key contextual factors that had the most profound influence on youth who participated in the ABC Dropout Prevention Projects are highlighted here.

Poverty. Among the commonly mentioned demographic factors that are related to dropping out of school poverty is one of the most robust and powerful predictors. Data show that as income declines, cumulative dropout rates increase.¹⁴ Family income level is highly related to neighborhoods, housing, schools, and resources (both public and private) and the quality of service linked to those resources.¹⁵ Poverty affects children directly by reducing the family's ability to purchase adequate safety, food, and educational materials, and by reducing the parent's ability to engage in health promoting activities.¹⁶ Adolescents from low-income families are more likely to

experience depression, mental health problems, poor physical health, school failure, delinquency, arrest, and early sexual intercourse.¹⁷

Family configuration is another indicator associated with economic pressure on families. Since 1970, the proportion of children living in single parent households has doubled.¹⁸ The prevalence of poverty among these female-headed households is seven to eight times higher than among married couples with children.¹⁹ Even so, when controlling for socioeconomic level, students from single-parent households are more likely to drop out of school than students from two-parent families and they are also more likely to engage in health compromising or deviant behavior.²⁰ Of those youth living with two parents, both have had to enter the workforce in order to maintain earnings during the past two decades. This has increased family stress and has limited direct supervision of adolescent children. In 1970, only 39% of children had mothers in the workforce; by 1990 the proportion was 61 percent. Furthermore, between 1979 and 1989, mothers increased their weekly work hours by 32 percent.²¹

Ethnicity. Ethnicity is another factor commonly associated with school dropouts. However, it is important to note that ethnicity is highly interrelated to other demographic factors. Students of color are most likely to attend the nation's poorest schools, with 75% of black students and 46% of Latino students attending schools ranked in the lowest 20% economically.²² Furthermore, the majority of black and Latino children are now being raised by unmarried mothers who were high school dropouts. While differences across ethnic groups virtually disappear when controlling for socioeconomic status, a multi-level of analysis student and school factors on the National Education Longitudinal Study of 1988 (NELS:88) data set revealed a more complex picture.²³ For example, misbehavior, changing schools, and low grades all increased the odds of dropping out for Blacks and Whites, but not Hispanics. Nonetheless, Rumberger found that high absenteeism greatly increased the odds of dropping out in all groups.

Middle Schools. Despite the finding of relationships between poverty status and poor school performance (including dropping out), it is important to remember that the relationships are not causal. Poverty does not cause dropping out. There are many students who, despite certain demographic characteristics, do very well. Some of the reasons for this are associated with school practices and policies. Several characteristics of middle or junior high schools have been related to dropout rates. Among the factors is logistics.²⁴ Students now have many teachers instead of one teacher when they are in the middle school. This makes it more difficult for parents and students to connect with a school-based adult and to develop a trusting, working relationship. School size is another complicating factor.²⁵ Middle and junior high schools tend to be constructed to hold many more students than elementary schools, with the interrelated problems associated with less direct adult supervision and the developmental tendency of adolescents to challenge authority.

The holding power of middle and junior high schools is a critical issue to address. A school's holding power refers to its ability to keep youth engaged in school. Middle schools and junior high schools, much more so than elementary schools, implement several policies that are prone to being exclusionary in practice. These include punitive discipline procedures, attendance and grade retention policies, changing schools, academic standards, and failure to establish home-school collaboration.²⁶ Discipline procedures tend to be punitive in nature, and often rely on procedures, such as suspension, which do more to "push" kids out of school than to enhance students' behavioral repertoire or to promote constructive conflict resolution. Attendance and grade policies are also often exclusionary in practice. Of particular concern are school policies that have automatic consequences for absenteeism, such that unexcused absences result in automatic course failure, administrative transfers, out-of-school suspension, or non-promotion to the next grade.²⁷

Similarly, the failure of schools to involve parents contributes to their lack of holding power. Parents who are involved in education have children who obtain higher grades and test scores and better long-term academic achievement.²⁸ Family practices directly related to student's exit status include parental academic support, parental supervision, and parents' educational expectations for their children.²⁹ Unfortunately, schools are least effective at developing collaborative partnerships with the families of students most at risk -- those who move a lot, those without phones, those without transportation, and those who cannot read.

Communities. Neighborhoods and community resources are commonly-identified contextual issues that are discussed in relation to the dropout problem. Neighborhood is a strong predictor of a variety of outcomes for youth, including dropping out of school. Concentrated poverty in neighborhoods is associated with many social problems such as drug selling and use, gang activity and violence, crime, AIDS, sexually transmitted diseases, limited youth recreational and development programs, and diminished opportunities for employment.³⁰

A variety of resources may be unavailable or inaccessible to those students most likely to drop out of school. Communities typically have limited physical and mental health services for adolescents. This is especially so for underclass *working* families who do not have employer provided or private health insurance. While substance use and abuse, sexually transmitted disease, depression, suicide, physical or sexual abuse, and disorders of self-image are among the most commonly reported adolescent health problems, these are not among the most commonly reported reasons for doctor office visits. There has been a tremendous rise in teenage homicide and suicide, and nearly a quarter of all adolescents are predicted to have emotional or psychiatric problems that warrant mental health treatment.³¹ Yet, it is estimated that 75% of adolescents who require mental health services do not have contact with a provider.³²

The juvenile justice system also interacts with other community factors. During the past decade, juvenile justice systems have assumed an increasingly greater role in the lives of adolescents,

especially adolescents of racial and ethnic minorities and adolescents living in poverty.³³ There has been a shift away from treatment and prevention to deterrence and punishment. In many communities, the juvenile and adult justice systems are blended, with increasing numbers of adolescents being tried and sentenced as adults.³⁴

■ Summary - Contexts of Influence

Single characteristics of students, while related to eventual outcomes, are much more powerful and potentially detrimental in combination. Furthermore, many factors other than the personal characteristics of youth have an influence on their behavior. Important contexts of influence include the school context, the family context, and community contexts. Consideration of the people, resources, and experiences within these contexts is critical. During the past two decades, for more and more young people, there has been a catastrophic decline in the ability of the contexts in which they live to provide adequate resources, support, and opportunities that are fundamental for growth and development into productive adulthood. In an article titled *Dropping Out: Another Side of the Story*, the authors report that for these high risk youth and their families, school has become "a series of academic failures, conflicts with staff and peers, disciplinary hearings, suspensions, and expulsions. Dropping out was not a problem. It was a solution" (p. 244).³⁵

Despite a proliferation of approaches for students at risk of dropping out of school, few had been empirically validated. Of the research that was available at the time the projects began, close to none included systematic investigations of strategies that were successful for students with disabilities. Interventions based on student factors as well as school and community were needed. Many factors came into play as we considered the dropout problem among middle school youth with learning and emotional disabilities. A brief description of each project's approach is provided in the next pages, followed by three detailed case studies.

The ABC Projects

The U.S. Department of Education, Office of Special Education Programs (OSEP), established three cooperative agreements under a program competition titled "Dropout Prevention and Intervention Programs for Junior High School Students in Special Education." The programs were to focus on youth with learning and emotional/behavioral disabilities, with priority given to programs using a collaborative approach across spheres of influence -- home, school, and community. Projects were funded for five years (1990-1995) to develop, refine, and evaluate dropout prevention and intervention strategies for two cohorts of students. The three projects are described briefly as follows:

A LAS stands for "Achievement for Latinos through Academic Success" and means "wings" in Spanish. The ALAS program focused on adolescents and their families, school, and community. In each of these spheres, several strategies were used, for example: (a) *adolescents* - social problem-solving training; counseling; student recognition; enhancement of school affiliation; continuous monitoring of attendance, behavior, school work, and community behavior; advocacy; (b) *school* - frequent teacher feedback to students and parents; (c) *family* - building parent capacity to use community resources; parent education in school participation; parent education to guide and monitor adolescents in home, school, and community contexts; and (d) *community* - enhancement of collaboration among community agencies for youth and family services; enhancement of skills and methods for serving youth and families. ALAS was founded on the premise that the youth and their contexts of influence must be addressed simultaneously if dropout prevention efforts are to be successful. Assumptions central to the model are that each context needs individual reform to increase its positive influence on youth, and that barriers to communication and coherence between contexts must be bridged.

B elief Academy consisted of five major components: program stability over time, intensive academic and behavioral intervention in grades 7 and 8, family case management services, social support to students, and program options and ongoing support at the high school level. The Academy was based on seven assumptions: (a) youth need to enter ninth grade with at least sixth grade skills in reading and math to have a chance to be successful; (b) students who enter middle school with basic skills below grade level seldom make progress since the curriculum does not typically focus on remediation; (c) intensive instructional procedures with culturally relevant instruction and increased instructional time in basic skills are necessary in an accelerated remedial program; (d) family needs or out of school activities that interfere with student progress cannot be fully addressed by in-school activities directed by teachers; (e) because many inner city students with learning and behavioral disabilities feel estranged from school, formal attempts are needed to build affiliation with the school program; (f) the self-esteem and confidence of individual students needs to be fostered in a comprehensive, long-term program; and (g) students and their families need to be involved in constantly focusing and planning for their post high school goals, in conjunction with a long-term support program that provides viable options for the goals to be achieved.

C heck and Connect/Partnership for School Success addressed the interacting systems of family, school, and community. Stakeholder involvement began with the process of drafting the proposal and continued with the establishment of a planning committee of parents, educators, community members, and the youth themselves. Intervention strategies focused on both the

individual needs of the students and on building capacity within the families and schools. The Check and Connect monitoring and school engagement procedure evolved out of this collaborative effort. The "Check" involves continuous assessment of student levels of engagement with school, by monitoring daily incidents of tardies, absences, behavior referrals, suspensions, failing grades, and mobility. The "Connect" involves both monthly core connect strategies, and the possibility of additional interventions (problem solving, academic support, and exploration of recreational and community service options) when youth engaged in risk behaviors. This project is based on four assumptions: solving the dropout problem will require a multicomponent effort of home, school, community, and youth; leaving school prior to graduation is not an instantaneous event; students must be empowered to take control of their own behavior; and schools must be designed to reach out to families in partnership with the community.

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ALAS: Achievement for Latinos through Academic Success

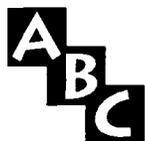
*Dropout prevention and intervention project
targeting middle school youth with learning
disabilities and emotional/behavioral
disorders at risk for dropping out of school.*

Project Evaluation 1990 – 1995

University of California, Santa Barbara

By Katherine Larson and Russell Rumberger

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SECTION I**Who Are the Students? How are They at Risk?**

ALAS (pronounced ah'-lahs), which means WINGS in Spanish, is an acronym for **Achievement for Latinos through Academic Success**. The purpose of the ALAS project was to develop and test promising approaches for educating and graduating disabled and highest-risk youth of Mexican descent who live in urban neighborhoods with high concentrations of poverty. The urgent need to improve educational outcomes for these youth is clearly found in the growing numbers of Latinos who are immigrating to America as well as in the growing and youthful population of American Latinos.

This document describes the ALAS intervention model, components of the program, the research design and participants and empirical results of the project. Additionally, an overview of issues relating to educating highest-risk Latino youth and where appropriate a review of relevant literature or background statistics are presented.

Structural Characteristics of the Community and School District**■ Community**

ALAS students live in a circumscribed community located in Los Angeles County. Within the community boundaries are 22,000 residents of which approximately 83% are Latino, 1% are Black, 15% are Anglo and 1% are other races. This community was selected for the project because it is representative of the economically deprived metropolitan life style of Latinos living in Los Angeles as well as in other U.S. cities.

As is the case with the majority of Latino citizens, community residents are essentially segregated from other races and cultures.¹ Neighborhoods within the community could be classified as tracks of concentrated poverty with per capita income half that of the state and county average -- approximately \$8,000 versus \$16,000 (see Table 1). Nearly half of all immigrants to the United States come to Los Angeles and the community represents an immigration end point with 44 percent of the population foreign born. Sixty-seven percent of the community families report they do not speak English in the home and nearly 75 percent of the adults in the community report they do not speak English very well. Essentially all daily living transactions in the community shops, restaurants, and gas stations are conducted in Spanish.

The neighborhoods are primarily small, fenced single family homes with a mix of large apartment units. The public streets are not well kept and often have illegally dumped trash or waste along the roadside. A large weed infested train track runs throughout the middle of the community. The community is blighted with graffiti marking virtually every sign, wall and building. Burning in

the 1992 Los Angeles riots took place within the community neighborhoods. The Department of Health reported in 1993 that HIV/AIDS rates of infection are increasing faster in this community than in other areas within the Los Angeles basin. Needless to say, high crime and gang activity characterize the neighborhoods. In a 1994 report issued by the Los Angeles Police Department, some neighborhoods within the community were characterized as one of LA's ten top crime "hot spots".

	State	County	Community
Population	29,760,021	8,863,164	22,580
Hispanics (%)	25.8	37.8	82.7
Foreign born (%)	21.7	32.7	44.4
Persons 5 years and over who don't speak English at home (%)	31.5	45.4	74.9
Dropouts, 16-19 year olds (%)	14.2	17.6	23.7
Dropouts, 25 years old and over (%)	23.8	29.1	59.3
Per capita income (1989 dollars)	16,409	16,149	8,876
Children under 18 years living below poverty (%)	17.8	21.4	22.5
Sources: U.S. Census Bureau, <i>1990 Census: Summary Population and Housing Characteristics</i> , CPH-1-6 (Washington, D.C.: U.S. Government Printing Office), Table 3; U.S. Census Bureau, <i>1990 Census: Summary Social, Economic, and Housing Characteristics</i> , CPH-5-6 (Washington, D.C.: U.S. Government Printing Office), Tables 1 and 3.			

Illiteracy and poor education of adults in the community is widespread. Sixty percent of the residents over 25 years of age report they did not graduate from high school (see Table 1).

■ School District

The intervention took place in the Los Angeles Unified School District (LAUSD). LAUSD is the second largest in the United States, enrolling more than 600,000 students. Like many large, urban school districts, LAUSD enrolls primarily minority students. In 1990, only 14 percent of the students were White, 13 percent were Black, and 63 percent were Hispanic (see Table 2).

■ Target School

The school serves about 2,220 students in grades 7, 8, and 9. Average class size in the school ranges from 25 to 28 students in academic subjects. The classroom interiors are in disrepair with water stained and punctured ceilings, broken and boarded windows, carved and graffiti "tagged" desks and chairs. Custodial service is minimal and classrooms are dirty and unswept.

Approximately 96% of the students are Latino, 2% are Anglo, and 2% are African American (see Table 2). Seventy percent of the students participate in the federal school lunch program. A three year analysis of the cohort who entered the school as 7th graders in 1990 showed that 62% spoke Spanish as a first language.² Many of the cohort did not complete three full years at the school -- only 60% of the 1990 cohort remained in the target school for grades 7, 8, and 9. Of the students

who remained enrolled in the school for all three years, only 65% accrued all possible high school credits during the 9th grade. In fact, 16% of the boys and 7% of the girls in the 1990 cohort failed *more than half* their classes during the 9th grade.

Students in the school are representative of well documented Latino under achievement.³ As is the case with other predominantly Latino schools, students in the targeted school test below state and school district norms.⁴ However, even when controlling for such demographic factors as SES, student transience, race and parent education level, according to California Assessment Program data of student reading achievement, the target school ranks only in the 17th percentile of all California schools.⁵ Not taking these demographic factors into account, the target school student reading achievement scores rank in the 4th percentile of all California schools.

Under achievement is also present in the school's learning disabled resource specialist students (LD). In 1989, LD students who had sufficient skills to participate in the state testing, scored below the school district LD average in academic areas.

Unit of Analysis	CTBS Scaled Scores			
	Reading	Math	History	Science
Target Jr. High LD Students	57	163	126	94
LA City Jr. High LD Students	115	152	149	159

Project Participants

The ALAS project specifically focused on youth of Mexican descent. Mexican Americans or Chicanos represent two-thirds of the Latino population in the United States, by far the largest of the Latino sub-groups.⁶ Only about 25% of Mexican Americans are foreign born.⁷ Mexican Americans are a diverse group who differ in such ways as language use, immigration status, and their own ethnic identities.⁸ Nevertheless, Mexican Americans as a whole have the lowest socioeconomic status, the lowest level of educational attainment and the highest dropout rate of all the Latino sub-groups and, consequently, their educational and economic circumstances warrant particular attention by researchers and policy makers.⁹

■ Selecting Students

Two types of students were targeted for the ALAS study. One type was students *formally* identified by the school district as Learning Disabled (LD) or Severely Emotionally Distributed (SED). The other type was students who were *not* identified by the district as LD or SED but who exhibited characteristics similar to identified LD or SED students and who on the basis of risk could be reliably differentiated from other students in the regular program. We refer to these subjects as

highest-risk (HR) students. The primary reason for including non-identified students is that previous studies have shown schools have difficulty reliably differentiating between low-achieving LD secondary students, especially among Hispanic students.¹⁰ Moreover, Los Angeles identifies a smaller proportion of students as handicapped compared to other large urban districts.¹¹

(1) **LD and SED Students.** Entering seventh grade students who had an active IEP from sixth grade identifying them as either LD or SED were included in the study. These students had been identified through a multidisciplinary process using federal and state guidelines.

(2) **Highest-risk students.** To identify HR students from the general population of low-income Latino students living in the targeted community, HR subjects were assessed in sixth grade using a five-item teacher rating scale evaluating (a) need for supervision, (b) level of motivation, (c) academic potential, (d) social interaction skill, and (e) difficulty-to-teach, and (f) need for special education services. In a previous study, Larson showed that this rating system was able to reliably differentiate low-income Latino youth into highest-risk and lowest-risk groups.¹² Categorization into highest and lower risk groups based on these ratings predicted 73 percent of the variance in eighth grade classroom expulsions, 80 percent of the variance in truancy, 50 percent of the variance in cooperation grades, 67 percent of the variance in whole day absences, 30 percent of the variance in work habit grades, and 50 percent of the variance in grade point average. That is, two years after students were rated, the sixth grade teacher ratings explained a significantly large proportion of variance in middle school performance.

Students were identified as HR if their teacher had rated them below their classroom average on most of the six items. For example, on average, each HR student was rated below the class average on 4 or 5 of the 6 items whereas the remaining students in each classroom were rated below the class average on less than 1 of the 6 items. All sixth grade students attending 11 elementary schools (approximately 625 students from 23 classrooms) surrounding the middle school were rated by their teachers on the six-item scale. Approximately 30 percent of the students from each classroom were targeted as highest-risk using this method and, of these, 60 percent were male. All other students were targeted as lower-risk (although compared to state and national criteria, such as poverty, there were also at risk of dropping out).

■ Assignment of Students to Experimental Groups

Random assignment. Of the sixth grade students originally rated, 149 highest-risk students entered the middle school as seventh graders in the Fall of 1990. Of these, 55 students were excluded from consideration because they spoke no English and could not be provided the intervention as designed. The remaining 94 students were randomly assigned to a HR control (n = 48) or HR treatment group (n = 46). Gender was equated in both groups with each being about two-thirds male.

In addition, we randomly assigned 60 students within gender groups from the “lower-risk” (LR) comparison group (n = 60) to match the gender composition of the highest-risk control group.

Cohort assignment. We aggregated students with IEP designations of LD or SED into single cohort groups. The reason is that previous studies have shown that schools have trouble reliably differentiating among LD and SED students and that more than one-third of LD students and two-thirds of SED students would be classified differently depending on where they lived.¹³

All seventh grade students with an active IEP indicating a learning disability or a serious emotional disturbance who entered the targeted junior high school in the Fall 1990 were assigned to *Special Education Treatment Cohort I* (n = 33). All seventh grade students with an active IEP indicating a learning disability or a serious emotional disturbance who entered the targeted junior high school in Fall 1991 were assigned to *Special Education Treatment Cohort II* (n= 44). All seventh grade students with an active IEP indicating a learning disability or a serious emotional disturbance who entered the targeted junior high school in Fall 1992 were assigned to *Special Education Control Cohort* (n = 55).

Student Demographics. The demographic characteristics of the two types of treatment groups and their respective control groups were similar to the characteristics of the target school population generally and that of the larger district (see Table 2).

Table 2. ALAS Students in Contrast to a Larger Population							
	District	Target School	Special Education Treatment	Special Education Control	High Risk Treatment	High Risk Control	Low Risk Control
Ethnicity:							
Anglo	14%	2%	0%	0%	4%	2%	2%
Black	15%	3%	8%	7%	0%	2%	2%
Latino	63%	94%	91%	93%	96%	96%	96%
Other	8%	1%	1%	0%	0%	0%	0%
Language background:							
English only	40%	37%	39%	25%	45%	40%	37%
Fluent English Proficient (FEP)	21%	23%	8%	26%	32%	35%	46%
Limited English Proficient (LEP)	39%	40%	53%	49%	22%	25%	17%
School Lunch	58%	72%	94%	75%	92%	91%	
TOTAL NUMBER	620,447	2,245	77	55	46	48	60

Additional comparisons show all the treatment groups with very low reading scores (Table 3). The special education groups had reading scores in the bottom quintile nationally, while the highest-risk treatment group had reading test scores in the bottom quartile nationally. IQ scores were also extremely low for these groups. Clearly the targeted students in the ALAS programs were at-risk both by their demographic characteristics, poverty and language background, and by their ability and

achievement levels. But as we explain below, ALAS students were at-risk in larger and more pervasive ways.

Table 3. Group Characteristics												
	Special Ed. Treatment Cohort 1		Special Ed. Treatment Cohort 2		Special Ed. Control Cohort 3		High Risk Treatment		High Risk Control		Low Risk Control	
	n	%	n	%	n	%	n	%	n	%	n	%
GROUP SIZE^a	33	100	44	100	55	100	46	100	48	100	60	100
GENDER												
male	24	73	29	66	45	82	30	65	30	63	25	42
female	9	27	15	34	10	18	16	35	18	37	35	58
ETHNICITY^b												
Anglo	0	0	0	0	0	0	2	4	1	2	1	2
Black	3	9	3	7	4	7	0	0	1	2	1	2
Latino	30	91	40	91	51	93	44	96	46	96	58	96
Native American	0	0	1	2	0	0	0	0	0	0	0	0
AGE												
mean (yr. & mo.)	12 yr		12 yr		12 yr		12 yr		12 yr		-	
(sd, in months)	11 mo		9 mo		8 mo		8 mo		6 mo			
	(6 mo)		(6 mo)		(6 mo)		(5 mo)		(5 mo)			
READING *												
mean ss	6.12		5.84		5.35		7.71		7.22		-	
(sd)	(2.41)		(2.46)		(2.65)		(1.63)		(2.17)			
mean % rank	16.45		13.48		-		24.98		22.63		-	
(sd)	(16.80)		(11.37)				(16.47)		(21.41)			
IQ**												
mean ss	72.24		71.84		-		82.67		-		-	
(sd)	(32.63)		(31.28)				(18.56)					

^a There is no significant difference between the High Risk groups.
^b There is no significant difference between the Special Education Groups
* Test of Reading Comprehension - ^t n = 42; ^{tt} n = 33 (Brown, Hammill, Wiederholt)
** Culture Fair Intelligence Test (Cattell)

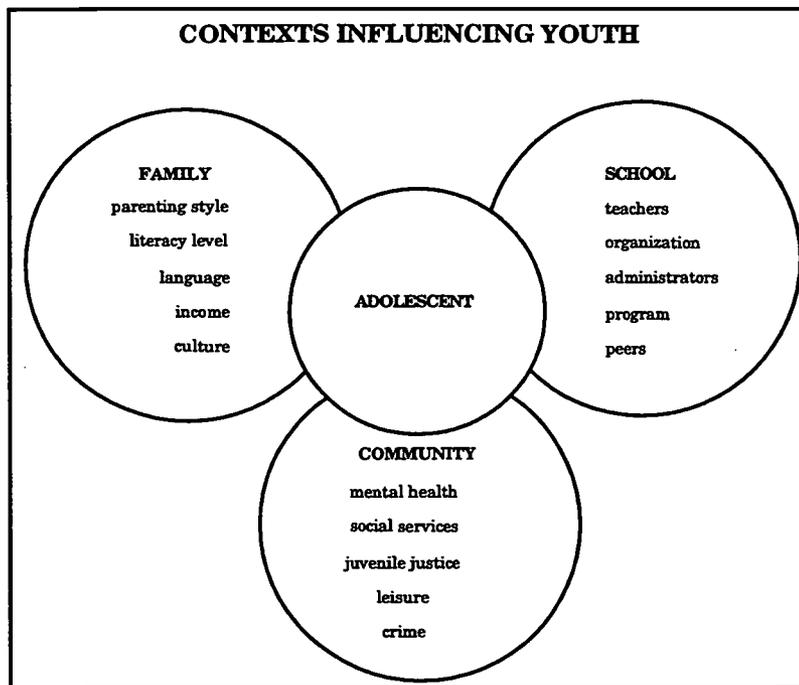
How Are Students At Risk

■ The Importance of Context as an Influence on Behavior

Partly as a result of the medical model perspective and partly as a result of valuing individual difference, the field of special education has historically focused diagnostic and remedial efforts on the characteristics or attributes that an individual youth presents while essentially ignoring or diminishing the importance of the setting or context in which the youth lives and functions. Although individual attributes, disabilities and skills are important, it is of course true that behavior is a reflection of the interaction between individual characteristics and context.

Several studies have shown that a student's ability and race do not completely account for school success and in special education it is not the most "severely" handicapped students who are at greatest risk for school failure. For example, in a group of lowest-achieving Hispanic adolescents attending the same school, Larson¹⁴ found that achievement level accounted for almost none of the variance in truancy, attendance, misbehavior or school grades. Thornton, Morrow and Zigmond¹⁵ found that achievement levels did not differentiate LD students who dropped out from those who stayed. And finally, Alpert and Dunham,¹⁶ found that not all high-risk youth with a GPA below 1.0 thought they were unsuccessful in school. Some of these students had many friends, got along with teachers and attended extracurricular activities and rated themselves as successful in school despite their low GPA. The point is that there are other factors over and beyond personal characteristics which influence a youth's behavior. These "other" factors comprise the settings in which an adolescent

lives and functions- including the people, the resources and the experiences within those settings.



During the past two decades, for more and more young people, especially young people of color living, there has been a catastrophic decline in the ability of the contexts in which they live to provide adequate resources, support, and opportunities that are fundamental for growth and development into productive adulthood. These settings

include the school context as well as the family and community contexts (see figure above).¹⁷ Within these contexts, of course, are the influence of school resources, policies and programs; the influences of family configuration, income, education, and functionality as well as the influence of the neighborhood, peers, health and mental health resources, the juvenile justice system and the resources for transition into the world of work. Major influences within these contexts are discussed below.

■ Poverty

Many factors shape the contexts in which an adolescent lives but none so powerfully as does family income. Neighborhoods, housing, schools and both private and public resources and the

quality of service linked to those resources are largely controlled by family income level.¹⁸ In 1990, more than 4 of every 10 children lived in low-income households.¹⁹

Poverty affects children directly by reducing the family's ability to purchase adequate safety, food and educational materials and by reducing the parent's ability to engage in health promoting activities.²⁰ Family income stands as the single strongest predictor of success and well being in adolescents. Adolescents from low-income families are more likely to experience depression, mental health problems, poor physical health, school failure, delinquency, arrest and early sexual intercourse.²¹ And income is a powerful influence on shaping the most critical context - family life itself. Family stress is exacerbated by financial anxiety. There are strong links between economic deprivation and neglect or abuse of children within the household²² and low-income parents, especially urban parents, report a greater degree of worry than more affluent parents about their children's health and education.²³

In order to maintain earnings during the last two decades, families have had to have both parents enter the workforce which has increased family stress and limited direct supervision of adolescent children. In 1970, 39 percent of children had mothers in the workforce; by 1990 the proportion was 61 percent. Furthermore, between 1979 and 1989 mothers increased their weekly work hours by 32 percent.²⁴

Disabled students are far more likely than non-disabled students to be economically disadvantaged. The NLTS data reveal that nearly 70% of all disabled children live in poverty.²⁵ From these data we can infer that disabled youth live in poor households at twice the rate of non-disabled children.

The NLTS also found that poverty predicts virtually every negative secondary and post secondary outcome for disabled students. Poverty in the disabled population is related to dropout rates, lack of earned high school credits, failed classes, high absence, limited parent involvement, residential dependence, limited community participation, lower pay, and diminished enrollment in vocational or college courses.²⁶

The Story of Joe

Joe first came to our attention because he failed to show up for school after the first day when he had enrolled as an entering 7th grader. In the end, we learned that tracking Joe down proved to be as challenging for us as finding a place to sleep each night was for Joe.

Joe ostensibly lived with his mother and three younger siblings at a specific address. In reality, however, because they had no place of their own, Joe, his mother and siblings moved each night between various relative's houses. Joe's father was not in the picture; he had been killed in a shooting incident shortly after Joe's birth.

(Joe's story continued on next page)

(Joe's story continued)

As we got to know Joe and his life circumstances better, we learned that the reason Joe was frequently absent from school or came without notebooks and materials, including homework, was because he never knew from day to day where he was going to eat dinner or sleep. We experienced Joe's dislocation firsthand when we tried to pick him up for school in the morning. Three days out of five Joe was not where Joe he told us he was going to be. At first we thought Joe was giving us inaccurate information as to his whereabouts. We eventually realized, however, that decisions about Joe's location were often made in the evening and impromptu after the various relatives had assessed who had room that night for Joe and his family members. Very often Joe did not sleep where his mother or siblings slept. Needless to say, during these moves Joe would frequently forget to gather up all of the things he needed for school the next day -- PE clothes, math homework, notebook, library book, wood shop project, etc. This would often result in the school assigning Joe some form of punishment the next day, usually detention or "sentences," because he had forgotten some item he was to be responsible for.

Joe typifies the acute poverty and accompanying daily disorder and dismal prospects many youth experience as the result of being the children of an adolescent mother who is a school dropout with virtually no skills and who subsequently never marries or never receives child support from the father.

A year after we first met Joe, his mother was able to move into an apartment with Joe and his brothers and sisters. Even though the rent and utilities were average for a two bedroom apartment in a low-income neighborhood, Joe's mother had only \$15 plus food stamps left over each week from the welfare and social security money she received. The family's welfare stipend had been reduced because the mother had failed to meet the requirements of California's welfare-work program (go to school or get a job). The \$60 each month went to pay for clothes, bus fare, food and supplies for the four children and the mother. They had no furniture or beds. They did have mattresses on the floor and a refrigerator and stove. However, when the first winter came with heavy rains, as a result of the mother's brother having gone berserk and punching in the ceiling and walls in a drunken rage some months before, the apartment leaked so badly that the carpets and mattresses were soaked and later mildewed. Joe's mother reported that she could not move out because she was two months behind on rent and had no where to go except back to her various relatives. Joe's mother refused to apply for public housing because "the projects" were dangerous and crime ridden. At any rate, there was a three year waiting period for public housing.

■ **Ethnicity/Race**

Adolescents of color are unequivocally at greatest risk for negative life outcomes in virtually every arena. Negative life prospects are primarily the result of high concentrations of poverty in minority populations with three times as many black youth (45%) and more than twice as many Latino youth (38%) living in poverty as Anglo youth (15%).²⁷

Racial and economic stratification exposes Black and Latino youth to neighborhoods with the highest rates of crime, violence, drug dealing, fires, AIDS, unemployment, and diminished recreational programs.²⁸ In turn, in response to the settings in which they live, minority adolescents are more prone to engage in high rates of delinquency, gang involvement and sex with the tragic consequences of incarceration, pregnancy, HIV/AIDS, or death.²⁹

The Story of Ramon

Ramon was a seriously learning disabled adolescent who functioned academically at the 2nd grade level when he entered 7th grade. His parents were immigrants who came to the U.S. from Mexico a few years before Ramon was born. Ramon's mother was a housewife who spoke little English. Ramon's father worked 60 hours each week as a landscaper. He spoke a good deal of English. The family spoke Spanish in the home and observed traditional customs with food, holidays and social norms. Both parents could read and write Spanish but neither parent could read or write English. Ramon's parents encouraged their children to do well in school and their 11 year old daughter was an A student.

Ramon had been in a special day class since 3rd grade and yet he had made little progress in reading or spelling. When he was in the 6th grade, his parents requested that the school retain him but the school overruled the parents request and told the parents he would learn best in junior high school.

Ramon's parents came to the school whenever they were asked. Ramon's mother attended each yearly IEP meeting. Ramon's younger sister accompanied the mother as a translator. The father did not attend. He said he was afraid to take time off from work and expressed that he couldn't chance losing his good job.

Ramon remained in a special day class throughout junior high school. Ramon's mother reported that she was never called to the school for any parent conferences during the three years Ramon attended the junior high school. She felt this was because "Ramon was such a good boy who behaved and didn't give his teachers trouble."

The mother said that she and her husband never lodged a complaint about Ramon's lack of progress. Ramon's mother said they were frustrated that Ramon couldn't read but they knew he had a "mental" problem because he "never learned his colors as a child". The parents expressed a great concern and protectiveness for Ramon's self-esteem and were concerned that Ramon felt so bad about not being able to read. The mother reported that she had signed and accepted the written IEP each year because that was what the school personnel said was best for Ramon. She reported that she and her husband knew that Ramon had a problem and that surely the school professionals knew best -- especially since she and her husband were not educated in American schools and didn't know how decisions were made. All she had to go on she said was what she and her husband had learned in Mexico -- that consejeros and maestros were to be honored and respected for their status and knowledge.

Ramon was given a three year reevaluation before going into 10th grade. His parents were informed that he was still reading and writing at the 2nd grade level and had made no progress in three years. Ramon's parents received this information with anger and resentment. They felt they had trusted their child to the school and their child had been hurt. They felt they had done their part by encouraging Ramon, having his attendance excellent and teaching him to behave and obey. The parents sought out an advocate.

Ramon's parents requested a mediation hearing to obtain private special schooling. Ramon's mother reported remembering that the school at each IEP meeting had told her she could challenge the IEP decisions-- she said that she never knew what part of the IEP to challenge -- and who is she to challenge the school?

It is not surprising that holding race and family background constant, teen pregnancy is more likely to occur in poor neighborhoods where options, alternatives and hope are in markedly limited.³⁰ Thus, because children of color are likely to live in poor neighborhoods, the possibility

that they will have or become teen mothers is greatly increased. Indeed, the *majority* of Latino and Black children are now being raised by unmarried mothers who were high school dropouts.³¹

Youth of color are also at greatest risk for school failure with 65 percent of Black and Latino youth compared to 25 percent of Anglo youth of the sophomore class of 1980 either dropping out before graduating or graduating with a grade point average below C.³² Minority youth are also most likely to attend the nation's poorest school with 75 percent of Black students and 46 percent of Latino students attending schools ranked in the lowest 20 percent economically.³³

Not unexpectedly, the NLTS found that disabled children of color who live in poverty have the poorest outcomes of *all* children in the nation during both secondary school as well as post secondary school.³⁴ Just as in the general population, disabled children of color do more poorly in school than Anglo disabled children. The NLTS found that 34 percent of Latino and 38 percent of African American disabled students drop out of school which is a significantly greater rate than the 25 percent dropout rate of disabled Anglo youth. Moreover, in a separate analysis of the NLTS data, Wagner, Blackerbee, and Hebbler,³⁵ report that failing classes is significantly related to a disabled student being Latino. These authors report that even when controlling for poverty, disability category, parent involvement and gender, Latino disabled students fail 16 percent more classes in grade nine and 14 percent more in grade eleven than Anglo disabled students.

According to parental reports the NLTS data, although most disabled young adults of all ethnic groups are not receiving needed services 2-5 years post high school, far greater proportions of Latino and African American disabled young people compared to Anglos are not receiving vocational assistance, life skills training, tutoring, personal counseling and physical therapy.

■ Family Background

Family background or structure is widely recognized as one of the most or even *the* most important contributor to the successful development of youth. Family background effects educational outcomes. For example, parent education or literacy level is a powerful predictor of school achievement and dropout behavior and other research has shown that family configuration impacts school performance and adolescent behavior.³⁶

Since 1970, the proportion of children living in single parent households has doubled.³⁷ When controlling for socioeconomic level, students from single-parent households are more likely to drop out of school than students from two-parent families³⁸ and are also more likely to engage in health compromising or deviant behavior.³⁹

Risk is especially great for children living in female headed households and this risk has dramatically increased. Over the past two decades there has been a 40 percent increase in the number of female-headed households with children. In 1960, 15 percent of teens giving birth were unmarried, by 1989 over 67 percent of teenage mothers were unmarried.⁴⁰ Moreover, the prevalence

of poverty among these female-headed households is seven to eight times higher than among married couples with children. Not unexpectedly, the adolescent children of adolescent mothers are far more likely to do poorly in school and engage in high-risk behaviors.⁴¹

Dysfunctional parental attributes such as alcoholism, drug addiction or other mental health problems as well as violence in the home or high stress and over crowding constraints within the household that often accompany poverty limit a parent's ability to provide adequate emotional support and stimulation to their children which results in increased risk for academic and social behavioral problems.⁴²

Given the persuasiveness of poverty in disabled youth, it is not surprising that the NLTS⁴³ found that nearly twice as many disabled children (41%) compared to non-disabled children (22%) have parents who are not high school graduates and more disabled children live in one parent households.

Some Family Backgrounds

Marisela ran away at age 13 because her father beat her. She went to live with her 17 year old sister who had also run away from the father. The sister called the school to find out if she could become Marisela's guardian. The sister said that, "Marisela had always gotten the brunt of the father's rage because Marisela would stand up to him and say 'it may hurt now but it won't hurt forever'."

David lived in five different relatives homes by the time he was 12 years old. When asked about the frequency of moves his response was, "My brothers and I are too hard to take care of, we make too much noise and that's why we have to go to another house."

Eddie's mother was a paranoid schizophrenic who was delusional, incoherent, volatile and violent. She refused medication. She could not be hospitalized for treatment because the father's medical insurance only paid 75% and he could not pay the remaining fees. The mother lived at home and terrorized the family.

Joe's mother was 15 years old when he was born. His parents never married. His father was killed in a gang shooting when Joe was an infant. Joe lived with his mother, a 14 year old half sister whose father who was also deceased from a shooting, and two younger half brothers whose father was in prison. Joe's mother was an alcohol abuser and drug addict during his early years and a binge drinker during his teen years. Since the age of eleven, Joe was often required to protect his mother from physically abusive boyfriends.

Roberta was 10 years old when she was abandoned with her five younger siblings. Roberta took care of these siblings alone for two weeks until the police discovered them. Both her mother and father are heroine addicts who are imprisoned periodically. Roberta and her five brothers and sisters live with their maternal grandparents who also have guardianship of three other grandchildren. The nine children and two grandparents receive \$1205 per month from the government to cover food, housing, clothes, and other expenses.

(Family backgrounds continued on next page)

(Family backgrounds continued)

Giovanne lived with his mother and sister in a single car garage that had no plumbing or heating. They paid rent with cash. His mother worked long hours in a garment factory. Because the family had no utility bills in their name, *Giovanne* could not prove his residency when he applied for the federal youth summer job program. Having lost his U.S. birth certificate, *Giovanne* could not prove he existed and was not permitted into the job program for disadvantaged youth.

Enrique was born addicted to drugs. The hospital never knew his mother used drugs. He went through withdrawal without medical help because his grandparents, who had taken him away from his mother, did not know better. He received a great deal of love from his grandparents, however, his grandfather was an alcoholic and his grandmother was an invalid through out his life. When *Enrique* was 14 years old, the school counselor discovered he regularly used amphetamines and sniffed whatever he could find. His grandfather was outraged and not supportive of treatment because he felt that *Enrique* could quit if he wanted.

■ **Neighborhoods**

A neighborhood is both a social network and a spatial unit and is a strong predictor of a variety of outcomes for youth. Household poverty and segregation by race are fundamental elements of neighborhoods, especially in metropolitan centers. High poverty neighborhoods have much higher concentrations of single parent families, unmarried teenage mothers and under employed young adults.⁴⁴

Ricketts and Mincy⁴⁵ define underclass neighborhoods as *high* in a) under employed working age males, b) households headed by women, c) households receiving welfare, and d) dropouts among the school age population. Underclass or concentrated poverty neighborhoods are defined as those with 40 percent or more residents having poverty level incomes. Ricketts and Mincy argue that many low-income neighborhoods have deteriorated since the 1970s into underclass neighborhoods. These researchers found that between 1970 and 1980, there was a 331 percent increase in the number of underclass neighborhoods in America.

Concentrated poverty is associated with many social problems such as drug selling and use, gang activity and violence, crime, AIDS, sexually transmitted diseases, limited youth recreational and development programs, and diminished opportunities for employment.⁴⁶

■ **Health Services**

Evidence is strong that during the past two decades the health status of adolescents has deteriorated.⁴⁷ Yet, communities typically have limited physical and mental health services for adolescents and this is especially so for underclass *working* families who do not have employer provided or private health insurance.

In particular, adolescents have low rates of visits to doctors offices. Moreover, their problems are poorly represented in medical data bases. Inadequate care is related to the fact that conventional concepts of health care rooted in biological determinants of disease are less applicable to today's teens whose physical and mental health care needs are related to patterns of behavior adopted as a response to the settings in which adolescents live and to current times. For example, between 1965 and 1988, death by cancer, heart disease and influenza decreased among adolescents whereas adolescent deaths by suicide and homicide nearly tripled⁴⁸ and AIDS became the fastest growing cause of death among teenagers and young adults.⁴⁹ Substance use and abuse, sexually transmitted disease, depression, suicide, physical or sexual abuse, and disorders of self-image are among the most commonly reported adolescent health problems described in research, yet, these health problems do not appear among the most commonly reported reasons for doctor office visits. This is because these health problems are behavioral not biological and require a different approach to adolescent health care than currently exists. Irwin found that the average length of doctor visit by adolescents was ten minutes.⁵⁰ Perhaps this explains why the socially sensitive health problems which adolescents experience are not being adequately addressed.

Moreover, the rise in teenage homicide and suicide suggests an increase in high levels of hopelessness, grief and anger among adolescents. Nearly a quarter of all adolescents are predicted to have emotional or psychiatric problems that warrant mental health treatment.⁵¹ However it is estimated that 75 percent of adolescents who require mental health services do not have contact with a provider.⁵²

When provided, services are available through special education in the schools, in non profit community centers and community mental health centers but these services are fragmented with little coordinated case management activity. Services for adolescents often fall under special short term funding such as the FEMA provided earthquake funds in Los Angeles which provided counseling funds to the community for one year. Youth receiving the services have no place to continue treatment after the FEMA funds run dry.

Table 4. Stress and Depression Among ALAS Students	
Students who experience stress events	
2-5 events per year	53%
6-9 events per year	30%
10-15 events per year	6%
Students who experience depressive symptoms at least twice per month	
3-7 symptoms	47%
6-9 symptoms	15%
10-15 symptoms	8%

Seventh grade assessment of ALAS students (Table 4) shows that they experience a significant number of stress events such as family illness or death, family breakup, parent lost job,

threatened by gang, mother began working, breakup with boy/girlfriend, trouble at school. ALAS students also reported a clinically significant number of depressive symptoms such as tired, headaches, trouble sleeping, loss of appetite, feeling unhappy, feeling nervous, sad or worried.

■ **The Juvenile Justice System**

During the last decade, juvenile justice systems have assumed an increasingly greater role in the lives of adolescents, especially adolescents of racial and ethnic minorities and adolescents living in poverty.⁵³ More recently there has been a shift away from treatment and prevention to deterrence and punishment. In many communities the juvenile and adult justice systems are blended with increasing numbers of adolescents being tried and sentenced as adults. Between 1986 and 1991 arrests for juveniles between 10 and 17 years for rape, robbery, homicide or aggravated assault increased by 48 percent.⁵⁴ Adolescent of color who are also poor are most victimized by crime and also most adjudicated for criminal behavior. Arrest rates of minority youth are not simply a function of rate of criminal activity on the part of adolescents but also the interaction effects between police and minority adolescents. For example, police have been shown to act more suspiciously, more aggressively and more preemptively in low income neighborhoods with high concentrations of minority youth.⁵⁵

■ **School**

Although education has been historically perceived as the means by which individuals disadvantaged by poverty and life circumstances can reduce and even eliminate negative influences and increase their adult prospects, for many students, schools do not now provide this redress. Indeed, social and economic stratification influence almost all structures and activities that take place at school.

Just as they face inadequate community contexts, children of color face the most dismal schooling circumstances. Because they are generally from low income neighborhoods, most children of color attend schools characterized by relative lack of safety, unsightly and unkempt school buildings, limited curricular resources and peers with high rates of school dropout and low achievement scores.

Because most children in America attend schools that are homogeneous by race, income and ethnicity they do not receive equivalent educational programs or resources.⁵⁶ Differences in funding rates between schools with high concentrations of poverty and those with low determine differences in availability of textbooks, laboratory equipment, resource rooms, library books and other educational resources.⁵⁷

Students attending economically disadvantaged schools receive relatively lower expectations from school staff. The Commission on Chapter 1 found that "The *low* expectations in our suburban

high schools are *high* in comparison to expectations in urban schools and rural schools with concentrations of children in poverty . . ."58 Although schools have been charged with "dulling the minds and dashing the hopes of millions of America's children"59 it is only fair to note that school personnel in schools with large numbers of low-income students have not been prepared to face the challenges these students present educationally and behaviorally.

Unfortunately, most reform efforts do not reflect the profound systemic changes in *attitude* and *philosophy* that educators must adopt if schooling is to be the leavening factor in American society.60

ALAS: SECTION I

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SECTION II

How Did We Intervene?

Traditionally, dropout prevention efforts have not addressed the contexts in which youth live and function. Instead, the personal characteristics of students have been the focus of investigations seeking to explain school failure. This line of research led to targeting student attributes or student background characteristics – income level, race, ethnicity, home language, parent education, immigration status – as "the cause" of school failure and school dropout.

Thus, the student and not the contexts which influence the student were viewed as the problem in need of reform. In turn, intervention efforts were directed toward "fixing" students by enticing or coercing them to accommodate or submit to the existing school program and policies. Many argue that this exclusive focus on reforming students has led to limited success in developing successful dropout prevention efforts because the contexts which influence youth performance are not addressed.¹

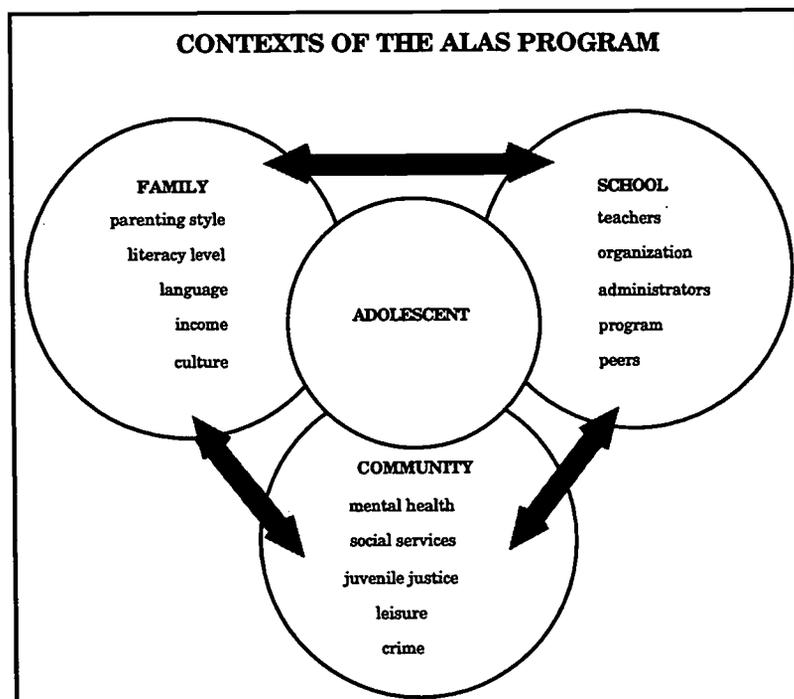
Consequently, recent dropout prevention efforts have shifted the focus of reform to the school as a context of influence on the youth. During the last decade a plethora of "school reform" efforts have reflected this change of focus. With this perspective, the definition of the school as a context has been expanded beyond curriculum to include school climate, teacher behavior and most recently school management and organization structure. Thus, school reform efforts are described as "restructuring" schools so that all of the sub-contexts within the school are brought into the process of reform. Unfortunately, evaluations of school restructuring efforts have been disappointing.² However, what has emerged from the school restructuring efforts and the focus on school-as-context is a further expansion of the concept of context.

Educators and other stakeholders have come to recognize that the school context and all its complexities is inextricably bound to the *other* contexts of influence on youth achievement. That is, the achievement of a child in the school context is now acknowledged to be significantly influenced not only by school variables but also by the other contexts in which the youth functions – the family and the community. The robustness, intactness and effectiveness of school, family and community contexts determine degree of "risk" for undesirable life outcomes as surely as do a youth's own innate characteristics. Few would now argue with the conclusion "so go the contexts in which a youth functions, so goes the youth."

However, this sentiment is profoundly troubling given the deteriorated and insufficient support many youth of today receive from family, school and community as described in Part One of this report.

Program Design: Mediating Multiple Contexts of Youth

ALAS was founded on the premise that the youth and contexts of influence must be addressed simultaneously if dropout prevention efforts are to be successful. A central assumption of the model is that each context needs individual reform to increase its positive influence on youth and, additionally, barriers which reduce or prevent communication and coherence between contexts must be bridged. Thus, ALAS consisted of a series of specific intervention strategies focused on the adolescent as well as on the three contexts of influence on achievement--the family, school and



community adolescent. The intervention strategies were designed to increase the effectiveness of each context as well as to increase collaboration between contexts.

Providing dropout intervention in all contexts in which the adolescent functions is predicated on two notions. The first is understanding that child behavior and development is an interaction between multiple contexts of influence and the individual characteristics of each child.³ The second is

acknowledging that many high risk youth and their parents require ongoing, comprehensive and integrated services from the fields of health, social and legal services, employment, juvenile justice and education.⁴

■ Intervention Strategies and Rationale

ALAS consisted of a series of specific intervention strategies focused on the adolescent as well as on the three contexts of influence on adolescent achievement--the family, school and community. The intervention strategies of ALAS were designed to increase the effectiveness of each context as well as to increase collaboration between contexts.

- **Strategies focused on the *adolescent*** included social problem-solving training; counseling; student recognition; enhancement of school affiliation.

- **Strategies focused on the *school* included** frequent teacher feedback to students and parents; attendance monitoring.
- **Strategies focused on the *family* included** use of community resources; parent training in school participation; training to guide and monitor their adolescent.
- **Strategies focused on the *community* included** enhancement of collaboration among community agencies for youth and family services; enhancement of skills and methods for serving the youth and family.

The specific interventions and their rationale are described on the following pages.

Remediate the Student's Deficient Social and Task-Related Problem Solving Skills. To positively enhance students' social and task-related behavior, the student intervention strategy used in the ALAS project was a social metacognitive problem solving training program previously developed and tested by Larson.⁵ ALAS students received ten weeks of problem solving instruction and two years of follow-up problem solving prompting and counseling. The training also taught school survival problem solving.

In a prior study, the problem solving strategy training reduced gang involvement and delinquency⁶ in adjudicated youth and reduced school truancy and misbehavior incidents in highest-risk junior high school students.⁷

The need for dropout prevention efforts to focus on a student's school and classroom behavior is predicated on the fact that disruptive social and task-related behavior is the student characteristic which most disturbs teachers and school staff.⁸ Social and task-related behavior and problem solving skills have been consistently reported as problematic for low-achieving youth of all ethnic backgrounds. Indeed, social and task-related behavior problems are found to correlate with school failure over and above IQ and academic achievement.⁹

School behavior problems have been shown to be clearly related to dropout and low grades.¹⁰ Low-achieving high-risk "stayers" have been distinguished from dropouts primarily on the basis of degree of misbehavior in school.¹¹ Schwartz found that low-track students identified with an anti-academic subculture that based social status on defiance of school and teacher norms.¹²

Latino dropouts report more trouble than other students in getting along with teachers.¹³ In several studies, Larson found that lowest achieving Latino junior high students, those students who were at greatest risk to drop out of school, had four times the rate of classroom expulsions than other Latino students.¹⁴ Indeed, projections of her figures showed that the lowest-quartile subgroup of students ($n = 500$) in this Los Angeles Latino school would have generated nearly 25,000 disciplinary contacts during seventh and eighth grades! Larson concluded that this disproportionate use of staff time for disciplinary events for a minority of students was a major *disincentive* for school staff to try and keep these highest-risk students in school.

Elements of the Social Thinking Skills Training¹⁵

- how to recognize when a problem first begins
 - how to identify and define problems clearly
 - how to control impulsive reactions
 - how to overlook irritations that are best ignored
 - how to identify emotions
 - how to set clear and realistic goals for the short and long term
 - how to evaluate one's own competence for solving a problem
 - how to think of a variety of potential solutions
 - how to develop a step-by-step plan
 - how to anticipate the roadblocks and pitfalls when taking action
 - how to be assertive and socially appropriate when facing peer pressure or criticism
 - how to sustain persistence and effort when frustrated
 - how to control anger and express emotions appropriately and effectively
-

Provide Recognition and Bonding Activities. To increase school affiliation and status within the school organization, students in the ALAS project were given frequent positive reinforcement such as praise, outings, recognition ceremonies, certificates, and positive home calls to parents for meeting goals or improving behavior, attendance, and school work. Students were allowed to "hang-out" in the ALAS lounge during lunch or after school and were encouraged to bring friends to ALAS parties.

The importance of *actively* working to increase highest risk student's sense of membership is made clear by studies showing that dropouts and ethnic and racial minorities report feeling much less of a membership or bonding to school than do other students. Wehlage and Rutter found that dropouts feel alienated from school as indicated by their perceptions of lack of teachers interest in them, expressed belief of poor effectiveness of school discipline and unfairness of school discipline.¹⁶ In another ethnographic study, Wehlage and his associates found that virtually every student dropout they interviewed expressed the feeling that schools and teachers did not care about them and that they had no adult at school to turn to for help.¹⁷ Ekstrom, Goertz, Pollack, and Rock also concluded that compared to non-dropouts, dropouts are alienated from school life as indicated by feeling less important and less popular and feeling that other students see them as troublemakers and by lower levels of participation in extracurricular events and self-reported low interest in school.¹⁸

Historically, low SES and ethnic and racial minority students show less affiliation for school than middle class or Anglo students. Latino students are often found to have a difficult time crossing

sociocultural boundaries and consequently feel alienated from the norms and values of mainstream education.¹⁹ This alienation and resultant poor achievement is not merely a matter of new immigrant status. Studies by Hayes-Bautista, Schienk and Chapa and Fernandez and Nielsen found that the longer the residence in the United States the lower the academic achievement and school success.²⁰

Lack of affiliation to school in Latino students is suggested by various student behaviors. Latinos are found to participate less often in class and to report that teachers disapproved of them and felt they lacked ability.²¹ Lack of affiliation with school is also sadly seen in the data showing that Latino dropouts have higher self-esteem than Latino adolescents who remain in school!²²

Wehlage and his colleagues suggest that for a student to become socially bonded to school he/she must feel attachment, commitment, involvement and belief.²³ When the student feels personal concern and caring from at least one significant adult in the school and when adults express belief in the student and provide ways for the student to feel successful, then the student will become bonded to the school and its goals.

Student Bonding Activities Included

- An open office for ALAS students and their friends to hang out before and after school and during lunch
 - Holiday school parties allowing friends to be invited
- Certificates and small rewards for improving grades or attendance
 - Occasional evening or weekend outings for achievement
 - Positive notes and calls to parents
- After school “boys” and “girls” groups to discuss teen issues
- Hot chocolate mornings before school or order-in pizza lunch
 - After school and in school tutoring
- Home wake-up or reminder calls if requested by the teen
- Frequent public acknowledgment of student improvement

Maintain Intensive Attendance Monitoring. Students were monitored for period-by-period attendance. Parents were contacted daily about student truancy or extended absence. Students were required to make up missed time and were provided with positive adult contacts communicating a personal interest in the student's attendance.

Clearly all dropout research shows that dropouts have poor school attendance prior to dropping out.²⁴ In many large secondary schools, attendance is not closely monitored and students quickly get the message that school staff do not really care whether they are in school or not. The

National High School and Beyond data show that twice as many Latino dropouts admit to cutting classes compared to non-dropout Latinos.²⁵

Patterns of truancy are gradual, occurring over an extended period of time beginning in junior high school. Larson found that highest-risk junior high school Latino youth started out seventh grade with no worse truancy or absences than peers; however, by the end of the first semester of seventh grade the highest-risk students had more than doubled their truancy and absence rate (from 12% to 27%) and throughout the remainder of junior high school these students never returned to their entry level attendance patterns.²⁶

Attendance Monitoring Included

- Student circulates teacher signature card to each class and then to ALAS office for monitoring
 - Student escorted to classes if chronically “cuts”
 - Parent escorts student to first class or to school office
 - Parent notified the a day a student is absent
 - Transporting student to school
 - Locating truant student and returning him or her to school
 - Arranging for teacher to send note if the student is absent from class
 - Visually checking to see if a student is in class
 - Daily notes home to parent about student’s attendance
 - Filing report with the School Attendance and Review Board, Probation Officer, or Social Services
-

Provide Frequent Teacher Feedback to the Parent and Student. The ALAS intervention provided weekly and, if needed, daily feedback reports to students and parents regarding classroom comportment, missed assignments, and missing homework. Students were taught to use this teacher feedback for focusing thinking and decision making during problem solving maintenance training. The ALAS project sent home regular notes (or telephone calls) to parents on a daily, weekly, or bimonthly basis informing them about their child's school progress. Teachers were regularly informed by the ALAS counselor about how teacher comments and evaluations were addressed with the student and parent.

The need to provide highest risk students with feedback regarding their school performance is predicated on the fact that a basic principal of behavior change is specific and frequent feedback to the performer. Low-achievers particularly need clear and frequent feedback regarding their performance--what they are doing well and what they need to improve.

The traditional feedback system in secondary schools is report card grades every quarter semester. However, lowest-achieving, high-risk students require feedback and progress reports much

more frequently. Larson found that lowest-achieving junior high school students were not able to accurately predict school grades at five-week intervals without interim feedback reports from teachers.²⁷

Larson's previous work found that students who received feedback with parent notification improved classroom performance and attendance.²⁸ However, students who received weekly feedback without parent notification did not improve attendance or school performance. Larson found that low-income Latino parents in this study consistently expressed appreciation for being informed weekly and the students reported that the teacher feedback reports and home notes made a positive impact on their school behavior. Similarly, Delgado-Gaitan found that Latino parents were angry when the school did not notify them of their adolescent's poor school performance, even though the parents did not initiate any school contacts themselves.²⁹

Student Feedback Included

- Student-circulated teacher evaluations to each class daily
 - Academic grade monitoring from teachers weekly
 - Missing assignment monitoring from teachers daily, weekly, or monthly as needed
 - Homework monitoring daily
 - Daily note to parent listing homework assignments
 - Daily, weekly, or monthly notes home to parents as needed regarding behavior or school work
 - Daily or weekly telephone calls to parents if needed
 - Weekly parent conference if needed
-

Teach Parents School Participation and Teen Management. The ALAS intervention program trained parents in two skills: (1) parent-child problem solving, and (2) parent participation in the schools. Parents in the project received direct instruction and modeling in how to reduce their child's inappropriate or undesirable behavior and how to increase desirable behavior. Parents were specifically monitored for follow through and prompted to use newly learned parenting skills. Additionally, parents received instruction in how and when to participate in school activities, how to understand report cards and school credits and when and how to contact teachers and administrators.

The fact that parental values and attitudes play an important role in academic achievement has long been substantiated by researchers.³⁰ For adolescents, parental monitoring of their behavior had a marked positive impact on grades and homework.³¹ Rumberger et. al found that parents of school dropouts are less involved in their child's education than other parents including those of graduating low-achieving students.³² These researchers also found that parents of dropouts had a more

permissive parenting style, were less involved in their child's life-decisions, used negative sanctions and emotions when reacting to poor academic performance and contacted the school less often.

Social class has a powerful influence on parent school participation. For example, between 40% and 60% of low SES parents fail to attend parent-conferences compared to 20% to 30% for middle class.³³ Low-income parents attend school events less, make fewer complaints to the principal and enroll their child less in summer school than middle class parents.³⁴

Not surprisingly, in Latino students, parental involvement is also found related to achievement.³⁵ Moreover, research has clearly shown that Latino parents interact significantly less than non-Latino parents with teachers and school personnel.³⁶ However, the stereotyped belief that Latino parents give little value to education has been recently challenged by research findings which show that values, attitudes, and aspirations concerning education are not very different in Latino and Anglo households.³⁷

It appears that Latino parents fail to participate in their child's school due to lack of understanding the role that parents can and are expected to play in their child's school, lack of confidence due and skills in how to interact with teachers and other school staff and due to home-school cultural mismatches.³⁸

Parent Training Included

- Premises and assumptions of American educators
 - Practices and procedures of American schools
 - When and how to contact school personnel
 - Reading and interpreting report cards and graduation credits
 - Social and identity needs of adolescents
 - Due process and legal rights of students and parents
 - How to make requests of school personnel and get action
 - How to request special education services and program adaptations
 - Differences between Mexican and American cultures and mores
 - Red flags of teen behavior
 - When and how to monitor adolescent behavior
 - How to manage and direct a recalcitrant teenager at home
 - How to make and use home contracts
 - How to monitor the adolescents school behavior and performance
 - How to work with the courts, probation, and mental health services
-

The need for parent training for highest-risk Latino youth is supported by several factors. Many of these parents are immigrants, and are often from rural backgrounds, and have limited

knowledge and no direct experience with parenting a child in an urban, high crime, gang oriented, American barrio. Many parents have low-literacy skills and do not receive mainstream information, tips and cautions that are regularly directed to parents by the media, schools, political and community organizations. And finally, for a variety of reasons a substantial proportion of these parents lack effective parenting skills. For example, Rumberger et. al (1990) found that parents of dropouts and "least adjusted" adolescents participate less with their child in decision making or joint problem solving and use authoritarian or laissez faire parenting styles.

Integrate School and Home Needs with Community Services. The community component of the ALAS intervention functioned to directly facilitate youth and parents' use of community services such as psychiatric and mental health services, alcohol and drug counseling, social services, child protective services, parenting classes, gang intervention projects, recreation and sports programs, probation, work programs, etc. Parents and youth were not simply referred to these community agencies by ALAS staff but were directly helped with making appointments, transportation, letters of reference, reminders, and so forth. Parents were given knowledge and rationale about how a particular service could benefit them or their child and were monitored for keeping commitments to participate in the community service.

Community Interventions Included

- working with public defenders and investigating probation officers to determine most effective disposition or placement
 - advocating for youth in court--preparing written reports and testifying in court
 - working regularly with probation officers to modify behavior
- arranging through the system to meet youth in juvenile hall and transitioning between public school and correctional school
- working with parent and state work-welfare program to get family food stamps or social security benefits
 - helping government agency and family to obtain federal, county or city summer jobs for disadvantaged and disabled youth
 - referring parent to potential jobs or school training program
 - helping family move and seek food, shelter and government help after earthquake
 - getting free city bus pass for student to get to and from school
 - advocating for child and parent at a school IEP meeting
- working with county mental health, schools to get child into nonpublic school or extra tutoring
 - working as advocate for child and parent in state special education mediation hearings

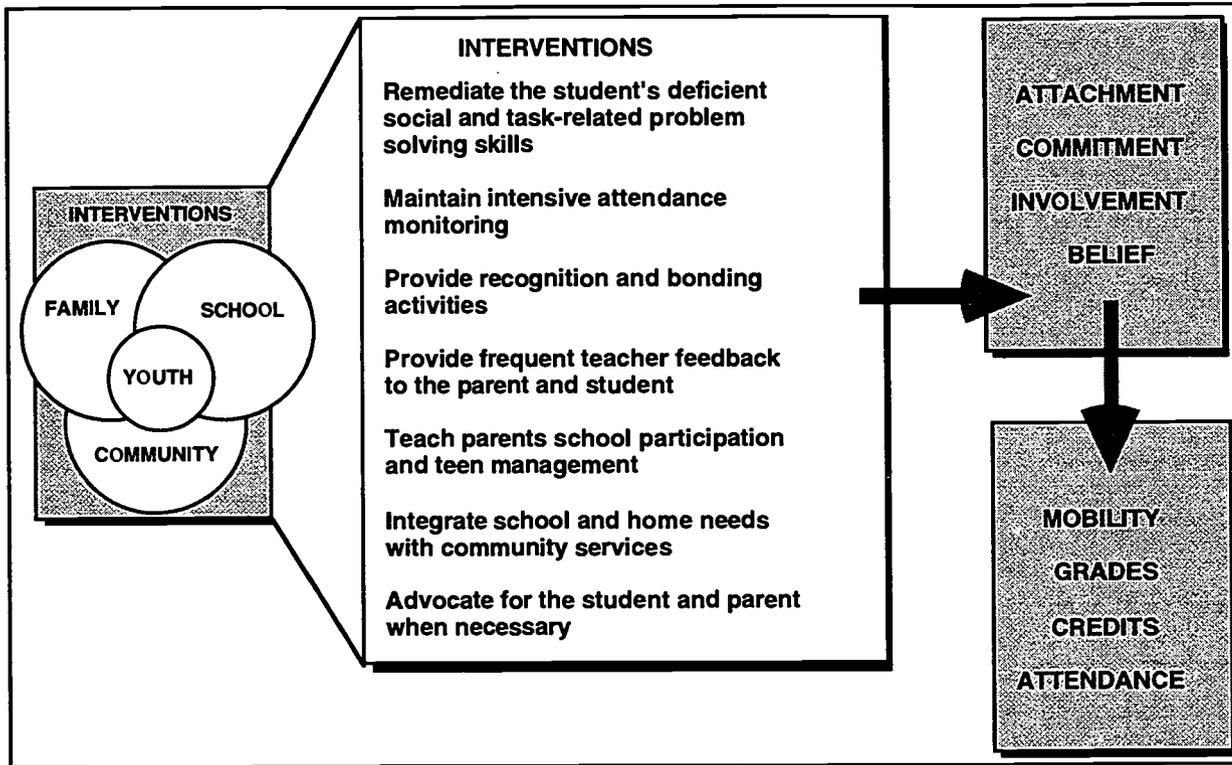
(Community Interventions continued on next page)

(Community Interventions continued)

- working with public agencies and parent to get child committed to emergency psychiatric facility
 - getting handicapped child enrolled as independent minor Medical program
 - working with child protective services to provide services to family and/or initiate removal of child from home
 - helping admit youth or parent into drug rehabilitation program
 - ranging for family to join psychiatric support group
 - arranging to get parent transported to for AA support meeting
 - arranging to admit youth into hospital adolescent weight loss program
 - helping facilitate the establishment of youth leisure programs in the local community through park service, boy scouts, teen programs, etc.
-

The need to go beyond the presenting behavior of the youth and address larger issues within the family is predicated on the fact that families living at the margin of society; families whose primary language is different from the majority culture; families which are dysfunctional due to substance abuse and or mental health problems; and families living below the poverty line are families which, in general, do not have the skills or strategies for seeking out and getting help from community services such as parenting classes, family counseling, special youth programs, and training programs.³⁹ Moreover, these families are not helped by simply being given a referral or name and phone number. Rather, the parents and youth need specific guidance and liaison support to make contact with and begin participation in a community program.

The figure on the next page provides a sample of the kinds of service integration between school, family and community contexts that was performed as part of the ALAS intervention program.



■ Treatment Duration

Beginning in the 1990-1991 school year, treatment and control students enrolled in the target junior high school. Treatment students received the intervention program in conjunction with the regular school program for all three years of junior high school. Treatment staff were based at the school site every day for three years and accessed the community and home contexts as needed. All treatment students received all of the intervention strategies. The control groups received only the regular (i.e., traditional) school program during junior high school.

Key Principles of the ALAS Intervention

Crossing the borders of student culture was a primary challenge of project staff. Working with students directly was such a significant aspect of our effort that, in one sense, it could be said that ALAS staff spent most of their time with students in "building relationship." Even during many of the interactions that are directed toward teachers, school staff and parents, the primary intent was to build a stronger bond between students and ALAS staff by enhancing the school and family system for them. These activities also built stronger bonds between students and parents and between students and educators.

The ALAS program attempted to develop a sense of school membership and affiliation in students by developing a strong bond between students and the ALAS program. Our intervention components, described earlier, served as vehicles for enhancing the student bonding and for creating nurturing and positive adult-student relationships.

Affiliation was evidenced when participating students spontaneously brought friends to "join" ALAS. Students throughout the school eventually recognized ALAS as a program that helps youth and non-ALAS students often recited a long litany of "problems" for justification of joining. Students, also without prompting, began to refer to themselves as members of ALAS and even designed a membership card.

In our attempts to cross student culture boundaries, we derived four principles that describe how our project structured student-adult relationships and thereby increased student affiliation, instilled hope and promoted empowerment.

■ Be Accountable for Student's Growth and Progress

This principle is primary and drives the remaining three principles. Our dedication to the concept of holding ourselves responsible for student performance was reflected in our use of the word intervention to describe our efforts.

Webster defines intervene as "to come in between by way of modification". We held ourselves accountable for coming in between and modifying effectively the interface of disadvantaged youth with academic learning. It was our mission and the way we found and defined professional success.

Consequently, we interpreted poor student performance as our failure. Failed classes, truancy, fighting, parent no-shows were not viewed as characteristics of the kinds of students and families we work with. Rather, we viewed these failures as indicators that we must recast our approach, change what we were doing with this particular child and parent so they could perform optimally. This does not mean that the student or parent were not asked to change or assume responsibility for their performance. Quite the contrary. It simply meant that we needed to change our approach so that the student and parent could also change and be held accountable and function optimally within an institutional learning environment.

Having staff hold themselves accountable for student performance automatically sustained motivation to be creative and to deliver maximum effort. After all, ALAS staff egos were impacted by how well "the kids did".

It also required an ongoing assessment of student performance and frequent feedback. We checked student indicator variables compulsively on a weekly and even daily basis--that is, we checked attendance, tardies, trancies, student behavior, classroom behavior, notes home, etc. We monitored, monitored, monitored students and changed our behavior based on this feedback.

On the other hand, it was our experience that most secondary schools, including the one in which we worked, make no on-going and systematic evaluation of school-wide student attendance, no recording of proportion of failed classes by teacher and subject, no accounting of number of students removed from class or why, no recording of the number of teacher-parent phone communications, no pre-post evaluation of learning per class, and so forth. For the most part, there is little or no accountability on the part of adults in the school for student performance. And in instances when these variables are measured by schools, the information is not generated in order to change adult behavior toward students. It seems that the only ones held accountable for change are students, and, if they don't measure up, they fail or are suspended.

Accountability for student performance automatically created the need for our second principle in building effective child-adult relationship.

■ **Accept Students as They Are**

In order to be accountable for change or performance it is essential to embrace the current reality that most urban students are not middle class Anglos. Surprisingly, most adults in schools with high proportions of minority children living in poverty appear to respond to the students as if they were middle class Anglos.

For example, in our school, assignments were given with little acknowledgment or accommodation to the fact that: few of our students have calculators, rulers, magazines or newspapers, etc. in their homes to aid homework; few of the parents know English and therefore cannot help with homework; few of the parents read or write Spanish and therefore do not read school bulletins or letters home; many of our students sleep in the living room and have no place to keep two-month projects and papers "safe" in multiple family households; many of our students have an alcoholic or drug using parent or dysfunctional families; and violence, unpaid utility bills, cockroaches, gangs and illness occupy family dynamics and clinically depress many of our students. And for many low-income minority secondary students, there's the additional problem of reading, writing and computing 3 or 4 years behind grade level.

Students must be accepted and valued for who they are and for what skills and assets they bring to the school task. For example, Juan slept in a different house every night. Whether he should have been able to or not, Juan simply could not keep track of his school materials and was frequently sent out of classes for no supplies. Our solution was to personalize the environment for Juan--have extra supplies for Juan and have him keep important school work in our office. (School lockers are not a viable solution because break-in, theft and vandalism are rampant.)

Another example of accepting students as they come and the need for personalization of school is the case of Enrique. Enrique refused to come to school because he needed hourly eye drops and was too embarrassed to go to the nurse's office. The school district rule requires that a nurse

administer all medication. Our solution was to convince the school to get parent permission to let him borrow a faculty bathroom key each day from us and put in his own drops in privacy just as he did at home.

Once one accepts students' unique needs and their life circumstances unconditionally and stops blaming them for their background, or, in some cases, the disabilities they embody, then it is a small and inevitable step to recognizing the third principle of creating an effective child-adult relationship.

■ Attend to Students' Many Needs and Their Complex Situations

Our students were not only economically needy, but often psychologically needy as well. Compassion must flavor the behavior of educators who work with disadvantaged children. Many are fragile. We found for the most part that explaining a child's life circumstances, even the most heart-wrenching examples, engendered little empathy from adults at the school. Indeed, to our despair, explanations of the child's background often caused the student to be rejected even more--the child's life circumstances were used as reasons for "why the student should not be in this school."

For example, Angela frequently responded sarcastically or with hostility to adults, especially men, yet when it was explained that she was a victim of child battering by her father and had gone to live with an 18 year old unmarried sister and 17 month old niece at age 14 in order to get away from the home, there was no mitigating the suspensions for "disrespectful" behavior. Elizabeth, at the beginning of her eighth grade year, discovered that both her parents were heroin addicts. Her father was jailed for selling and her mother left Elizabeth and her five younger siblings in the care of the grandparents. Elizabeth became very depressed and despondent and fell into a pattern of not completing classwork. She began having nosebleeds and was frequently absent. Yet, there was no accommodation extended to helping her complete the work or reducing the work load. Elizabeth was labeled by most of the adults at the school as "getting an attitude." Perhaps it is resignation on the part of adults in schools or a sense of being overwhelmed that make them appear so indifferent or uncaring toward children who are suffering.

High-risk low-income students require a great deal of attending to. One third of ALAS students required daily monitoring of their school performance in order to experience success in following through on their responsibilities. About 25 percent of the ALAS students circulated teacher feedback forms throughout their school day so that their behavior and assignments could be monitored daily by ALAS staff. This feedback was used to communicate nightly with parents. Given current school resources and organizational structure, school staff cannot be expected to provide this degree of monitoring. Auxiliary personnel such as ALAS appear to be sorely needed.

Additionally, we have found that to solve students' school problems often requires attending to their home or family problems, such as welfare, legal matters, medical problems, or siblings. Again,

although we can certainly expect school staff to be empathic and to demonstrate emotional and psychological support for students; given current resources, they cannot be expected to provide the necessary social work services that high-risk students need. Yet these services are sorely needed.

Attending to the whole child as a high-need and highly complex individual forces one to adopt the fourth principle for creating effective adult-child relationships within the school environment.

■ Alter and Individualize Procedures and Policies

Flexibility requires that school staff take the time to really listen to individual students. High-risk students often have difficulty identifying a problem and expressing clearly what they need to have happen to succeed in the school. A significant task of the listening adult is to filter the confusion, frustration and often anger of the student and to determine whether the student or the system, or both, need to adjust in order for the student to succeed.

Flexibility and individualization are the key to successfully working with high-risk students. We have found that it is impossible to succeed with these most difficult-to-teach students if the school context is not tailored to their individual psychological needs and skills. Flexibility permits personalization of the educational experience for students.

We have found that success often requires only minor adjustments of school-wide procedures. We refer to this as tinkering with the system or advocating for students. However, as presently structured, large secondary schools are rarely malleable to even minor adjustments in policies or procedures for individual students. Student advocacy serves primarily to "free-up" and personalize the system for each student.

The degree to which an institution must respond flexibly varies with each student. Sometimes students simply want preferences to be met. We have found that, for the most part, student preferences are discounted by school staff as nonessentials. We think this is incorrect educational practice and that it contributes significantly to student alienation. ALAS staff did not require students to justify individual preferences, to justify why the system should be changed for them. If it was possible and practical to change the system, we made every effort to get the system to accommodate individual preferences of students. We regarded this as simply a form of nurturing.

Because of our "creativity" in accommodating students, ALAS project staff were frequently labeled as unorthodox. For example, Amanda was scheduled into a music class during the second semester of seventh grade. On the second day of the semester, Amanda was referred out of class by the teacher and arrived at the ALAS office fuming. This was not particularly unusual for Amanda who had a tendency to get into power struggles with adults. The problem was that in certain power struggles with adults at school, Amanda would rather be suspended or kicked out of school than give in. We soon realized that music was one of those times. The school was

prepared to suspend Amanda and require her to "take music" because that is what every 7th grader did. We were able to solve the problem by convincing the school counselor to schedule Amanda to repeat an art class in which she had done well. State guidelines for fine arts credits would still be met with this option. As simple as this solution appears, it was viewed by school staff as very unorthodox. Part of the challenge for reformers is to help insiders recognize that orthodox has not worked for many disadvantaged students.

Another example of being flexible is the case of Camilo. Because of excessive truancy in the seventh grade when he did begin to attend regularly, Camilo was unable to comprehend eighth grade math. Our solution was to keep him in all eighth grade classes except math and, instead, give him 7th grade math (this was considered unorthodox because traditional policy dictated that a student was either retained or passed across all subject areas). The problem was that the 7th grade math teacher on his track (it is a year round school calendar) was not willing to take him as an eighth grader. We then negotiated with another teacher on a different track (therefore, different calendar year) to take him and when her off-track (vacation) time came we scheduled him with yet another teacher who used the same book. The final solution meant that Camilo was on two different grade levels with teachers from three different track calendars! Camilo learned his math. This solution was indeed unorthodox but it is representative of the kinds of flexibility needed to accommodate high-risk students to large systems. Personalizing schooling seems important for all students; however, in order to succeed with the 25-30 percent most-difficult-to-teach students will always require that the school system be "tweaked" to meet their individual needs.

ALAS: SECTION II

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SECTION III

How Did The Intervention Work?

In this section we examine how the intervention worked. We focus on student outcomes, since that was the primary focus of the project. But we also examine the impact of the program on parents and teachers because having positive impacts in those two areas were thought to help improve student outcomes.

Student Outcomes

Typical of low achieving adolescents everywhere, students in ALAS had for a very long time experienced policies and practices as well as engaged in behavior leading to school failure. More often than not these students had not performed successfully since entering first grade. Consequently, from the outset of the ALAS program, it was assumed that long-standing school-related behavioral patterns in both students and parents would change slowly and develop over time as new skills were learned and integrated into existing life experiences. Thus, the full impact of the ALAS program as designed was not expected to be realized until the students and parents had received the interventions for at least two years.

All the students who remained in the target school received the ALAS program for the full three years they were enrolled in the school. In general, our hypothesis was that the longer students were exposed to the program, the better the outcomes of the program would be. Thus, the first evaluation of students outcomes for the program was performed when students completed their 9th grade year. Although students remained in the junior high school during the 9th grade, the 9th grade is officially the first year of high school and critically important for accruing credits toward high school graduation.

But we were also interested in finding out if the effects of the program could be sustained beyond the 9th grade, when the students had moved on to senior high school and were no longer receiving any intervention services. For the first cohort of students, 7th graders who entered the treatment school in the fall of 1990, we have thus far tracked their performance through the 1994-95 school year, when they should have completed their 11th grade of high school. We refer to these outcomes as long-term outcomes because they represent the sustained or long-term effects of the program, at least up until the time this report was written. However, the ultimate success of the program will have to be measured in terms of if and when program participants graduate from high school, which was the ultimate goal of the program.

Below we report student outcomes in two sections, one dealing with treatment outcomes at the end of 9th grade and the other dealing with long-term outcomes at the end of 11th grade. In each

case, we examine a variety of outcomes across groups, including enrollment status, credits, grades and attendance.

■ General Data Analysis

Information was collected on a variety of student outcomes which previous research suggests are associated with school performance and dropping out. They include school enrollment, school persistence, school performance, psycho-social adjustment, family relations, and social behavior. Within each of these major categories, we examined a number of specific student outcome measures. The data were collected from a variety of sources, including school records, standardized tests, teacher and staff ratings of students, and a student survey about parenting practices designed and refined by Dornbusch and colleagues that has been shown to predict school performance and dropout behavior.

Table 5. Student Outcome Measures and Sources of Data	
Student Outcome Measures	Sources of Data
Progress Toward Graduation <ul style="list-style-type: none"> • Enrollment status • High school credits earned 	<ul style="list-style-type: none"> • School records • School records
School Persistence <ul style="list-style-type: none"> • School attrition • Program recovery rates • School mobility 	<ul style="list-style-type: none"> • School records • School records • School records
School Performance <ul style="list-style-type: none"> • Attendance • Academic grades • Cooperation grades • Work habit grades • Classroom behavior 	<ul style="list-style-type: none"> • School records • School records • School records • School records • Gresham & Elliott's Social Skills Rating Scale
Psycho-Social Adjustment <ul style="list-style-type: none"> • Self-efficacy • Cultural orientation • Depression 	<ul style="list-style-type: none"> • Coopersmith Self-Esteem Inventory • General Survey (Dornbusch) • General Survey (Dornbusch)
Family Relations <ul style="list-style-type: none"> • parent/child communication • parental supervision 	<ul style="list-style-type: none"> • General Survey (Dornbusch) • General Survey (Dornbusch)
Social Behavior <ul style="list-style-type: none"> • Incarceration • Teenage pregnancy 	<ul style="list-style-type: none"> • School records • Telephone survey

Data were collected for all ALAS students, both in treatment and control groups, beginning the year before intervention, when students were still enrolled in the 6th grade. Data were then collected each year students were enrolled in the ALAS program as well as the years after the intervention ended in order to assess the longer-term outcomes associated with the program. An overview of the data collected for the project is shown in Table 6.

Table 6. Overview of Data Collected in the ALAS Project

	1989-90	1990-91	1991-92	1992-93	1993-94	1994-95
	COHORT 1: 6th Grade	7th Grade School Data	8th Grade School Data	9th Grade School Data	10th Grade	11th Grade
1. Low Risk (n=59) Teacher Ratings	General Survey Self-Efficacy	General Survey	General Survey	General Survey Self-Efficacy	Attendance Credits Grades	Attendance Credits Grades
2. High Risk Control (n=48) Teacher Ratings Attendance Grades	General Survey Self-Efficacy Reading IQ Teacher Ratings	General Survey Self-Efficacy Teacher Ratings	General Survey Self-Efficacy Teacher Ratings	General Survey Self-Efficacy	Attendance Credits Grades	Attendance Credits Grades
3. High Risk Treatment (n=46) Teacher Ratings Attendance Grades	General Survey Self-Efficacy Reading IQ Teacher Ratings	General Survey Self-Efficacy Teacher Ratings	General Survey Self-Efficacy Teacher Ratings	General Survey Self-Efficacy	Attendance Credits Grades	Attendance Credits Grades
4. Special Ed Treatment (n=33) Teacher Ratings Attendance Grades	General Survey Self-Efficacy Reading IQ Teacher Ratings	General Survey Self-Efficacy	General Survey Self-Efficacy	General Survey Self-Efficacy	Attendance Credits Grades	Attendance Credits Grades
	COHORT 2: 6th Grade	7th Grade	8th Grade	9th Grade	10th Grade	11th Grade
	5. Special Ed Treatment (n=44) Attendance Academic Grades Behavior Grades	General Survey Self-Efficacy Reading IQ	General Survey Self-Efficacy	General Survey Self-Efficacy	General Survey Self-Efficacy	Attendance Credits Grades
	COHORT 3: 6th Grade	7th Grade	8th Grade	9th Grade	10th Grade	11th Grade
	6. Special Ed Control (n=55) Attendance Grades	General Survey Self-Efficacy Reading IQ	General Survey Self-Efficacy	General Survey Self-Efficacy	General Survey Self-Efficacy	Attendance Credits Grades

The data collection efforts for this project were ambitious. Generally, two types of data were collected: (1) archival data routinely collected by the school and district, and (2) original data collected by the ALAS project staff. Collecting both types of data presented challenges.

Accessing and using school archival data was difficult for several reasons. First, the data and the Student Information System (SSI) used by the school and the district to collect them were not designed to be used by researchers. Thus, considerable effort had to be taken to learn about the system and how to access and interpret the data. Second, school staff were not always knowledgeable or helpful in getting access to the data, in part, because of other demands on their time and the perception that projects such as ALAS were of a secondary concern to them. Finally, over the time we spent in the school we discovered that the school data were not always accurate. In particular, we discovered that the vice-principal of the school often used informal or unofficial suspensions rather than formal ones that required following official district procedures. As a result, official school records could not be used to monitor student suspensions. Despite these difficulties and limitations, however, the school data proved to be rich source of information that is generally not well used by educational researchers.¹

Collecting original data presented other challenges. The primary one was the difficulty in administering surveys and instruments to students during class time. As stated above, teachers and school staff often viewed the ALAS project as secondary to their primary concerns of dealing with students. Thus they did not always cooperate in providing class time to administer surveys and instruments. And as the project proceeded, with ALAS counselors becoming advocates for students, cooperation was reduced even further. (We will discuss this issues further in the final section of the report). Finally, it was difficult to administer surveys and instruments to the control students, since these students did not know the ALAS staff and thus were less willing to cooperate.

Due the limitations with both the archival and original data, less data was collected in this project than originally anticipated. Nonetheless, a rich and comprehensive array of data was collected that was more than sufficient to evaluate the impact of the ALAS program.

The analysis of student outcomes were based primarily on comparing similar groups of students on the various outcome measures. That is, Special Education Treatment Groups 1 and 2 were contrasted with the Special Education Control Group, and the High Risk Treatment Group was contrasted with the High Risk Control Group. Results of the Low Risk Control Group are also shown for many outcomes just to see differences between high risk and non-high-risk students.

■ Treatment Outcomes at the End of 9th Grade

Enrollment Status. The primary goal of the ALAS program was to keep students enrolled in school in order to graduate from high school. Thus, we monitored each student's enrollment status throughout the project. Although, in general, it would appear straightforward to know whether a

student is enrolled in school or not, it is, in fact, quite complicated. There are a variety of definitions and procedures for determining whether a student is enrolled in school, a school dropout, or some other status. States and districts throughout the country differ in how they determine a student's status.² In California, the official definition of a dropout is a person who meets the following criteria:

- was formerly enrolled in a school or program leading to a high school diploma or its equivalent;
- has not re-enrolled in the school or program;
- has left school for 45 consecutive school days and has not enrolled in another public or private institution or school program;
- has not received a high school diploma or its equivalent;
- was under twenty-one years of age.³

The federal government collects a variety of data on dropouts from different sources and using different definitions.⁴ One definition, used in the National Longitudinal Education Longitudinal Survey of 1988 (NELS:88), was:

- an individual who, ...according to the school (if a sample member could not be located), or according to the school and home, has not been in school for four consecutive weeks or more and is not absent due to accident or illness; or
- a student who has been in school less than two weeks after a period in which he or she missed school for four or more consecutive weeks not due to accident or illness.⁵

Like the California definition, NELS:88 only counted students enrolled in programs or schools that would lead to a high school diploma or its equivalent. It excluded students in alternative programs who may receive training, but not a high school diploma or its equivalent. But unlike the California definition, NELS:88 required confirmation of a persons dropout status not only from school records, but also from the family or former student directly. So some persons who the school indicated were dropouts were excluded from the NELS:88 population estimates of cohort dropout rates. Also unlike California, NELS:88 used a period of 20 days absent from school rather than California's 45 days.

In this project we decided to employ the NELS:88 definition in order to make our results comparable with national estimates of cohort dropout rates, although we did not require confirmation of a student's dropout status by the former student or his or her family. That is, a student was marked as a dropout if he or she was not enrolled during the last 20 days of each semester and no request for the student's records had been received by their school during that period. As with NELS:88 and the California Education Code, we counted any student as enrolled if the school or program lead to regular high school diploma or a GED. Although the vast majority of students in all groups are enrolled in traditional high schools, the educational programs ranged from independent study, community dropout programs, nonpublic special education schools, private schools, continuation high school, juvenile detention centers, occupational centers and traditional public high school. We

classified students in juvenile detention centers separately from other non-educational settings as a means of tracking juvenile delinquency.

Altogether, we categorized each student's status at the end of each semester beginning in the fall of 7th grade as one of the following:

Enrolled

<i>Enrolled in district</i>	Enrolled in district school no later than 20 days before the end of the semester.
<i>Transfer out of district</i>	Transferred out of district as confirmed by a request for student records from receiving district.
<i>Transfer out of state</i>	Transferred out of state as confirmed by a request for student records from receiving district.
<i>Institutionalized</i>	Institutionalized in government or private mental health facility.

Not Enrolled

<i>Dropout</i>	Not enrolled in school during the last 20 days of the semester and no request for student records from another district during that 20 day period.
<i>Out to Mexico</i>	Dropout who reported that they were going to Mexico.
<i>Juvenile Hall</i>	Incarcerated as confirmed by a request for student records from Youth Authority.

Not Applicable

<i>Unknown</i>	Status unknown--students who in previous year had transferred.
<i>Deceased</i>	

Special Education Students. The enrollment status for the two Special Education Treatment groups is shown in Table 7. As can be seen in the table, dropout rates for both Special Education Treatment groups were much lower than the control group, although only the rates for the second cohort were statistically significant. By the end of 9th grade, 85 percent of the two Special Education Treatment groups were still enrolled in school compared to 69 percent for the control group.

	Special Education Treatment Cohort 1 (SE1)		Special Education Treatment Cohort 2 (SE2)		Special Education Control (SEC)	
	n	%	n	%	n	%
ENROLLED	28.0^a	87.5	38.0^b	95.0	38.0^{a,b}	76.0
Enrolled in district	28.0	87.5	37.0	92.5	37.0	74.0
Transfer out of district	0.0	0.0	0.0	0.0	0.0	0.0
Transfer out of state	0.0	0.0	1.0	2.5	1.0	2.0
Institutionalized	0.0	0.0	0.0	0.0	0.0	0.0
NOT ENROLLED	4.0^a	12.5	2.0^b	5.0	12.0^{a,b}	24.0
Drop-out	4.0	12.5	2.0	5.0	8.0	16.0
Out to Mexico	0.0	0.0	0.0	0.0	2.0	4.0
Juvenile Hall	0.0	0.0	0.0	0.0	2.0	4.0
NOT APPLICABLE	1.0	NA	4.0	NA	5.0	NA
Unknown	1.0	-	3.0	NA	5.0	NA
Deceased	0.0	-	0.0	-	0.0	-
Status pending	0.0	-	1.0	2.3	0.0	-
TOTAL	33.0	100.0	44.0	100.0	55.0	100.0

^a Difference between enrolled and not enrolled for SE1 and SEC, Pearson Chi-Square = 1.643, df=1, p< .19990.
^b Difference between enrolled and not enrolled for SE2 and SEC, Pearson Chi-Square = 6.107, df=1, p< .01346.

High Risk Students. The enrollment status for high risk students is shown in Table 8. The dropout rate for High Risk Treatment student was only 2 percent, compared to 17 percent for high risk control students. This difference was statistically significant. In fact, the dropout rate for the High Risk Treatment group was actually a bit better than the dropout rate for the low risk control group (2 percent versus 5 percent), although this difference was probably not statistically significant.

	High Risk Treatment (HRT)		High Risk Control (HRC)		Low Risk Control (LRC)	
	n	%	n	%	n	%
ENROLLED	45.0^a	97.9	40.0^a	83.3	56.0	94.9
Enrolled in district	43.0	93.5	38.0	79.2	55.0	93.2
Transfer out of district	0.0	0.0	1.0	2.1	1.0	1.7
Transfer out of state	1.0	2.2	1.0	2.1	0.0	0.0
Institutionalized	1.0	2.2	0.0	0.0	0.0	0.0
NOT ENROLLED	1.0^a	2.2	8.0^a	16.7	3.0	5.1
Drop-out	0.0	0.0	7.0	14.6	2.0	3.3
Out to Mexico	0.0	0.0	1.0	2.1	1.0	1.8
Juvenile Hall	1.0	2.2	0.0	0.0	0.0	0.0
NOT APPLICABLE	0.0	0.0	0.0	0.0	1.0	NA
Unknown	0.0	0.0	0.0	0.0	0.0	-
Deceased	0.0	0.0	0.0	0.0	0.0	-
Status pending	0.0	0.0	0.0	0.0	0.0	-
TOTAL	46.0	100.0	48.0	100.0	60.0	100.0

^a Difference between enrolled and not enrolled for HRT and HRC, Fisher's Exact Test, two-tailed, p<.0371.

Overall, the ALAS program had a powerful and significant impact on students in two of the three treatment groups—special education students in cohort 2 and high risk students. The overall dropout rates over the three years of the intervention are shown in Figure 1.

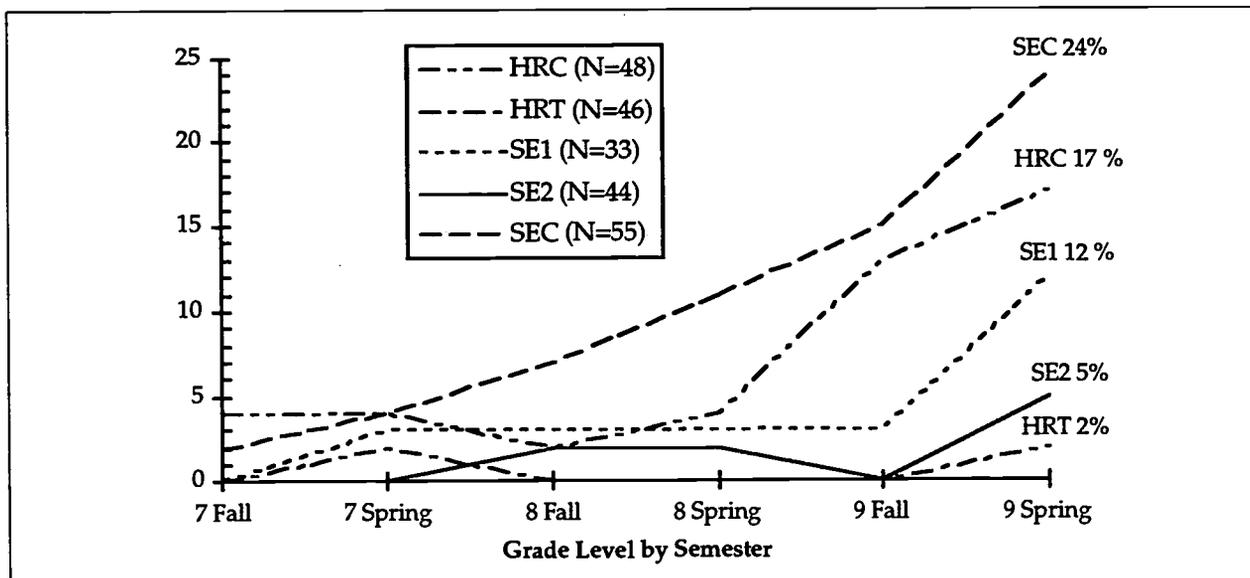


Figure 1. Percentage of Groups Known to Have Dropped Out of School

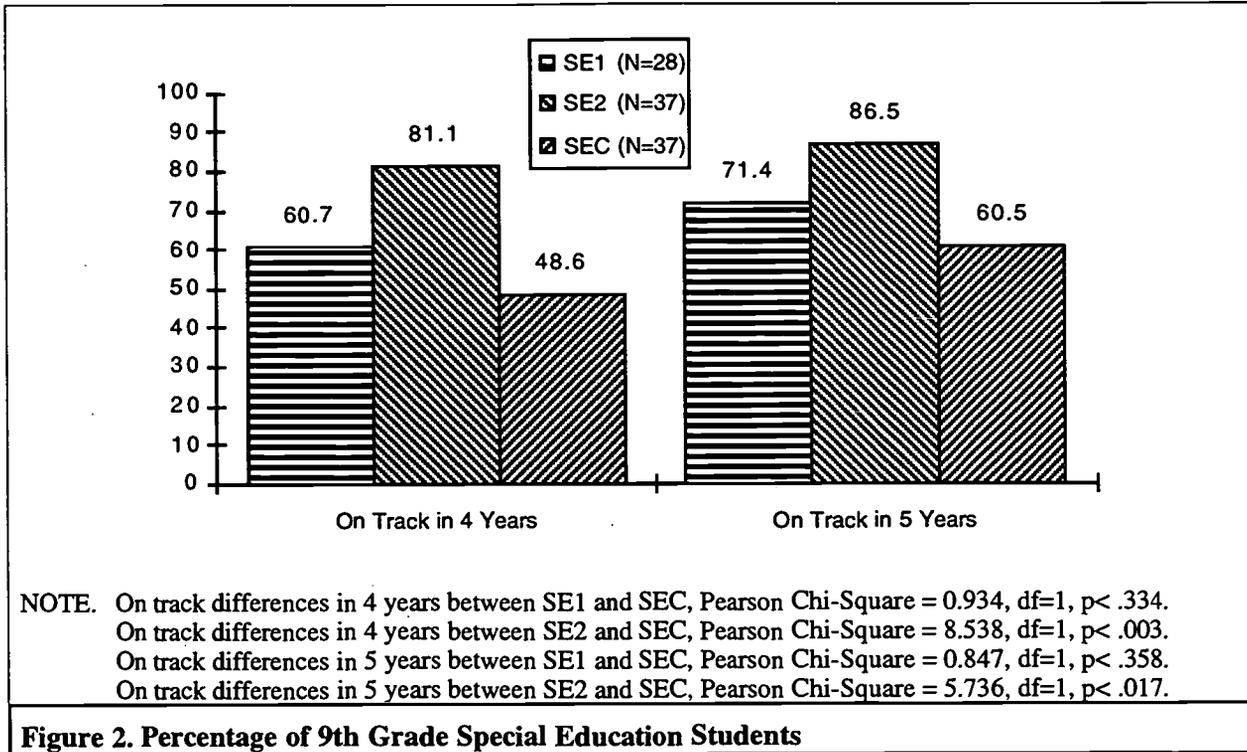
High School Credits. Keeping students enrolled in school is only the first step in getting students to graduate. Students must also earn enough credits to progress toward graduation. In the school district where the ALAS program was implemented, students must earn a total of 220 credits to graduate from high school (which is equivalent of 22 Carnegie units.) Therefore, by the end of 9th grade, students must earn a minimum of 55 credits or one-quarter of their credits to be “on track” to graduate in four years. Or they must earn a minimum of 45 credits or one-fifth of their credits to be “on track” to graduate in five years. We examined the total number of credits that ALAS students earned by end of the 9th grade, including summer school after 9th grade, because part of the ALAS intervention was to encourage students to attend summer school.

Special Education Students. The credits earned by special education students is shown in Table 9. As the data show, a much higher portion of Special Education Treatment groups earned all of their credits (60 credits, or more if they attended summer school. Fifty-four percent of the first Special Education Treatment group and 70 percent of the second treatment group earned all of their credits, compared to only 30 percent of the control group.

Number of credits	Special Education Treatment Cohort 1 (SE1)		Special Education Treatment Cohort 2 (SE2)		Special Education Control (SEC)	
	n	%	n	%	n	%
60 or more	15.0	53.6	26.0	70.3	11.0	29.7
55	5.0	17.9	4.0	10.8	7.0	18.9
50	3.0	10.7	1.0	2.7	4.0	10.8
45	0.0	0.0	1.0	2.7	1.0	2.7
40 or less	5.0	17.9	5.0	13.5	14.0	13.5
TOTAL	28.0	100.0	37.0	100.0	37.0	100.0

Note: Credits are shown only for students who were enrolled in a district school.

The proportion of students who were “on track” to graduate is shown in Figure 2. As the figures show, after one year of high school only half of the special education control students were on track to graduate in four years and only 61 percent were on track to graduate in 5 years. These figures confirm earlier findings that special education students have a high risk of dropping out of high school.⁶ A somewhat higher proportion of special education students in the first treatment group were on track to graduate in four years (61 percent) and in five years (71 percent), but these differences were not significantly different than the control students. But a much larger proportion of students in the second treatment group were on track to graduate in four years (81 percent) and in five years (87 percent). These differences were statistically significant.



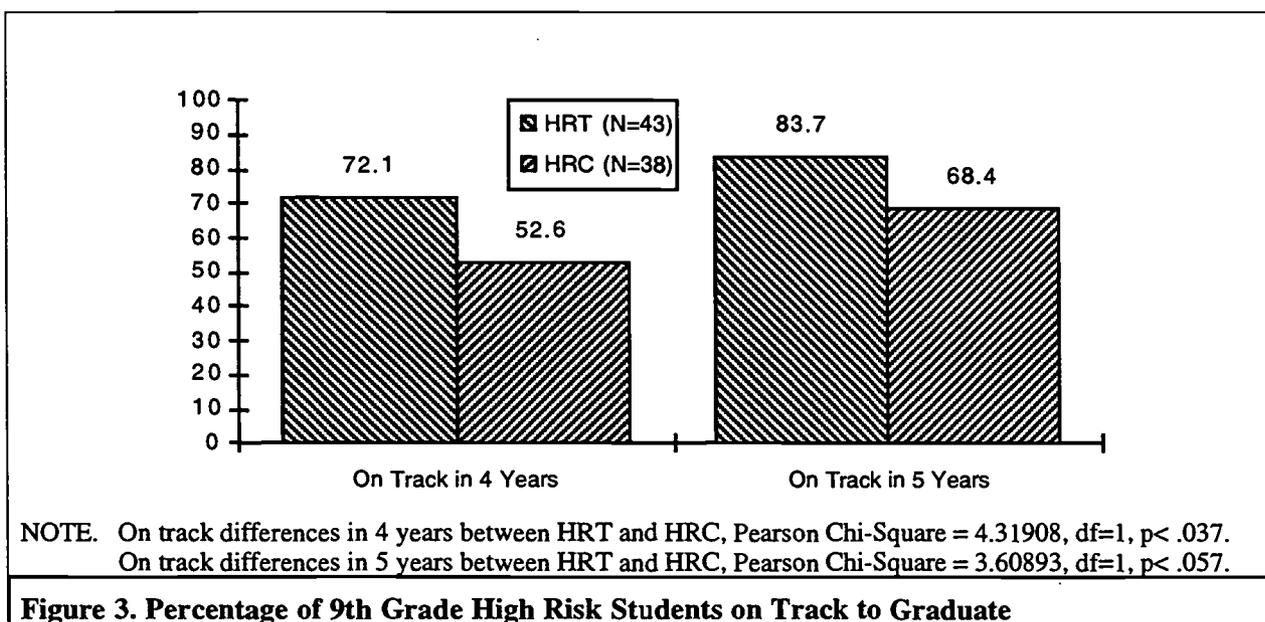
High and Low Risk Students. The credits earned by high and low risk students by the end of 9th grade are shown in Table 10. Of the students still enrolled in district schools, 56 percent of the treatment students earned all of their 9th grade credits, compared with 45 percent of the high risk students. In contrast, more than 70 percent of the low risk students earned all of their 9th grade credits.

Number of credits	High Risk Treatment (HRT)		High Risk Control (HRC)		Low Risk Control (LRC)	
	n	%	n	%	n	%
60 or more	24.0	55.8	17.0	44.7	39.0	70.9
55	7.0	16.3	3.0	7.9	12.0	21.8
50	4.0	9.3	4.0	10.5	2.0	3.6
45	1.0	2.3	2.0	5.3	0.0	0.0
40 or less	7.0	16.3	12.0	31.6	2.0	3.6
TOTAL	43.0	100.0	38.0	100.0	55.0	100.0

Note: Credits are shown only for students who were enrolled in a district school.

There were large and significant differences in the proportion of High Risk Treatment and Control students who were on track to graduate in four years. Seventy-two per of High Risk Treatment students were on track to graduate in 4 years, compared to 53 percent of high risk control students. The fact that almost half of all high risk control students were already behind in the

progress toward graduation after only one year of high school is a strong testament to their need for assistance. Even assuming that students take five years to graduate, only two-thirds of high risk control students earned enough credits in 9th grade to meet that deadline, compared to 84 percent for High Risk Treatment students.



In summary, the ALAS project had a meaningful and significant impact on improving students' progress toward graduation for two of the three treatment groups--the second Special Education Treatment group and the High Risk Treatment group. For both groups, not only did the ALAS project keep a larger proportion of students enrolled in school, but a higher proportion of those who were enrolled had earned enough credits by the end of 9th grade to graduate in four years.

Attrition from the ALAS Program. The "holding power" of a school or program is important because stability in school experiences dramatically increases achievement and, at the secondary level, is correlated with high school graduation. Rumberger found that changing schools at the secondary level increases a student's chances of dropping out by 40 percent.⁷

The holding power of the ALAS program was measured by tracking student attrition from the middle school from initial entry in seventh grade through ninth grade graduation. The ALAS program was found to have strong holding power as reflected in reduced student attrition (see Figure 4). Attrition was positively and significantly reduced for both high risk and special education students. This difference in attrition suggests that, despite difficult life circumstances which may exacerbate mobility, participation in the ALAS program reduced school mobility and increased educational stability. This finding is somewhat unexpected given that the school has a high transience

rate with only 60 percent of the 746 seventh grade students entering the school in 1990 remaining enrolled through 9th grade.⁸

More ALAS students stayed enrolled in the original junior high school from the beginning of 7th grade through the completion of 9th grade than comparison students. This difference in attrition is especially marked for the special education students. By the end of 9th grade, 24 percent of Special Education Cohort 1 had left the school and 23 percent of Special Education Cohort 2 had left the school. This is far less attrition than the Special Education Control students who appear to leave the school at nearly twice the rate (47 percent) of the ALAS Special Education students. This difference was statistically significant. By the end of 9th grade, 22 percent of the high risk intervention students and 35 percent of the high risk control students had left the school by transferring to another school. This difference was not statistically significant although there was a 38 percent improvement.

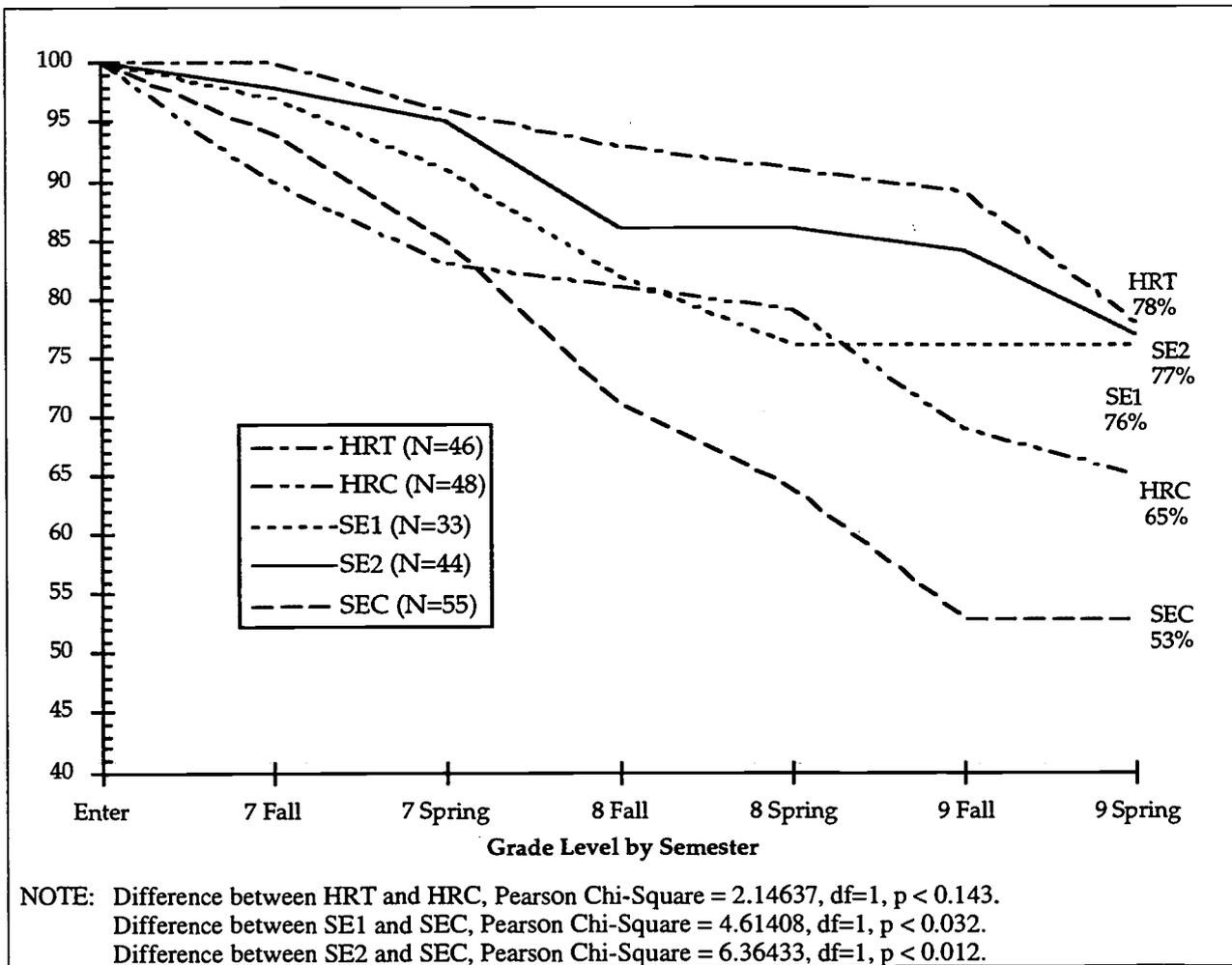


Figure 4. Percentage of Groups Remaining in the Original Middle School

Recovery of Students. Another measure of an educational program's holding power is the "recapture" of students who leave the program or school. Most secondary students leave a school or program for reasons other than geographic relocation. Many studies have shown that rates of student *school* mobility are significantly greater than *geographic* relocation rates.⁹ A national study of secondary student transfers out of school found that 40 percent of the moves were not caused by geographic relocation.¹⁰ In fact, 32 percent of the students who changed schools stated that school issues and school difficulties or desire for a different school were the reason they changed schools.

Do students who leave a secondary school ever come back? There are few data to answer this question. However, our analysis of student mobility in the middle school where ALAS students attended shows that few students return after leaving. Only 15 percent of students in the 1990 cohort (668 students) who left the ALAS middle school ever returned.¹¹

Recovery of students who leave is very important because some of the students who leave a school do not enroll in other educational programs and are simply out of school. Obviously, in these cases recovering students is imperative. Recovery rates are additionally important because they not only reflect the attractiveness or holding power of an educational program but also the program's ability to enhance or develop the "client's" (i.e., student and parent) educational consumerism which is a measure of engagement in the educational process. That is, when a student returns to a school or program they (and most probably their parent) have likely engaged in some comparison shopping - actively thinking about and comparing the educational attributes of the new educational program with the old one they left. A return to the old program is a reflection of its pulling or holding power. Enhancing educational consumerism is a worthy outcome because informed consumers will help drive the improvement of American education. It is not only positive for students and parents but also for educators who will have more involved learners and parents to work with.

The ALAS program had a very high recovery rate for all three treatment groups (see Table 11). Between one-third and one-half of all treatment students who at one time left the target school and thus the ALAS program eventually returned. In contrast, hardly any control students who left the school returned. Although the number of students who left makes it difficult to test for statistical significance, the large differences are suggest they are.

Table 11. A Comparison of Recovery Rates of Students Who Left the School

	Special Education Treatment Cohort 1 (SE1)		Special Education Treatment Cohort 2 (SE2)		Special Education Control (SEC)		High Risk Treatment (HRT)		High Risk Control (HRC)		Low Risk Control (LRC)	
	n	%	n	%	n	%	n	%	n	%	n	%
	LEFT THE SCHOOL	13	100	15	100	27	100	17	100	21	100	14
Never Returned	8	53	10	67	26	96	10	59	17	81	11	79
Returned	5	47	5	33	1	4	7	41	4	19	3	21

Note: Tests of statistical significance not performed due to the small sample sizes.

Educational Stability. No one would argue that educational stability is desirable and research clearly shows a strong relationship to stability and educational achievement.¹² Educational stability is measured in two ways. The number of different educational placements a student experiences in a given time reflects a student's educational *transience*. The number of enrollment transitions in and out of school or back and forth between different settings reflects a student's educational *discontinuity*. Special education and high risk students are known to have high rates of transience and discontinuity.¹³

The ALAS program had a marked effect on reducing transience, essentially cutting in half the number of educational placements a student experienced during the 7th through 9th grades (see Table 12). Partly as a result of actively seeking to place students in temporary alternative programs (e.g., drug rehab, juvenile hall, psychiatric hospital) ALAS had less effect on reducing educational discontinuity.

Table 12. Proportion of Students in Each Group Who Made Educational Transitions

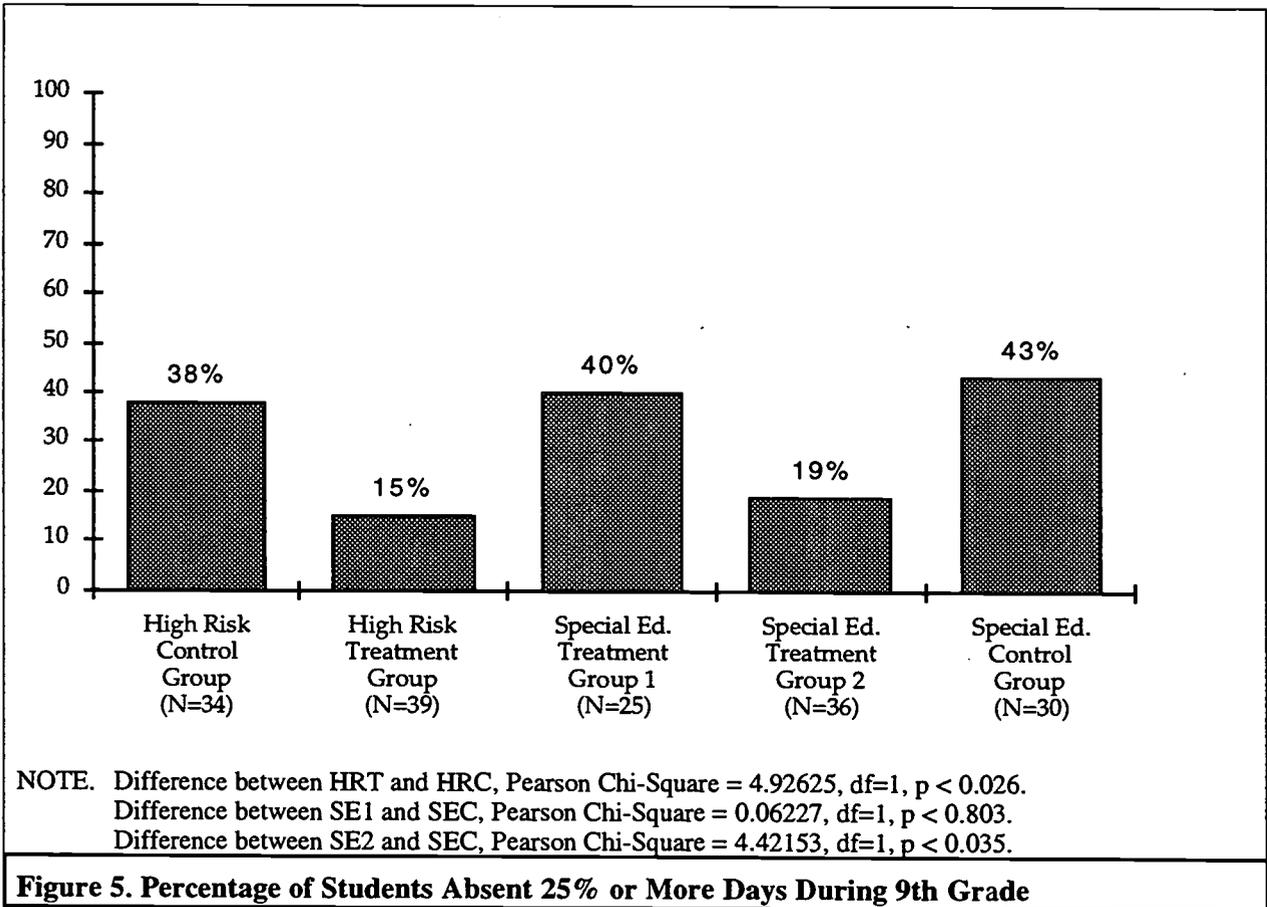
Number of Transitions	Special Education Treatment Cohort 1 (SE1)	Special Education Treatment Cohort 2 (SE2)	Special Education Control (SEC)	High Risk Treatment (HRT)	High Risk Control (HRC)
1	76	68	58	72	58
2	9	11	25	9	15
3	3	11	4	13	6
4	0	7	9	0	6
5	6	2	4	4	6
6	3	0	0	2	2
7	0	0	0	0	4
8	0	0	0	0	0
9	3	0	0	0	2

- Entry into middle school counted as one transition.
- Transitions defined as changes between settings including juvenile corrections, all types of educational placements, and non-enrollment in school for a month or more.
- Changes from one grade level to another did not count as a transition if the student continued in the same educational setting.
- The group "SE C" reflects transitions during 7th and 8th grades only.

Attendance. A recent study of middle school dropouts shows that excessive absenteeism--more than 25%--greatly increases the odds of students dropping out.¹⁴ The ALAS intervention reduced excessive absenteeism in two of the three treatment groups. More than 40 percent of the Special Education Control students were absent more than 25 percent of the time in 9th grade (see

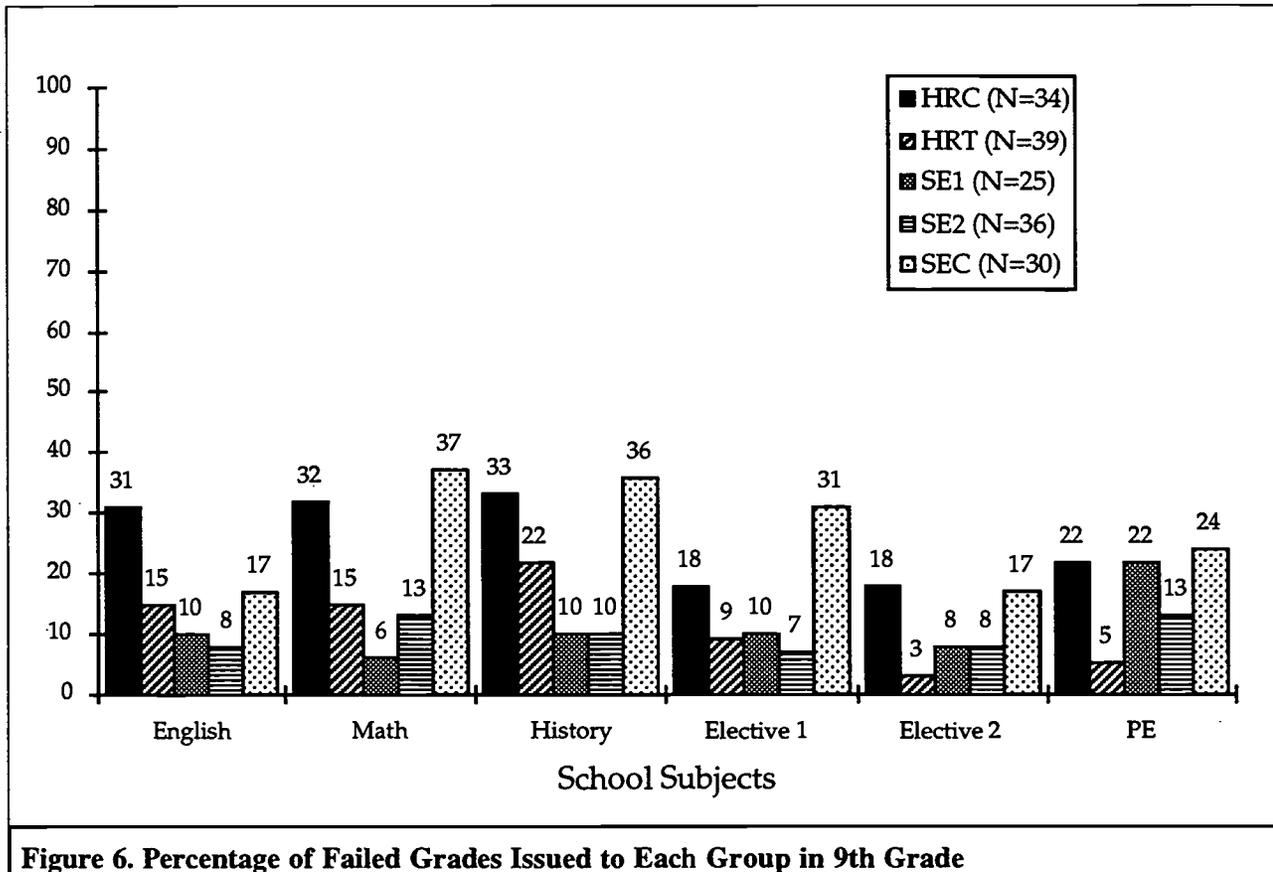
Figure 5). The rate was not reduced for the Special Education Treatment Cohort 1, but it was cut in half for Special Education Treatment Cohort 2. This difference was statistically significant.

Thirty-eight percent of the High Risk Control students were absent more than 25 percent of the time in 9th grade. This rate was only 15 percent for the High Risk Treatment students and was statistically significant.



Report Card Grades. Data indicate that the ALAS intervention dramatically improved school grades for 9th grade classes, especially reducing the number of failed classes. Figure 6 shows the percentage of students from each treatment and control group who failed each of their six 9th grade subjects. As the data indicate, the Special Education Control group and the High Risk Control group failed all subjects except Physical Education at a much higher rate than any of the three ALAS treatment groups. In general, the two control groups received about twice as many fails as ALAS students during the ninth grade. Special Education ALAS students received the fewest fails. A comparisons of the number of failed grades across six classes showed a significantly better achievement of ALAS students at the .05 level.

Reducing the number of failed classes is an important finding given that the National Transition Study of Special Education students found that learning disabled and seriously emotionally disturbed students fail the most classes of any students.¹⁵



Long-term Outcomes

The ALAS project was designed to test the notion that an intensive middle school intervention for disabled and high risk students could improve the chances for these students to graduate from high school. Thus, the ultimate test of the efficacy of this project is to see whether there were any long-term, sustained effects of this project once the ALAS students had entered high school.

The first cohort of students from the ALAS project should have entered the 12th grade in the 1995-96 school year. It is therefore too early to tell if ALAS students finish high school at a higher rate than other, non-treated students. But below we present data on the first cohort of students--the High Risk Treatment and Control groups and the Special Education Treatment Cohort 1--to see how well they were progressing toward graduation after three years of high school at the end of the 1994-95 school year. We also compare these groups to the progress of Low Risk Control students.

Enrollment Status. The enrollment status of the four cohort 1 groups (1990-91 7th graders) at the end of 11th grade is shown in Table 13. As the figures show, only about two thirds of the two

control groups are still enrolled after three years of high school. In contrast, three-quarters of the High Risk Treatment group is still enrolled in school, although this difference is not statistically significant compared to the High Risk Control group. And almost 9 in 10 Low Risk Control students are still enrolled.

	Special Education Treatment Cohort 1 (SE1)		High Risk Treatment (HRT)		High Risk Control (HRC)		Low Risk Control (LRC)	
	n	%	n	%	n	%	n	%
	ENROLLED	20.0	69.5	33.0^a	75.0	30.0^a	66.7	52.0
Enrolled in district	19.0	65.5	33.0	75.0	27.0	60.0	51.0	86.4
Transfer out of district	1.0	4.0	0.0	0.0	2.0	4.4	0.0	0.0
Transfer out of state	0.0	0.0	0.0	0.0	1.0	2.3	1.0	1.7
Institutionalized	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
NOT ENROLLED	9.0	31.2	11.0^a	25.0	15.0^a	33.3	7.0	11.9
Drop-out	8.0	27.6	8.0	18.2	8.0	17.8	6.0	10.2
Out to Mexico	0.0	0.0	2.0	4.5	3.0	6.7	1.0	1.7
Juvenile Hall	1.0	4.6	1.0	2.3	4.0	8.9	0.0	0.0
NOT APPLICABLE	4.0	NA	2.0	NA	3.0	NA	1.0	NA
Unknown	3.0	NA	2.0	NA	3.0	NA	1.0	NA
Deceased	0.0	-	0.0	-	0.0	-	0.0	-
Status pending	1.0	NA	0.0	-	0.0	-	0.0	-
TOTAL	33.0	100.0	46.0	100.0	48.0	100.0	60.0	100.0

^a Difference between enrolled and not enrolled for HRT and HRC groups, Pearson Chi-Square = 0.74710, df=1, p< .387.

High School Credits. Finally, we examined the high school credits of students who were still enrolled in district schools (for whom we had reliable data on credits earned). The credits for the four cohort 1 groups are shown in Table 14. We grouped the credits in such a way as to show the proportion of students who had earned all their credits by the end of 11th grade (180 credits or more), the proportion who had earned enough to finish in one year (3/4 of the 220 credits needed for high school graduation, or 165 or more), the proportion who had earned enough credits to finish in two years (3/5 of the 220 credits needed for high school graduation, or 132 or more) and the proportion of students who were more than 2 years away from graduating from high school. These figures do not include any credits that the students may have earned during summer school after 11th grade.

As the data reveal, very few students in any of the groups had passed all of their high school courses by the end of the 11th grade. Even among Low Risk Control students, only 29 percent had passed all of their classes in the first three years of high school. At the other end of the spectrum, almost half of the High Risk Control students who were still enrolled in high school at the end of 11th grade were more than two years away from completing high school! A high proportion of Special

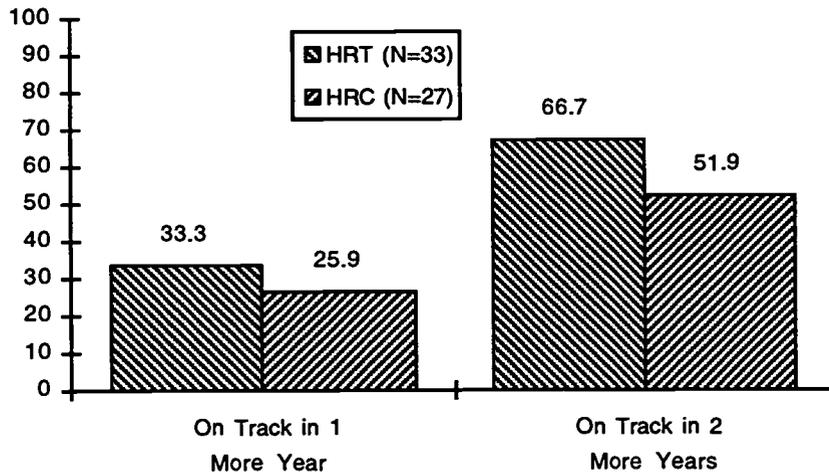
Education and High Risk Treatment group students were also more than two years away from completing high school.

Table 14. High School Credits for Cohort 1 Students: End of 11th Grade

Number of credits	Special Education Treatment Cohort 1 (SE1)		High Risk Treatment (HRT)		High Risk Control (HRC)		Low Risk Control (LRC)	
	n	%	n	%	n	%	n	%
180 or more	2.0	10.5	4.0	12.1	2.0	7.4	15.0	29.4
165 thru 179.5	3.0	15.8	7.0	21.2	5.0	18.5	18.0	35.3
150 thru 164.5	3.0	15.8	3.0	9.1	7.0	25.9	2.0	3.9
132 thru 149.5	3.0	15.8	8.0	24.2	0.0	0.0	7.0	13.7
131.5 or less	8.0	42.1	11.0	33.3	13.0	48.1	9.0	17.6
TOTAL	19.0	100.0	33.0	100.0	48.0	100.0	51.0	100.0

Note: Credits are shown only for students who were enrolled in a district school.

If we examine the proportion of students who were on track to graduate in one or two years, we see some differences the High Risk Treatment and Control groups. Of the students still enrolled in district schools, 33 percent of the High Risk Treatment students are one track to graduate in one year, compared to 26 percent for the High Risk Control group. But fully two-thirds of the High Risk Treatment students are on track to graduate in two more years, compared to 52 percent for the High Risk Control students. Neither of these differences are statistically significant.



NOTE: On track differences in 1 more year between HRT and HRC, Pearson Chi-Square = 0.388, df=1, p< .533.
On track differences in 2 more years between HRT and HRC, Pearson Chi-Square = 1.358, df=1, p< .244.

Figure 7. Percentage of 11th Grade High Risk Students On Track

Other Outcomes. We are continuing to monitor a variety of other outcomes associated with student achievement and social adjustment. For example, we are monitoring requests for student records that come from juvenile hall. We are using this information as an indicator of juvenile delinquency, although it would tend to fail to identify students who were convicted and put on probation. Through the end of 11th grade, six of the High Risk Control students have been incarcerated as evidenced by this indicator, compared to three of the High Risk Treatment students. Although this difference is large, the numbers are too small to be statistically significant. Nonetheless, we believe that the ALAS program may have had a positive, sustained impact on the social behavior of its students that leads to reduced rates of criminal activity.

Parent Responses

ALAS did not carry out any formal, quantitative evaluation of the impact of the program on parents. But we did receive a large number of letters from parents stating how they were impact by the project.

Examples of Parent Letters
(English Translation from Spanish)

"Because of the group of efficient counselors that help the students succeed, I Raquel P. thank that the program ALAS helped me a lot and above all it helped my daughter. I am very grateful with all of you and I give you my most sincere thanks. May God bless you."

"I am Mrs. Z. I would like to thank the program ALAS because I am convinced that it is a very good program. It helped my son a lot. It helped me to understand and recognize things that I never knew. For example, I did not know that there were credits in report cards. Now thanks to ALAS not just do I know this but I also understand it. Thank you again."

"I Edgar M. by means of this letter give you thanks for having helped my daughter Nora to succeed a lot. I hope that your program ALAS will help other children in the same way you helped my daughter. I am very happy because this program helped my daughter get better grades. Thank you very much."

"I Rafaela and my huband Felix R. are writing this lines to give you thanks for the program ALAS and especially to thank our son's counselor Madalena Neil who always has been so attentive with us. I want to thank the whole group of this program which I support to go ahead because without this program my son would not have graduated. Thank you very much to everyone in this program."

" Teresa R. heard of this program from the mother of Adriana T. She told me that this program had helped her daughter very much and because of that I am pleading with you to help my daughter Mayra R. by putting her in the program ALAS."

"I am writing these lines to congratulate and thank you for the program ALAS. We are the parents of Luis R. and we are very grateful for the effort that you have put forth to help us help him succeed. With your cooperation we have accomplished his success. Thank you for having programs like this that can help young people like Luis. Thank you for allowing them to be in your school. If only this program could enter other schools and continue to help. Forgive my writing, I hope you can understand me, but the important thing is the gratitude that we feel. Once again thank you."

"Thank you for the help that you have given my daughter Gabriela S. At the beginning Gabriela did not want to come to this program because she thought that this was a program for dummies. Later she realized that she was improving and that this program was good for her. By participating in this program she was able to see things clearly. This year she experienced a great change. She stopped being truant and started to pay more attention to her studies. Her grades have improved. Now she does not want to be absent to school. I think that programs like this should also be in all schools. What I like that most about this program is that it helps students increase their self-esteem."

"In the name of Juan and Altagracia L., we want to thank you, the program ALAS, whom has benefited many parents who have children like our son. Also for helping our son Jesus keep on going. Thank you very much for having the ALAS program, and for helping my son Jesus."

Teacher Responses

ALAS did conduct a formal evaluation of the teacher responses to the project. During the second year of the project we surveyed all the teachers who had ALAS students in their classes and with whom the ALAS staff worked. We asked questions about how the teachers viewed the impact of the program on students and the impact of the program on teachers.

As the data indicate, most teachers felt that the ALAS program had at least a fair impact on the behavior, attendance, and school work of ALAS students. And the majority felt it had a good or excellent impact.

Impact of ALAS Program on Students

Question	Excellent	Good	Fair	Poor	Total
ALAS interventions helped target students improve behavior.	4	12	7	4	27
ALAS interventions helped targeted students improve school work.	6	10	7	3	26
ALAS interventions helped targeted students improve attendance.	8	10	7	1	26

Most teachers also felt that the demands made by the ALAS staff on them were acceptable. And most thought that communication with the ALAS staff was good or excellent.

Impact of ALAS Program on Teachers

Question	Yes	No
The number of interruptions to my classroom was acceptable.	26	5

Question	Far Too Much	Doable	Worth While
Requests and time asked of me by ALAS were:	2	15	12

Question	Excellent	Good	Fair	Poor
Communications between ALAS staff and myself was:	8	15	8	1

ALAS: SECTION III

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SECTION IV

What Does It Mean?

In this section we discuss the findings of the project. We then speculate about what we know or think that we know from our experience in conducting this project and what we'd like to know, but don't. Finally, we make some recommendation.

Discussion of Project Findings

The ALAS project was designed to improve the educational achievement of the most at-risk students in poor, urban, and predominantly minority schools—identified special education students and unidentified, high risk students with similar types of learning and behavior problems. We recognized that such students are at risk, in part, because of the high risk settings of families, schools, and communities in which they reside. The project did not or could not alter those settings to any real extent. Rather, the project focused on trying to change long-standing school-related behavioral patterns in both students and parents through such activities as counseling, skills training, and advocating. Because such patterns develop over a long period of time, it was assumed from the onset that it would take the full three years of the intervention before any significant changes in such patterns could be observed and positive changes in school performance occur. Thus our project evaluation focused on documenting changes in a number of different performance and achievement indicators at the end of 9th grade, when the treatment ended.

At the same time, we were interested in whether any changes we observed at the end of treatment would be sustained after the treatment ended. The middle school in which this project took place included grades 7 through 9, with 9th grade the first year of high school. But after leaving the program and the target school, all students were then required to enroll in a senior high school to complete their last three years of their high school education. This transition is difficult for many students, but probably more so for the types of low achieving, high risk students that were in the ALAS program. Thus we were interested in how the ALAS treatment students performed in high school relative to the control groups. Ultimately, we would like to know whether ALAS students, who have three years of intensive intervention during grades 7, 8, and 9, graduate from high school at a higher rate than comparable, non-treated students.

Because the first cohort of ALAS students would not be expected to finish high school until June of 1996, it is too early to evaluate the long-term impact of the ALAS intervention. But we did examine some outcomes at the end of 11th grade for the treatment and control High Risk groups. The long-term evaluation of the Special Education Treatment groups will take longer to complete because the Special Education Control group, who entered the target school as 7th graders in the Fall

of 1992, had only completed the 9th grade as of June 1995. So it will be three years, at least, before it will be possible to evaluate the ultimate impact of the ALAS program on the two Special Education Treatment groups.

Below we discuss briefly the treatment outcomes of the ALAS program, at the end of 9th grade, and some preliminary longer-term outcomes for the first cohort of students at the end of 11th grade.

■ Treatment Outcomes

The evaluation of the ALAS program focused on a number of different outcomes: (1) progress toward graduation, (2) school persistence, and (3) school performance. We also examined a number of other non-school outcomes such as psycho-social adjustment, family relations, and social behavior, but these are not reported here.

Progress Toward Graduation. The most important treatment outcome in which we were interested was progress toward graduation. We measured progress with two indicators: (1) enrollment status in school, and (2) high school credits earned. Both outcomes are important if students are to graduate. First, students need to stay enrolled if they hope to graduate. Second, they have to earn enough high school credits to be eligible to graduate. In the district where ALAS took place, students need 220 credits to graduate. Thus we determined how many students had earned at least 55 or one-quarter of their high school credits at the end of 9th grade, which means they were “on track” to graduate in the normal four years if they continued to earn credits at the same rate for the subsequent three years of high school. We also determined how many students had earned at least 45 credits or one-fifth of the high school credits at the end of 9th grade, which means they were “on track” to graduate in five years if they continued to earn credits at the same rate for the subsequent three years of high school.

At the end of 9th grade, ALAS students in all three treatment groups had much higher enrollment rates and much lower dropout rates than students in the control groups. By the end of 9th grade, almost one-quarter of all Special Education Control students had dropped out of school, had left school and gone to Mexico, or were in juvenile hall. Dropout and non-enrollment rates for the two Special Education Treatment groups were one-half to one-quarter of the these rates, with the Group 2 comparison being statistically significant. By the end of 9th grade, 17 percent of the High Risk Control group was not enrolled in school, compared to only 2 percent for the High Risk Treatment group. This difference was statistically significant.

Not only were ALAS students more likely to be enrolled at the end of 9th grade, a higher percentage of enrolled ALAS students were “on track” to graduate in four or five years than enrolled control students. By the end of 9th grade, only 50 percent of Special Education Control students had earned enough credits to graduate in four years, compared to 61 percent for Special

Education Treatment group 1 and 81 percent for Special Education Treatment group 2. The group 2 comparison was statistically significant. By the end of 9th grade, almost three-quarters of High Risk Treatment students were enrolled in school had earned enough credits to graduate in four years, compared to only half of High Risk Control students who were enrolled. This difference was statistically significant. This impact is even more remarkable considering that a higher percentage of Special Education and High Risk control students had already left school, which means the “better” students were more likely to remain in the two comparison groups.

Educational Stability. In order to achieve the goal of improving progress toward graduation, ALAS staff worked with students and families to improve a variety of factors that influence school success. One of those was to improve educational stability. Our project observed and research has confirmed that there is a high incidence of mobility among low-achieving, high risk students. Moreover, mobility is often preventable--that is, its not simply related to families and students changing residences or choosing to attend another school. The ALAS staff made a conscious effort to keep treatment students in the ALAS program and the target school for the full three years of the intervention in order to maximize the benefits of the treatment and to reduce the negative consequences of changing schools.

We documented the movements of all ALAS and control students over the entire three years of middle school, even after they left the program and target school. These data confirmed the findings of other studies that special education and high risk students, in the absence of any intervention, are, indeed, highly mobile. Over the three year period of the ALAS program, almost half of the students in the Special Education and High Risk Control groups left the target school and most never returned. Some of these students had five, six, and even nine changes in educational placements over this period. In contrast, fewer ALAS students left the target school over the three year period and, of those who did leave, a much higher percentage returned to the target school and the ALAS program. At the end of 9th grade, a significantly higher proportion of students from the two Special Education Treatment groups remained in the treatment school compared to students in the Special Education Control group. A higher proportion of students from the High Risk Treatment group also remained at the school compared to students in the High Risk Control group, although this difference was not statistically significant.

School Performance. In order to improve progress toward graduation, the ALAS program also worked to improve the school performance of ALAS students. School performance includes participation in school, academic achievement, and social behavior.

Theory suggests and empirical studies confirm that chronic absenteeism increases the likelihood that students dropout because it indicates that students are not engaged in learning and do not feel a sense of membership in the school. ALAS staff worked to improve students affiliation with the school and particularly with the ALAS program. Results indicated that the program significantly

reduced chronic absenteeism by more than 50 percent for students in Special Education Treatment Group 2 and the High Risk Treatment Group.

The ALAS program also reduced the percentage of fails in 9th grade academic courses. One-third of the Special Education Control and High Risk Control groups failed two or three of their academic courses during 9th grade. In contrast, the failure rate for ALAS students was one-half to one-third of that rate. These differences were statistically significant.

Summary of Treatment Outcomes. Overall, the ALAS program had a powerful impact on a number of educational outcomes by the end of the treatment in 9th grade. The strongest and most consistent impacts were on two of the three treatment groups--the Special Education Treatment Group 2 and the High Risk Treatment Group. In virtually all areas--school enrollment, high school credits, school mobility, absenteeism, and grades--students in these two treatment groups performed significantly better than students in the comparable control groups. Students in Special Education Treatment Group 1 also performed better in most areas, but, in part, because the size of the treatment group was small (N=33), it was not possible to demonstrate a statistically significant difference with the Special Education Control Group.

■ Long-term Outcomes

Although the ALAS program ended when students were in the 9th grade and still attending middle school, we have continued to monitor their educational progress in senior high school. This monitoring has included tracking students educational placements, their enrollment status, and their grades and credits. In this report we have only provided information on the educational progress of the first cohort of students who, by the end of the 1994-95 school year, should have completed three of their four years of high school. Thus we examined what proportion of students were still enrolled as this point in time and what proportion were “on track” to graduate in one more year of high school, which means they had completed three-quarters of their high school credits (165/220), and what proportion were on track to graduate in two more years, which means they had completed three-fifths of their high school credits (132/220).

By their end of the 11th grade, 12 percent of the Low Risk Control students whose status was known were no longer enrolled in school. But one-third (15/45) of the High Risk Control students whose status was still known were no longer enrolled in high school. Eight had dropped out, three others had dropped out and gone to Mexico, and four were in juvenile hall. This difference was large and statistically significant. Clearly, there are important differences between students in the high and low risk groups, confirming the value of the 6th teacher ratings as a way of identifying students at greater risk of failure in secondary school than generally used demographic indicators.

When we examine the high school credits, an even bleaker picture emerges of the High Risk control students. Among the 60 percent of the High Risk Control students still enrolled in the district

at the end of 11th grade, for whom we have reliable credit information, only 25 percent were still on track to graduate on time--that is, in one more year. This represents only 7 students, or 15 percent of the original cohort of 48 students! This is a sad commentary on the educational and future outlook of high risk students. If high risk students represent roughly 25 percent of the students enrolled in US public schools, as our analysis and that of others suggests,¹ then a substantial number of disadvantaged students, many of who are poor, minority, and attend urban schools, face a bleak future.

Among students in the High Risk Treatment group whose status was known, one-quarter were no longer enrolled in school by the end of 11th grade, a proportion not much lower than one-third rate for the High Risk control students. There are similar differences among High Risk Treatment and Control students in the proportion of students likely to graduate on time--33 percent for the High Risk Treatment students versus 25 percent for the High Risk Control students. The proportion of students capable of graduating in two years rather than the normal one roughly doubles for both groups.

It appears, therefore, that the ALAS program, at least among the High Risk group, did not lead to any long-term or sustained effects beyond the treatment period. On the one hand, this could be expected. Studies of other interventions that target high risk youth, such as Head Start and other pre-school interventions, have found that few of these programs have sustained effects two or three years beyond the end of treatment.² Since we argued earlier that the kinds of students in the ALAS program were at risk, in large part, because of the high risk settings in which they lived--families, schools, and communities--and that the program did not and could not alter these settings in any fundamental way, then the inability to sustain treatment effects after the treatment and the supports it provided were removed should be expected. On the other hand, until we fully evaluate the long-term effects of the ALAS program on the Special Education Treatment students, it is premature to reach a definitive conclusion about the long-term impacts of the ALAS program. Because the Special Education Control students by the end of 9th grade were already doing so poorly, the ALAS program might show significant impacts on the two Special Education Treatment groups. Thus we will have to wait to pass final judgment on the long-term impact of the ALAS program.

Reflections of Project Directors

Apart from the formal evaluation of the ALAS program, we learned a lot over the course of this project. We gained considerable insights and some surprises about schools, about parents and families, and what kind of intervention seems to work best with special education and other high risk youth, and about the personal, bittersweet experiences of working with these kids. We reflect on a few

of these below. We summarize these insights and surprises into a list of things that we know and a few things that we'd like to know.

■ Insights and Surprises

About Schools

Mobility. Shortly after beginning work in the school, it became clear that many seventh grade students did not stay in same middle school through ninth grade graduation, but rather transferred to another middle school. We were surprised by the sheer number of educational placements that some students attended during the middle school years--24 percent of the non-identified special education students attended between 6 and 13 placements in five years and 22 percent of special education students attending between 4 and 9 placements between 7th and 11th grades. In light of other research showing that frequency of school transfers predicts dropout, we realized that to be effective, dropout interventions have to include active methods for reducing the number of students who transfer schools. This primarily included students who were given administrative transfers by school staff as well as students who simply wanted to try another school.

Another surprise was the readiness of school administrators to administratively transfer students to another school for behaviors associated with school disengagement and dropout - high absenteeism, disruptive non-conforming behavior, or poor academic work. Case studies in other schools have documented how often and in what ways school administrators actively "get rid of troublemakers."³

Provision of special education services. Special education law and due process were frequently ignored by either blatant noncompliance or by conforming to the letter of the law but not the intent or spirit of the law. Primarily children were under-served either because they were not being identified or were given fewer services that their IEP required. There was deep resistance by the school to provide more than 45 minutes of resource help despite the youth's failing multiple classes.

Most often it was "regular" education personnel who were responsible for making suspension and disciplinary referrals about special education youth. In general, these personnel were more exclusionary and alienating in their approach than inclusionary and engaging. Frequently, the "letter of the special education law" framed actions as opposed to the "spirit" of the IEP process.

Independent study. Frequently, when a youth was having difficulty in school, especially in terms of behavior problems, the school would place the student on home or independent study. This was viewed by school personnel as a legitimate alternative placement, indeed, it was viewed as providing choice to students and families. Unfortunately, we found that almost every single youth placed on independent study, where they came to a center to receive and turn in assignments completed at home, did not produce enough school work to earn any credits toward graduation. Success in an independent study placement requires that a youth be self disciplined, self-directed,

goal oriented, independently capable of completing work assigned and highly motivated to perform well in school. These are not characteristics that describe low achieving and highest risk youth. Essentially, we concluded that, for high risk youth, independent study was little better than being out of school entirely.

Schools and change. The school staff was extremely resistant to change and to being challenged by change. School problems were perceived to be caused by deficiencies on the part of students and parents. The need for fundamental change was believed to reside within students and parents. School staff were reluctantly willing to engage in structural and organizational change but were not willing to focus on changing attitudes and beliefs about students and parents.

The problem of bringing about fundamental change in the way schools work has been well-documented in the research literature. A recent review of the \$50 million New Futures project that attempted to bring about systemic changes in five middle-sized school districts throughout the United States through the use of collaboratives involving schools and community service agencies notes:

Frequently collaborative board members became exasperated with what they say as log opportunities to make changes. Collaboratives viewed the schools' seeming inaction in the context of what seemed to be substantial new resources. Staff from the collaboratives were also frustrated by their 'outside' status in the schools. They felt their help should be more enthusiastically received. On the other hand, the schools threw up their hands at what they way as unrealistic expectations and criticism that was interpreted as a lack of respect from people who seemed not to understand how schools worked. Moreover, what the collaboratives saw as substantial new resources were from a school system perspective seen as only marginal additions to multi-million dollar budgets.⁴

About Parents and Families

Parental involvement. There were deep chasms in the relationship and communication between school and home. School personnel had many negative misconceptions about the motivations and values of parents. There was widespread belief that parents did not sufficiently value education and that they were unwilling to give sufficient time to rearing their children and participating in school activities. On the other hand, we found most parents to be fearful and alienated from school authorities while at the same time assigning expertise and responsibility to school personnel for educating their children.

However, when parents were approached with a genuine desire to serve them and their family, we found that almost all parents were exceedingly open to suggestion and to becoming more involved in directing their adolescent and monitoring school performance. Parents, far more than school or community personnel, were willing to implement suggestions from project researchers.

To establish rapport and a teamwork relationship with parents required three things: (1) that the economic restraints, cultural mores and literacy level of the parent be accommodated. (2) that the educator communicate a genuine desire to be of service to the parents as opposed to just believing that it is only the parent who needs to change and that the parent needs to do certain things the

educator wants, and (3) that the educator take the initiative to actually do what was promised and to check back within a week to determine if the parent is doing what was agreed upon and if there are any remaining issues not addressed or newly emerged. This service orientation on the part of educators implies that parent's must be asked what they need and desire and what their concerns are, that family members other than the target child be offered help and that the parent's ideas and concerns be taken seriously and acted upon.

About Interventions

Degree of intervention. To successfully impact high risk middle school youth a tremendous amount of effort is required. Interventions must be intensive, comprehensive, coordinated and sustained. Anything less is naive and will show only marginal results. There is no "cure all" or "fix the kid" phenomenon. These youth function in high risk contexts and therefore require sustained intervention throughout their secondary experience. When special intervention is stopped before high school graduation one can expect high risk youth who have become successful to once again be at risk for school failure and dropout.

Multiple contexts. Youth are influenced by their family, school and community contexts. High risk youth are most often required to function in contexts that are dysfunctional or antithetical to the nurturing and support children require. Consequently, if an intervention is expected to succeed it will have to address all three contexts in such a way as to enhance the effectiveness of the contexts and to increase the coordination and communication between contexts.

Effective intervention. Effective middle school interventions must accomplish six functions. (a) Frequent (in some cases hourly but generally daily or weekly) and on-going (sustained throughout the school year) monitoring of the youth's school performance. This includes keeping track of attendance, truancy, behavior, homework and class assignments. High risk youth are literally hanging on by their finger tips and are not generally capable of making up a long backlog of missed assignments. They cannot afford to get behind. (b) Close teamwork with parents including parent training in terms of being an effective educational consumer and issues with raising a teenager. (c) A case manager is essential to coordinating services provided and linking school, home and community together into a cohesive structure for the youth. The case manager must serve as the youth's monitor, counselor, guide, advocate and coordinator of various services. It is up to the case manager to see that each context provides the best possible "service" to the youth. The case manager needs to be school based because of the amount of time each youth spends in the school context and because successful schooling has a spillover effect on the youth's community behavior. Yet, the case manager needs to also be independent from the school and school district so as not to become co-opted by the norms and policies of the school. (d) The intervention must respond to the individual needs of youth and must be sufficiently flexible to personalize the educational experience. (e) A social cognitive problem solving approach that teaches the youth and parents how to effectively handle short and long term

challenges is highly effective in making high risk youth less impulsive, more independent and more goal oriented. (f) The intervention must actively attempt to change the youth's expectations and vision of the future from one of probable failure and hopelessness to one of hopefulness and possibility. This is accomplished by providing the youth with actual success, on-going documentation of progress and goals achieved, experience with young adults of similar background who are successful, and a continuing expression of valuing and belief in the youth.

A Bittersweet Experience

Fragile successes and random failures. Working with highest risk middle school youth can be a bittersweet experience. On the one hand this project truly turned lives around and made permanent and profound impacts on kids. On the other hand, two of our "successes" died before reaching 12th grade - one from suicide and one from a drive by shooting. In a project like this, where the intervention proceeds despite economic disadvantage and deteriorated conditions in social institutions, the children are continually vulnerable to both predictable and random threats from the contexts in which they live and function.

■ What We Think We Know

In General

- In the long run, to make substantial improvements in the entire population of disadvantaged kids will require improvements in the contexts---families, schools, and communities—and coordination among them.
- In the short run, however, comprehensive, intensive, and sustained support can be provided and make significant improvements in the lives of kids prior to systemic changes in these contexts.
- Middle school is not too late to make a positive and significant impact on high risk youth.
- The lives of high risk youth will not improve until those who provide services to them stop viewing the problem as within the youth.

About Schools

- Schools and school personnel are resistant to significant change and are inflexible in how they go about their business.
- Student preferences are viewed by school staff as non-essentials, which contributes to student alienation.
- Schools are not utilizing are resources that are available within the community.
- Schools define and respond to kids as troublemakers when kids don't conform to existing policies or don't benefit from existing programs.
- Many highest risk youth in middle school have a long history of problems and failure that were never addressed in elementary school.
- Adjudicated youth often earn more graduation credits during incarceration than during enrolled in public schools.
- Many high risk children and their parents are blamed and not treated with respect by educators.

About Families

- Highest risk students and their parents are very responsive to genuine and meaningful offers of help despite cultural, language, and economic barriers.

(What We Think We Know continued on next page)

About Communities

- Community services, both public and private, are traditionally unaware of how children are functioning in school.
- Communities need to expand their search and serve function and outreach efforts.

About Treatment

- Case managers bring coherence to high risk children’s lives by integrating family, school, and community contexts.
- An effective intervention in middle school can have a lasting, positive impact on high school performance.
- To successfully work with high risk, efforts must be compassionate and nurturing.

■ **Things We’d Like to Know**

- Do parents generalize skills and experiences with the dropout prevention project to their other children?
- Do youth that became successful have a positive influence on younger siblings?
- How many students from each group will eventually receive a high school diploma?
- How does the system reach adolescents who have overwhelming needs for support?

Recommendations for Administrators

Based on our experiences in working on this project, we offer these recommendations about how schools could better meet the needs of high risk students. Similar recommendations have been made by others who have studied school reform and the problems of educating disadvantaged students.⁵ Taken together, there appears to be a general consensus about the policies and practices that are likely to improve the educational outcomes and opportunities for such students.

1. Schools should be held accountable and should hold themselves accountable for growth and progress of all students.

There has been considerable interest among policymakers to deregulate public schools by giving them more local authority to make decisions and then holding them accountable for achieving measurable results.⁶ However, for this policy to work, schools need to be accountable for the progress of all students, including special education as well as non-special education students. They also need to be held accountable for students who leave and not just the students who stay.

2. School procedures, practices, and policies must be individualized and personalized for high risk youth.

Many schools expect students to conform to the policies and practices of the school instead of having the policies and practices conform to the kids. The former approach may be adequate for most kids, but not for high-risk, disadvantaged students. As Paul Hill, a noted educational researcher points out:⁷

To beat the odds in dealing with disadvantaged student, schools must never let up. Teachers must keep trying, to the point of working individually with students who are not learning from regular classroom instruction. Parent support must be enlisted to ensure that students attend school every day and complete all their assignments. Students must be pressed to keep working, assured that they, their parents, and teacher can together overcome any obstacles to learning.

3. Effective middle school interventions for high risk youth must address simultaneously the three contexts of family, school, and community through an independent, school-based, case management approach.

Because disadvantaged students are often at risk due to high risk settings of family, school, and community in which they live, to be successful with these students requires a multifaceted intervention that addresses all of these contexts if they. One person must coordinate the intervention and that person should be located in the school, but also must be independent from it in order to work for the welfare of the child and not the school. Such a person may best be labeled a case manager, although the person would actually perform several roles on behalf of the child, including that of counselor, advocate, and service coordinator.

4. System reforms of schools must not only change organization structures and practices, but more importantly, must change adult attitudes and behaviors to be more compassionate and nurturing toward high risk youth.

As with other recommendations, this observation has been echoed by others. In their study of successful schools dealing with students at risk of dropping out, Wehlage and his associates observed that teachers must have a series of:⁸

...beliefs and/or values, accompanied by corresponding sets of behaviors, that together constitute a positive teacher culture facilitating membership and engagement for students. These beliefs are: teachers accept personal *accountability* for student success; they believe in practicing an *extended teacher role*; they accept the need to be *persistent* with students who are not ideal pupils; they *express a sense of optimism* that all student can learn if one builds upon their strengths rather than their weaknesses.

They go on to argue that schools should be structured to help achieve this positive teacher culture. Yet creating such “enabling school structures” through fundamental, systemic changes in schools is a long and difficult process. In their formative evaluation of the New Futures project, which was unable to achieve such changes, Wehlage and his associates observe:⁹

Organizational changes alone are not likely to lead to substantive changes in the content of schooling. We will argue that unless restructuring is directed at the school’s core cultural beliefs and values affecting the quality of students’ experiences and teachers’ worklives, the modification of mere organizational structures will have little payoff in terms of better outcomes for students. Restructuring must address not only organizational forms, but also the myths, customs, and traditions of schooling that now shape day-to-day experiences of students and faculty. However, if the culture of the school must be changed to obtain different results for students, we are faced with the difficult question of how this can be done.

Yet, however difficult they may be, these are the changes that are needed if schools and society at large are truly going to improve the lives and educational success of disadvantaged students.

ALAS: SECTION IV

Endnotes

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Belief Academy

Dropout prevention and intervention project targeting middle school youth with learning disabilities and emotional/behavioral disorders at risk for dropping out of school.

Project Evaluation 1990 – 1995

Seattle Public Schools
University of Washington

By Eugene Edgar and Ernest Johnson

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and Intervention Series*

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SECTION I

Who Are The Students? How Are They At Risk?

Structural Characteristics of the Community and School District

■ Community

Seattle is a major urban community of 530,000 residents with the following ethnic breakdowns: Caucasian 73%, African American 10%, Asian 11%, Latino 5%, Native American 1%. The median family income is \$19,100.

■ School District

The District. The Seattle Public Schools serve the Seattle City limits and is an urban school district, part of the Greater Cities Schools. The district has a total student population of 40,927 students with 3,914 (9.6%) special education students and is an ethnically rich district. For the total school population, 43 % are Caucasian, 24% Asian, 23% African American, 7% Hispanic, and 3% Native American. The special education population consists of 43% Caucasian, 36% African American, 11% Asian, 6% Hispanic, and 4% Native American. African Americans are over-represented and Asians are under-represented in the special education programs.

The school population has been stable for the past 5 years, but there has been a significant decrease in the school population over the past 15 years (60,000 to the current 40,000). The high school completion rate in Seattle is 74%. For students labeled as learning disabled the completion rate is approximately 60% and for students with serious behavioral disorders the rate is less than 50%.

Special Education. Services at the middle and high school level for youth with learning disabilities and serious behavioral disorders consists primarily of resource rooms in which the students receive from one to two periods per day of assistance while spending the majority of their time in the regular classroom settings. There are limited self-contained classrooms for those students with serious acting out behaviors.

The Middle Schools. The target schools for this project were Denny Middle School and Mercer Middle School. These two schools were selected based on the demographic make-up of the target population in the two schools (African American students were slightly overrepresented in these two schools as were students with serious behavioral disorders). Denny has a total 6-8 population of 884 of which 61% are minority and 49% are eligible for free/reduced lunch. Mercer has a total 6-8 enrollment of 909 of which 72% are minorities and 42% are eligible for free/reduced lunch. Mercer also contained the primary self-contained room for acting out middle school special education students in the District. Due to the district wide bussing policy students from all over Seattle attend these two schools.

■ Demographic Characteristics

The students in this project consisted of two groups (cohorts) of students. Cohort 1 consisted of 49 seventh grade students selected from the Denny and Mercer sixth grade classes during the 1990-91 school year (see Table 1). We attempted to recruit all the sixth grade students from these two schools who were labeled as Learning Disabled or Serious Behaviorally Disordered. All but two such labeled students at Mercer and one at Denny were recruited. The project director and co-principal investigator met with each of the students individually and informed them of the program, the desired outcomes, and gave examples of some planned activities. All the parents of these students received a letter which provided a brief overview of the program and invited them to a parent meeting at their home school. These meetings were poorly attended (six families at the Denny meeting and five families at the Mercer meeting). The project director and co-principal investigator then conducted follow-up home visits to each of the target families. A formal contract explaining the program and requesting parent and student participation in all events was signed by all parents and students.

Table 1. Demographics at Entrance to Belief Academy		
	Cohort 1 (N=49)	
	<i>%</i>	<i>Freq.</i>
DISABILITY:		
Learning Disabled	82	40
Behavior Disordered	18	9
GENDER:		
Female	26	13
Male	74	36
ETHNICITY:		
African American	53	26
European American	33	16
Hispanic American	0	0
Native American	4	2
Asian/Pacific Islander	10	5
LIVING SITUATION:		
Two Parents	39	19
One Parent	55	27
Guardian	6	3
FREE/REDUCED LUNCH:		
Eligible	63	31
Not Eligible	37	18
	<i>NCE Mean</i>	<i>Freq.</i>
ACHIEVEMENT (CAT):		
6th Grade READING	21.45	29
6th Grade MATH	26.14	28

Cohort 2 consisted of 22 seventh grade students who were recruited from across the entire district's sixth grade classes during the 1991-92 school year based on recommendations from special education supervising teachers (see Table 2). Home visits were made by the project director or co-principal investigator and the contracts were signed by parents and students. This classroom was located at Denny.

Table 2. Demographics at Entrance to Belief Academy			
		Cohort 2 (N=22)	
		%	Freq.
DISABILITY:	Learning Disabled	95	21
	Behavior Disordered	5	1
GENDER:	Female	32	7
	Male	68	15
ETHNICITY:	African American	59	13
	European American	32	7
	Hispanic American	5	1
	Native American	5	1
	Asian/Pacific Islander	0	0
LIVING SITUATION:	Two Parents	23	5
	One Parent	59	13
	Guardian	18	4
FREE/REDUCED LUNCH:	Eligible	59	13
	Not Eligible	41	9
		<i>NCE Mean</i>	<i>Freq.</i>
ACHIEVEMENT (CAT):	6th Grade READING	28.56	18
	6th Grade MATH	17.78	18

Vignettes of Students

Cohort 1 Stories

Andy entered the Belief Academy after a history of behavioral problems at school that began in the first grade. He qualified for special education services as Health Impaired due to ADHD Tourette's syndrome. Andy's mother reported that it was a difficult pregnancy ending in a pre-mature delivery. She also has indicated that she was actively using alcohol and/or other drugs during the pregnancy. Andy lived with his biological mother, stepfather, and two siblings. Academically, Andy was above grade level in reading (WRAT-2 grade level equivalent above 12) and at grade level in math. Behaviorally, Andy exhibited poor impulse control, aggressiveness, disrespect toward others and disobedience.

David is African American, lived with his father when he entered the Belief Academy, and was eligible for free lunch. He was labeled LD with an IQ of 83 and a reading level of 3.0. He was reported not to have had legal problems nor involvement with drugs and alcohol.

(Cohort 1 Stories continued on next page)

(Cohort 1 Stories continued)

Noah is American Samoan (Pacific Islander), lived with his mother and father, and was not eligible for free or reduced lunch. He was labeled as LD and had a reading level (grade equivalent) of 3.0 when he entered the program at the end of sixth grade. He has been in special education since pre-school and was part of an experimental program at the University of Washington as a 3-year-old. At entrance he was reported to have some minor infractions with the legal system, but was not abusing drugs or alcohol. Noah was academically above many of the other students in the group but he was often absent. When in school he stayed productively on task and helped enforce respectful behavior among the students.

Karl is African American, lived with his father, and was not eligible for free/reduced lunch when he entered the program. Karl was labeled SBD, had an IQ of 85, and a reading level of 2.5 when he entered the program.

Kim is African American, lived with her mother when she entered Belief Academy, and was eligible for free/reduced lunch. She was labeled LD with an IQ of 78 and a reading level of 2.5 when she entered the program.

Mark is Caucasian, lived with his mother and father, and was not eligible for free/reduced lunch. He was labeled LD with an IQ of 108 and a reading level of 2.4. Both parents have considerable learning problems and were in special education as youth. There is no family health coverage. Mark was withdrawn in school and often appeared depressed. Although he typically failed to perform at his suspected ability level he was a persistent worker and was always well behaved in the class.

Raven is African American, lived with her mother and sister, and was eligible for free/reduced lunch. She is labeled SBD, has an IQ of 93, and a reading level of 5.0. She had a long history of behavioral problems at school and was placed in special education in the second grade. Her behavior was physically and verbally aggressive toward staff and peers. She was easily agitated and was unresponsive to redirection or de-escalation. Her non-compliance and disrespect for others caused serious disruptions within the classroom environment. She also showed a great strength in being a natural leader with her peers. This, however, often worked against the education milieu and contributed to disruptiveness when she exercised this in a negative fashion. Historically, school had not been a very positive experience for Raven. Interestingly enough she rarely missed a day of school except for the days she was forced to miss due to suspensions for misbehavior. School was not the only source of stress for Raven as she also had death, illness, and substance abuse issues to confront. Her favorite brother died of a congenital kidney disease while at home with Raven and her mother. Raven's mother, to whom she was very close, is also dealing with kidney problems and high blood pressure. Raven herself has undergone much testing but so far shows no signs of the illness. One of her older sisters has had addictive episodes with alcohol and cocaine which throws a lot of stress and chaos into Raven and her mother's life.

Cohort 2 Stories

Bruce is Hispanic American, lived with his mother in low income housing. His father was in prison for a violent crime. Bruce was eligible for free/reduced lunch. He was labeled as LD with an IQ of 118 and a reading level of 5.8 when he entered the program. He was reported to have had behavioral problems in his first year of middle school, and continued in Belief during seventh grade with verbal aggression towards his teachers and periodic verbal and physical altercations with his classmates. He had no reported legal infractions and no reported drug or alcohol abuse when entering the program.

Tina is African American, lived with both parents in low income housing. Tina's father is unemployed and her mother works as an aid at a nursing home. She has a younger brother and they all live in a small apartment in a housing project. Tina's older brother has his own apartment, but is still an active member of the family. Tina has a very close relationship with her father. She frequently says that she has little respect for her mother and feels that she cannot talk to her. The house is extremely messy and disorganized. At one point the family was at risk for being evicted because of the mess and Tina stayed home from school in order to help the family clean. She was eligible for free/reduced lunch, but refused to take it. She was often hungry in school and frequently borrowed money from staff, which she often repaid, possibly from her industry ventures selling candy for various causes. She was labeled as LD, with a reading score of 3.9 when entering the program. She had reported incidents of severe acting out in sixth grade and was recommended to our program as having high potential, but struggling in the existing middle school program. She had a history of being suspended and of failing classes. She was considered to be a disruptive student who had frequent conflicts with other students. There were also many complaints about her being excessively loud. However, she had no reported legal infractions, drug or alcohol abuse when entering the program.

Kevin is African American, lived with his mother, but spent many weekends with his father and his father's family. He was originally labeled as ADHD and later reassessed as LD during his second year in Belief. He had a reading score of 3.6 and an IQ of 102 when entering the program. He was not eligible for free/reduced lunch. He was a popular student with some administrators at the middle school from which he was recruited, but his former teachers were relieved to see him enter a different program. He takes medication for his hyperactivity, and had no record of legal infractions, alcohol or drug abuse when entering the program.

How are They at Risk?

■ How the Project Defined Risk

An earlier study of special education drop-outs in the Seattle School District (Blackorby, Korterling, & Edgar, 1992) found that the disability category of SBD and African American ethnicity predicted school non-completion. However, the number of school interruptions in high school was the best predictor of completion or noncompletion of high school; students who had less than two interruptions were most likely to graduate. Based on this information the project considered all youth labeled as Learning Disabled or Seriously Behaviorally Disordered as at-risk for not completing high school, but over-sampled on the category of SBD. To insure that the sample represented the range of students with these labels, the project targeted schools that had a representative sample of students with these labels and that represented the district proportion of youth from the various ethnic backgrounds and with free/reduced lunch status (a proxy for social class). Mercer and Denny Middle Schools fulfilled these criteria.

Due to the experiences during the first year of the project the second cohort was selected from across the District by requesting the special education program supervisors to refer students with these labels who the supervisor thought was at risk for dropping out of school and for whom the Belief Academy would be an appropriate placement. We under-sampled on the category of SBD for the second cohort.

■ Policies and Practices that Influence the Life of Youth

The Belief Academy proposal hypothesized that a number of practices would influence the probability of school retention for these youth. First was the notion of stability and continuity of the school program. We believed youth became “lost” in the school system during the middle school years. As students moved from class to class there is no sense of community or continuity of program, especially for those students who were experiencing school difficulty. Second, because the majority of these students were far behind their age peers in basic academic skills (especially reading), we believed that the students would not be able to benefit from the instruction in typical middle school classes, and that they would receive little, if any, remedial instruction in the basic skills and fall even further behind their age peers. Third, we believed the families of many of these students were experiencing serious problems that negatively influenced their ability to provide a stable home environment for the students (interpersonal problems, drug and alcohol abuse, lack of jobs or housing, access to medical services). Finally, we believed that some of these students were not connected to community and school activities that provide informal support and stability to their lives. The interventions of the Belief Academy were designed to address these issues.

SECTION II

How Did We Intervene?

Intervention Design

The program interventions consisted of five major components: 1) stability of program over time; 2) intensive academic and behavioral intervention in the seventh and eighth grades; 3) family case management services; 4) social support to the students; and 5) program options and ongoing support at the high school level.

■ Rationale

The intervention procedures were developed with the following assumptions: 1) students need to enter the ninth grade with basic skill levels in reading and math at least at the sixth grade level if they are to have a reasonable opportunity to be successful in the mainstream curriculum and move on to post secondary education; 2) the curriculum in middle school does not focus on remediation so students who are significantly below grade level in basic skills when they enter middle school seldom make progress in the basic skills; 3) intensive instructional procedures that include culturally relevant instruction and increased instructional time in basic skills are necessary in an accelerated remedial program (a program that focuses on catching the students up to their peers in basic skills); 4) there are often factors related to family needs or out of school activities that interfere with student progress and cannot be addressed by in-school activities directed by teachers; 5) many inner city students labeled as learning disabled and seriously behaviorally disordered feel estranged from the institution of school and formal attempts to build affiliation with the school program are needed; 6) the self-esteem and self-confidence of individual students need to be fostered in a comprehensive, long-term program; 7) students and their families need to be involved in constantly focusing and planning for their post high school goals, and there needs to be a long-term support program in place that provides viable options for the students and their families to achieve these goals. Completion of school and the type of post-school placement are considered to be the major outcome variables of this study; therefore, the intervention program and data collection MUST continue through the entire high school program. The rationale of the Belief Academy intervention strategies is that these students cannot be “inoculated” once and for all against school failure, but require intensive and ongoing program intervention throughout their high school career.

■ Key Interventions – Cohort 1

Stability of Program. Stability of program addressed the issues of school affiliation. The students and families in the program were guaranteed that the Belief Academy would continue

throughout their entire school career (to the completion of high school). An emphasis was placed on the notion that the Academy would stand by the student and family, that there would be consistent long-term planning, and that there would be the feeling of belonging. This has come to be translated as “the Belief Academy as family.” The students and family could count on the program standing by them and there would be the consistency of staff and program options. This component included the development of program affiliation activities (picnics, tee shirts, sports teams, and media publicity) that stressed the “Academy.”

Fidelity of this cohort 1 program is described here. The administrative staff provided the only long-term stability to this cohort. The teaching team at the Mercer site remained unstable throughout the entire first year of the project and the two sites were combined for the second year (grade eight). This change resulted in considerable doubt about the long-term stability of the program. There were also numerous changes in the program content and the assignment of tutors and mentors was delayed for a number of students. This lack of congruity between the promised program and the delivered program caused considerable concern among the participants as to the probability of the long-term stability of the program. Considerable anxiety about the overall stability of the program was voiced by many parents, students, and staff for this cohort. In general participant confidence in long-term stability was low.

Intensive Academic and Behavioral Intervention. Academic and behavioral intervention consisted of a **self-contained, separate program** during the seventh and eighth grades. The programs, located at the two Middle Schools, were schools within schools, totally separate from the regular school program. All academic instruction and social interactions during school hours were separate from the other students. The teaching teams (two teachers, a family liaison, and instructional assistants) provided all the academic instruction to the students.

A **multicultural curriculum** was developed by the teaching teams to meet the needs of the students. The curriculum varied across the two sites during year 1 but generally consisted of ethnically sensitive curriculum materials that provided examples of individuals from various ethnic backgrounds who have achieved a “place in history and society.” The Denny team (which included two African American teachers) incorporated examples of personal family history (the journal of a grandfather of one of the teachers) and identity (music, foods, friends and family) in the classroom. The Mercer team relied on commercial materials and books. When the groups were combined for year 2 the Denny curriculum prevailed. In essence the curriculum was totally teacher specific and was never formalized to the extent that replication is possible.

The instructional procedures consisted of a whole language approach to reading with individual direct instruction in word attack skills. This consisted mainly of the students reading culturally relevant books at a high interest low instructional level with small group instruction in word

attack skills using Direct Instruction materials. Two students received specialized reading instruction from a tutor (contracted from the Learning Disability Association) after school hours. Math instruction was whole group with the use of choral response. The math sequence was designed by one of the Denny teachers and consisted basically of a pre-algebra sequence of skills. Cooperative learning groups and projects (e.g., hydro-plane construction, a student written play on gangs) were used for the majority of the basic knowledge instruction. Meta-cognitive study skills strategies (pre-viewing, main points, prediction, summarizing) were taught in context with the content materials. The emphasis during the seventh and eighth grades was to accelerate academic learning and catch the students up in basic skills of reading, writing, math, and in general knowledge.

Behavioral interventions during the first year varied by site. The Mercer site was chaotic and undisciplined for the entire year while the Denny site had a firm, consistent, effective behavior management system in place. During the second year of the project the effective behavior management system was in place. The system consisted of a total classroom management system based on levels and individual points for appropriate behavior. A student government was developed that elected students leaders on a weekly basis to enforce the level system. Debriefing and “processing” were used to address major behavioral incidents that exceeded the standard rules. One of the Denny teachers was clearly the main enforcer of the behavioral program and commanded total compliance from all the students. In addition to the classroom behavior management system, the case managers attempted to obtain individual and family counseling for specific students and their families and to assist the parent in implementing effective parenting practices at home.

Fidelity of this cohort 1 component is described here. The academic interventions for the Denny site during year 1 and the combined sites during year 2 were of moderate intensity. Academics tended to focus on remedial math and reading skills with some multicultural materials included for special projects. The majority of the academic work took place in large groups with some individual work for selected students (both high and low-performing students). Two university practicum students assisted with the instruction.

The original Denny site students received intensive behavioral intervention for the first two years of the program. The first year for the Mercer site students was chaotic, and behavioral and academic interventions were poor and inconsistent.

During the second year of the program the two sites were combined at Mercer and all students received a strong behavioral intervention. With hindsight the behavioral interventions can best be described as highly structured and dependent on one teacher in the program. The emphasis was on consistent group contingencies. Not all the students (nor their parents) were pleased with the emphasis on group rules and there was considerable discussion with one parent about the need to individualize for their child that resulted in the parent removing the child from the program. [In this case the group contingency was for the entire class to pay attention to the lesson. The student in

question was far advanced in the specific skill being taught and was not paying attention to the lesson and was playing with a toy car. The teacher called attention to this fact and demanded that the student put away the toy he was playing with. When the student was slow to comply, the teacher brought peer pressure to bear on the situation. The student did not respond well to the peer pressure and balked at the request. The teacher followed through on the classroom rules and deducted points from the student. The parents requested a parent-teacher conference to devise an individual management program for their son with an emphasis on appropriate academic instruction and individualized--different--consequences for not paying attention. The teacher refused, arguing that the group needed to have fair and consistent rules for all students and to individualize for their son would be detrimental to the group].

The student behavior and on-task attention in the classroom was impressive. The students as a group were extremely well behaved during field trips. However, when the lead teacher was not present the group engaged in serious acting out behavior. An additional problem was noted with the use of group processing for specific behavioral events, especially due to the frequency of the use of this procedure (1-2 times per week). Typically, processing was used when a behavioral event exceeded the group rules (a fight between two classmates in the classroom). The activity would stop and the group would discuss the event, describing what had happened and what alternative actions would have been more appropriate. For example, in one case when two girls got in a fight the group discussed gossip and rumors and how this type of behavior hurt each other's feelings and how painful it was to have rumors spread about you. The entire event took approximately 50 minutes and at the conclusion one of the girls who was involved commented on how important it was to her to have a "family" at school who cared enough about her to take the time to help her work out her feelings. An outside observer used this instance to describe the "positive" class environment of the Belief Academy. Another outside observer, described the same event, noting how the students with good social behavior, but low academics, were "cheated" out of instruction time to engage in the processing. This view suggested a dilemma: in surrounding students with behavioral needs with good student models, how can we insure that students with instructional needs get intensive instructional time. The Belief Academy, by necessity, focused on the behavioral interventions at the expense of the academic interventions.

Social Support Activities. Social support activities consisted of each student having a plan to be involved in a social activity in the community and being engaged in a productive summer activity (job or formal social group). Each student was to be assigned a tutor to assist with academic activities and a mentor to act as an additional adult role model and to engage the student in out-of-school activities.

Fidelity of this cohort 1 component is described here. Our original plan was to involve the Belief Academy students in the regular school extracurricular activities to promote social integration with their peers. The lack of school activities forced us to create in-school activities for the Belief Academy. The Denny group was involved in a model hydroplane project during the first year which included many out-of-school activities, and a Belief Academy basketball team was formed. The Mercer students had no formal social activities other than several field trips. During the second year the Belief basketball team (including cheerleaders) was the major social focal point of the combined group and attracted non-Belief Academy students. There were numerous class outings, including several weekend trips.

Less than half of the students had a tutor or a mentor due to difficulties in locating sufficient volunteers. The family liaison attempted to insure each student was enrolled in some form of formal community based social organization. Summer jobs were arranged for as many students as possible through Summer Youth Employment or informal contacts with business. See Table 3 for data on the social support services.

Table 3. Summary of Social Support Services Provided: Cohort 1

	Grade 7 N=49	Grade 8 N=39	Grade 9 N=28	Grade 10 N=22
Tutors/Mentors	18 (37%)	25 (64%)	17 (61%)	11 (50%)
Summer Job	11 (22%)	23 (59%)	18 (64%)	11 (50%)
Families in Crisis	18 (37%)	17 (44%)	18 (64%)	10 (45%)
Family Support	31 (63%)	30 (77%)	22 (79%)	13 (59%)
In-School Activity	9 (18%)	28 (72%)	12 (43%)	18 (64%)
Out-of-School Activity	24 (49%)	25 (64%)	18 (64%)	6 (27%)

Family Case Management. Family case management services were provided by the family liaison (MSW) in an attempt to address the pressing needs of all the family members. Assessments were conducted by the family liaison and individualized family plans were developed that addressed family needs such as housing, access to health care, counseling, parenting skills support, and accessing needed services for siblings or other family members. The family liaison also coordinated the out-of-school activities of the students (social support activities), and helped match the students with their tutors and mentors. The family liaison determined whether there was any type of family crisis (employment, serious illness, housing, interpersonal relations, etc.), and attempted to provide case management services to families in need of them. Additionally, the family liaison provided ongoing contact between the school program and the family.

Fidelity of this cohort 1 component is described here. The implementation of this aspect of the program was spotty. Some families and students received all the services provided and others received none of these services. Some of the families that did receive services were not able to take

advantage of them (time, transportation, finances prevented them from using the services). Others refused to use the services offered or believed the available services were inappropriate (some African American families desired an African American family counselor and none were available). There were some examples of the case manager not being able to form appropriate relations with families and the families refused all services. There were problems in communication between the teachers and the case managers and the families that resulted in mixed messages between the program and the families. (For example, in some cases the case manager was unaware of events in the classroom and provided inaccurate information to parents who inquired about a specific event.) See Table 5 for data on this aspect of the program.

Placement in High School Programs. Program options at the high school level consisted of two discrete choices. The **college bound option** (academic focus) was developed for students who have the interest and aptitude (basic skills above the sixth grade level at exit from the eighth grade). This program includes total mainstreaming in the pre-college curriculum at any of the 12 district high schools, assistance in choosing appropriate course work, family case management services, tutors and mentors, and a Saturday school consisting of advanced academic work. Summer jobs that are related to the occupational interests of the students were arranged through summer employment programs.

For students with basic skills below the sixth grade level at exit from eighth grade (or for those who express an interest), the **apprenticeship option** (career focus) was developed which, like the college-bound option, includes family case management services, tutors and mentors. The curriculum for these students consisted of the advanced skills of collecting information, synthesizing the information, engaging in group discussion, and arriving at conclusions using a non-reading focused project based instructional model and portfolio assessment. The curriculum also contains a career exploration component of job shadowing that leads to work study, paid internships, and finally a job that the student views as an occupation, pays a livable wage and health benefits, all as part of their high school program.

Fidelity of this cohort 1 component is described here. The staff made recommendations to the families and students as to which program each student should enter in the ninth grade based on student interest and academic level (reading level at, or above, the sixth grade level). The student and family had the final decision on the ninth grade placement. As a result a number of students were placed in the pre-college program who did not meet the minimal criteria for such placement. See Table 4 for the data on high school placements.

Table 4. Year 3 Placements: Cohort 1 (N=31)		
Program:	%	Freq.
Pre-College	55	17
Apprenticeship	45	14

■ Key Interventions – Cohort 2

Several modifications were planned for the second cohort based on the experiences with the first cohort. Program staff consulted with Middle school special education Team Leaders to select students who they believed would more likely be successful in the program. For cohort 1 several students were heavily recruited even though reluctant to enter the program. Cohort 2 students were encouraged to enter the program only if they evidenced interest. The size of the cohort was reduced to one classroom (22 students). Finally, based on the experiences of the first year, the description of the program services were modified to more accurately represent the actual program (e.g., the Outward Bound program was not promised, and tutors and mentors were mentioned as a goal, not a promise).

Stability of Program. The notion of the Belief Academy as family was continued from cohort 1 to cohort 2. An emphasis was placed on group activities such as Ropes Courses, field trips, and group outings. The teaching team (two teachers, one instructional assistant, and one case manager) was presented as a long-term stable team to the students and parents. The teaching team concentrated on forming a trusting relationship with the students and their parents. The administrative team maintained consistent contact with the students and families.

Fidelity of this cohort 2 component is described here. The major difference between cohort 1 and cohort 2 was the stability of the teaching team in cohort 2 which remained in place for the full two years of the program. Both parents and students seemed to be comfortable with the perceived stability of the program, but during the second year of the program for cohort 2 (the third year of services for Belief) there was concern expressed by the parents about the future funding of the program. The group activities were successful in forming a positive bond between the students, the staff, and program. The administrative team was a consistent part of the program.

Intensive Academic and Behavioral Intervention. Based on the experiences of the first cohort the teaching team was encouraged to develop their own curriculum and behavior management procedures. The teachers in this program were white women who did not feel comfortable replicating the curriculum and instructional procedures developed by the cohort 1 Denny team. Instead they focused on using multicultural materials from a wide range of cultural viewpoints and unit teaching of themes. For example, they developed science and social studies themes that were used to teach reading, writing, and math skills as well as general knowledge. They supplemented their small group work with intensive one-to-one tutoring of students in basic skills. They also invited many of the student tutors into the classroom to assist in the one-to-one remedial tutoring activities. The team implemented the level system developed by cohort 1, with some basic modifications, as their standard behavioral intervention technique.

Fidelity of this cohort 2 component is described here. Academic interventions tended to focus on unit presentations of content material with remedial assistance provided on an individual basis and with some multicultural materials included for special projects. The students were more engaged in academic activities than was cohort 1. The behavioral interventions can best be described as moderate in intensity, but few students were excluded from this group because of their behavior problems. A significant amount of teacher and administrator time was spent enforcing in-house suspensions and time-out procedures for five of the students in this cohort. By the beginning of the second year of intervention the behavioral techniques were well in place and effective for nearly all of the students in this cohort.

Social Support Activities. As with cohort 1 these activities consisted of each student having a plan to be involved in a social activity in the community and being engaged in a productive summer activity (job or formal social group). Each student was to be assigned a tutor to assist with academic activities and a mentor to act as an additional adult role model and to engage the student in out-of-school activities.

Fidelity of this cohort 2 component is described here. There were numerous class outings, including several weekend trips. A high percentage of students had a tutor or a mentor. Summer jobs were arranged for over half of the students and the students were active in school-based activities (sponsored by the Belief Academy) and community organizations. See Table 3 for data on this aspect of the program.

Table 5. Summary of Social Support Services Provided: Cohort 2			
	Grade 7 N=49	Grade 8 N=39	Grade 9 N=28
Tutors/Mentors	15 (79%)	15 (88%)	10 (83%)
Summer Job	8 (42%)	10 (59%)	8 (67%)
Families in Crisis	10 (53%)	13 (77%)	7 (58%)
Family Support	16 (84%)	16 (94%)	12 (100%)
In-School Activity	16 (84%)	17 (100%)	5 (42%)
Out-of-School Activity	11 (58%)	15 (88%)	7 (58%)

Family Case Management. As with cohort 1 family case management services were provided by the family liaison (MSW) in an attempt to address the pressing needs of all the family members. The family liaison determined whether there was any type of family crisis (employment, serious illness, housing, interpersonal relations, etc.), and attempted to provide case management services to families in need of them. Individualized family plans were developed that addressed family needs such as housing, access to health care, counseling, parenting skills support, and accessing needed services for siblings or other family members. The family liaison also coordinated the out-of-school

activities of the students (social support activities), helped match the students with their tutors and mentors, and provided ongoing contact between the school program and the family.

Fidelity of this cohort 2 component is described here. Family case management services were more systematic for cohort 2 (due to the lessons we had learned during year 1). However, some students and their families were not provided appropriate services due to the immersion of the case manager in the extensive needs of a few students and their families. See Table 5 for the data on the social support services provided.

Placement in High School Programs. As with cohort 1 program options at the high school level consisted of two discrete choices between the **college bound option** (academic focus) and the **apprenticeship option** (career focus). Both programs included mainstreaming in regular classes, a one period study skills class each day, assistance in choosing appropriate course work, family case management services, tutors and mentors. Summer jobs that were related to the occupational interests of the students were arranged through summer employment programs. The college bound group could attend any of the 12 Seattle High Schools while the apprenticeship option was only available at Rainier Beach High School. The apprenticeship option was refined from the cohort 1 option based on the data obtained with that group. The students were offered classes in the regular curriculum with additional assistance from the Belief teachers and more structured and systematic job shadowing opportunities.

Fidelity of this cohort 2 component is described here. Fewer students were recommended for the pre-college option than in cohort 1 based on the poor experience of many cohort 1 students in the pre-college option in 9th grade. See Table 5 for the data on high school placements for cohort 2.

Table 6. Year 3 Placements: Cohort 2 (N=17)		
Program:	%	Freq.
Pre-College	55	17
Apprenticeship	82	14

Vignettes of Students Exemplifying Interventions Used**Cohort 1 Stories**

Andy, upon entrance to the Belief Academy, immediately evidenced behavior problems, and, by the middle of the year, was transferred to the other Academy site in order to benefit from the structure of a demanding African American male teacher. He showed improvement behaviorally and academically during his stay with this class. He was connected with a mentor at the beginning of the school year, but the mentor did not attempt contact with him, and the match fell through. At the beginning of 8th grade the two 8th grade classes were combined into one class. Andy once again began to experience academic difficulty and aggressive episodes (even though he was with the same teaching team as at the end of the previous year). He was suspended on several occasions for fighting with non-Belief students outside of the Belief classroom. The Academy referred Andy for an assessment with a child psychologist who helped the Academy and the family design a comprehensive school and home program. His parents, however, refused to seek the recommended family counseling and medication evaluation for his ADHD. Andy received individual counseling and some group work with the case manager at the Academy throughout the 8th grade. Andy graduated with the 8th grade class and was placed in the pre-college ninth grade program despite showing minimal academic and behavioral improvement during the middle school years.

In the high school program Andy was academically mainstreamed for the majority of his classes. Behaviorally, Andy showed some initial improvement (less frequent and less aggressive occurrences of behavior), however, he quickly began showing fluctuations in behavior from class to class and not completing his work. Andy was connected with a mentor in the Steps Ahead program who worked with him the entire year. Andy's parents felt that the mentor was too invasive into family business and undermined the relationship. Andy's parents refused staff recommendation of increasing his contact hours with special education for the second semester. Because there was little to no improvement in his school performance, Andy's family was again approached as to the benefits of medication trials and counseling support, and again they were not receptive to referrals and/or intervention. Despite tutor, mentor, family contact and school staffing, Andy failed all classes but P.E. in his first semester. Andy continued to fail academically in the second semester and his unpredictable, impulsive, behavior caused increasing anxiety among the high school staff.

The Academy connected Andy with a summer work training program in which there was a summer school component. Andy completed the summer program and returned to the high school in the fall for his 10th grade year. Andy again showed poor academic growth and unpredictable behavior. The Academy reiterated its recommendation of counseling and medication trials and provided referrals. His parents followed through with a visit to a specialist in ADHD who prescribed a Clonidine patch. Although Andy reported to staff that the patch was helping him to settle in and concentrate, he reported negative side effects to his parents, reinforcing their view that medication is harmful. Andy began to manipulate his dosage by

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removing the patch, his mother agreed to monitor by placing them on him herself. Andy's mother did not follow through and Andy began not wearing the patch consistently or not at all. The medication trial was not consistent enough to provide an accurate look at the possibilities of this medication. The case manager at the Belief Academy encouraged Andy's parents to return to the specialist and reassess the medication and/or try a new regimen. The family was not receptive to this intervention. Andy continued to deteriorate and the Belief Academy began looking at and recommending alternative school placements for Andy because it was painfully obvious that he was not being successful in the current high school setting. In the interim Andy brought a knife to school and threatened another student with bodily harm. The school followed district policy and expelled Andy. A staffing was held, but his parents did not attend. His parents were notified that unless they appealed the decision he would be expelled to a reentry program; they did not appeal. Since the family lived out of the school district, they placed him in an alternative school closer to home. It remains to be seen if Andy will be more successful in this setting. As of the second semester of 1995 he was still attending school.

Noah made considerable progress during the two years of the middle school program. He increased his reading level to 4.8 (from 3.0), he had good attendance, and he was generally well behaved in school. He received services from a Samoan mentor and a tutor for both years he was in the program. His family was assisted in numerous ways by the case worker, including assistance with the juvenile justice system. Noah was involved in the Belief Academy basketball team and was an active participant in the community-based Samoan Cultural Center. During the first two years in the Belief Academy, Noah was a compliant student in school, but became involved in gang activities and had two instances of stealing cars. At the end of the eighth grade year there was a serious gang event that resulted in Noah being targeted by a rival gang and he was forced to go into hiding. At the end of eighth grade Noah was placed in the pre-college program at Rainier Beach High School. He rarely attended his classes in the ninth grade and was observed around school with known gang members. He was eventually suspended for nonattendance and fighting, and he refused to attend the re-entrance program. He continues to be out of school and gang involved.

David had a mentor during the first year in the program and a tutor during the second year. He experienced serious family upheaval during the first two years; there were many moves due to his father's inability to pay rent and finally David moved in with his 23 year old sister who was experiencing serious problems of her own (drug and alcohol related). Much case manager effort was given to the family. David was involved with the Belief basketball team and participated in basketball teams at the local community center. He had a summer job through Summer Youth Employment each summer. He made few academic gains in the program. At the end of eighth grade David was placed in the apprenticeship program at Rainier Beach High School.

Karl's reading level improved to 3.7 while in the program. While in the program he had no mentor or tutor. He played on the Belief basketball team and was involved in basketball at the local community

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center. His father received assistance in getting a neurological examination for Karl. Karl was placed in the apprenticeship program in ninth grade. Karl made noticeable progress in his behavior at the end of eighth grade after being involved in an auto accident in which he broke his leg. In the ninth grade Karl evidenced better adjustment to school and added maturity. He enjoyed the mainstream classes, but continued to have difficulty staying on task and completing his work. He continues to act out to get attention and in so doing disrupts the teachers and other students.

Kim received a tutor and a mentor for both years she was in the program. Her reading improved to the 4.4 grade level. She was involved as a cheerleader for the Belief basketball team and was an active member of a dance group at the community center. Her mother received considerable assistance from the case manager during the program with parenting advice and assistance in general family matters. Kim had a summer job during the summer after eighth grade through Summer Youth Employment. Kim has been gang-involved since eighth grade, and was fired from her summer job after ninth grade. She was placed in the career focus program in ninth grade. She continued to complain that the Academy was not meeting her academic needs. She rarely attended her classes and was one of the few students in cohort 1 who failed to receive full credit for the ninth grade. In the tenth grade Kim has evidenced some increased maturity, but continues to have an attendance problem and is working below her potential.

Mark's reading had improved to the 3.6 grade level by the end of eighth grade. He had a tutor for the second year in the program. His family experienced serious problems, including loss of employment and an older sister running away and being placed in residential treatment. Mark had a summer job through Summer Youth Employment. Mark was involved as the manager for the Belief basketball team and was very active in his local church. Mark was placed in the apprenticeship program in ninth grade.

Raven, despite staffing, counseling, a psychological assessment, and subsequent behavioral management plans, continued to have threatening episodes from the first day in the Belief Academy. One particularly aggressive face off with a teacher culminated in Raven shoving the teacher. Raven was suspended for this action and the Academy began to look at an alternative school placement that might better meet her needs. One particular day treatment program showed particular promise for Raven because of its small class size and highly structured behavioral management system. The program also required family counseling and it was felt that Raven and her mother would both benefit from this component. Raven began in this program toward the end of 7th grade and continued throughout most of the 8th grade year. The Belief Academy case manager worked closely with the treatment staff at the day treatment program and planned for Raven's reintegration back into the Belief Academy as soon as Raven consolidated her behavioral gains. Raven made consistent progress through the program and the Belief Academy began to reintegrate her back into the regular school schedule by adding classes incrementally based upon her performance at each site. The goal was to provide a bridge between the highly structured day treatment program and the regular school setting with the long-term goal to transition full time into the school setting supported by the Academy

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over the course of her 9th grade year. Raven began with two and increased to five classes with the Belief Academy at the regular high school setting and one class at the day treatment program her first semester, then completely with the Belief Academy by second semester. Raven was given support through the counselor at the day treatment program, a case manager at a local mental health agency that provided group counseling, and extra-curricular activities. Raven also received tutorial help during her 9th grade year as well as counseling, academic monitoring, and family support by the case manager at the Belief Academy. Raven's first year of high school was basically successful. She had to drop a first period due to excessive absences/tardies, but her attendance in general remained consistent and her grades were good (second semester 3.0 G.P.A.). Behavioral difficulties were greatly reduced in frequency and severity. She received a two-day suspension on two separate occasions for threatening behavior during her freshmen year which was an improvement over her previous school year performances. Raven has been connected to the Teen Health Center at the high school and given counseling regarding pregnancy prevention and STD transmission. She chose to use an effective form of birth control and acted responsibly. Contact with her family counselor through the day treatment program was continued and with the local community agency into her sophomore year. Raven was referred to the Summer Youth Employment program which she successfully completed over two consecutive summers. She received an award by the Mayor's office for her outstanding job performance in her second year. She has continued to show positive school performance and earned a 2.88 G.P.A. for the first semester of her sophomore year. She has, however, become pregnant and is due at the end of the school year. This is generally perceived as a large obstacle, although she has a mature, realistic outlook, and is highly motivated to finish high school and go into nursing or a related field. Raven, although dealing with some major life stressors, is focused and has a determined vision for the future. Socially she has matured greatly and shows much improved relationships with staff and peers. With Belief Academy staff assistance, she has set up a good support system and has developed a good prenatal program. She is planning for the future and problem solving around becoming a mother. She has been assisted in applying for and/or participating in various programs such as a Teen Parent housing program in order to establish her own home. Raven's determination and tenacity will be greatly tested by what lies ahead.

Kathy qualified for special education services under the category of Specific Learning Disability. Kathy has received special education services since the second grade. At entrance to the Belief Academy Kathy was a quiet, shy young person who would rarely ask for help in the classroom setting. The intimate atmosphere of the Belief Academy classroom seemed to provide a safe environment for Kathy to begin experimentation with becoming more assertive. She was matched with a tutor/mentor that worked with her throughout the first year. The case manager provided individual and group counseling sessions designed to increase assertiveness and self-esteem. Kathy seemed to really enjoy the self-contained structure of the Belief Academy and showed improvements in peer relationships, assertiveness, and academic grades. In the 8th grade the two Belief Academy classes were combined into one rather large class which also increased the number of female students in the class. Kathy liked having more interaction with other girls. She became a

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cheer leader for the Belief Academy basketball team. This involvement was a real benefit toward improving Kathy's self-image and she became the most dependable performer on the squad. Kathy was connected with an in-school tutor and showed a consistent 3.0+ G.P.A. within the Belief Academy classes. Toward the end of her 8th grade year she was assisted in applying for a Summer Youth Employment Program into which she was accepted for the summer of 1993. Kathy, however, failed to complete the whole summer assignment.

Due to Kathy's diligence toward the completion of assignments and overall school performance she was recommended to the mainstream college track of the Belief Academy as she began her 9th grade year. Although she struggled her first semester in high school with the new demands, she managed a 2.5 G.P.A. Kathy was provided support by the Belief Academy in the mainstream setting by two main support systems. The first was a study strategies class taught by a special education endorsed teacher which focused upon test taking strategies, note taking, and other study skills. The second was academic support and monitoring by the case manager in conjunction with her special education and mainstream teachers. Kathy showed improved grades her second semester due in part to these interventions. She was also matched with a tutor from the University of Washington Minority Affairs Program. At the end of her freshman year she was connected with Summer Youth Employment Program and completed her job assignment satisfactorily.

In the 10th grade Kathy was scheduled for all mainstream classes except a study hall period which was monitored by the case manager. Kathy was matched with a tutor from the university toward the middle of first semester and has displayed an increasing trend in her grades. Although Kathy continues to test significantly below grade level in reading (WRAT-2 1994, reading score 4 B grade equivalent), she has maintained a 2.8 average in the high school mainstreamed academic setting.

Kathy continues to show academic improvement in all subject areas and seems to have adjusted well to the high school milieu. Although she is not currently involved in any extra-curricular activities, she has developed good friendships and seems well liked by her peers. Kathy has a strong vision toward the future and would like to become a mid-wife or a registered nurse. Her self-advocacy skills have greatly improved to where she seeks needed assistance in the classes. She has developed excellent relationships with the teachers at the school. Kathy has built a good base toward achieving her goals and seems well on her way to high school graduation.

Cohort 2 Stories

Bruce had a mentor during his first two years of middle school. His reading level decreased to 2.6 (we doubt the validity of this score), and he had good attendance during his seventh grade year. During eighth grade his behavioral problems began to diminish and his academic performance was consistently at the top of the class. Though he lived in a gang-infested housing project, he avoided gang life. He participated on the Belief basketball team in eighth grade and that of his community center. Although he had a fist fight toward

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the end of his eighth year, he went on to be selected for the academic focus program, choosing to go to Rainier Beach High School with his other classmates. It is also the school which his sister graduated from the year before he entered. Bruce is doing very well both behaviorally and academically at this point with a 2.8 average for the first quarter.

Tina was easily discouraged during her first year in the Belief Academy. She would take on many projects but give up at the first frustration. She seemed to have very low self-esteem, frequently crying during class because of a low grade or a conflict with another student. When Tina first entered the program, her desk was also messy and disorganized. She had a box next to her desk containing many personal possessions which did not fit into her desk. The staff worked with her on organizational skills and she reported that these skills have helped her to maintain organization in her room at home as well as at school. The case manager is working on finding resources for the family to help them get their house in order. Tina participated in a "girls group" conducted by the case manager which addressed peer conflicts. Many conflicts involving Tina were addressed in the group and this helped Tina realize how she contributed to conflicts. The Belief Academy teachers individualized her instruction to maximize her success. She was also matched with a tutor from the University. The tutor met with Tina weekly for two years. In addition to tutoring, Tina was occasionally included in the tutor's family events. They frequently talked on the phone and seemed to have an excellent relationship. Gradually Tina began to experience more academic success. Through a class art project, Tina developed an interest in the arts. She represented the class at a public art instruction event. She also began to play basketball and football on the Belief Academy teams. In the eighth grade she was the only girl to join the Belief Academy Community League team. These activities increased Tina's self-esteem and her ability to make friends. She also was active in a drama project, a music production, and had weekly horseback riding lessons with one of the Belief Academy teachers. One of the greatest experiences for Tina was tutoring at an elementary school. She worked closely with one teacher and a number of students and was highly effective and respected. Following this experience Tina declared that she would like to work with children. She also became active in several other out-of-school activities including an African dance group, a gospel choir, and a lip sync group. The Belief Academy staff worked with her and her family on how best to manage her schedule and time demands.

Tina continued to receive complaints about her loud voice tone. She stated that she realized her loudness bothered others and that she was willing to work on it, but was unaware when she was being loud. In 8th grade she began working with the speech therapist to help her learn how to monitor her voice. The staff developed a way to "cue" Tina when she was talking unnecessarily loudly. Tina still receives some complaints about her loudness, however, it has significantly improved.

Tina has frequent medical and dental problems. The family does not have insurance. The case manager referred the family to Washington Basic Health and to the Department of Social and Health Services for medical coupons. The family decided to not pursue these options. The case manager then referred them to various free medical and dental clinics which the family now utilizes. Tina also receives services from the

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school's Teen Health Center. Despite Tina's increased academic success, she highly disliked being in a self-contained classroom. She missed the social opportunities of a mainstream program, and she felt stigmatized by the "special education" label. Tina's goal was to be in a mainstream program in high school and to eventually go to college. She stated that it was this goal that helped her to focus on academic improvement in middle school.

She entered the pre-college option program in high school. One of the Belief Academy staff acted as her academic advisor and meets with her regularly regarding her academic progress. She was matched with a senior who tutors her. Tina seemed comfortable asking Belief Academy staff for support. She played football in the community league and basketball on the school's varsity team. She plans to try out for the school's baseball team. Her academic and athletic success seem to have made an enormous impact on her self-esteem. She seeks the assistance of the counselor at the Teen Health Center when she feels the need. She also utilizes the case manager as well as other Belief Academy staff to assist in peer conflict mediation. She still has frequent conflicts with other students and is often moody, but compared to her behaviors at the entrance to the program, she has made incredible progress.

Kevin had a mentor during his second year in the program. He was a constant challenge for staff in a self-contained setting, especially because he resented more than any other student his isolation from the general student body. He was given special concessions to involve himself in the activities of our host middle school which for the most part made an exception in his case. His reading level increased to 6.4. Because of his inability to focus, inconsistent work, and refusal to bring his behavior under control in groups, he was not recommended for the academic focus. He resented the placement proposal and initially refused to attend the career focus program at Rainier Beach High School. At present he is failing two of his core classes. He was caught shoplifting at a local grocery store during lunch period, for which he was disciplined at school and home. He now has his first infraction with the legal system, although it seems to have made him take life and school more seriously.

Jane entered the Belief Academy in the 7th grade with a long history of frequent absences and had been held back several grades. She had myriad health problems, mostly allergy and asthma related, and she missed a great deal of school due to these illnesses. In addition she seemed to be highly "accident prone." She lived in a small house with both of her parents and her two brothers. The father works for Boeing and the mother works as a newspaper distributor. The household is small and generally kept somewhat in a state of disarray. Jane's father is a heavy smoker and this exacerbates Jane's asthma problems. In addition, the dust and old food in the house add to her allergies. She has missed a fair amount of school due to small accidents such as sprained ankles. While Jane has a lot of real health issues, it also seems that she exaggerates illness and misses school at times when most other students in a similar condition would probably to attend. These absences are almost always with the approval and support of her mother. Jane's mother also frequently complains of a variety of health-related problems. When describing health problems, both Jane and her

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mother tend to be very dramatic and detailed. Jane frequently babysits. There is a boy who the family babysits for on a full-time basis. Jane is very involved in his care and occasionally the mother asks her to stay home from school to assist in the babysitting. The Belief Academy staff discussed this with the mother who agreed Jane would not miss school in order to babysit. During Jane's first year, she was frequently in fights. She was in-house suspended on a regular basis, largely due to fighting. She was in a girl's group facilitated by the case manager who also provided her with one-on-one counseling, crisis intervention and conflict mediation. Jane and her family were not open to outside counseling. Jane's parents usually defended Jane's fighting and reinforced her right to "self-defense." The Belief Academy staff had regular meetings with the family and finally successfully encouraged the family to change its rule from "fighting being justified if you are insulted" to "fighting is only justified when you are actually physically being attacked." At the start of 8th grade, Jane verbalized that her goal was to not get suspended all year. In fact she met this goal and successfully avoided several fights. The case manager continued to work with her in terms of crisis intervention and conflict mediation with her peers. In 7th grade, Jane had a tutor/mentor who worked with her on a weekly basis. They did intensive tutoring and also did social activities. They had an excellent relationship and Jane frequently called her mentor/tutor just to talk. In addition to working with the mentor, Jane also had horseback riding lessons after school with one of the Belief Academy teachers. During 8th grade, Jane's older brother dropped out of high school. The case manager helped him to enroll in a GED program and he received his GED in approximately one year. Jane's tutor/mentor was unable to continue in the 8th grade. Jane was matched with another woman who acted only as a mentor. They met once a week and also had frequent telephone contact. Throughout the family's involvement with the Belief Academy the mother has frequently sought support from various staff. She frequently has lengthy conversations with the case manager to discuss personal issues and frustrations. This has resulted in a number of referrals, including referrals to assist her in locating her biological parents who placed her for adoption. Most of these contacts have been for the mother needing support and a place to vent. She has not wanted to seek regular counseling, but seems to trust the Belief Academy staff.

The father is a Vietnam Veteran who has a long history of post traumatic stress disorder. He has a history of psychiatric hospitalization and alcoholism. He has been in sobriety for a number of years. He sees a psychiatrist regularly at the VA hospital and occasionally takes psychotropic medication. During the 7th and 8th grades the family seemed to be very loving towards, and protective of, one another. Jane speaks very highly of her parents and identified her mother as her best friend. She says that she feels very comfortable talking about intimate matters, such as birth control and sexual behavior, with her mother. Many people have described Jane as being "boy crazy" and Jane always seems to have a boyfriend. The case manager provided birth control education to the entire class and to the girl's group. Jane reports that she uses condoms regularly and knows where to obtain them. In 7th and 8th grades both parents seemed to take an active interest in Jane's progress. Both parents came to school events and parent meetings, and there was a general sense that the family "looks out for one another."

During 9th grade, many family conflicts arose. The father was laid off and the family felt that he made

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(Cohort 2 Stories continued)

no effort to find employment. The family became under tremendous financial strain and lost the health insurance. The case manager assisted them in obtaining free care through community clinics and hooked up Jane with the Teen Health Center at the school. The family was also referred to Basic Health and for food stamps. The school provided emergency assistance at Thanksgiving and Christmas. Jane's mentor was unable to continue into the ninth grade. While Jane was disappointed, she agreed to take another tutor. She was matched with a tutor who she met weekly for tutoring. They developed a comfortable relationship. One of the Belief Academy staff served as an academic advisor and met with Jane regularly to discuss her academic progress. Stress in the family increased and the father began to drink again. The family did not wish to go to any support groups related to this. Jane elected to begin a weekly anger management group at school. She also sought out the Teen Health Center's mental health counselor when she felt the need. Jane and her mother frequently sought the support of Belief Academy staff. Shortly before winter vacation, Jane ran away from home. The mother and the Belief Academy staff spent several hours with the police and called various friends. Jane finally called the case manager and agreed to stay with a friend and meet with the case manager and her mother the following day. The family was eventually referred to Family Reconciliation Services for intensive family counseling. The father moved out of the home. Jane and her mother stated that they felt much better since the father moved out. The children still visit the father who moved only 1 mile away. Jane's attendance improved slightly following her father moving out of the house. Jane frequently seeks out the nurse or various counselors while at school. The case manager meets with the other counselors in order to coordinate services and minimize the times she is called out of class. Over the three years that this family has been involved with the program, it has undergone tremendous changes and these changes have been very stressful for Jane. Despite these major upsets, Jane has made remarkable personal improvements. She has definitely improved in her attempts to make up missed work. Jane is increasingly able to voice her concerns in a constructive manner and to curb her anger.

SECTION III

How Did the Intervention Work?

Student Outcomes

■ Research Design

A contrast group of same-age (and grade) students with a similar distribution of diagnostic labels and demographic characteristics as the Belief Academy students was recruited from the entire school district. Similar data were collected on entrance to seventh grade and at exit from eighth grade for both the contrast group and the Belief Academy group (parent and student interviews, achievement data, self-concept assessment, teacher behavior ratings, and school placement data). We attempted to over-sample the contrast group, but family refusal to participate in the study made this process difficult. Additionally, all similarly labeled students in the entering seventh grade cohorts were included in a third group for comparison on academic achievement, school completion, and post-school placement.

■ Subjects

Cohort 1. Cohort 1(1991 seventh graders) consisted of 49 Belief students and a contrast group of 72 students matched as a group to the Belief students on disability, gender, and ethnicity. Additionally, data were collected on all the remaining students labeled Learning Disabled and Seriously Behaviorally Disordered (153) in the 1991 seventh grade cohort. Table 7 includes the basic demographic data on cohort 1.

Table 7. Belief Academy Cohort 1 at Entrance						
	Belief Academy		Contrast Group		Other LD & BD	
	%	<i>n</i>	%	<i>n</i>	%	<i>n</i>
DISABILITY:						
Learning Disabled:	82	40	90	65	89	137
Behavior Disordered:	18	9	10	7	11	17
GENDER:						
Male:	74	36	65	47	69	105
Female:	26	13	35	25	31	48
ETHNICITY:						
Caucasian:	33	16	31	22	36	55
African-American:	53	26	48	34	45	69
Native American:	4	2	4	3	5	7
Asian/Pacific Islander:	10	5	6	4	8	13
Hispanic:	0	0	11	8	6	9
LIVING SITUATION:						
With Both Parents:	39	19	37	27	33	50
With One Parent:	55	27	53	38	56	86
With a Guardian:	6	3	10	7	9	14
Institution:	0	0	0	0	2	3
FREE/REDUCED LUNCH						
Not Eligible:	37	18	46	33	44	68
Eligible:	63	31	54	39	56	86
	<i>mean</i>	<i>n</i>	<i>mean</i>	<i>n</i>	<i>mean</i>	<i>n</i>
ACHIEVEMENT (CAT)						
6th Grade Reading NCE Mean:	21.22	35	24.09	44	28.40	93
6th Grade Math NCE Mean:	26.20	35	20.11	45	26.96	96

Cohort 2. Cohort 2 (1992 Seventh graders) consisted of 22 Belief students and a contrast group of 30 students matched to the Belief students on disability, gender, and ethnicity. The Belief students were selected from nominations of program supervisors and all but five of the nominated students entered the program. Additionally, data were collected on all the remaining students labeled Learning Disabled and Seriously Behaviorally Disordered (185) in the 1992 seventh grade cohort. Table 8 includes the basic demographic data on cohort 2.

Table 8. Cohort 2 at Entrance						
	Belief Academy		Contrast Group		Other LD & BD	
	%	n	%	n	%	n
DISABILITY:						
Learning Disabled:	95	21	87	26	80	147
Behavior Disordered:	5	1	13	4	20	38
GENDER:						
Male:	68	15	67	20	68	125
Female:	32	7	33	10	32	60
ETHNICITY:						
Caucasian:	32	7	50	15	33	61
African-American:	59	13	47	14	38	70
Native American:	5	1	0	0	7	14
Asian/Pacific Islander:	0	0	3	1	13	24
Hispanic:	5	1	0	0	9	16
LIVING SITUATION:						
With Both Parents:	23	5	37	11	37	69
With One Parent:	59	13	53	16	52	96
With a Guardian:	18	4	10	3	8	14
Institution:	0	0	0	0	3	6
FREE/REDUCED LUNCH						
Not Eligible:	41	9	40	12	39	73
Eligible:	59	13	60	18	61	112
ACHIEVEMENT	<i>mean</i>	<i>n</i>	<i>mean</i>	<i>n</i>	<i>mean</i>	<i>n</i>
6th Grade Reading NCE Mean:	28.56	18	20.13	24	25.59	126
6th Grade Math NCE Mean:	17.78	18	22.13	24	23.79	126

■ Retention of Students

The primary aim of the project was to maintain the Belief Academy students in school throughout their middle school years. Additionally, we tried to maintain the students in the Belief Academy program.

For cohort 1 we maintained 31 of the original 49 students in the Belief Academy for the first two years. Of the 18 students who left the Belief Academy program during the first two years 2 enrolled but never attended, 3 moved out of the District, 5 requested to transfer to other programs within the District (3 of them into regular education), and 8 were placed out of the program because we were not able to address their needs in the Belief Academy.

Table 9. Reasons for Leaving the Belief Academy Cohort 1		
	Reason for Leaving	Disability Category
Year 1	No Show 2	2 LD
	Move 2	1 LD, 1 SBD
	Transfer 1	1 LD
	Placed 5	3 SBD, 2 LD
Year 2	Move 1	1 LD
	Transfer 3	3 LD
	Placed 3	2 SBD, 1 LD
Total	17	6 SBD, 11 LD

For cohort 2 we maintained 17 of the original 22 students in the Belief Academy for the first two years. Of the 5 students who left the Belief Academy program during the first two years 2 experienced transportation problems and transferred to other programs during the first semester of year 1 and 3 requested to transfer to other programs within the District at the end of year 1. There was no attrition during year 2.

Table 10. Reasons for Leaving the Belief Academy Cohort 2		
Year	Reasons for Leaving	Disability Category
Year 1	Transfer	4 LD, 1 SBD
Year 2	N/A	0

Data were collected on the school status of all original 49 Belief students at the end of eighth grade and compared to the school status of the contrast group and the other LD & BD students in cohort 1. Similar data were compiled for cohort 2.

The project was very successful in maintaining the students in school; for cohort 1, 98% of the Belief students were enrolled at the end of eighth grade and for cohort 2 the percentage was 100%. However, the Contrast and the Other groups show similar retention rates. We suspect some of the data on the Other group is inaccurate. Based on our comparison of the data for the Belief Academy and Contrast groups obtained from the computer files and verified by parent interview we believe the Other group data (obtained only from the computer files) over-represents youth in school.

Table 11. Retention of Students at End of Eighth Grade: Cohort 1						
	Belief Academy		Contrast Group		Other LD & BD	
	%	n	%	n	%	n
SCHOOL STATUS:						
In Belief Academy:	65	32	N/A		N/A	
In Special Education/Seattle:	14	7	6	45	83	129
In Regular Education/Seattle:	6	3	11	8	1	2
In School/Out of District:	6	3	17	12	12	18
Incarcerated:	0	0	4	3	0	0
Out of School:	2	1	3	2	1	2
Unknown:	6	3	3	2	3	4
TOTAL						
In School:	92	45	90	65	96	149
Out of School:	2	1	3	2	1	2
Incarcerated:	0	0	4	3	0	0
Unknown:	6	3	3	2	3	4
Retention of Students at End of Tenth Grade: Cohort 1						
SCHOOL STATUS:						
In School/Seattle:	61.2	30	58.3	42	51.3	79
Out of School:	20.4	10	18.1	13	17.5	27
Left District:	10.2	5	20.8	15	22.1	34
Deceased:	2.0	1	0.0	0	0.0	0
Unknown:	6.1	3	9.1	14	9.1	14

Table 12. Retention of Students at Entrance to Ninth Grade Cohort 2						
	Belief Academy		Contrast Group		Other LD & BD	
	%	n	%	n	%	n
SCHOOL STATUS:						
In Belief Academy:	77	17	N/A		1	1
In Special Education/Seattle:	18	4	77	23	76	142
In Regular Education/Seattle:	5	1	13	4	0	0
In School/Out of District:	0	0	7	2	16	29
Incarcerated:	0	0	0	0	0	0
Out of School:	0	0	3	1	2	3
Unknown:	0	0	0	0	6	11
TOTAL						
In School:	100	22	97	29	92	172
Out of School:	0	0	3	1	2	3
Incarcerated:	0	0	0	0	0	0
Unknown:	0	0	0	0	6	11
At End of Ninth Grade						
SCHOOL STATUS:						
In School/Seattle:	72.7	16	83.3	25	57.0	106
Out of School:	13.6	3	0	0	17.7	33
Left District:	9.1	2	13.3	4	22.6	42
Unknown:	4.5	1	3.3	1	2.7	5

■ Academic Gains

A second goal of the project was to increase the basic academic levels of the students in the Belief Academy. For cohort 1 few youth made significant gains in reading or math (Table 13).

Table 13. Cohort 1 Academics				
	6th Grade NCE Mean	8th Grade NCE Mean	Achievement Gain	Significance
Reading				
Belief Academy (n=25)	19.84	21.52	1.68	Belief differed significantly from Other LD/BD group for 8th grade mean at the .050 level Contrast differed significantly from Other LD/BD group for gain mean at the .050 level
Contrast Group (n=27)	27.56	25.89	-1.67	
Other LD & BD (n=51)	31.71	36.63	4.92	
Math				
Belief Academy (n=24)	19.84	21.52	1.68	No two groups differed significantly at the .050 level
Contrast Group (n=26)	27.56	25.89	-1.67	
Other LD & BD (n=51)	31.71	36.63	-4.92	
	6th Grade NCE Mean	8th Grade NCE Mean	10th Grade NCE Mean	Significance
Reading				
Belief Academy (n=25)	19.84	21.52	35.0 (n=17)	No significance differences in 10th grade scores
Contrast Group (n=27)	27.56	25.89	39.4 (n=22)	
Other LD & BD (n=51)	31.71	36.63	33.4 (n=47)	
Math				
Belief Academy (n=24)	19.84	21.52	28.8 (n=17)	No significance differences in 10th grade scores
Contrast Group (n=26)	27.56	25.89	33.6 (n=24)	
Other LD & BD (n=51)	31.71	36.63	30.7 (n=47)	

Similar results in academic gains were obtained for cohort 2 as with cohort 1 (Table 14).

Table 14. Cohort 2 Academics				
	6th Grade NCE Mean	8th Grade NCE Mean	Achievement Gain	Significance
Reading (CAT)	27.43	22.43	-5.00	No two groups differed significantly at the .050 level
Belief Academy (n=14)	20.33	19.89	-.444	
Contrast Group (n=18)	27.69	27.59	-.100	
Math (CAT)				Belief differed significantly from Other LD/BD group for achievement gain at .050 level
Belief Academy (n=14)	18.07	24.57	6.50	
Contrast Group (n=18)	24.94	25.11	.167	
Other LD & BD (n=72)	25.93	23.26	-2.67	
	6th Grade NCE Mean	8th Grade NCE Mean	10th Grade NCE Mean	Significance
Reading (CAT)				No significance differences in 9th grade scores
Belief Academy (n=14)	27.43	22.43	30.2 (n=13)	
Contrast Group (n=18)	20.33	19.89	34.3 (n=12)	
Other LD & BD (n=80)	27.69	27.59	36.9 (n=52)	
Math (CAT)				No significance differences in 9th grade scores
Belief Academy (n=14)	18.07	24.57	24.1 (n=11)	
Contrast Group (n=18)	24.94	25.11	31.1 (n=12)	
Other LD & BD (n=72)	25.93	23.26	27.8 (n=50)	

Participant Responses

For both cohorts students and parents in the Belief Academy were more satisfied with their teachers and school program than were the Contrast group (Tables 15 & 16).

Table 15. Cohort 1 Satisfaction at Completion of Eighth Grade			
	Completed Belief Academy (N=32)	Left Belief Academy (N=17)	Contrast Group (N=72)
STUDENT	n=32	n=9	n=64
With Teachers:	1.09	1.77	2.19
With School Otherwise:	1.28	2.11	2.13
PARENT:	n=30	n=9	n=57
With School	1.20	2.55	2.00
Scale: mean scored on 1-4 scale, 1 = very satisfied and 4 = not very satisfied			

Table 16. Cohort 2 Satisfaction at Completion of Eighth Grade			
	Completed Belief Academy (N=17)	Left Belief Academy (N=3)	Contrast Group (N=30)
STUDENT	n=16	n=3	n=23
With Teachers:	1.75	2.67	1.96
With School Otherwise:	1.69	2.33	2.13
PARENT:	n=15	n=2	n=19
With School	1.47	2.50	1.94
Scale: mean scored on 1-4 scale, 1 = very satisfied and 4 = not very satisfied			

SECTION IV
What Does It All Mean?**Discussion of Intervention Efficacy**

We have maintained excellent school attendance by the Belief Academy students through 7th and 8th grades. We have provided tutors or mentors to over 40 youth. We have afforded the students in the Belief Academy a remarkable range of activities and experiences, assisting at least 40 of them to find appropriate community-based recreational and social organizations and over 45 to become formally involved with school organizations. We have provided case management services to at least 47 families, many of whom were experiencing a serious family crisis. We have helped 33 youth to be placed in 52 summer jobs. We have placed a reasonable number of the students into the pre-college high school curriculum in fully included classes. We have developed and implemented an alternative high school program for those with low reading skills. The students and parents in both cohorts reported greater satisfaction with school than the Contrast group students and parents. The Belief students in cohort 2 made significantly higher gains in math than the Contrast group.

Despite all of these achievements we don't believe the Belief Academy, as a discrete program model, was a success. Despite incredible effort, at times heroic, there is little we can strongly recommend to other schools.

We believe that the Belief Academy provided very good services to a number of students. We are totally convinced that all of the students served in the Belief Academy received services at least equal to those provided by other special education programs in the District. Nevertheless, we were unsuccessful with a large number of students. Many presented problems so severe that our staff and the extra resources we could bring to bear on the problems were insufficient to enable us to maintain these students in our program. These students were placed in other special education programs in the District. With the exception of Raven who was successfully treated in an intensive day program, the others are not doing well.

Other students chose to leave our program. Most chose to enter a more mainstreamed program, but several left with bad feelings about the Belief Academy and our services. We have found it extremely difficult to serve students with acting out behaviors alongside students with learning problems without major acting out problems. Some of the students who left our program did so because of the acting out of other students or the classroom management system that was in place because of acting out students. We suspect this is a difficult problem for all classrooms, but it raises the issue of inclusion of youth with acting out behaviors.

We were unsuccessful with the students labeled as Seriously Behaviorally Disordered (SBD). Of the 10 SBD students enrolled in the two cohorts we have maintained 3 (30%) in the program for

the full two years. One of these students moved to another district, one requested to transfer to another program, and 6 were removed from the Belief Academy because their behavior problems exceeded our resources (one of these, Raven, returned to the Belief Academy, and we count her as one of our successes). Thus we were successful, during the first two years, with only 30% of our youth labeled as SBD. As an aside, of the three youth labeled as SBD two continue to do well in the high school programs (one is in the pre-college program and one in the apprenticeship program). The other student, enrolled in the pre-college program, has been expelled from school.

For youth labeled as Learning Disabled we have maintained 45 of the original 61 (86%). Of the 16 youth with learning disabilities who left our program during the first two years, 3 were placed in other programs due to their serious behavior problems, 9 requested to transfer to other programs because they were not satisfied with the Belief Academy, and 4 moved to other districts.

We were unable to find methods that were successful in teaching students with low reading scores how to read more successfully. This failure, on our part, continues to haunt us and will impede the future success of these students. Of the 48 youth who completed two years of the Belief Academy only 14 (29%) were reading above the sixth grade level. Of these, nine were reading above the sixth grade level **when they entered the Belief Academy in the seventh grade**. Thus we were successful in achieving our goal of improving reading levels to the sixth grade level for five of the 39 students with low reading scores (13%). As an aside, we believe that a number of students with low reading scores have higher functional reading skills than is indicated by their test scores. We base this belief on the fact that a number of these students are performing well in regular high school classes with minimal adaptation.

Our planned interventions included five major components: Stability of program over time, intensive academic and behavioral interventions in a self-contained setting during the seventh and eighth grades, family case management, social support for the students, and program options at the high school level. We were moderately successful in providing these interventions and our opinion of the effectiveness of these interventions has been altered by our experiences.

Stability of program is, we believe, an important program intervention. Primarily this refers to consistency of staff and intervention procedures over several years and the confidence, of the youth and their families, that the program will continue. We were only moderately successful in delivering this aspect of our intervention. We had far more staff turn over than desirable and the program officially terminated at the end of the project funding (the end of tenth grade for Cohort 1 and the end of ninth grade for Cohort 2). However, we are more convinced than ever that consistency of staff and intervention is of primary importance. The staff were able to form deep, positive long term relationships with many of the students and their families as a result of the four year commitment. Both the staff and the students learned to trust and like each other and this was due, in large measure, to the number of years spent together. The termination of the Belief Academy was a

sad time for staff, youth, and families. Even though many students were very capable of being successful in general education with minimal support, the presence of familiar staff in their school environment was an important aspect of their success. The large majority of these youth experience chronic problems that require long term ongoing support from trusted and familiar staff. Future intervention programs will be well served if they keep this principle in mind when developing programs.

Intensive academic and behavioral interventions in a self-contained setting was not a successful component of this intervention. We have mixed feelings about attempting a similar intervention in the future. Our lack of success in raising the academic achievement level of the students was extremely depressing. With hind-sight we should have implemented a more systematic reading and math program, probably a direct instruction program that focused on more instructional time in reading and math. We would, in the future, separate the more severe anti-social students from those with less behavioral problems so as to address more intensely the academic needs of the less acting out youth. This strategy, however calls into question the practice of congregating acting out youth in one setting. Our inability to address the acting out problems in a timely and effective manner contributed to the reduced academic instruction time. We did find the self contained program assisted in developing positive affiliation between staff and students. The feeling of "family" was achieved for the most part and this was undoubtedly due to the self contained nature of our program. On the other hand, the students disliked (extremely) the self contained setting, wanting to be with their peers in the typical Middle School change of classes. We are at a loss as to what to recommend to future programs. Perhaps our experiences will provide some clues for more astute observers than we.

Family case management was a crucial aspect of our program. Many of the families required assistance in meeting their basic needs and in providing adequate parenting support for their children. Our surprise was in the lack of available family support services in the community. There is no question that there are many stressors on families that interfere with student learning which are not typically addressed by school programs. Poverty causes many of these (lack of health care, high mobility, lack of resources for enrichment activities, living in neighborhoods that are prone to violence). These factors have a direct impact on the ability of the student to take advantage of the schooling opportunity and tend to be out of reach of typical school based programs. Case management services for these families is absolutely crucial for any serious intervention program. Other families have interpersonal problems (drug and alcohol abuse, family violence, seriously maladaptive interaction patterns). These families need services from highly specialized treatment programs that exceed the capability of school programs. Case management services can connect families in need to such services, if these services exist. Our experience was that of a lack of such services for families that did not have the financial resources to purchase them. Clearly not all

families need such services, but those that do have an extremely difficult time finding appropriate services. This lack of services decreases the probability of the youth from these families being successful in school. Other families needed assistance in helping their child take advantage of school (assistance with home work, monitoring school attendance and social relationships), interacting with school personnel, and general parenting. School programs should be able to offer this assistance but often fail to do so. A good case management program should address these needs. Our experience was less than positive with the effectiveness of the case management services primarily due to a lack of services in the community. Schools should, we believe, take the lead in advocating for more such services. Future intervention programs should strongly consider including a case management component.

Social support to students was a successful aspect of our program. We were able to deliver many additional social support activities to the students and these supports added considerably to the student's success in school. Tutors were especially effective in several cases as were mentors. We had considerable difficulty in recruiting volunteers to be tutors and mentors but in the several cases in which we were successful these relationships proved to be invaluable. Future programs should strongly consider paid tutors and mentors. We were also successful in providing a large number of enrichment activities for our students. Many of our students had no easy access to clubs, organizations, or other social groups that typically provide enrichment and quality to our lives. Our basketball team, hydro-plane club, multiple group outings, rope courses, horse back riding opportunities, and group social events filled an important gap in the lives of many of our students and their families. Our summer job program and job shadowing services opened up many new occupational paths for our students. Future intervention programs need to seriously address the issue of additional social support activities for the youth.

Multiple program options in high school are crucial for the long term success of these students. Many are not capable of going on to college or other post secondary education and the typical high school program has little to offer these students. Our particular attempt to address this issue was less than successful but we maintain our firm belief in the need for multiple program options at the high school level for all students.

We continue to believe that these students--all of them--are salvageable. We are less sure we know the solution to the riddles of how to support them.

Reflections

■ Insights

The Student Needs Were Greater Than We Anticipated. Overall we were overwhelmed with the needs of the students. They were much greater than we anticipated and greater than the resources we could bring to bear on them. For example: Noah received good instruction; he had a tutor and an ethnically matched mentor, was enrolled in a good gang prevention program, and received specialized individual tutoring from a private tutoring service; the family received counseling and support services. Despite all of this, Noah joined a gang and frequently engages in criminal activities. Although he remained in the Belief Academy through the beginning of ninth grade he then dropped out of school and remains heavily influenced by the gang culture. His ties and obligations to his gang-involved peers outweigh (at times) those to his biological family, let alone to the Belief Academy.

Staff Issues Were More Difficult Than We Anticipated. First, the principal investigator (the primary district supporter of the program) resigned from the District and moved to another state at the end of the planning year. This created a void that was never filled in terms of insuring ongoing, daily support with district procedures. Second, three of the four teachers originally hired for the Academy and who had received three weeks of training resigned by the end of the first week of school. This forced us to replace them with untrained staff from a limited pool of applicants and with minimal time to search for additional staff. One of the replacement teachers turned out to be a star. The other two were less than satisfactory and although they continued for one year they were not capable of providing even a minimally appropriate program for our students (although, to be fair, we were unable to provide these teachers with the training and support that might have allowed them to be successful). Thus, during the first year one of the classrooms of cohort 1 did not receive the instructional components of the Belief Academy.

Third, the service delivery system of the Belief Academy demands close team work among the staff. We have yet to realize a totally integrated well functioning team. We have had teams that functioned well in part, centered around the personality of a dominant team member. We also have had dysfunction occur with respect to other parts of teams that came in conflict with the dominant individuals whose teaming was limited to their own terms. The differences in the roles of teacher, teaching assistant, and case manager working within the traditional teacher domain of the classroom necessitated clear definitions and communication. This clarity was not successfully provided by the project administrators and revolved around the idiosyncrasies of the teachers who were given, particularly at the middle school level, a wide range of latitude as to how to organize the delivery of instruction.

At times there was considerable staff turmoil and ill feelings toward one another and the administrator was deemed responsible for allowing a particular staff member too much authority. Outside mediation was used at one time, and the program coordinator acted as mediator on several occasions. Generally, mediation and other attempts at resolving problems were only temporarily successful, with ill feelings remaining between staff members. Now that we team in a broader sense with the general education teachers at the high school that hosts our career focus program, internal discord is potentially devastating to our efforts. Facilitating staff mediation and basic communication has been an ongoing and unanticipated problem. A constant difficulty has been locating, training, and maintaining staff with appropriate experience, ethnic sensitivity, and teaming skills, which has undermined the effectiveness of this program.

There Have Been Policies and Practices That Have Caused Considerable Difficulties for the Academy. The main difficulty encountered has been the complexity of the district bureaucracy in hiring staff, adjusting the budget, addressing staff needs, and acquiring promised district resources. The director of the Academy was not a district employee prior to being hired for this position and the principal investigator (the special education director) was expected to guide the program through the bureaucracy. When the principal investigator left the district, the Academy lost its guide and as a result the director, with minimal district experience, was required to **navigate** the system. This has resulted in an incredible burden for the director and the loss of promised district resources. Due to this factor and the recurrent budget crises (there is a budget crisis every year in an urban district with declining student population), the Academy did not receive the fiscal support promised in the original proposal. The director was also distracted from Academy-centered activities by being forced to address issues originally considered to be within the workscope of the principal investigator.

The Curriculum Was More Difficult to Implement Than We Anticipated. When experienced teachers (who have been successful in previous classroom settings) are hired, it is difficult to get them to change their instructional procedures (even when the procedures are not working well). There is little evidence that the training the Academy provided the staff had an effect in the classroom. Thus we were unable to develop a program model of curriculum and instructional practices that we could identify as “the Belief Academy model.”

Coordinating Community Resources Was More Difficult Than We Anticipated. We were not successful in case managing resources for families in need. There simply are too few services for families, especially those families without insurance coverage that pays for such services. We also experienced difficulties in recruiting volunteers to be tutors and mentors. Future projects should consider paying individuals to be tutors and mentors. We were also unable to access community organizations for extra funding (e.g., the Outward Bound program). Our overall plans to organize community resources for our students and families were largely unfulfilled.

■ What We Know

The Belief Academy Did Not Work for Students Labeled SBD. The students placed out of Belief exhibited serious acting out (sexual assault on other students, verbal and physical abuse of other students and staff, gang affiliation, drug dealing on campus) that exceeded the resources of the Belief Academy. Although these students are currently being served by other special education programs within the Seattle Schools, all available evidence suggests that most of these students are not being adequately served in the alternative programs.

Thus of the original 10 students labeled as SBD, only three remain in the Belief Academy. In general, the Belief Academy staff have no major recommendations for this group of students other than to recommend the bringing together of multiple resources from mental health, corrections, and the public schools to develop small, intensive, 24 hour, long-term intervention programs. These students are the lost souls of our society. Everyone who personally knows them believes they are waiting to kill or be killed and that there is little hope to save them. It consumes one's soul to think of them.

Few Belief Students Made Academic Gains Sufficient to be Successful in the Ninth Grade. We are very dismayed at the lack of academic progress made by the students in the Belief Academy. While the program did not provide the intensive and accelerated remediation we had hoped to provide, there was considerable effort expended to increase the reading levels of the students. We have no proposals on how to increase their basic skill levels and believe they will probably have academic skill deficits for their entire lives. If remediation efforts are to be attempted in the future we are sure that the intervention will need to be very powerful and intensive if there is to be any hope of success. We continue to believe that these students can be successful if they receive support and come to believe in themselves.

The Students and Their Parents Did Not Like the Separateness of the Belief Academy but They Did Like the Consistency and "Family Like" Atmosphere of the Program. This presents a dilemma for program developers as it is difficult to create a consistent program without it being self-contained. However, the formal satisfaction ratings indicated that the students and parents rated their Belief Academy experiences higher than the Contrast group. The issue of self-contained program versus included program remains difficult to understand from a program development point of view.

There Are Some Students (and Their Families) Who Clearly Need Intensive Family and Individual Counseling Which Either Are Not Available in the Community or Are Unaffordable. For example, there is a need for African American counselors, and for counselors who are sensitive to cultural differences. Drug and alcohol treatment programs have few openings for public funded clients. Providing case management services to these families can only be as effective as there are services to manage.

■ Speculations

Many of the Students Remain at Serious Risk For Not Completing High School. As we follow the students into the ninth grade and beyond we have recorded a number of students who have dropped out of school or have become incarcerated. We believe the data on school dropouts at the beginning of ninth grade will severely underestimate the number of students who will fail to graduate.

Maintaining Students With Low Reading Abilities in the Typical High School Pre-College Curriculum Will Not Prepare the Students for Adult Life. We maintain our original assertion that the typical high school curriculum is inappropriate for low performing students (students with reading levels below the sixth grade).

The Availability of Guns and Drugs to Youth is a Major Factor in Many of the Issues Faced by Our Students. Until guns and drugs are no longer part of street life there will be the ongoing problem of gangs and students being lured away from school and the values of the greater society.

■ What We Don't Know and Need to Know

- **How to provide reading instruction to low performing readers in a manner that will increase their reading skills and maintain them in contact with their age peers.**
- **How to organize community-based resources to provide support to families and children in need in a timely manner.**
- **How to address issues that relate to family dysfunctionality without removing the children from the home.**
- **How to access out of home placements for children who need such placements.**
- **How to access residential treatment services for severely emotionally disturbed youth.**
- **How to develop and implement curriculum options at the secondary level that are effective and socially valued.**

Recommendations for Administrators

1. Implement an ongoing data tracking system that will provide accurate information on the status of all special education students in Middle and High School. Use these data to evaluate the effectiveness of current programs and to address students for whom the current programs are not working. The issue is that of determining who should collect and enter such data and who should monitor the data.
2. Develop interagency support services that schools can call on to assist them in meeting the needs of youth and their families that exceed the resources of the school programs. Examples would include: diagnostic psychiatric services that include the potential for medication; individual and family counseling services; and residential treatment for drug/alcohol and mental health problems. There must be a system to match families in need of such services to the appropriate services.
3. Address the issue of youth with low reading ability in the secondary schools. Either implement serious remedial reading programs and/or develop alternative high school curricula.
4. Experiment with alternative programs for youth with serious acting out behaviors. Develop a continuum of services to insure that there are program options regardless of the severity of the behaviors. These options will need to include residential programs.

Recommendations for Further Research

Future priorities should include a longer time line (6-10 years), more resources, and a smaller number of students. The first priority of this research is to find some program elements that work and then try to replicate the program. As of now there are few firm answers to the riddle of how to assist youth to complete high school.

Future attempts should begin work with students at a younger age and provide ongoing resources to graduation. A possible program intervention might start at the end of fifth grade (beginning of Middle School). The Middle School program would focus on a self-contained program with an academic emphasis and reasonable socialization opportunities with non-disabled students (special joint projects, assemblies, lunch). A team of healthy, inspiring, and competent teachers would work with the group and there would be intensive parental support in the classrooms. There should be a three week residential camp experience at the end of sixth and eighth grades. Certificates of achievement and vouchers for monetary rewards would be used throughout the program and awarded at the end of eighth grade. Healthy, inspiring, and competent teachers need to be in place through graduation.

Check & Connect Partnership for School Success

*Dropout prevention and intervention project
targeting middle school youth with learning
disabilities and emotional/behavioral
disorders at risk for dropping out of school.*

Project Evaluation 1990 – 1995

University of Minnesota
Minneapolis Public Schools

By Mary Sinclair, Martha Thurlow,
Sandra Christenson, and David Evelo

December, 1995



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and Intervention Series*

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- School district personnel who provided administrative support, facilitating logistical requirements and providing information needed to assess the effectiveness of the project and to prepare this case study.
- Community members and organizations who made their programs and services more welcoming for youth with disabilities, who helped with transportation, and to those who served on the project planning committee, along with teachers, parents, and students.
- Project staff whose dedication, creativity, and persistence is evidenced in the accomplishments of the Check and Connect Project - from the success experienced by the students and satisfaction of the parents to the depth and scope of data gathered, information disseminated, and related materials under development.

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SECTION I**Who Are the Students? How Are They at Risk?**

This first section describes the students who were involved in the Check and Connect/Partnership for School Success dropout prevention and intervention project and how they were at risk for dropping out of school. It should be noted first that participants in the project were defined to a large extent by the requirements of the original request for proposals (RFP), briefly outlined here and presented in greater detail throughout the project evaluation. This RFP was intended to establish dropout prevention and intervention projects for students with learning and emotional/behavioral disabilities in urban middle schools. The RFP specified that projects would incorporate two cohorts of students to receive at least two years of interventions, and would refine interventions for the second cohort based on findings from the first cohort of students. The first year (1990-1991) and last year (1994-1995) activities of the project were to be planning (Year 1) and data analysis (Year 5).

The Check and Connect/Partnership for School Success project adopted a design that involved all students with learning and emotional/behavioral disabilities in two middle schools (the schools that served as district sites for students with severe learning and emotional/behavioral disabilities). A comparison group of students with learning and emotional/behavioral disabilities was identified in a third district middle school. A comparison group of students without disabilities was also identified, although this group was not part of funded activities. Finally, another comparison group was defined due to the inappropriate use of students in a typical middle school special education program as a comparison for those students with severe learning and emotional/behavioral disabilities who were served in separate programs. For those students, a historical comparison group was used. This group consisted of students who had been in the schools' special programs before the project started (and thus were at least two years older than similar students in the treatment group when intervention began).

With these parameters in mind, it is now possible to further describe the students. This description begins with an overview of the structural demographic characteristics of the students' community and school district, followed by specific information about the students and families who participated in the project. Section I of this project evaluation concludes with a description of how students' background characteristics and experiences interact with the spheres of home and school to place youth at high risk for dropping out.

Structural Characteristics of the Community and School District

Structural characteristics refer to demographic descriptors, such as socioeconomic status, gender, and size of population. In brief, the participants of the Check and Connect/Partnership for

School Success project resided in a North Central city of moderate size and attended one of the 100 largest school districts in the country.

■ Community

The population of the metropolitan area in which the school district is located includes more than 2 million people in an area that is close to 1500 square miles. Approximately 368,830 people reside within the boundaries of the school district, which is geographically divided into 12 communities that span across approximately 80 neighborhoods. Eight regional parks that offer recreational and leisure programs for youth and adults are located within the city. The public transportation system consists of bus and taxi services. The students involved in the project reside in neighborhoods throughout the city.

The majority of the city's population is of European American background; European Americans represent 77.9% of the population, African Americans 12.9%, Asian Americans 4.2%, Native Americans 3.3%, and Hispanic Americans and other ethnic backgrounds 1.7%. In recent years, the percentage of European Americans has decreased while the percentage of all other groups has increased. The ethnic/racial composition of youth between 5 and 21 years of age who live in the city is similar to the population at large (i.e., 62% European American, 20% African American, 7% Asian American, 6% Native American, 3% Hispanic/Latino/Chicano American). The 1989 median household income in the city was \$25,324; 19% of the households had incomes of less than \$10,000 per year. Approximately 7% of Minneapolis married couples with children under the age of 18 are living in poverty and 50% of single parents (mostly female headed families) with children under the age of 18 are living in poverty. The crime rate in the city was fairly stable, with a total of 81,604 offenses and 26,430 arrests. This information is from the 1990 Census of Population and Housing.

■ School District

The school district serves more than 42,000 students in 11 early childhood programs, 59 elementary schools, 7 middle schools, 7 high schools, and 9 alternative secondary programs. District-wide student demographics of youth in grades K-12 for the three years of project intervention (1991-1994) are presented in Table 1. The district employs 2,600 certified teachers, half of whom have a master's degree. About 17% of the district's instructional staff, including teachers, principals, counselors, resource teachers, and instructional aids, are persons of color.

Table 1. District Demographics for Project Intervention Years

District Demographics	1991-92		1992-1993		1993-1994	
	%	Freq.	%	Freq.	%	Freq.
Total Enrollment	100	42,189	100	43,313	100	44,405
Special Education Enrollment	12	5,040	12	5,351	13	5,691
Learning Disability	6	2,558	6	2,760	6	2,759
Emotional/Behavioral Disability	2	729	2	688	2	785
SES (lunch status)						
Eligible	52	21,939	54	23,216	55	24,318
Not eligible	48	20,250	46	20,097	45	20,087
Racial Composition						
European American	46	19,086	43	18,610	41	17,901
African American	34	14,088	35	15,151	37	16,247
Asian American	10	4,402	11	4,738	12	5,184
Native American	8	3,162	8	3,166	7	3,180
Hispanic American	2	985	3	1,196	3	1,420

Information Source: District Office, Research and Development Division, 1993. Discrepancies are due to varying times of year when data were gathered (e.g., "racial composition" in October; "total enrollment" in June).

The Middle Schools. Students are assigned to one of the seven middle schools by attendance area, but most do not attend schools within walking distance. Whether one attends the neighborhood school is influenced by desegregation practices, magnet programs, open enrollment, and the location of special education services.

In 1989, the superintendent initiated a restructuring effort to transform the early secondary schools, which averaged about 1,000 students per building, from a junior high model to a middle school model. The restructuring effort was intended to create schools that were better able to address students' developmental needs. When the Partnership project began intervening, all three schools involved in the project had reorganized into teams, began admitting 6th graders, and instituted advisory periods and exploratory classes. Each team included approximately 120 students grouped heterogeneously, four subject area teachers, and one special education teacher. Two of the schools experimented with mixed grade level teams. For the most part, students took academic courses with their team teachers and took elective courses with "off-team" teachers. Team teachers shared the same prep period and classes were scheduled in a manner that allowed team teachers to manipulate the length of class periods around the goals of the curriculum unit.

Special Education Services. The school district serves students with mild to moderate disabilities primarily in general education classes and resource rooms through non-categorical programs (referred to as level II and III services). Level II refers to indirect services in the form of consultation to the general education teachers and monitoring of status. Level III refers to direct service from a special education teacher for less than half the day. Students with disabilities were assigned to the building teams by school staff, averaging 15 youth with Individualized Educational Programs (IEP) for level II and III services per team. The case manager for these students was the

team's special education teacher. Direct services were provided either in the classroom or in a resource room; practices varied from team to team.

Students with more challenging learning or emotional/behavioral disabilities were taught in separate classes (referred to as level IV services) or in separate buildings (referred to as level V services). Middle school students receiving level IV services attended either the SIMS program for youth with challenging learning disabilities, located at one of the project intervention schools, or the SPAN program for youth with emotional/behavioral disorders, located at the other intervention school. The Systematic Instructional Management Strategies (SIMS) program was developed in the mid 1970s and has a data-based focus. Teachers collect academic and behavioral data on a frequent basis and use the data to make decisions about the programs of individual students. Special reading and written language curricula were developed for the program, with the written language component complementing the phonetic-based approach to teaching basic reading skills. The Special Programs for Adolescent Needs (SPAN) program was directed toward students' social and academic needs. The major goals of the SPAN program included the following: increasing student growth in social skills; increasing students' academic skills in reading, math, and written expression; informing parents or guardians of student progress; increasing students' school attendance; and decreasing the frequency of aversive consequences. Program intervention strategies included the use of behavior modification, life space intervention, skills streaming, time out, and mainstreaming. The students and teachers of the level IV programs comprised their own building teams.

District eligibility for a learning disability is based on three specific criteria: (a) the learner must demonstrate severe under achievement in response to typical classroom instruction, (b) the learner must demonstrate a severe discrepancy between general intellectual ability and achievement, and (c) the assessment team must agree that sufficient data have been collected to verify student eligibility. Information about each eligibility item must be sought from the parent and included in the assessment data. Students identified with an emotional or behavioral disorder must meet the following four district criteria: (a) They must exhibit an established pattern of developmentally inappropriate behavior, characterized by severely aggressive or impulsive behaviors, withdrawn or anxious behaviors, or severely disordered thought processes; (b) the condition must adversely affect educational performance; (c) the combined results of prior documented interventions and the assessment data must establish significant impairments; and (d) the assessment team must agree that sufficient data have been collected to verify student eligibility. A functional assessment procedure is used to determine eligibility for both disability categories, based on at least one ability measure, one norm-referenced achievement measure, one criterion-referenced achievement measure, one progress monitoring procedure, one adaptive behavior measure, and one systematic observation procedure.

Project Participants

Student participants involved in the Check and Connect/Partnership for School Success dropout prevention project were in either a treatment or a comparison group. As noted previously, the project involved students with learning disabilities and emotional/behavioral disabilities from three of seven middle schools in the large, urban North Central school district. Dropout prevention interventions were administered in two of the three middle schools for two cohorts of students during their 7th and 8th grade years. The third school served as a comparison site.

■ Building Descriptions and Selection Procedures

The middle school that offered the SIMS level IV program for youth with learning disabilities and the school that offered the SPAN level IV program for youth with emotional/behavioral disabilities were selected as the intervention sites due to their large population of youth with learning and emotional/behavioral disabilities. The comparison school was selected by a district administrator from the remaining middle schools for its similar characteristics to the intervention sites. Student-teacher ratios averaged 35 students to one teacher. Enrollments at each school were above the recommended building capacity by several hundred students. Of the general education population across the three buildings, students were absent from school an average of 23 days per year (i.e., including both unexcused and excused absences) and were suspended from school an average of 5 days per year. These figures are slightly higher for the special education students across the three buildings: averaging for the year 37 days of absences and 6 days of suspension. (Note: This information is based on the 1992-93 school year, which is the same year used for data presented in Table 2.)

Resource staff in the buildings, excluding the level IV programs, averaged two assistant principals, one school counselor, one social worker, one nurse, and two hall monitors. Each of the level IV programs had their own social worker and part-time coordinator. Staff turnover in the project sites was high. The principal in each of the three middle schools changed once during the project periods and the coordinators of the level IV programs also changed (once in the SPAN program and four times in the SIMS program). Two times during the project (in years 1 and 4), one of the intervention schools was identified as a potential site to accommodate the growing demand for more elementary school space. If this would have occurred, the staff and students in those schools would have been reassigned to schools throughout the district.

Significant differences were found among the three schools in terms of certain demographic characteristics of the total student populations. The differences that exist across lunch status, racial composition, adult with whom the youth resides, and primary home language can be attributed mostly to the level IV programs at the treatment schools and a Limited English Proficiency (LEP) program at the comparison school (see Table 2). These school differences are **NOT** reflected in the special education treatment and comparison groups, as will be discussed later.

Demographic Characteristics	Treatment School (SPAN* program)		Treatment School (SIMS** program)		Comparison School		Test of Significance	
	%	Freq.	%	Freq.	%	Freq.	P	χ^2 (df)
Total Enrollment	100	1216	100	1004	100	980	.01	9.8 (2)
Special Education Enrollment	22	271	21	212	17	167		
Gender								
Female	47	565	48	486	48	469		NS
Male	53	651	52	518	52	511		
SES (lunch status)							.00	18.5 (2)
Eligible	64	717	55	493	63	535		
Not Eligible	36	403	45	402	37	318		
Adult with whom Child Resides							.00	31.0 (4)
Two parents	29	350	37	371	39	380		
Mother	53	644	45	445	45	442		
Other	18	218	18	182	16	156		
Racial/Ethnic Composition							.00	174.8 (8)
European American	42	510	39	390	35	338		
African American	47	567	45	448	35	346		
Asian American	4	48	10	104	20	197		
Native American	5	63	4	38	5	49		
Hispanic American	2	28	2	24	5	50		
Primary Home Language							.00	185.7 (2)
English	97	1165	91	906	79	729		
Non-English	3	40	9	87	21	197		

Information Source: District database, 1992-93 school year.
 * SPAN - level IV special education program for students with severe emotional/behavioral disabilities.
 ** SIMS - level IV special education program for students with severe learning disabilities.

Baseline data on a variety of school context variables (e.g., school climate, school effectiveness, home-school relations) were collected during the first year of the project (1990-1991) from a random selection of 1,507 students, 130 teachers, and 75 parents of youth with and without disabilities (see Table 3). Student surveys were read aloud by the teachers or project staff. Youth with disabilities were administered the surveys individually and in small groups. While some differences between schools did exist across demographic characteristics, no differences among schools were found in terms of these baseline measures of attitudes and behaviors regarding education and home-school collaboration, with the exception of two subscales. The teachers at the treatment school with the SPAN program expressed higher levels of adaptability and flexibility among the teams ($M_{SPAN} = 1.8$) than teachers at the other schools ($M_{OtherSch} \geq 2.1$, $p = .031$) and the students at the treatment school with the SPAN program found more of their teachers to be supportive ($M_{SPAN} = 1.6$) compared to the other schools ($M_{OtherSch} \geq 1.7$, $p = .000$). This may be attributed to the fact that this school was one year ahead of the other schools in their restructuring efforts (see Table 3 for rating scales).

Overall, the responses of students, teachers, and parents were generally positive. The Secondary Student Opinion Survey¹ was originally developed by the school district based on items

from a number of existing instruments and modified by University researchers for project purposes.

Instrument-Respondent • Constructs	Treatment School SPAN* program		Treatment School SIMS** program		Comparison School		Tests of Significance	
	Mean	SD	Mean	SD	Mean	SD	P	F (df)
Secondary Opinion Survey-Student	N=516		N=450		N=541			
Positive attitudes toward school ♣	2.2	0.5	2.2	0.5	2.2	0.5	NS	
# of supportive teachers ♣	1.6	0.5	1.7	0.5	1.8	0.5	.00	20.02(2,1532)
# of supportive family members ♣	1.1	0.4	1.2	0.5	1.2	0.5	NS	
Positive self-concept as learner ♣	1.8	0.4	1.8	0.5	1.8	0.5	NS	
Relevant curriculum ♣	2.2	0.6	2.1	0.6	2.2	0.6	NS	
Frequency of family monitoring ♦	2.1	0.7	2.1	0.8	2.1	0.8	NS	
School Effectiveness&Climate-Teacher	N=49		N=49		N=32			
School effectiveness ♣	2.1	0.3	2.2	0.3	2.1	0.4	NS	
Positive school climate ♣	2.2	0.4	2.2	0.3	2.2	0.3	NS	
Presence of parent involvement ♣	2.2	0.5	2.2	0.6	2.2	0.5	NS	
Teaming Climate-Teacher	N=32		N=30		N=18			
Frequency of cohesion-rapport ♥	1.6	0.7	1.8	0.6	1.9	0.8	NS	
Frequency of adaptability ♥	1.8	0.6	2.2	0.5	2.1	0.8	.03	3.65(2,79)
Home-School Partnership-Teacher	N=41		N=30		N=29			
Positive attitudes toward parents ♣	2.0	0.3	2.0	0.3	2.1	0.4	NS	
Frequency of communication ♦	2.9	0.5	2.9	0.4	3.0	0.3	NS	
Presence of trust ♣	2.6	0.4	2.6	0.4	2.7	0.5	NS	
Home-School Partnership-Parent	N=23		N=29		N=23			
Positive attitudes toward teachers ♣	1.8	0.3	1.7	0.4	1.8	0.3	NS	
Frequency of communication ♦	2.9	0.5	2.9	0.6	3.0	0.5	NS	
Presence of trust ♣	2.0	0.6	2.1	0.4	2.3	0.6	NS	
Rating scales: ♣ 1=strongly agree, 2=agree, 3=disagree, 4=strongly disagree; statements worded positively. ♦ 1=almost always, 2=often, 3=sometimes, 4=almost never; ♥ 1=very often, 2=often, 3=sometimes, 4=occasionally, 5=almost never; ♠ 1=most, 2=some, 3=one, 4=none.								
* SPAN - level IV special education program for students with severe emotional/behavioral disabilities. ** SIMS - level IV special education program for students with severe learning disabilities.								

Student attitudes toward school and about themselves were generally positive, ranging from 1.6 to 2.2, where 2 = agree (see Table 3 for rating scale). Teacher attitudes toward school and their ability to work effectively in teams were moderately positive, as measured by the School Effectiveness and Climate questionnaire.² Beliefs about the school climate and parent involvement in particular ranged from 2.1 to 2.4, using the same four-point Likert agreement scale. The degree of cohesion and adaptability among each team of teachers, as measured by the Teaming Climate questionnaire, suggests that group interactions were generally adequate, ranging from 1.6 to 2.2, where 2 = often (see Table 3 for rating scale).³

The Home-School Partnership Survey⁴ was developed to measure parent and teacher attitudes and actual behavior regarding home-school collaboration. No differences among the three school sites were found. However, the measures of trust between home and school were somewhat different for parents and teachers, with parents assigning more positive ratings to the presence of trust and degree of comfort level (M_{parents} = 2.0 to 2.3) than did teachers (M_{teachers} = 2.6 to 2.7), using a

four-point Likert scale where 2 = agree and 3 = disagree). Responses indicated that **attitudes** toward home-school collaboration were positive among both parents and teachers, in which the mean responses varied around 2.0, using a four-point Likert scale where 2 = agree. Ratings on **actual behavior** for frequency of communication between home and school were lower, with the frequency of two-way communication rated by parents and teachers between 2.9 to 3.0, where 3 = sometimes.

Student Selection Procedures. The target population for the Check and Connect/Partnership for School Success Project involved youth with learning or emotional/behavioral disabilities. Selection procedures involved three criteria. First, students included in the study had to be enrolled at one of three targeted middle schools in the district. The two schools that housed the district-wide level IV programs served as the treatment sites, the third school served as the comparison site. The second criterion was that students had to have an IEP for a learning or emotional/behavioral disability. The third criterion defined a cut-off period, such that only those students who entered as 7th graders in the 1991-92 or 1992-93 school years, between the months of September and January, were included in the study. This criterion was needed to balance the parameters of the study with the high mobility rates of students in the district. Approximately 100 additional students who meet the first two criteria entered one of the three schools after the cut off date (i.e., criteria 3).

One exception to these selection procedures resulted in an increase of 23 students in the research sample. Sixteen treatment students and seven special education comparison students from the first cohort entered after the cut-off point but remained in the treatment schools for the duration of the cohort period. Because the interventions were in a start-up phase during the first few months, it seemed reasonable to conclude that the cohort 1 late-comers received an amount of intervention similar to the cohort 1 students who were in the treatment schools within the cut-off period.

A historical comparison group was used for the students in the level IV programs because these programs were district-wide and therefore were offered only in the treatment sites. The historical comparison groups included students who attended the level IV programs as 8th graders during the 1990-91 school year. This precluded their exposure to any project intervention. A general education comparison group, of similar size to the treatment group, was also identified. Selection procedures were stratified by school site and by cohort.

Number of Subjects. The numbers of subjects in the treatment and comparison groups are shown in Table 4 by cohort. The total number of treatment subjects was 259. The special education comparison groups included 109 youth in all. The general education comparison group included 227 students from the same grade levels. Please note that only descriptive data for the general education population will be reported in this project evaluation. Use of this information is intended to provide a frame of reference for the special education sample. Comparative analyses of the general education outcome data will be reported in a separate document, by the same authors.

	Treatment	Special Education Comparison	General Education Comparison
Total	259	109	227
Cohort 1 (entered 7th grade 1991)	121	28	125
Cohort 2 (entered 7th grade 1992)	138	36	102
Historical (entered 7th grade 1989)	n/a	45	n/a

Demographic Characteristics. The demographic characteristics of students in the treatment and comparison groups are described here according to 8 marker variables: (a) age, (b) disability category, (c) gender, (d) socioeconomic status (as measured by eligibility for free/reduced lunch), (e) adult with whom the youth resides, (f) ethnicity, (g) primary home language, and (h) mother's educational level. All demographic information is from the students' 7th grade year in school (see Table 5). Note, tests of significance are reported in the following text and in Table 6.

Demographic Variables	Treatment N = 259			Special Education Comparison N = 109			General Education Comparison N = 227		
	<i>Mean</i>	<i>SD</i>	<i>Freq.</i>	<i>Mean</i>	<i>SD</i>	<i>Freq.</i>	<i>Mean</i>	<i>SD</i>	<i>Freq.</i>
Age (years entering grade 7)	12.9	0.6	259	12.9	0.7	109	12.5	0.6	227
	<i>%</i>	<i>Freq.</i>		<i>%</i>	<i>Freq.</i>		<i>%</i>	<i>Freq.</i>	
Disability Category									
Learning Disability	70		181	77		84	n/a		
Emotional/Behavioral Disorder	30		78	23		25			
Gender									
Female	29		75	27		29	56		128
Male	71		184	73		80	44		99
SES (free/reduced lunch)									
Eligible	75		187	68		72	53		117
Not eligible	25		63	32		34	47		104
Adult with whom youth resides									
Both parents	20		50	15		17	40		91
Mother	60		155	67		72	47		106
Other	20		52	18		20	13		30
Racial/Ethnic Composition									
European American	29		74	31		34	52		118
African American	60		157	57		62	37		83
Asian American	1		2	3		3	4		10
Native American	8		20	8		9	5		11
Hispanic American	2		6	1		1	2		5
Primary Home Language									
English	98		254	98		106	95		216
Non-English	2		5	2		2	5		11
Mother's Educational Level									
11th grade or less	37		30	26		9	6		4
High school graduate	34		28	43		15	30		20
Some college	29		24	31		11	64		42

NOTE: Tests of significance between groups and within groups are reported separately in Table 6.

Between-group comparisons indicated that no differences exist between the special education treatment and comparison groups across the 8 demographic characteristics. Greater differences exist between the general and special education groups. The general education comparison sample is 5 months younger than the youth with disabilities ($p < .001$). Compared to the general education population, a disproportionate number of the special education sample is male (44%_{Reg} vs. over 70%_{Spec}, $p < .001$), African American (37%_{Reg} vs. over 57%_{Spec}, $p < .001$), lower SES (53%_{Reg} vs. over 68%_{Spec}, $p < .001$), and living with mothers (47%_{Reg} vs. over 61%_{Spec}, $p < .001$) who did not complete high school (6%_{Reg} vs. over 25%_{Spec}, $p < .001$).

Within-group comparisons included tests for differences by the two levels of cohort (i.e., 1 and 2) and by four disability categories for the special education groups (i.e., LD II/III, LD IV, EBD II/III, EBD IV). In brief, within-group differences were found for disability category in 5 of the 14 comparisons and the only cohort differences were within the general education comparison groups (see Table 6).

Demographic Variables	Treatment	Special Education Comparison	General Education Comparison
Age (years upon entering 7th grade)	★	NS	NS
Gender	★	★	NS
SES (free/reduced lunch status)	NS	★	NS
Adult with whom youth resides	★	NS	✗
Racial/Ethnic Composition	NS	NS	NS
Primary Home Language	NS	NS	✗
Mother's Educational Level	NS	NS	NS

★=significant at the .05 level by disability category.
✗=significant at the .05 level by cohort.

1. Three of the within-group differences by disability category were found in the special education treatment group: age, gender, and adult with whom the youth resides. The treatment students with a learning disability were on average 4 to 5 months older than treatment students with an emotional/behavioral disorder ($p = .003$). While males were disproportionately represented in all four disability categories, significantly more of the level IV treatment students with emotional/behavioral disabilities were male (91%) compared to the level IV treatment students with learning disabilities (70%) and the level II/III treatment students with learning disabilities (62%), $p = .001$. Also, significantly more of the level II/III treatment students with emotional/behavioral disabilities were male (80%) compared to the level II/III treatment students (62%), $p = .001$. Significantly fewer students with level IV learning disabilities reside with their mothers only compared to the treatment students across the remaining disability categories (32%_{LDII/III} vs. over 60%_{OtherDis}, $p < .05$).

2. Two of the within-group differences by disability category were found in the special

education comparison group: gender, SES. Again, males were disproportionately represented in all four disability categories, but significantly more of the level IV special education comparison students with emotional/behavioral disabilities were male (95%) in relation to the level IV comparison students with learning disabilities (64%) and the level II/III comparison students with learning disabilities (69%), $p = .04$. Significantly fewer of the special education comparison students with level IV emotional/behavioral disabilities were eligible for free/reduced lunch (40%) compared to special education comparison students with level II/III learning disabilities (79%) and the special education comparison students with level II/III emotional/behavioral disabilities (100%), $p = .005$.

3. The two general education cohorts differed significantly across two variables: adult with whom the youth resides and language. More of the regular education students in cohort 2 lived with their mothers (57%_{cht2} vs. 38%_{cht1}, $p = .021$) and fewer spoke English as their primary home language (92%_{cht2} vs. 99%_{cht1}, $p < .001$) than the cohort 1 regular education sample.

How Are Students At Risk?

The response to the question "how are students at risk?" begins with a definition of risk. The definition is followed by a discussion of how the risk factors interact with the practices across the systems of home and school to place youth at high risk for dropping out of school. It is assumed that each specific risk factor is not as critical as is the cumulative effect of risk factors. Youth exposed to more risk factors are hypothesized to be more likely to drop out and in greater need of protective factors, such as school support for learning or family support for learning.

Risk is explored first in terms of demographic characteristics, and second, in terms of school-related behaviors or indicators of school withdrawal.

■ Demographic Risk Factors

Two issues of greatest concern in relation to demographic characteristics of the youth and the environments in which they live are the influences of poverty and the high rates of mobility. Although the two issues are interrelated, the prevalence of each phenomenon warrants separate discussion.

Poverty. Approximately three-fourths of the students with whom we intervened were eligible for free and reduced lunch, a variable used as a proxy for socioeconomic status. Families with limited financial resources tend to have fewer personal resources. The majority of these students resided with single mothers (62%). Only 20% of the target students lived with two parents.

Carl's Story

Carl's* (pseudonyms are used throughout the project evaluation) family includes his mother, his mother's boyfriend, and his older brother. Carl's mother, Lynn, dropped out of high school and does not work. She struggles with mental health issues. Lynn's boyfriend, Mike, holds temporary employment positions. They both receive some form of Public Assistance. Carl's brother, Craig, lives on and off at the family's apartment. He dropped out of high school and has been in and out of jail for minor offenses. Craig has a child, but the child does not live with Carl's family.

At the start of the school year, Carl and his family were living in a shelter. Shortly thereafter, they found a one bedroom apartment and moved. Inside Carl's apartment there were three pieces of furniture: a mattress, a couch, and a chair. There was no telephone, nor a stove. The landlord, however, was supposed to supply a stove. Carl's family did not get along well with the landlord, and believed that he was stealing from their apartment. The family decided to change the locks on the apartment without notifying the landlord.

The impact of Carl's family circumstances was most evident to his peers and teachers in his hygiene and personal appearance. He owned very few clothes and sometimes came to school wearing women's clothing. Carl's home was usually unclean when visited by project staff and he often came to school unbathed and wearing dirty clothes. One of Carl's teachers would often wash his clothes at school and buy him products for his hair. She checked in regularly with Carl to monitor his hygiene and to provide any other support he needed.

The influence of poverty on students' educational experiences was most evident in terms of student attendance and home-school communication. Over 30% of the families did not have a telephone or consistent access to telephone services. This limited the mode of communication between home and school to either home visits, mail, or student "courier services." The drawbacks of these alternative communication options are that home visits are resource intensive and mail/courier services are not adequate when immediate contact is needed. Furthermore, it was not uncommon for the adolescents to screen their parents' mail and to let flyers intended for parents collect in the bottom of lockers. On average, project staff would make four attempts to contact parents before a connection was made.

Car ownership was also an exception among the families with whom we worked. Most parents or family members were dependent on public transportation or friends and relatives with cars. The metro area transportation system is not always convenient nor timely, with most routes requiring riders to transfer at downtown points regardless of ones' final destination. Project staff routinely provided or arranged transportation services to evening meetings for 70% of the targeted families. Lack of appropriate clothing, particularly in winter, interfered with participation in school as well.

Mobility. Mobility is the second demographic issue of concern, particularly movement from school to school and residential mobility of the families. Stability and consistency appear to be a missing element in the lives of many youth with learning and emotional/behavioral disabilities. Research suggests that mobility is strongly associated with dropping out of school. Cohen⁵ reported that high mobility rates were associated with grade retention and behavioral problems in school, both

of which are known correlates of dropping out.

Robert's Story

Robert lived in many different places and with different people during his two years with the project. He began his 7th grade year with sporadic attendance. An initial home visit from project and school staff to encourage Robert to come to school revealed that Robert and his family were literally living on the street. His mother eventually made plans to move in with one of her siblings. Each time project staff made a home visit to Robert's residence, different people were behind the door. Mobility was perpetual not only for Robert's family, but also for Robert within his family. He moved back and forth between his mother and father's place of residence and his whereabouts were often unknown to either of them.

This pattern of mobility and chronic absenteeism continued into the 8th grade. Educational support for Robert was tentative from both home and school. Robert's father would verbally commit to various plans, but would not follow through with the appropriate actions. Robert's mother had serious physical health problems that minimized her capacity to monitor and control Robert's daily activities. Attempts by project staff to get Robert to school were resisted by some of Robert's teachers. For example, a project staff member arranged to pick Robert up one morning and personally bring him to school. The intervention was a short term strategy to get Robert back in the habit of attending school and riding the bus. After school that day, the project staff member went to Robert's bus to encourage him to return to school on the following day. One of Robert's teachers, on bus duty, stopped the project staff to express his frustration with our dropout prevention efforts. The teacher said: "Since you brought this kid, I hope you plan to take care of him tomorrow if he acts up. If he's here I'm going to send him to you. We have already got 37 kids in the classroom. I know you are doing your job, I know what you are trying to do, but we have too many kids already. There is not enough room to rearrange the class" and so on. In the end, the intervention in conjunction with other efforts did not break Robert of the habit of skipping school. At the time, he was too young to enroll in any of the alternative school programs. The combination of Robert's frequent residential mobility and his parents' inconsistent knowledge regarding Robert's whereabouts made it difficult for project and school staff to address his truancy problem. Robert never did attend school with any regularity. At the end of 8th grade, Robert's most recent place of residence was condemned, putting him on the move once again. His location and the location of his family are currently unknown.

Teachers in urban schools can often be overheard talking about the high mobility rates of their students. As shown in Table 7, no more than half of all project students (i.e., treatment and comparison groups combined) remained in the same school for the entire two years of middle school. Less than a quarter of the students with emotional/behavioral disorders stayed in the same school for two years. Each time these students move to a new school, their IEPs and learning routines are disrupted.

	<i>%</i>	<i>Freq.</i>
Regular Education	69	227
Special Education	41	368
• Youth with EBD	19	103
• Youth with LD	50	265

The students must orient themselves to a new setting, teachers must familiarize themselves with a new

student and family, parents must learn a new school routine, and community service agencies must be informed of the new circumstances to remain effective members of the support network.

Many youth with learning and behavioral disabilities have also experienced a number of residential and school moves (see Table 8, again note treatment and comparison groups combined).

	<i>mean (in years)</i>	<i>range (in years)</i>	<i>N</i>
Number of States Lived In	1.7	1 to 7	170
Number of Schools Attended	4.2	2 to 7	169
Number of Residential Moves	4.0	1 to 7	149
Years in Twin Cities	6.3	< 1 year to 7	170
Families in Twin Cities			
yes	91%		154
no	9%		15

Interviews with parents revealed a variety of reasons for these moves, including the need for a bigger place, a desire to move to a better and safer environment, and job related reasons. While responses indicated that the majority of families had lived in the metropolitan area for more than six years and had extended family in the area, many of the middle school students had lived in multiple states (49%), had attended four or more schools since first grade (62%), and had moved four or more times during the past eight years (50%). Even when the student stays in the same school, residential mobility makes it challenging for schools to effectively communicate with families whose addresses and phone numbers are constantly changing. Moves often disrupt bus service for a period of time and interfere with students' school attendance.

■ School-Related Risk Factors

The second means of defining risk is according to school related risk factors. A rating scheme of student risk for school failure was initially developed to improve our ability to match interventions with students' needs and to better understand the degree to which youth were at risk for dropping out of school. The profile rating is an indication of student levels of engagement with school. Each student was rated on the following variables that have been identified in the literature as most predictive of a youth's ultimate withdrawal from school (i.e., dropping out): attendance, problem behaviors, and course grades. The ratings range from "no profile" (i.e., no risk), "low profile", "medium profile", to "high profile" (i.e., high risk). The relevant profile rating was assigned to middle school students exhibiting one or any combination of the criteria identified across the next four pages. The risk criteria were determined by school practitioners and project staff, through a two-stage process of individual determination followed by group consensus. A vignette of each profile rating is presented for illustration (see p. C-36 for additional information regarding profile rating).

NO PROFILE

Criteria:

- **no more than 1-2 absences per month**
- **passing all classes**
- **no significant problem behaviors**

Cecelia is an 8th grade student with a learning disability who receives most of her education in general education classrooms. Cecelia has been at her middle school for two years, achieves passing grades in all classes, and has made the honor roll several times. She works diligently in her classes and gets along well with both her teachers and peers. She struggles with the level of difficulty in several of her courses, but works with a tutor for extra help. Cecelia is rarely absent or tardy to school but when she is, a member of her family generally calls the school to inform the staff of Cecelia's circumstances.

Cecelia's family is both supportive of and involved in her education. For example, Cecelia's mom attended parent conferences and came to school several other times throughout the year for special events and IEP meetings. Family members encourage Cecelia to try hard and do her best in school and they are willing to help her with homework and other assignments. Outside of academics, Cecelia is involved in several after-school activities including a dance group which meets twice each week at her school. In addition, Cecelia has been hired by a local community youth agency for a part-time summer job. Cecelia will be attending one of the magnet programs next year for high school. She went to tour the program during 8th grade and participated in her transition meeting to plan for ninth grade.

This description of Cecelia is representative of the majority of observations made about students categorized as no profile. However, some variations were present and should be expected. For example, not all parents were as outwardly involved in their child's education as were Cecelia's. In addition, not all students made the honor roll but most passed all classes each trimester. Finally, some students identified as no profile have disabilities related to emotional/behavioral challenges, rather than learning disabilities.

LOW PROFILE**Criteria:**

- **no more than 3-4 absences per month**
- **passing most classes (one D or F)**
- **little problem behavior (i.e., one or two behavior referrals)**

Lorenzo is an 8th grader who attends a citywide program for students with significant learning disabilities. For core academic classes such as English, math, reading and writing, Lorenzo receives his education with other students in the citywide program in special education classes. He is mainstreamed several hours per day for science, physical education, and wood shop classes. Lorenzo has attended his middle school for two years although last year his family temporarily moved out of the school district for a few months. Generally Lorenzo passes most of his classes with grades of C or better. If he does earn less than a C, it is usually in courses such as physical education, health, or home economics. Lorenzo states that some subjects are difficult for him, particularly in his non-special education courses. Lorenzo has a tutor who provides some extra help and support, primarily in the area of reading. Absences and tardies are sometimes an issue for Lorenzo; he is usually absent or late to school two to four times each month. Behaviorally, Lorenzo seems to get along well with peers. Low intensity behaviors such as disruption, lack of cooperation, and defiance are occasionally problematic for Lorenzo and have resulted in several behavior referrals and suspensions during the past two years.

Lorenzo's family is supportive of his education; they encourage him to do well and consider education a priority for Lorenzo. Due to their work schedules, Lorenzo's parents were only able to come to school twice during the year, once for IEP conferences and the other time for graduation. Lorenzo is involved in after-school recreational activities and plans to work part-time this summer. Lorenzo is planning to attend his home school next year for high school. He went to tour the school in the spring and participated in his transition meeting to plan for ninth grade.

This description of Lorenzo is generally representative of the majority of students categorized as "low profile." As in other profile categories, some variations were present and expected. For example, not all students characterized as low profile participated in after-school programs. In addition, some students experienced more significant moves during the year, including brief periods of residence at group homes and shelters. Finally, about half the students identified as low profile have disabilities related to emotional/behavioral challenges rather than learning disabilities.

MEDIUM PROFILE

Criteria:

- **no more than 3-4 absences per month**
- **several D's or F's (no more than 3)**
- **some problem behavior (i.e., emerging pattern of referrals/suspension)**

Jonas is an 8th grade student who currently has an IEP to accommodate an emotional/behavioral disorder. He attends most of his elective classes (e.g., home economics, art) in the mainstream, while core classes (e.g., English and math) are in special education or resource classrooms. Jonas is frequently absent from school without an excuse. On the days that he does attend, it is highly probable that he will receive two or more behavior referrals in the same day. The referrals are typically for behavior such as lack of cooperation, play-fighting, talking, disruption, disrespect, and skipping classes. As a consequence, Jonas must serve after-school detention or is sent to "quiet study" (i.e., in-school suspension) during class. Jonas has been suspended and sent home twice; once for fighting with another student and once for receiving three detentions in one week. Jonas' grades are also suffering. He is failing English and history, and is receiving D's in science and art. Attempts to provide tutoring for Jonas have not been successful. He may attend two to three sessions then refuse to participate in any other sessions.

Jonas lives with his mother who does not have a car and who also works well over 40 hours a week. These two factors, in addition to the significant distance they live from the school, make it difficult for her to attend IEP or other special meetings at the school. It is not unusual for her to cancel and reschedule several times before a meeting takes place. Jonas is not involved in any after school activities, and the prospect does not seem to interest him. He may be attending summer school this year, but does not seem to care either way. This apathetic attitude also applies to his feelings about high school in that he has stated that high school is not very important to him, but he will go anyway.

This description of Jonas exemplifies many students rated as medium profile. However, a portion of these students are not as obvious. While their degree of risk is just as significant, they do not display the behavior problems such as fighting or class disruption. These are students whose grades or amount of absences quietly mark their degree of withdrawal from school. Finally, some students identified as medium profile have disabilities related to learning disabilities, rather than emotional/behavioral challenges.

HIGH PROFILE**Criteria:**

- **chronic absences (more than 3-4 absences per month)**
- **many D's or F's (more than 3)**
- **significant problem behaviors (repeated suspensions/referrals)**

Alex is an 8th grade student with an IEP for a learning disability. He receives most of his education in the general classroom with special education support. Alex has attended various schools over the past several years due in part to administrative transfers for assaulting a peer on one occasion and for assaulting a teacher on another. He attended another school when he moved to a relative's out of the district. Alex is chronically absent and typically tardy when he does attend school. When Alex is at school, his tendency to become involved in verbal assaults, fighting, property damage, and skipping classes results in behavioral referrals and out-of-school suspensions. Alex was assigned a parole officer during his last truancy court appearance and has a pending court date for a misdemeanor offense. It is not surprising that Alex is failing many of his classes and finds school hard. He is resistant to offers of extra assistance via a tutor or supplemental computer aided instruction.

School staff and personnel are frustrated by Alex's behaviors and poor attendance and are reluctant to devote extra time to help him catch up. They do not give him the warmest welcome when he does come to school. Alex's family is sporadic with their support of his education and lack the follow through necessary to assist Alex. Alex's siblings are also struggling in school. His family has moved often due to having their apartment condemned or being evicted. His parent is currently unemployed and struggling with personal issues. Alex has stated that he is not sure where or whether he will be going on to high school.

This description of Alex is representative of the majority of the students with a high profile rating. Most of these youth are part of a single-parent-family headed by a female, usually the mother. Often times, the female parents have expressed an inability to control the adolescent because of their size difference. Every high profile student has had numerous problems at home, in school, and in the community that have influenced their ability to function effectively in school. Alex is not a unique example. Note, about half of the students identified as high profile have disabilities related to emotional/behavioral challenges rather than learning disabilities.

Data for the profile rating were drawn from our monitoring and school engagement procedure (described in greater detail in Section II of this project evaluation). The procedure was designed to facilitate the continuous assessment of student levels of engagement with school. Six indicators of risk were monitored daily: tardiness, absenteeism, behavior referrals to the office, in-school suspension, out-of-school suspension, and course failure. Each student's profile rating was based on data spanning a three-month period. While youth with emotional/behavioral disabilities tended to fall at the *medium* to *high* profile end of the rating scheme, youth with more challenging learning disabilities tended to fall at the *no* to *low* end; type of disability nonetheless cuts across all four profile ratings, as shown in Table 9. Note, the profile rating is used in this document primarily for descriptive purposes.

Table 9. Type of Disability by Profile Rating

Profile Rating	LD II/III		LD IV		EBD II/III		EBD IV	
	%	Freq.	%	Freq.	%	Freq.	%	Freq.
No	28	25	40	16	5	1	11	4
Low	27	24	38	15	32	6	20	7
Medium	25	22	10	4	26	5	49	17
High	20	18	13	5	37	7	20	7

Note: The profile rating is available only for 183 of the treatment students who were still enrolled in target schools at the time of rating. Of the 76 treatment students without a profile rating: 73% were still in school at some other location, 10% had dropped out, and 17% had moved and were not known to be continuing, at the time the rating was assigned (January 1993).

■ School Policies and Practices that Influence the Life of the Youth

School policies and practices that influence a student's level of engagement with school are discussed here. The narrative focuses on those factors that had a noteworthy influence on lives of the middle school students who participated in the Check and Connect/Partnership for School Success project. Although we discuss schools, family/home, and community separately, all are highly interrelated. Project interventions frequently drew upon the collective efforts of individuals from all three spheres to engage students in school.

Three issues were of concern within the middle schools. The first issue relates to those policies and practices that alienate students and tend to discourage their participation in school. These are primarily discipline policies and practices. The second issue reflects the propensity for high risk youth to experience problematic interactions within the secondary school system, especially in conjunction with the lack of fully effective communication strategies within the school and across the systems of school, home, and community. The third issue evolves from local school reform efforts and their impact on the target population. Although we do not assume that schools are solely responsible for increasing the percentage of youth who graduate from high school, students' exit

status is an important indicator of educational program effectiveness. Schools must be held accountable for their role in formulating policies and practices that create a climate to foster all students' abilities to be successful and remain in school until graduation.

Discipline Policies and Practices. In a report titled *The Way Out*, Wheelock⁶ examined the exclusionary practices of Boston middle schools. She depicted the process of student disengagement as a merry-go-round cycle of out-of-school suspension, repeating grades, in-school truancy (e.g., cutting classes, disruption), poor attendance, and course failure. To slow down the merry-go-round, Wheelock argued that school policies and practices should be evaluated in terms of the extent to which they encourage full participation or exacerbate the school dropout phenomenon. Building upon the merry-go-round analogy, a school's "holding power" could be measured intermittently by indicators such as average daily attendance, percentage of courses passed, or accumulation of credits. Ineffective practices could be defined as those that interfere with attendance and participation in the classroom and the broader activities of the school community.

Michael's Story

Michael is a middle school student with a disability. He and his parents have recently been in and out of a homeless shelter and are presently in temporary housing - address unknown. While Michael has a history of being truant, the school was not aware of his current residential problems. At first, staff only recognized that he was absent. Michael's monitor enlisted the efforts of a local truancy program to pick up Michael and bring him to school. The bus driver found no one at home. Michael's monitor also made subsequent home visits, again to find the house empty and the telephone disconnected. Neighbors did not seem to know where the family was living. A week later, Michael showed up at school. His monitor and the school social worker then learned from Michael that he was living at the shelter.

The next day at school, Michael's monitor noticed him sitting in the office with a referral for suspension from the physical education (PE) teacher. The referral noted that Michael had neglected to bring his gym clothes and failed to acknowledge that he had done anything wrong. The referral also indicated that the PE teacher had given Michael after-school detention for past offenses, but Michael never showed up for detention. On that same day, Michael's monitor spoke with one of the assistant principals and emphatically pleaded that out-of-school suspension for having no gym clothes was an inappropriate consequence for a boy who was living in a shelter, who barely attended school to begin with, and who has a disability that affects his education. The assistant principals concurred after being made aware of the situation. In addition to planning with school administrators, Michael and his monitor wrote a contract intended to get Michael back in the habit of going to school. The contract stated that Michael would receive a reward of his choice in return for increased attendance.

The next day, the PE teacher referred Michael to the office again because he refused to dress. The referral indicated that Michael had called her a name, used inappropriate language, never attended class and that when he did, he did not have gym clothes. The teacher stated that in accordance with PE and district policy, she was requesting that Michael be suspended for three days. Michael was suspended, but not by the assistant principals. While both assistant principals were aware of the problem and were willing to explore alternative solutions, the unexpected happened: Michael was suspended by a non administrative staff member whose

-Michael's Story continued on next page-

-Michael's Story continued-

role, ironically, is to advocate for students and assist in the process of mediation.

One day later, Michael was back in school. Two staff welcomed him back and encouraged him to continue to come to school. Then Michael went to gym class. According to Michael, he was standing with a group of students and the PE teacher told them to be quiet, and specifically told Michael to "shut up." Michael said "I don't like being talked to that way: it's not respectful." The teacher replied "Get out into the hall." Michael replied with a swear word. Subsequently, he was suspended again for a day by the assistant principal.

While efforts are being made to mediate the power struggle between Michael, his teacher, and the assistant principals, Michael is losing the battle. He is missing school and moving one step closer to dropping out.

Reasons for dropping out of school frequently reported by youth include suspension, expulsion, and not getting along with teachers.⁷ Students' responses suggest that policies governing the consequences of misconduct are often rigid and overly punitive. Furthermore, concerns about safe schools, fueled by the fears of parents and school staff, tend to sustain intractable discipline practices. It is not uncommon, for example, for a student to be suspended for repeatedly being late to class or not having gym clothes. The obvious hazard of out-of-school suspension is that it directly impedes a student's opportunity to attend school and can be characterized as "pushing" students out the door. Over 50% of all the students involved in the Check and Connect/Partnership for School Success project were suspended at least once each year; the average was closer to 7 days per year. Approximately 12% of the parents interviewed (N = 19/161) in the summer of 1993 made unsolicited comments on the "unfair" rules regarding suspensions, attendance, or tardiness. Parents indicated that out-of-school suspensions just didn't make sense and were issued all too often. The school district's city-wide policy for suspension and corresponding mandated disciplinary action is highlighted in Table 10.

Reason for Suspension	Number Days Suspended
<ul style="list-style-type: none"> • chronic truancy (15 or more consecutive days) • habitual tardiness • defiance - failure to comply with a reasonable request • disrespect - verbal abuse toward school personnel • setting off or attempting to set off a false fire alarm • vandalism • theft of school district property 	compulsory attendance law procedure* treated as truants 3 days (grades 4-12); 1-3 days (grades K-3) 3 days (grades 4-12); 1-3 days (grades K-3) 2 days 3-15 days, police referral, and restitution 3-15 days, police referral, and restitution
* Compulsory attendance law procedures require schools to formally withdrawal a student with 15 or more consecutive days of unexcused absences. The youth must be accompanied by an adult in order to be re enrolled.	

The suspension policies are put into practice in several ways. For example, when two students are involved in a fight, both are suspended regardless of the specific details of the incident. If a weapon

was involved, defined as any object used with intent to injure (e.g., a chair, a thrown pencil), the student can be transferred to another school or expelled. When an adult is the recipient of a direct attack, suspension and administrative transfers are an automatic consequence. During the third year of the project, an assistant principal was knocked down and pushed off a bus during an attempt to break up a fight between two students. One of the students was a participant of the Check and Connect/Partnership for School Success project. Both adolescents were transferred to other middle schools; neither was expelled from the district. It is likely that the sending school accepted a "problem" student in exchange.

Project staff found that students with "invisible" disabilities who were mainstreamed into general education classes seemed more likely to be held to the same rules as youth without disabilities, unless the student was explicitly advocated for by a special education teacher, social worker, or project staff member. Even though special education regulations at the time required that a new IEP be written before a student with a disability could be suspended for more than 10 days over a one year period, the rule was often pushed to the limit. The extent to which a student's disability influenced his or her role in an event of misconduct was not always taken into immediate consideration, particularly when 10 to 20 other students were waiting outside the assistant principal's door. Wheelock⁸ would question the extent to which schools with high suspension rates are a reflection of school staffs' failure to communicate compelling reasons for student cooperation, to teach self-discipline, or to develop a school-home-community partnership that acknowledges the importance of meeting young adolescents' normal developmental needs.

Secondary-Level System and Communication Difficulties. The second issue relates to the propensity for youth with learning and emotional/behavioral disabilities to struggle and flounder in the secondary educational system. Secondary schools are large, with high student-to-staff ratios, and infrastructures that are frail. The schools rely on students and parents to assume greater responsibility for monitoring students' academic progress and challenging school policies and practices that may be counterproductive or detrimental to at-risk youth. However, many project students and families do not have the skills, knowledge, or experiences to draw upon in order to orient themselves successfully to the secondary system.

Consider the following scenario of the transition from elementary to secondary schools. The number of students once served in 60 buildings is now served in 7 buildings. Students are now instructed by seven teachers instead of one teacher. Students are expected to learn the rules of acceptable behavior for each classroom. Parents no longer have a single point of contact to inquire about their child's progress. Sixty staff members are asked to communicate regularly with each of their 120 parents through the use of one or two telephone lines. Adolescents are at a stage in development characterized by an inclination to challenge the authority of adults. And while youth this age desire independence and resist parental interference, they typically are not always willing to

claim ownership for the consequences of their actions. Furthermore, the professional efforts of 60 autonomous educators must be coordinated by an individual (i.e., the principal) whose formal training in management and organizational theory is often limited. And, it is likely that less than 6 hours of university course credit was received by teachers on theory and intervention strategies regarding behavior management, child development, moral development, conflict mediation, organizational change, social skills, sex education, violence prevention, multicultural sensitivity, and so on.

In our experience, the greatest source of conflict was poor communication within the schools and between the spheres of home, school, and community. Messages would fail to pass from one teacher to the next, notes and flyers would get lost, students would screen their parents' mail from the school, home phone numbers were disconnected, both assistant principals would agree not to send a student home and then a hall monitor would suspend the youth for three days. The infrastructure of the schools was not capable of supporting an effective, timely, and reliable communication system. The potential for students to slip through the cracks was constant. Even though all youth with disabilities had a case manager, many case managers did not assume the role of trouble shooter and communication facilitator. Many of our intervention and prevention efforts had to be directed toward persistent monitoring of student levels of engagement with the school and running interference when conflicts arose.

Local School Reform Initiatives. The third issue of concern was the influence of district restructuring efforts that coincided with the project period on the three project school sites. These initiatives enhanced certain aspects of the educational system, but they also created new problems. For example, at the beginning of the project the former superintendent completely reorganized and relocated the district's special education administration. More special education staff were assigned directly to school buildings. The special education administration offices were moved back from a separate building to the same building as the general education district offices. However, the administrative cuts were so deep that the content and vision of special education services became dependent on the qualifications and philosophies of the individual staff members at each building. In the spring of 1992, the position of special education director was eliminated and special education programs and services were reassigned to the responsibility of special services and vocational education. Close to half the positions assigned to monitor and coordinate district-wide services were also eliminated. Minimal district-level guidance, beyond due process and compliance procedures, has been provided for special education services during the past five years. At the same time that special education was restructured, district-wide general education services were decentralized and school buildings began converting to site-based management. Building principals became directly responsible for all students enrolled in their schools, including all youth with disabilities.

Within each of the three project sites, the middle school restructuring created several new

systemic problems. For example, in the implementation of a collaborative model, the special education teachers no longer had classroom responsibilities. This shift was to support more mainstream placements. Each special education teacher shared a prep period with his or her team's general education teachers. The joint prep periods were intended to facilitate communication and coordination of services. However, many of the special education teachers effectively had their caseloads jump from 18 to 120 students if they were not able to establish boundaries and define balanced roles and responsibilities. Pressure to serve all students on a team was intensified by a district policy to use Title 1 funds solely at the elementary level and by the use of pre-referral interventions to keep special education referrals down. Staff resources were frequently devoured by the immediate demands of students who acted out, at the expense of channeling continuous attention toward students who were experiencing academic difficulties (e.g., not completing school work, failing classes), but not acting out.

Teacher ratings of students' risk status confirmed concerns about project students falling behind with school work and about the tendency for special education resources to focus on the students who exhibit behavior problems, even if they were not special education students. Teachers' overall perceptions of student risk for school failure (measured by the Index of Risk teacher checklist) correlated moderately ($r = .34$) with the school engagement based "profile rating" of student risk (see Table 11). Teachers were most adept at perceiving behavioral risk factors, which yielded a correlation of .44, explaining nearly 20% of the variance among profile ratings. However, teachers' perceptions were least sensitive to students' academic risk, yielding a negative correlation of .02. In a sense, the needs of special education students who were quietly withdrawing from school were being overshadowed by all other students who were exhibiting more active warning signs.

Table 11. Index of Risk Ratings for Profile Ratings

Risk Factors	Profile Rating												r
	NO			LOW			MEDIUM			HIGH			
	Mean	SD	Freq.	Mean	SD	Freq.	Mean	SD	Freq.	Mean	SD	Freq.	
Academic	.39	.25	39	.49	.19	39	.35	.25	37	.43	.21	29	-.02
Behavioral	.15	.18	39	.39	.27	39	.43	.31	37	.55	.33	29	.44
Psychological	.33	.23	39	.44	.29	39	.48	.27	37	.55	.27	29	.28
Social	.07	.11	39	.19	.21	39	.22	.21	37	.30	.25	29	.38
Environmental-Economical	.06	.14	39	.17	.20	39	.12	.17	37	.15	.16	29	.13
Global	.22	.11	39	.35	.16	39	.33	.17	37	.41	.18	29	.34

Rating scale: The mean represents the average proportional number of risk factors "checked" per category; where 0.0 indicates no risk factors are applicable and 1.0 indicates all risk factors are applicable.

■ **Family Practices that Influence the Life of the Youth**

Without exception, the parents of the target students wanted their children to do well in school

and to be successful. Project staff repeatedly established connections with parents who expressed great concern for their children, and often these parents were ones who had been labeled by school staff as "parents who do not care." Interview responses from parents and family members confirmed that it is a misconception to think they do not care. As mentioned previously, parents' attitudes toward school were very positive. Approximately 95% of parents indicated that they agreed or strongly agreed with the statements: "I want to be involved in school activities" or "I should help my child with learning activities at home."

Parent attitudes and beliefs, however, were not always reflected in their actions. Most problems we encountered stemmed from this gap between attitude and behaviors. Two areas of family practice that were particularly problematic include parenting and supervising at home, and parents' communication with school. It is important to reiterate here that schools must play an active role in reaching out to parents and establishing a positive dialogue between home and school.

Parenting and Supervising at Home. Parenting and supervising at home refers to the basic provision of food, clothing, and shelter, as well as love, guidance, and encouragement. One component of this parenting role overlaps with the limitations of poverty and financial resources, discussed earlier. Factors, such as having to move out of a condemned house, were not always within the parents' control. However, the routine supervision of students' sleeping schedules or monitoring of students' whereabouts after school was absent among some families. The prevalence of insufficient parenting is difficult to assess and disputably value laden. A cursory estimate, based entirely on the observations and interactions of the project staff, indicated that about 30% of the students were placed at some risk for school failure by insufficient parenting and supervision at home. The range in severity and impact on the students was quite varied. Some students were kept at home to help supervise their younger siblings. Some homes were filthy and the youth came to school unbathed in dirty clothes. A few students were suspected of involvement with prostitution. A portion of parents abused drugs and alcohol, stayed up late at night, slept all day, and allowed their children to follow the same sleeping pattern. No one set an alarm or had an alarm to set. The students, in turn, would not get up in time to meet the bus at 6:30 in the morning.

Communicating with School. The second level barrier in the area of parental practices relates to communication between home and school. The most salient parental practices that impeded home-school communication can be described in four categories. Again, the prevalence of these practices is hard to estimate, involving approximately half to three-quarters of the project families.

1. The first practice can be characterized as a lack of persistence. Accessing even the most basic information from a large urban school can require a great deal of persistence, tenacity, and patience. Parents often expressed frustration from difficulty in getting a teacher on the phone. Some parents were insulted by the curt manner of an office clerk. These interactions typically led to

feelings of frustration, anger, or intimidation and subsequently ended the dialogue. Parents lacked either the knowledge or comfort level to take the next step. The student's needs would be left untended and dependent upon the personal resources of the individual student, if some other adult did not step in to advocate for that youth and parent.

2. A second type of parental practice that hindered home-school communication was a blaming, confrontational approach. Some parents could be particularly defensive if their first school contact was for a negative reason. We encountered several angry parents who took the opportunity to yell at the first school person to knock on their door. We found that most of the hostility had dissipated by the second contact. The first encounter almost served as a litmus test of the school person, and subsequently acted as a building block toward a trusting relationship. This parental practice becomes a problem when school staff refuse to deal with the angry parent, so that the student's needs again are forfeited. We also noted the same type of school staff responses when the parents' style of communication was blunt or abrasive.

3. A third type of parental practice that impeded communication was avoidance. Frequently, our mail wasn't answered, telephone calls were screened, home visits were ignored, and requests made through the students were politely declined. We must recognize, however, that we do not know whether the parents were really unresponsive or our outreach strategies were inappropriate. The life circumstances of several families were unmistakably adverse.

4. The fourth type of parental practice that we struggled with was mobility. Parents and students would not always let us know their new address or new phone number, unless we asked directly. Timely communication was often obstructed by the schools' lack of knowledge regarding the student's current place of residence and appropriate manner of contact.

■ Community Practices and Policies that Influence the Life of the Youth

Community practices and policies can also have a significant impact on the extent to which students are engaged in school. Three issues for the Check and Connect/Partnership for School Success project were (a) serving high profile youth, (b) urban policies, and (c) the exclusion of students receiving special education services.

Serving High Profile Youth. Community practices and policies that influenced student levels of engagement with school were most apparent for the small group of youth who were highly mobile and/or seriously engaged in destructive behavior. These were the students with the greatest demand for resources beyond what schools typically provide. Very few organizations seemed equipped to deal with the needs of these high profile youth. These students were often moved from placement to placement. For example, a student might be removed from level III and IV programs in general buildings, to be placed in level V programs in separate buildings, then sent to day treatment or

residential treatment programs, and then removed from those due to behavior problems and sent back to the level V programs. The youth might stop moving only when they are incarcerated. Effective treatment programs are the exception and alternative schools with good reputations have long waiting lists. Some youth are just elusive. Approximately 15% of the project treatment group was enrolled in the intervention schools for less than three months and then disappeared.

Urban Policies. The emphasis on high profile students does not imply that changes in local urban policies would not benefit youth exhibiting medium and low profile behaviors. City housing policies could be modified to reduce the need for family mobility; public bus services could be expanded to enhance transportation efficiency and convenience; metro area development could be structured to support the city's economy. For example, the city council has recently proposed changes in policy regarding taxi licenses in order to improve neighborhood transportation services. Yet often when policies are adopted, the programs are haphazardly implemented. Non-profit organizations and youth programs funded by the city are not well connected nor are their efforts well coordinated. Funding for youth programs is tentative and usually approved at the last minute, minimizing the recruiting period and potency of the interventions. The programs are also generally under-funded and subject to high staff turnover rates.

Exclusion of Students Receiving Special Education Services. We encountered some automatic exclusion of youth receiving special education services from non-school programs. For example, summer job programs automatically slotted youth with low reading levels into remedial education instead of employment positions. One tutoring program excluded youth with special needs, because it was assumed the youth were already getting the necessary supports from school.

Check & Connect: SECTION I

Endnotes

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SECTION II

How Did We Intervene?

The second section of this project evaluation addresses how we intervened to prevent youth with learning and emotional/behavioral disabilities from dropping out of school. The response to this question begins with a description of the initial intervention design of the Check and Connect/Partnership for School Success project, followed by a description of the revised design and key intervention strategies. The project was charged with the task of using a comprehensive intervention program to address the dropout problem, and to engage the youth, their educators, family members, and members of their community support system in the prevention effort. This section concludes with three vignettes, illustrative of the types of interventions used and the degree to which the program matched the needs of the youth.

Initial Intervention Design

The design of the project's initial intervention strategies began with the support and approval of the building principals and district administrators, and was operationalized in partnership with a planning committee of individuals directly involved with high risk youth. This planning committee met regularly throughout the first year and a half of the project and included students with disabilities, their parents, teachers, youth advocates, and community outreach workers. The participation of key stakeholders in the planning and implementation process had been suggested by research to be a critical element of successful and enduring programs, and later proved to be the first step in building a trusting relationship among the participants.

■ Assumptions

The decision to take a collaborative approach for developing intervention strategies was influenced by the first of the four key assumptions that guided the Check and Connect/Partnership for School Success Project. The four assumptions are described here:

- Solving the dropout problem will require a multicomponent effort of home, school, community, and youth.
- Leaving school prior to graduation is not an instantaneous event.
- Students must be empowered to take control of their own behavior related to school completion.
- Schools must reach out to parents and family, in partnership with community resources, to strengthen the support network for students struggling with school.

First, efforts to confront the dropout problem must be a collaborative effort to support the individual needs of high risk youth. It is believed that no one constituency can increase a school's holding power in and of itself. The collective participation of all key stakeholders is essential if we intend to reform the policies and practices of the schools, families, and communities that influence a student's connection with school. In addition, multicomponent strategies are needed. A singular approach to preventing students from dropping out is insufficient. We know that youth drop out of school for various reasons (e.g., disliked school, did not get along with teachers, got married, was offered a job) and that school dropouts are a heterogeneous group (e.g., urban and rural, 14 and 18 years of age, readers and nonreaders). It is essential that strategies intended to keep students engaged in school meet the individualized needs of each learner and that parents, educators, and communities work together to serve those needs.

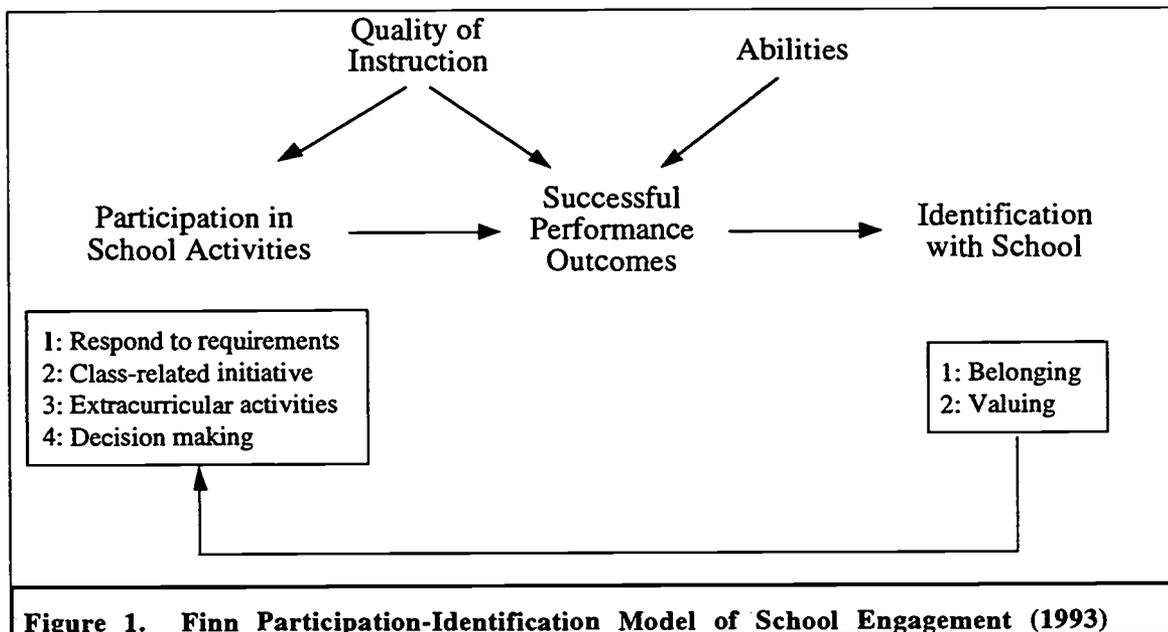
Second, leaving school prior to graduation is not an instantaneous event. Rather, dropping out of school is the outcome of a process of disengagement and alienation. The event of dropping out, in most cases, is preceded by less severe types of psychological or physical withdrawal (e.g., absenteeism, tardiness, failing classes, behavior referrals to principal's office, suspension, and movement from school to school). Yet, the point at which the connection breaks between school and student is tenuous. Therefore, we need continuous monitoring of the youth and those variables that indicate increasing risk of disengagement and alienation so that additional interventions can be started on a more timely basis than is now the case in most schools.

A *third* assumption is that the student has to be empowered to take control of his or her own behavior related to school completion in order for prevention techniques to be successful. For this to happen, youth need to be informed about the long-term consequences of high risk behaviors (e.g., skipping class, neglecting homework, failing classes). They must be empowered to question their own actions, particularly those youth who quietly withdrawal from school and slip away without notice. Students need a problem-solving approach at hand to identify problems, generate alternate solutions and resources, and anticipate consequences of their actions. And most importantly, students must have the opportunity to practice using those strategies.

The *fourth* assumption that underlies the interventions is that schools need to reach out to parents and family, in partnership with community resources, to strengthen the support network for students struggling with school. In his book *Education Through Partnership*, Seeley¹ contends that the product of education is not produced by schools alone, but instead he views learning as a student outcome generated by the support of teachers, parents, peers, and community. Parents and teachers are viewed as facilitators for children's development and educational performance. In such an approach, non-blaming interactions and problem-solving between parents and educators are essential. Multiple outreach strategies must be employed, including home visits, transportation, and flexible

meeting times. Schools must create opportunities for two-way communication designed for the convenience of the parents, in conjunction with what is reasonable for school people.

The evolution of the project's intervention program, as well as research design, was highly influenced by Finn's participation-identification model of school engagement.² The basic premise of Finn's model is that consistent participation in school activities over time is essential in order for positive outcomes to be realized and for students to identify with school and school-related goals (see Figure 1). Students are described as likely to remain engaged and to complete school if the youth believe they belong to and share common values with school. According to this model, the majority of students who drop out are expressing an extreme sense of alienation or disengagement that most likely was preceded by several behavioral indicators of withdrawal and unsuccessful school experiences. Thus, incidents of students regularly failing courses, not attending, or disrupting class are conceptualized as primary indicators of disengagement or risk of dropping out and as behaviors to monitor in order to target students for intervention. Finn argues that educators should focus on the behavioral risk factors that can be altered, rather than on status risk factors, such as socioeconomic status.



Finn's model is comprised of five factors. The two primary constructs are participation and identification. Participation refers to behavioral indicators of engagement and emphasizes the importance of a student's involvement in school activities. The operational definition of participation is based on four levels of behavioral antecedents. Level one, responding to requirements, refers to formal learning skills, such as attending school, arriving at class on time, paying attention to a teacher, and completing assigned work. Level two, class related initiatives, is measured by an expressed enthusiasm beyond the required coursework, such as staying after class to talk with the teacher or

participating in a subject-related clubs. Level three, extracurricular activities, includes social, recreational, or athletic type after-school or before-school activities. Level four, decision making, refers to participating in school governance. The other essential factor in Finn's model is identification with school, which refers to emotional or psychological indicators of engagement. According to Finn, identification with school is defined in terms of a student's internalized conception of belonging to school and valuing success in school-relevant goals. Identification is often described in the positive sense as affiliation, involvement, attachment, commitment, or bonding. Negative terms used to describe a lack of identification include alienation, disengagement, and withdrawal.

■ Project Design and Initial Implementation Strategy

The project design was structured around three phases (see Table 12). The first phase of the project (1990-1991) involved planning the interventions and community-building among key stakeholders. Phase two of the project (1991-1994) involved the implementation of interventions for two cohorts of students and primary data collection activities (see Section III for results). The final phase of the project (1994-1995) involved data analysis, report writing, product development, and dissemination.

	1990-91	1991-92	1992-93	1993-94	1994-95
Phase 1: Planning	•				
Phase 2: Intervention					
Cohort 1		•	•		
Cohort 2			•	•	
Phase 3: Reporting					•

One significant feature of the project design was the opportunity to refine the intervention strategies. The process was facilitated by staggering the two cohorts of students one year apart, and thus allowing one cohort to receive a full two years of the refined intervention. The initial intervention design was shaped by the four assumptions, the recommendations of the planning committee, and by research on dropout prevention and intervention strategies. The project's initial dropout prevention efforts reflected six themes. During months six through eighteen of the project, specific activities or programs were identified to address each of the themes. Both the themes and some of the activities are listed here (see pp. C-41 to C-47 for a description of the activities).

Theme: Family-school trust building

- parent-teacher action research teams (p. C-46)
- parent workers (p. C-45)

Theme: Use of out of school time

- parks and recreation department programs (p. C-44)
- summer jobs (p. C-45)

Theme: Problem solving

- social skills/problem solving groups for students and for parents (p. C-41)
- alternatives to out-of-school suspension (p. C-43)

Theme: Alternative instructional strategies

- DISCOURSE communication systems (p. C-45)
- guest lecturers (p. C-46)

Theme: Academic competence and social acceptance

- tutoring/mentoring supports (p. C-43)
- community service (p. C-44)

Theme: Transition from middle school to high school

- attending high school orientations (p. C-47)
- touring the high schools (p. C-47)

Several of the activities and programs already existed, and therefore project efforts were spent gathering information about them (e.g., goals, objectives, eligibility requirements, target population, schedules, transportation, willingness to accommodate adolescents with disabilities), meeting with the program director, signing students up for activities, getting parent permission slips signed, arranging for transportation when necessary, accompanying students on the first day of a program activity, and facilitating the interface between the communities' and the schools' schedules and procedures. Programs or activities that did not exist were developed from scratch. For the most part, new programs involved outreach strategies to promote family-school trust building and the use of technology to promote alternative teaching strategies and academic competence.

Additional grants were written by project staff and collaborative relationships were established in order to expand intervention activities beyond what the original award could support. These other resources were drawn from local, state, and national organizations and agencies. They include the following:

- Two Minnesota Department of Education grants were received. One was used to reallocate part of a teacher's school day to facilitate the community service tutoring program (see p. C-44). At present, the teacher is maintaining the program and grant re-application process independent of project resources. The other grant, which was received during the first year of the project, supported a pilot parent outreach effort. Four teachers contacted groups of parents of youth with learning and behavioral difficulties on a regular basis. They discussed student progress and supported student involvement in extracurricular activities.
- Community Education, which is funded by locally levied educational dollars, supported after school activities and the parent worker initiative (see p. C-45).
- The University of Minnesota, College of Education and Human Development funded a portion of the DISCOURSE Communication System (see p. C-45). The University's work study and community service program was used to fund four undergraduate students at a fraction of their salary to tutor project students (see p. C-43). In addition, the University's Institute on Community Integration, a University Affiliated Program on Developmental

Disabilities, subsidized the development of products and promoted the dissemination of research to practice.

- A grant was awarded to the two middle schools from the Institute on Responsive Education, at Boston University, to pursue the action-research activities of the PATHS teams (see p. C-46).
- Four graduate students worked with project students and gained research experience as part of an Office of Special Education (OSEP) personnel preparation and training grant.

Some activities and programs suggested during the planning year were not actually implemented during the first year of intervention (e.g., Junior Achievement) or were discontinued the second year of intervention (e.g., the learning lab, family focus, Outward Bound, one of the high school tutor-mentoring programs, the guest lecturer and parent visitor program). Many different reasons were associated with the intervention changes: the community programs with which we were collaborating were discontinued, the allocation of project resources was considered to be too high for the potential impact on individual students in the treatment group, a change in the building principal and associated changes in priorities.

We learned two important lessons from the initial experience of delivering interventions. **First**, the goal of the intervention was more important than the specific activity (e.g., providing academic support was important, but the means of providing the support--tutoring, computer aid instruction, home monitoring--varied as a function of availability of services and student needs). Given the tentative nature of youth oriented programs and the need to maximize finite resources, it seemed most efficient and perhaps most enduring to work with existing programs and activities as much as possible and to anticipate the task of piece-mealing support services. The **second** lesson we learned from the first year of intervention was that a systematic way to determine students' needs for intervention supports had to be established--severity and type of disability was not an effective means of determining student risk for disengaging and dropping out of school. More specifically, a mechanism (i.e., which evolved into the Check and Connect procedure) was needed for monitoring the warning signs of school withdrawal and for allocating subsequent intervention in a more timely manner. We wanted to be able to efficiently allocate finite project resources between the varying needs of many students and the broader need for system change.

Revised Intervention Design

The revised intervention strategies were used with cohort 2 students and for cohort 1 students during their second year of intervention. The revised strategies focused on both the individual needs of the students and on building capacity within the families and the infrastructure of the schools. First, a monitoring and school engagement procedure was developed to address intervention concerns

for individual students. Second, selected systemic interventions were continued in order to build capacity within the school and families. Selection of continued interventions was based on the degree of capacity building in relation to the amount of project resources required to maintain the intervention. The original six themes are embedded at one or both levels of intervention (i.e., individual or systemic).

The description begins with a summary of the revised strategy developed to meet the individual needs of the students, referred to as the Check and Connect monitoring and school engagement procedure. This is followed by a separate description of intervention strategies focused on capacity building within the families and within the infrastructure of the schools. The establishment of partnerships between home, school, and community was embedded in all aspects of intervention and was an integral part of project efforts.

■ Student-Focused Strategies

The Check and Connect procedure is comprised of two components. The first component is the **Check** part of the procedure, designed to systematically monitor youth's behavior for signs of school withdrawal. The second component is the **Connect** part of the procedure, designed to respond accordingly to students' needs (see Figure 2).

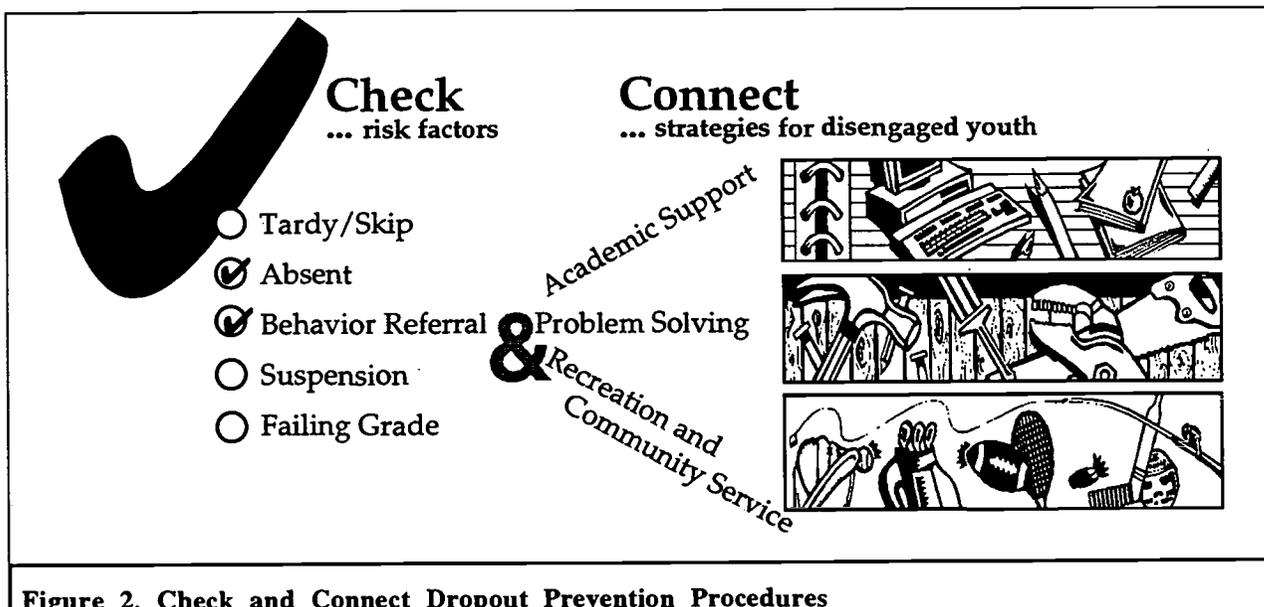


Figure 2. Check and Connect Dropout Prevention Procedures

All students received monthly "core" intervention strategies to reinforce their connection with school. For those students showing signs of *risk* for school disengagement (e.g., being suspended from school), "supplemental" intervention strategies were promptly implemented in conjunction with core intervention strategies to maintain their connection to school.

- Tardy/Skip:** arriving late for school, late for class, or missing selected class periods during the day.
High Risk = 5 or more incidents per month.
- Absenteeism:** missing an entire day of school for excused or unexcused reasons, including days suspended (these are also monitored separately).
High Risk = 3 or more incidents per month.
- Behavior Referral:** a consequence for inappropriate behavior, for which the student is sent to administrative or resource staff.
High Risk = 4 or more referrals per month.
- In-School Suspension:** a consequence for inappropriate behavior, for which the student "owes" time either before, during, or after school. The student is typically supervised and is expected to complete school work during the period or at least sit quietly.
High Risk = 2 to 4 or more incidents per month.
- Out-of-School Suspension:** a consequence for inappropriate behavior, for which the student spends a defined number of school days at home. The student is not allowed on school property for the suspension period.
High Risk = 2 or more days suspended per month.
- Failing Class(es):** occurrence of Fs or Ds in any subject area.
High Risk = 1 or more Fs and/or 2 or more Ds per grading period.

Behavioral referrals were not systematically recorded in the middle school procedure until the last year of intervention because of the inaccessibility of information in a timely manner. Nonetheless, behavior referrals are considered a critical risk variable to monitor. The occurrence of risk behaviors among the students who were being monitored is presented in Table 13, with students grouped according to their risk profile rating. The means in the table are the average portion of the intervention or monitoring period during which students exhibited high risk behaviors.

Table 13. Average Portion of Intervention Period Student Exhibited High Risk Behaviors.

Risk Behaviors	No Profile N=46		Low Profile N=52		Medium Profile N=48		High Profile N=37	
	Mean	SD	Mean	SD	Mean	SD	Mean	SD
Tardy	1%	6	3%	8	2%	5	7%	16
Absent	16%	19	38%	23	52%	23	74%	20
Behavior Referral	0%	0	1%	3	3%	7	4%	9
In-School Suspension	0%	0	1%	2	1%	2	0%	0
Out-of-School Suspension	2%	6	8%	10	24%	18	24%	20
Failing Class(es)	4%	7	8%	10	9%	10	13%	14

Rating scale: The frequency of occurrence could range from 0 to 100% of the time the students were involved in intervention. The higher the percentage, the more monitoring periods the student exhibited high risk behaviors.

Connecting Students to School: Core Strategies. The Connect part of the procedure can be described on two levels. First, certain "core" interventions were administered to all treatment students

regardless of their level of engagement. Additional interventions were brokered for students showing "high risk" in relation to any of the six indicators being monitored. The entire procedure was facilitated by a **monitor**. The monitors served in a role that could be characterized as a cross between a case manager and a mentor since they checked and then, when needed, focused on "connect" strategies. The monitors' Connect activities mostly involved facilitating **regular communication** among key stakeholders, including the student, and **accessing services**.

Four interventions served as a foundation for core efforts: (a) sharing general information with the student about the monitoring system, (b) providing regular feedback to the student, (c) regularly discussing the importance of staying in school, and (d) problem-solving with the student regarding risk factors. General information was initially shared with the student about the monitor's role and the purpose of the monitoring sheets. Students then were regularly given feedback on their progress in school in general and in relation to risk factors. Each student was asked directly about the importance of staying in school. Additional "facts" were added to the students' responses about the economics of staying in school. For example, students were informed that:

- Dropouts earn an average of \$60 a week less than high school graduates.
- During a lifetime, dropouts will earn approximately \$200,000 less than those who complete high school.
- The annual cost of providing for dropouts and their families is more than \$76 billion a year. For every taxpayer, that means about \$800 per person.
- Four of five federal prisoners have not completed high school
- If you drop out of school, you can still earn your high school diploma by re-enrolling in school or earning your GED diploma.
- You have to be in school in order to learn and do well in school.

The final and most significant component involved problem solving with students regarding risk factors and staying in school. Students were guided through real and/or hypothetical problems using a five step behavioral-cognitive problem-solving strategy. For example, the risk factor *attendance* was reviewed by dialoguing about either the consequences of skipping school or generating lists of strategies students use to get to school every day. The conversation was structured around the Five Step Plan:

- Step 1. "Stop. Think about the problem."
- Step 2. "What are some choices?"
- Step 3. "Choose one."
- Step 4. "Do it."
- Step 5. "How did it work?"

While this problem-solving strategy appears in various forms, the specific wording of the Five Step Plan was modified by teachers and resource staff in the project schools, using material developed by Braswell and Bloomquist.³ Most modifications involved incorporating more concrete language. An illustration of a conversation between a student and a monitor is provided here.

Illustration of a Conversation about Attendance:

Monitor: (Holding monitoring sheet) I notice that you had quite a few absences this past month. In fact, you were absent a total of eight days out of 20. I think its a problem, what do you think?

Student: Yeah, its a problem.

Monitor: Why is being absent so often from school a problem?

Student: Well, I could fail my classes.

Monitor: Right. Why else?

Student: I won't learn anything.

Monitor: Right again. Now tell me why its important to stay in school.

Student: Because you learn stuff you need to know for your future. And you need to graduate.

Monitor: Right again! I'm glad you see the importance of staying in school. Remember that not only will you learn important things in school; a high school diploma also helps you get a better job, and one that pays more than for people who dropped out of school. Now let's see if we can figure out a way to improve your attendance using the five step problem solving plan we've used before. What is the first step?

Student: Say the problem.

Monitor: Yes and so what is the problem?

Student: I don't come to school enough.

Monitor: OK, what are some choices to help you come to school more often?

Student: I could get my brother to wake me up in the morning.

Monitor: So part of the problem is you don't get up in the morning. OK, what's another choice?

Student: I could ask my mom to make sure I get up and go to school.

Monitor: Good idea. How about one more idea--its important to think of three ideas in case the first two don't work out.

Student: I don't know. I could just go to school.

Monitor: Right, but how would you do that? If getting up in the morning is a problem, then asking someone to wake you is a good idea. What about going to bed at night? Do you get enough sleep?

Student: I'm usually pretty tired. I get to bed kind of late.

Monitor: Maybe then you could think of a solution that relates to going to bed.

Student: I could go to bed earlier.

Monitor: OK, great. You have three choices. Let's consider each one to decide which would be the best choice to do. If you asked your brother to wake you in the morning, would that work?

Student: Yeah, he usually gets up when I do to get ready for school.

Monitor: Do you think he'd do it?

Student: I guess.

Monitor: OK. How about your second choice--asking your mother to make sure you get up and go to school?

Student: Well, she's usually already gone to work by the time I get up. But she could call me from work.

Monitor: Do you think she would do that?

Student: I don't know; she might forget.

Monitor: How about the third choice? The one about getting to bed earlier so that you're not so tired in the morning.

Student: Yeah, I could do that.

-Illustration continued next page-

-Illustration continued-

Monitor: OK, now that we have discussed all three, choose one idea that you think will work best to solve the problem of not getting to school.

Student: I could talk to my brother and see if he'll get me up.

Monitor: OK, but I have one more idea for you. Do you have an alarm clock?

Student: No, only my mom does.

Monitor: Well, what if I got you an alarm clock and that way your brother would just have to make sure you get up after it goes off?

Student: OK.

Monitor: Will you still be tired in the morning.

Student: Probably. I should go to bed early too.

Monitor: Well how about if you try going to bed early and using the alarm clock for now. And then we'll talk next week to see if it worked. And then we can decide if you want to try another solution.

Student: OK, but when will I get the alarm clock?

Monitor: I'll drop it off tomorrow and then we'll talk the same time next week to see how its going.

Student: Al'right.

Monitor: Good luck and good work solving your problem.

Connecting Students to School: Supplemental Intervention Strategies. The second level of support goes beyond these four core interventions. For students who showed signs of disengaging, supplemental intervention strategies were implemented based on individual student needs. The supplemental strategies drew upon three broad areas of support: problem solving, academic support, and recreational and community service exploration. Often, these strategies involved connecting a student with a tutor-mentor, helping parents access social services, getting students involved in community service, and so on. The Five Step Plan was used immediately to collaboratively problem-solve with the student and other key stakeholders (teachers, school staff, parents) using the non-blaming interactions and problem solving family-school meeting strategies described by Weiss and Edwards.⁴ The emphasis on the problem-solving process provides the conceptual framework for prevention activities. It systematically invites students to plan and manage their own problems, and build competencies that will allow them to constructively manage conflicts in the future that may otherwise result in undesirable consequences (i.e., dropping out of school).

A description of the interventions in the three areas of supplemental support (i.e., problem solving, academic support, and recreational and community service exploration) is provided here, as well as information regarding the degree to which students were involved in any one type of supplemental support. Existing programs were used as much as possible, rather than developing a separate set of programs and duplicate services. It was our belief that interventions were more likely to remain in place after the project ended if we could establish networks with community organizations and build on connections with individual professionals in the school district and the community at large.

A summary of intervention participation is provided in Table 14. The information is reported in two ways for each of type of supplemental support: (a) for students who were involved in at least one type of a supplemental support (e.g., a student who received problem solving support, through participation in the social skills group) and (b) for those students who were involved in three or more types of a supplemental support (e.g., a student who received problem solving support, but through participation in the social skills group, parent problem-solving meetings, and alternatives to out-of-school suspension).

	Problem Solving		Academic Support		Recreational and Community Service Exploration	
	≥1 Type % (Freq.)	≥3 Types % (Freq.)	≥1 Type % (Freq.)	≥3 Types % (Freq.)	≥1 Type % (Freq.)	≥3 Types % (Freq.)
Cohort 1:						
Grade 7 (N=112)	77 (86)	6 (7)	89 (100)	13 (15)	66 (74)	1 (1)
Grade 8 (N=120)	71 (85)	42 (50)	72 (86)	4 (5)	38 (46)	0 (0)
Cohort 2:						
Grade 7 (N=136)	96 (130)	62 (84)	90 (123)	21 (29)	51 (69)	0 (0)
Grade 8 (N=123)	78 (96)	72 (88)	76 (94)	51 (63)	72 (88)	21 (26)

Problem-solving refers to the general problem-solving and conflict management skills of youth and relevant adults in their lives. Several strategies described here were used to promote constructive problem-solving: (a) student social skills groups, (b) parent problem-solving meetings, (c) immediate problem-solving sessions with students exhibiting high risk behaviors, (d) individualized behavioral contracts, (e) alternatives to out-of-school suspension, and (f) family mediation services for truancy.

1. Students involved in **social skills groups** met, on average, 2 to 3 times per week.

Resource materials were pulled together for group leaders in the form of a manual. We prepared the manual after reviewing published resources (i.e., Skills Streaming, Life Space Interventions, etc.) and materials that had been developed locally by building teachers and resource staff. The material was organized by topics that were identified as most salient for middle school youth by the school staff leading the groups. The manual begins with an ice breaker, group building, and rule setting activities and covers four general topic areas - mastery of self, mastery of situation, anger management, and skills for classroom success. The Five Step Plan, mentioned previously, was the common strategy used across all the student groups.

2. In conjunction with the student problem-solving groups, regular **parent problem-solving meetings** were convened. The material covered in the student social skills groups was shared with parents during the meetings. The agenda typically revolved around a discussion

in which parents were encouraged to talk about their reactions to information presented during a meeting and to share problem-solving strategies they found to be effective at home. The rationale behind the parent component was that student competencies would stand a greater chance of improving if parents and teachers were working together and were reinforcing the same skills at home and at school. The meetings were held on a monthly basis in the evenings at a *neutral* building in the community. The meetings were not held at the school site for two reasons: first, it was important that parents felt comfortable in their surroundings; second, it was important for the meetings to be conveniently located to facilitate transportation, since students do not typically attend their neighborhood schools. Each meeting began with dinner and introductions. Day care, transportation, and a nominal stipend were provided to parents, school staff and guest presenters. Prior to each meeting, each family was contacted by the student's monitor or teacher to verify whether they would attend and were in need of transportation. Contact was made by mailing out invitational flyers one week before the meetings, calling the parents, and making a home visit if they were not contacted by phone. Several attempts were usually required before contact was made, often up until the day of the meeting. Attendance varied from meeting to meeting, sometimes as low as 20%, other times as high as 80%. Over the course of the years, 70% of the parents had attended meetings with some regularity.

3. **Immediate problem-solving sessions** were held with students who exhibited high risk behaviors. The "sessions" were similar to the monthly conversations with students, but focused on the real life situation. If a student was sent to the office on a behavior referral, for example, the monitor might address the incident with the student using the five step plan. The student would be asked to generate alternative options to the problem and to think about the outcomes of these alternate solutions. This provided students with an opportunity to practice and apply the skills being taught through other project interventions. Follow-up procedures, such as talking with the referring teacher or contacting a parent, were dependent on the particular situation.

4. One strategy used frequently by monitors and teachers was individualized **behavioral contracts**. Generally, reduction or elimination of the problem behavior for a certain period of time would be negotiated for some type of reward. The rewards varied from school supplies, to gift certificates at local fast food restaurants, to shared time together out of school.

5. Promoting **alternatives to out-of-school suspension** primarily involved the assistant principals, principals and other relevant educational administrators. Procedures were set in place at the school site with the level IV EBD program, in which the target student's case manager (i.e., special education teacher) or monitor would be called to the office to join the

assistant principal in determining the outcome of the teacher's referral for suspension. Unfortunately, the procedure only worked about one time out of every three times, and only with constant reminders and prompting of assistant principals and special education teachers by the intervention coordinator. The case managers or social worker were not always available for immediate consultation; the assistant principals often had ten other students waiting outside the door. The assistant principals at the intervention school with the level IV LD program were not responsive to the idea of establishing a standard alternative suspension procedure for the target students. All interventions of this type were made on a case by case basis.

6. Two programs in the county were pilot testing **alternative responses to truancy**, court proceedings being the traditional mode of operation. Project staff facilitated the link between these programs and target students. One of the programs was called Family Mediation. The mediation process differed from the traditional court procedure in several ways: (a) mediation was initiated immediately or within a few days, as opposed to action being delayed for several weeks; (b) parent/guardian and the student were brought together to talk about the reasons for truancy and to develop a solution that would ensure regular attendance, as opposed to having no involvement in the decision making; and (c) a trained mediator facilitated the parent/guardian-student meeting, drafted the contract, presented the solution to the courts (often bypassing formal hearings), and followed up with the student and family. The second program was call TAPS - truancy action panel overview. TAPS was also a pre-court intervention in which immediate action was taken after a student had been identified as truant. Home visits were made with the intention of bringing the student back to school.

Academic Support was provided to support students' connection with school using two strategies, including connecting students with a tutor-mentor, and drafting individualized academic contracts.

1. Students were paired with **tutor-mentors** based on referral from the monitor or teacher. The role of the tutor-mentor was to help the student complete assignments, to provide additional math or reading practice, to provide academic motivational support, and/or to reinforce the importance of staying in school. The hyphenated term tutor-mentor is used intentionally to convey the notion that the adult's role was most closely related to that of an "academic cheerleader," rather than a professional instructor or contrived "best" friend. The tutor-mentors were drawn from a variety of programs, some of which were pre-existing; they provided support either during school or after school. The tutor-mentors ranged in age from high school students, to college students (both undergraduate and graduate), to working professionals, to parents of other target students. A number of students also supplemented math

and reading instruction through the use of computer-aided instruction implemented in both schools. The program was developed by the Computer Curriculum Corporation (CCC) and was staffed by an undergraduate college student. The CCC program continues to be used by both school sites.

2. Individualized **academic contracts**, similar to the behavioral contracts, were used. Generally, improvement in grades or increased frequency of assignment completion would be negotiated for some type of reward. Again, the rewards varied from school supplies, to gift certificates at local fast food restaurants, to shared time together out of school.

Recreation/community service exploration was the third element of the supplemental intervention strategies. The project attempted to support and promote the "extracurricular" involvement of youth by facilitating youth involvement in after school activities, establishing a community service tutoring program, and helping students arrange for summer jobs and/or structured summer activities.

1. Several strategies were employed to facilitate youth involvement in **after school activities**, either in the school or community. Project resources were focused on helping students access the activities, rather than developing new activities or duplicating existing services. Strategies included (a) making a home visit to get the student's permission form signed, (b) helping students fill out forms to waive participation fees, (c) telling students about the program options and bringing them to the first meeting, (d) inviting program coordinators of recreational and life skills programs in the community to attend project parent meetings to share information with the parents, (e) co-staffing some of the after-school activities, and (f) helping to coordinate transportation.

2. Twenty-six target students participated in a **community service tutoring** program at an early childhood center adjacent to one of the intervention schools, a program that was funded in part by the Minnesota Department of Education through the Youth Service and Community Service grants. For two to five hours per week, target students would assist in a classroom by reading and helping the youngsters with their creative and recreational activities. Participation in this program was based on a combination of teacher referral, student interest, and student scheduling logistics. The middle school students were registered for the community service tutoring through their elective class period and received a grade from the early childhood and coordinating middle school teacher. The responsibility for monitoring the middle school students' passage from building to building every day was shared by several adults, including school and project staff. The coordinating teacher and the project's intervention coordinator attended to any other related trouble shooting.

3. Project staff worked in collaboration with teachers to help 10 students arrange **summer jobs** and/or structured summer activities. The city offered a limited number of summer jobs to city youth, ages 16 years and up (exceptions were made on occasion for youth ages 14 and 15). Project staff efforts included making home visits to get parent permission signatures, taking students downtown to get proper documentation to verify their eligibility for the program (e.g., birth certificate, social security card), and encouraging students to participate in the program.

■ **Systemic Capacity Building**

Intervention strategies were also implemented to build capacity within the families, within the infrastructure of the schools, and to establish systemic connections between home and school. A number of broad-based strategies were initiated: (a) implementing a DISCOURSE communication system, (b) hiring parent workers, (c) facilitating parent-teacher action research teams, (d) helping parents earn GEDs, and (e) facilitating students' transition from middle school to high school.

Implementing DISCOURSE. DISCOURSE is a computerized communication system intended to increase students' engagement in the learning process and to enhance student-teacher interaction. This intervention was implemented at one of the target schools, and funded in part by the University of Minnesota, College of Education and Human Development and by the Minneapolis Public Schools. Physically, the DISCOURSE System consists of a DISCOURSE card loaded into an IBM/compatible PC and 32 separate student studycoms consisting of keyboards with small screens attached. DISCOURSE networks the students and teacher, so that the teacher has instantaneous information on the responses of all students in the class and all students can have instantaneous feedback on their responses. Approximately 116 target students were exposed to DISCOURSE ranging in frequency from daily to biweekly. Student participation was a combined function of teacher interest and project efforts to maximize target student exposure. The school acquired a second DISCOURSE system through a cooperative project with the University; both systems continue to be used regularly.

Hiring Parent Workers. Over 40 parents of treatment students were hired throughout the project period to work part time in the schools, averaging 15 hours per week at \$6 an hour. The primary role of the parent worker was to provide emotional and motivational support to students. The parent workers were typically paired with a teacher or team of teachers to work in the classrooms, but some also helped out in the lunchroom, halls, and media center. For many of the parents, this was their first job experience and they needed a great deal of support to develop appropriate work habits (e.g., coming to work regularly, being on time, calling if unable to work, turning in a time card, and so on).

Facilitating Parent-Teacher Action Research Teams. A parent-teacher action research team, referred to as Parents and Teachers Heading for Success (PATHS), was established in each intervention school. These efforts were funded by a grant from the Institute on Responsive Education at Boston University. Approximately half of the parents on each PATHS team were involved in the Check and Connect/Partnership for School Success project. The evening meeting format used with the parent problem-solving groups was also used for the action research teams. Parents and teachers were brought together to identify the pressing issues in their schools, to choose a problem, and then to develop, implement, and evaluate an action plan. Both teams identified communication between home and school as the major problem. Four strategies were implemented to confront the issue: a homework hotline, interactive homework, a guest lecturer program, and a parent visitor program. Two of these strategies still remain in practice (i.e., the hotline and interactive homework). The guest lecturer and parent visitor program were both well received, but were too resource intensive to maintain by the school alone.

Homework hotline was a vehicle for parents and students to call in and find out what homework assignments or projects were due for the week, as well as upcoming school events. In terms of hardware, the hotline was a set of answering machines hooked up to designated telephone lines. Each team in both of the schools had its own line. The message was updated regularly by one of the team teachers.

Interactive homework was a strategy implemented in one school to engage parents in the monitoring and encouragement of students' homework assignments. Certain components of the homework activity required the input of family members. Students were asked to update their "blue assignment books" regarding their academic progress and outstanding homework assignments. They were also asked to have their parents regularly sign off. Various incentives, such as coupons or raffle tickets, were used to maintain the participation of the parents or other family members.

Guest lecturer program was initiated by one of the action research teams. Adults from the community, including family members of the students, were recruited to guest lecture during class periods on topics relevant to the curriculum unit. The presentations covered topics ranging from frying chicken and warnings about cholesterol intake, to employment opportunities with Pepsi, to one man's journey from Ethiopia, to a special unit on sex education, to "Black males: An endangered species." These provided students with an opportunity to meet successful people from their community, to extend learning beyond the classroom walls, and to experience the collaborative efforts of home, school, and community.

Parent visitor program was initiated by both action research teams. The family members of all 120 students were invited to spend some time at school, ranging from an hour to the whole day. The various activities included observing in the classroom, helping with bus duty, guest lecturing, and assisting in the library or lunch room. Some specific goals of this effort were to demonstrate to youth

that their families value education, to provide opportunities for school staff and parents to get to know each other, and to increase the variety of ways in which home-school partnerships can be achieved.

GED Preparation for Parents. A GED preparation program was available for parents in both schools through the CCC computerized software package used for tutoring students. Parents were free to practice on the computer and were offered support from community resources and project staff to help with the process of actually taking the GED exam (i.e., filling out the form, paying the fee, getting to the community center). Parent workers most often took advantage of this opportunity. Adult education classes taught in the building after school hours used the CCC GED program for other interested adults in the community. Over 40 parents of youth with and without disabilities utilized the program

Transition. To facilitate the transition from middle school to high school, students were encouraged to participate in the high school orientation sessions, during the winter quarter of their 8th grade year. Students and counselors from the seven high schools toured the middle schools and promoted their programs. Project staff also facilitated personal site visits for 13 students in the spring. The monitors drove their students to the schools, introduced them to the special education teachers, and accompanied them on the building orientation tour.

For a portion of students, the Check and Connect/Partnership for School Success intervention was continued through the 9th grade school year (see Appendix C). Each of the cohort 2 treatment students were randomly assigned to either the "continuation" treatment group or the continuation comparison group. Ninety-four of the 138 cohort 2 treatment students entered the Minneapolis Public School system during 9th grade and participated in the continuation study. No significant differences were found between the continuation treatment and comparison groups across eight demographic characteristics (i.e., age, disability category, gender, SES, adult with whom the youth resides, racial/ethnic composition, primary home language, and an 8th grade profile rating). It was hypothesized that the middle school intervention would not be sufficient to promote a successful transition to high school and to maintain students' engagement with school. A separate report will be available on this continuation project in Spring 1996, authored by the project directors of this Check and Connect/Partnership for School Success project evaluation.

Vignettes of Interventions - Need Match

Three vignettes are presented to augment the preceding response to the question "how did we intervene?" The vignettes illustrate how the Check and Connect procedure was used and the degree to which the interventions matched the needs of the students. Initially, one might assume that there is a

direct correlation between students' risk and the amount of intervention they require. However, consider the following scenario:

Two students are at risk for dropping out of school. One youth is failing classes because of missing homework assignments. The other student never arrives to school until 3rd period, and subsequently is also failing classes. One student is assigned a tutor for 3 to 5 hours a week, the other student is given an alarm clock. Both students turn their grades around by the end of the quarter. In this case, the observed student behavior is functionally equivalent, but the amount of intervention provided was substantially different. Nonetheless, the intensity of the intervention was appropriate for both students.

Our strategy for evaluating the degree of match between student need and intervention intensity was to analyze a subset of both quantitative and qualitative data and to draw upon the monitors' experiences with and knowledge of their students. A rating scheme was devised by project staff using a two step process. First, the same 10 cases were given to each monitor to score individually. At this stage, each monitor was asked to develop her or his own scoring system. Then as a group, each monitor presented the scoring system and rationale for the rating assigned to each case. A common rating scale evolved from this process (i.e., no match, partial match, match), as did common reasons for the assigned ratings (e.g., needs exceeded resources). The monitors used the common scoring system and their monitoring sheets to then rate each student on their case loads.

A rating was assigned to 95 of the 138 treatment students in cohort 2, based on their 8th grade experiences. (The remaining 44 students in cohort 2 were not rated because they were no longer enrolled in either of the two target middle schools, or were no longer receiving special education services.) A "match" rating between intervention and need was assigned to 33% of the students (N=31), 43% (N=41) were assigned a "partial match" rating, and 24% (N=23) were assigned a "no match" rating. Five reasons were cited most frequently for assigning a student a partial or no match rating (see Table 15). Multiple reasons could apply for each student.

Reason for Rating	Partial Match		No Match	
	%	Freq.	%	Freq.
Needs exceed the resources	49	20	65	15
Lack of parental support/responsiveness	41	17	52	12
Lack of school support/teacher responsiveness	26	11	26	6
Apparent lack of intervention	17	7	9	2
Timeliness of intervention	14	6	9	2

Match Vignette

Vanessa is a student with a learning disability who attends special education classes. During 8th grade Vanessa had poor attendance (she missed on the average six days per month, with a range from 1-13 days of absence). She was also suspended frequently during 8th grade (an average of two times per month) for a number of reasons that ranged from skipping class to refusing to do work or angry outbursts at staff. Vanessa was slow to bond with other people and it took a long time for her to "connect" with school and project staff.

Vanessa experienced a great deal of transition. She primarily lived with her mother, but they moved several times during the school year. On one occasion their house was condemned and another time they were evicted for not paying the rent. Vanessa would move back and forth between her uncle's and her grandmother's house. With all of the different family members in Vanessa's life, there was no one person that supervised her whereabouts or school performance. Sometimes when Vanessa's monitor would call her at her relatives' home, they were uncertain as to her present location.

The project monitor met with Vanessa a couple times per week in order to encourage her to come to school, tutor her in math, and set up a reward system for completing assignments. Each day Vanessa did not come to school her monitor would call home looking for her. In addition, her monitor would consult with Vanessa's teachers so that her assignments were adequately modified to meet Vanessa's skill level. The monitor would also meet with other school staff so that alternative interventions were used in place of suspensions. Vanessa responded well to her project monitor and her performance gradually improved. Vanessa began to stop by her monitor's office on her own to talk even on the days they did not meet.

Despite the risk factors present for Vanessa she was able to do well in school. The number and type of interventions provided by the school and the project seemed to be a good match for Vanessa. Her attendance (days absent decreased to two per month), behavior (no suspensions in the last three months of school), and her academic performance improved over the course of the school year. Not only did she come to school and complete her assignments more often, but Vanessa also began to ask her teachers questions when she did not understand, which was something she previously had difficulty doing. The persistent monitoring by the project staff seemed to be the right match for Vanessa.

Partial Match Vignette

Erica is a friendly student who gets along very well with adults. She is skilled at pleasing adults in a non-manipulative fashion. However, Erica is not so skilled at her school work or getting along with peers. Teachers at school consider Erica to be a student with a learning disability, with the characteristics of mild to moderate mental retardation. She is taught in non categorical special education classrooms. Erica is often teased by her peers because she is overweight and her clothes are different from most students her age.

At age 13 Erica was living with her grandparents and cousin. The conditions at her home were chaotic and stressful. No one seemed to be taking care of Erica. Her grandmother was ill as a result of diabetes and alcoholism and her cousin was allegedly sexually abusing Erica. At home, Erica appeared to be the primary caretaker of everyone else. This stress and neglect were noticed in Erica's interactions at school.

Erica attended school sporadically during 7th grade. When she attended, she was wearing ill-fitting clothing, came with no jacket, and was often unbathed. In response to her peers' disapproval and teasing, Erica became violent and engaged in temper tantrums, crying, and throwing chairs. When Erica's grandparents attended IEP meetings, they were excessively confrontational toward Erica. The combination of her poor attendance, violent outbursts toward peers, and the lack of support from home prompted school personnel to intervene to improve Erica's support both at home and school.

First, Erica's case manager and her project monitor contacted county social services to report the potential for abuse and neglect. Frequent home visits were made by county and school staff to assess Erica's home situation and develop a plan to improve her home life. Second, a behavioral intervention was developed to decrease Erica's violent outbursts. Teachers noticed that Erica came to school grumpy, which affected her entire day. A school staff member was assigned to greet Erica each morning to see that her day began smoothly. With the added attention in the morning, the remainder of Erica's day improved considerably.

School personnel also washed Erica's clothes when she came to school with dirty apparel. She was instructed in basic life skills that helped her learn to care for her own daily living needs. In addition, Erica was involved in monthly problem solving sessions and other activities with her project monitor. Erica's attendance slowly began to improve. However, circumstances at home had not changed.

-Partial Match continued on next page-

-Partial Match continued-

Finally, other agencies worked in collaboration with the school and the county to intervene on Erica's behalf. After three months, the decision was made to have Erica removed from her grandmother's home and have it condemned due to its unlivable conditions. At that time, when all of the systems in Erica's life were coming together, Erica was sent by her grandmother to live with her mother in another state. Erica reported that she did not attend school when living with her mother and therefore missed three months of school at the end of her 7th grade.

Erica returned to the target school at the start of 8th grade. She exhibited the same problems that she had at the start of 7th grade. Erica was attending school infrequently (e.g., missing on the average five days/month) and fighting with her peers (e.g., seven suspensions during the school year). Erica's grandmother had passed away, and she and her mother were living with other relatives and friends. Despite the new setting, her home life was as difficult as it had been the year before. There was conflict between Erica's mother and the other members of the household, eventually resulting in Erica and her mother leaving home to live temporarily in a shelter. While living at the shelter, Erica's behavior deteriorated (e.g., hitting a teacher with a crochet hook). However, in spite of their residential mobility, it seemed as if Erica was receiving slightly more home support in 8th grade. For example, her mother had a 75% attendance rate at monthly parent meetings. With this increased home support and regular attention from school staff (e.g., daily problem solving sessions), Erica eventually was able to return to the improved point she had reached when she left the year before.

Although Erica made significant gains in both 7th and 8th grade, it seemed that only a partial match between need and interventions was achieved. Her project monitor reported that the school and the county worked extremely well together to support not only Erica, but also her family. Despite the support, the out-of-state move in 7th grade interfered with Erica's schooling and the interventions that were in place. A large portion of her education was interrupted. It is known that family circumstances, such as moving, often make it difficult for students who have few resources and who have difficulty adjusting to new situations. When a family makes a decision to move, it indirectly makes the decision to terminate the services the youth may be receiving. In this case, it is beyond the control of the school, or other human service agencies, to continue to deliver their services. Regrettably, as in Erica's case, a departure from services usually has a negative impact on the student.

No Match Vignette

Larry is a Native American student who receives special education instruction for an emotional/behavioral disability. In the 7th and 8th grades Larry attended almost full day instruction in a segregated special education classroom, with only one class in general education. Larry disliked his special education classes and would have preferred a "mainstream" education. However, his behavior was not considered acceptable for such classes. The behavior Larry exhibited disrupted both the school staff and his classmates. When frustrated, Larry would argue with adults and fight with his peers. He was frequently suspended for aggressive and hostile behavior (getting suspended an average of 2 days per month during 8th grade). If things escalated to a certain point, Larry avoided the conflict altogether by leaving the classroom or the school building. School staff would then track him down in the surrounding neighborhood.

Although Larry had difficulty handling his emotions in problem situations, he was very skilled in interacting with others in other situations. School staff describe him as a nice kid with a great personality. They saw him as unchallenged by school and more attracted to things going on outside of school. Larry had many friends who did not attend school, and he preferred to hang out with them during school hours. On average, Larry was absent 11 days per month in 8th grade.

Larry's mother, Pam, was a parent worker with the project at Larry's school. She was at school consistently and attended all of the parent meetings held by the project. Pam was very supportive of Larry and his school, but she was not supportive of Larry's teachers. Pam often blamed the teacher's for his problems. Her blame was more pronounced during Larry's 8th grade year. This was due in part to staff turnover in the special education program. As often happens with school staff turnover, the beginning of the school year did not begin smoothly; the transition from the old to the new staff contributed to Larry's and Pam's dissatisfaction with Larry's education. Neither Larry nor Pam believed that Larry's instruction was appropriate for him. Despite Pam's dissatisfaction with the teachers, she continued to assist them with Larry's education. For example, when Larry would take off from school, Pam would offer to join school staff in searching for him.

Pam was not without her problems in handling Larry. Pam is a single parent with three children; Larry has two younger brothers. Larry's physical size is considerably larger than Pam's, which made it more difficult for Pam to control Larry's behavior. He frequently got into trouble outside of school (e.g., stabbed in the back with a butcher knife by a "friend"; unauthorized use of automobile), the least of which resulted in a court appearance and the assignment of a probation officer. Eventually, Pam had so little control over Larry's behavior, that she, along with the county, school, and project staff arranged for Larry to be sent to a residential treatment program midway through his 8th grade year.

-No Match continued on next page-

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Prior to Larry's residential placement, school and project staff tried many things to involve Larry in school and improve his performance. Aside from daily monitoring of his attendance, the project monitor would try to meet with Larry on a weekly basis to conduct problem solving sessions, review the economics of staying in school, and provide feedback. This was difficult because Larry was rarely present at school or at home when the monitor would look for him. In addition, Larry's teachers offered to allow him to add one general education class to his schedule if he could maintain positive behaviors for two successive weeks. This was not met due to Larry's poor attendance and behavior.

After Larry transferred to the residential treatment program, Pam continued as a parent worker and attended the remaining parent meetings. Project staff also assisted Pam in going back to school to obtain her license in social work by providing her with information about local college programs. The support for Pam continued beyond Larry's residential placement.

Even though a variety of interventions were implemented, none seemed sufficient to connect Larry to school. His attendance and behavior remained poor, and he never connected with his teachers or project staff. Neither the problem solving instruction nor the rewards were effective for Larry. The school and project interventions did not seem powerful enough to address Larry's problem behavior in the community. It seems that Larry's needs exceeded the resources the school or project could provide him. Therefore, the intervention was not a good match.

Check & Connect: SECTION II

Endnotes

- 1 Seeley, D. (1985). Education through partnership. Washington, D.C.: American Enterprise Institute for Public Policy Research.
- 2 Finn, J.D. (1993). School engagement and students at risk. (U.S. Department of Education, National Center for Educational Statistics) Buffalo, NY: State University.
- 3 Braswell, L. & Bloomquist, M. (1991). Cognitive-behavioral therapy for children with attention deficits and hyperactivity: A child, family and school model. New York: Guilford Press.
- 4 Weiss, H.M., & Edwards, M.E. (1992). The family-school collaboration project: Systemic interventions for school improvement. In S.L. Christenson & J.C. Conoley (Eds.), Home-school collaboration: Enhancing children's academic and social competence (pp. 215-243). Silver Spring, MD: National Association of School Psychologists.

SECTION III

How Did the Intervention Work?

The third section of the project evaluation addresses how the intervention worked. The response to this question is based primarily on student outcomes, but also includes parents' and teachers' appraisals of intervention activities. This section begins with a presentation of student outcomes. Outcomes of interest include student progress, student behaviors, student perceptions, and teachers' ratings of student performance. The second and third parts of Section III are presentations of parents' and teachers' opinions about the importance of the Check and Connect/Partnership for School Success project activities. Relevant information about the research design is addressed within each subsection, including the following: research questions; data collection schedule; and descriptions of measures, results, and statistical procedures. Both quantitative and qualitative data are reported.

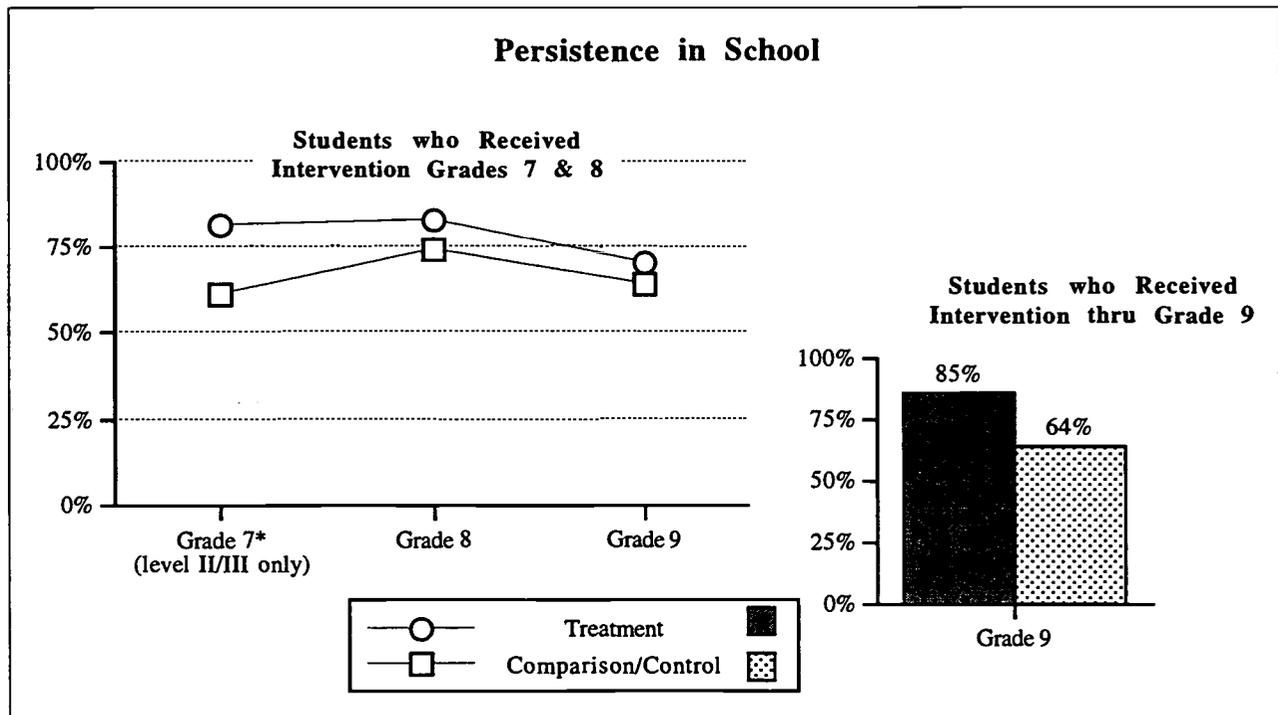
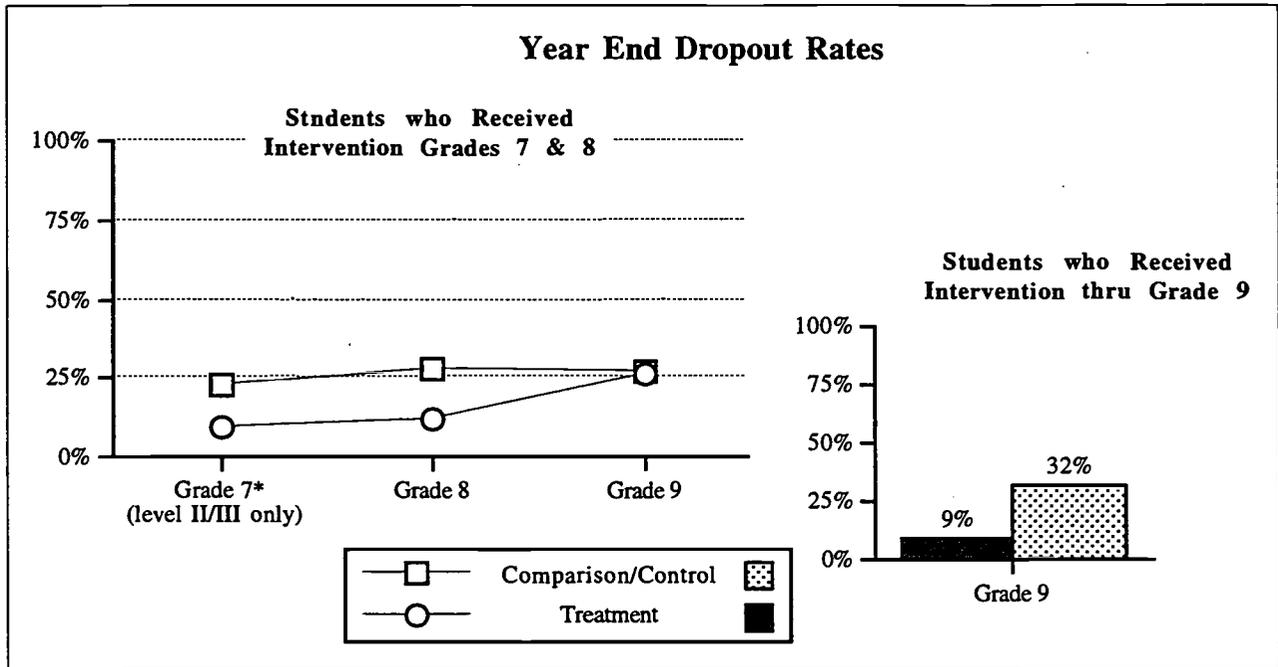
Baseline data were collected during the first year (Planning, 1990-1991) from teachers, students, and parents regarding their general opinions about school and the partnership between home and school (see Section I). During phase two of the project (Interventions, 1991-1994), survey instruments were administered to students and teachers pre- and post-intervention (pre = fall of 7th grade and post = spring of 8th grade) for two cohorts of students. Information from the District's database regarding student attendance, suspension incidents, grades, and credits was downloaded annually every June. In addition, monthly enrollment status of all students was documented through Year 5 of the project. Social validity data were collected from parents and teachers during the last years of intervention.

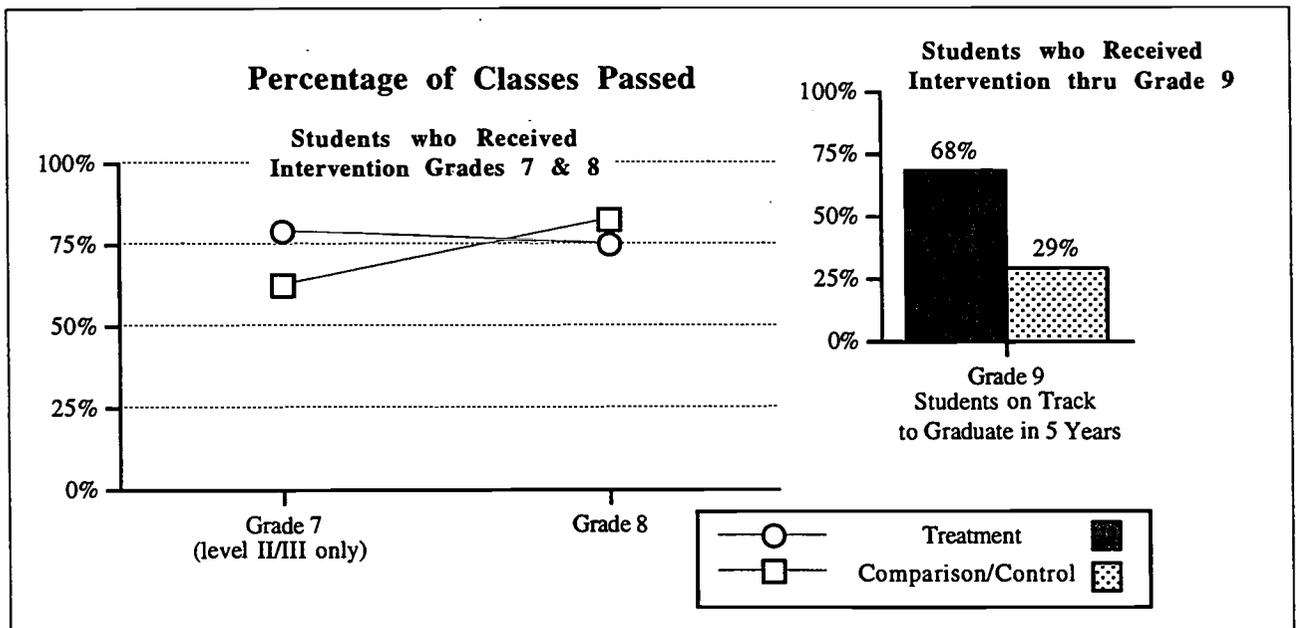
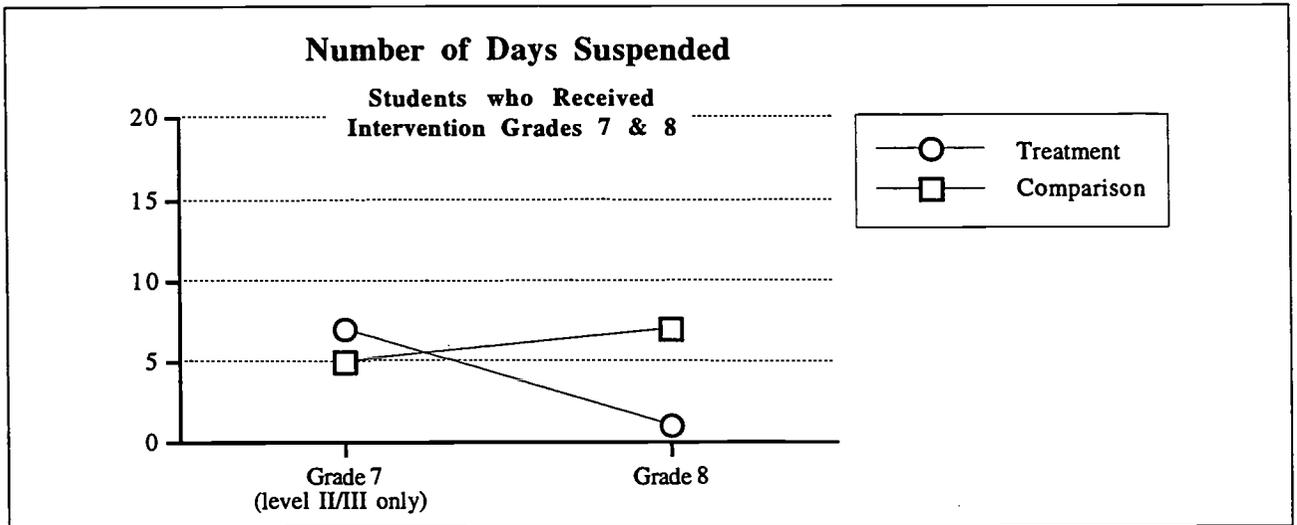
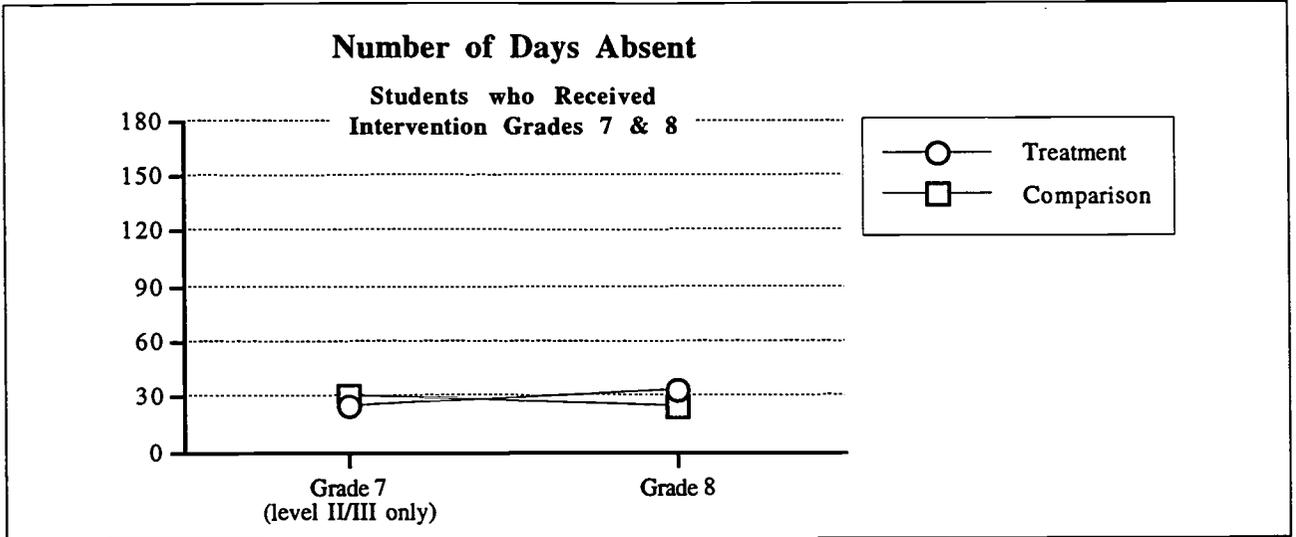
Student Outcomes

Student outcomes were assessed by examining data for five constructs: (a) enrollment status, (b) progress toward school completion (i.e., the accrual of credits), (c) participation in school, (d) identification with school, and (e) school performance, including academic, social, and behavioral competence. For two of these constructs, grade 9 data (i.e., first year of high school) were examined in addition to grade 7 and 8 data. The effectiveness of intervention was most evident for cohort 2 students in two of the five student constructs - *enrollment status* and *progress toward school completion*.

■ Highlights of Cohort 2

A glance at the primary risk factors monitored using the Check and Connect school engagement and dropout prevention procedure.





■ General Data Analysis

The effectiveness of the intervention was assessed by (a) running post-test (grade 8) analyses of treatment and comparison groups, and (b) examining changes in the outcome variables over time (grade 7 to grade 8). The outcome measures presented in this project evaluation were collected by all three dropout prevention projects (i.e., ALAS, Belief, Check & Connect) and are organized in Table 16 according to the theoretical constructs of Finn's participation-identification model of school engagement¹ described in Section II (see p. C-31).

Table 16. Student Outcome Measures organized according to Finn Model	
Constructs and Selected Variables	Source of Data
Enrollment Status <ul style="list-style-type: none"> • year-end enrollment status • persisters vs. interrupters 	<ul style="list-style-type: none"> • tracking system • tracking system
Progress toward Graduation <ul style="list-style-type: none"> • accrual of credits 	<ul style="list-style-type: none"> • Unisys
Participation in School <ul style="list-style-type: none"> • absences - total number for school year • absences - % of school year • assignment completion • classroom participation - student rating • classroom participation - special education teacher rating • classroom participation - general education teacher rating • time on task 	<ul style="list-style-type: none"> • Unisys • Unisys • AcadPerf (item 1a) • SSRS-S (items 13, 16, 17, 35) • SSRS-T (items 12, 19, 20, 29) • SSRS-T (items 12, 19, 20, 29) • BOF (items 1-180)
Identification with School <ul style="list-style-type: none"> • non-alienated from school • effort - works hard in school • relevance of school • expectation to graduate • connection with adults in school 	<ul style="list-style-type: none"> • SSOS (items 16, 19, 20, 23) • SSOS (items 10, 21, 22, 24) • SSOS (items 2, 8, 13, 17) • SSOS (item 55) • SSOS (items 48.1-48.6)
School Performance <i>Academic Competence:</i> <ul style="list-style-type: none"> • grades - % academic classes passed • grades - % nonacademic classes passed • academic competence - special education teacher rating • academic competence - general education teacher rating • assignment quality <i>Social Competence:</i> <ul style="list-style-type: none"> • social competence - student rating • social competence - special education teacher rating • social competence - general education teacher rating • "I get along with others" <i>Behavioral Competence:</i> <ul style="list-style-type: none"> • out-of-school suspension incidents • problem behaviors - special education teacher rating • problem behaviors - general education teacher rating 	<ul style="list-style-type: none"> • Unisys • Unisys • SSRS-T (items 43-51) • SSRS-T (items 43-51) • AcadPerf (item 1b) • SSRS-S (items 1-39) • SSRS-T (items 1-30) • SSRS-T (items 1-30) • SSOS (item 9) • Unisys • SSRS-T (items 31-42) • SSRS-T (items 31-42)
Key to sources of data (measures are described further within the text of Section III): AcadPerf: Teacher Rating of Academic Performance. BOF: Behavior Observation Form. SSOS: Secondary Student Opinion Survey. Unisys: School district on line data SSRS-S/T: Social Skills Rating System - Student/Teacher. base of student records.	

Grade 9 data were examined for the constructs *enrollment status* and *progress toward graduation*. The appropriate test statistic was used (e.g., t-test, chi-square test of independence) depending on the

type of data and characteristics of the sample distributions. Because many statistical tests were run, a p value of .01 was selected as the minimum for considering a difference in means significant. The reader is reminded that no pre-test differences were found between the special education treatment and comparison groups across demographic characteristics (i.e., age, disability category, gender, SES, adult with whom the youth resides, racial/ethnic composition, primary home language, mother's educational level).

Presentation of Data by Cohort and Disability Category. The results presented in the main text are reported by cohort and, in some circumstances, by disability category. The analysis was conducted by cohort so that the potential effect of the refined intervention strategy (i.e., described in Section II) provided for cohort 2 was not diluted by cohort 1 treatment. Data for cohorts 1 and 2 are presented in the main text for the constructs of *enrollment status* and *progress toward graduation*. Due to the length and complexity of the document and the minimal number of significant results, only cohort 2 data are presented in the main text for the remaining constructs (i.e., *participation in school*, *identification with school*, and *school performance*). The full results of treatment effect analyses via post-test comparisons, conducted by cohort and disability category, can be found in Appendices A and B. The results of analysis by disability category are presented in the main text for the primary outcome indicator - *enrollment status* and for remaining constructs only when no data were available for the students in the level IV comparison group.

■ Complications in Data Analysis

The overarching research question for the project was whether the intervention kept more youth engaged in school than similar students in the comparison group. Providing an answer to this question was complicated by the task of operationalizing the term intervention, which was originally defined as two years of participation in dropout prevention and school engagement procedures. However to receive intervention, students had to remain enrolled in one of the two treatment schools. While some sample attrition was anticipated, it was assumed that less than full participation would be attributed mostly to dropping out. This assumption was incorrect. In reality, most students were enrolled at the end of 8th grade, just not enrolled in one of three participating project school sites.

While we believe the more meaningful question is whether students remain engaged in school and not whether they remain engaged in **any one particular** school, our research parameters did not allow us to answer this question (with the exception of one construct - enrollment status). Because the intervention was school-based (i.e., it did not follow the student), the degree of sample attrition related to mobility raised two somewhat interrelated complications with the data analysis and reporting process. The first issue is whether intervention effectiveness should be measured using all the students targeted for the intervention or only those adolescents who participated in the full two years of intervention. The second issue is whether the students in the treatment and comparison groups who

were available for post-test data collection are truly comparable or whether the post-test data for the comparison group reflect students who are at less risk for dropping out due to differential attrition.

Full and Partial Intervention. The percentage of treatment students who received full and partial intervention is reported in Table 17. Partial intervention includes students who (a) either enrolled in an intervention school or were not picked up on the special education caseload until some time after September of their 7th grade year, (b) attended another school, correctional or treatment facility at some point within the intervention period (i.e., either in or out of state), or (c) dropped out of school for a portion of the intervention period and were not available to receive treatment.

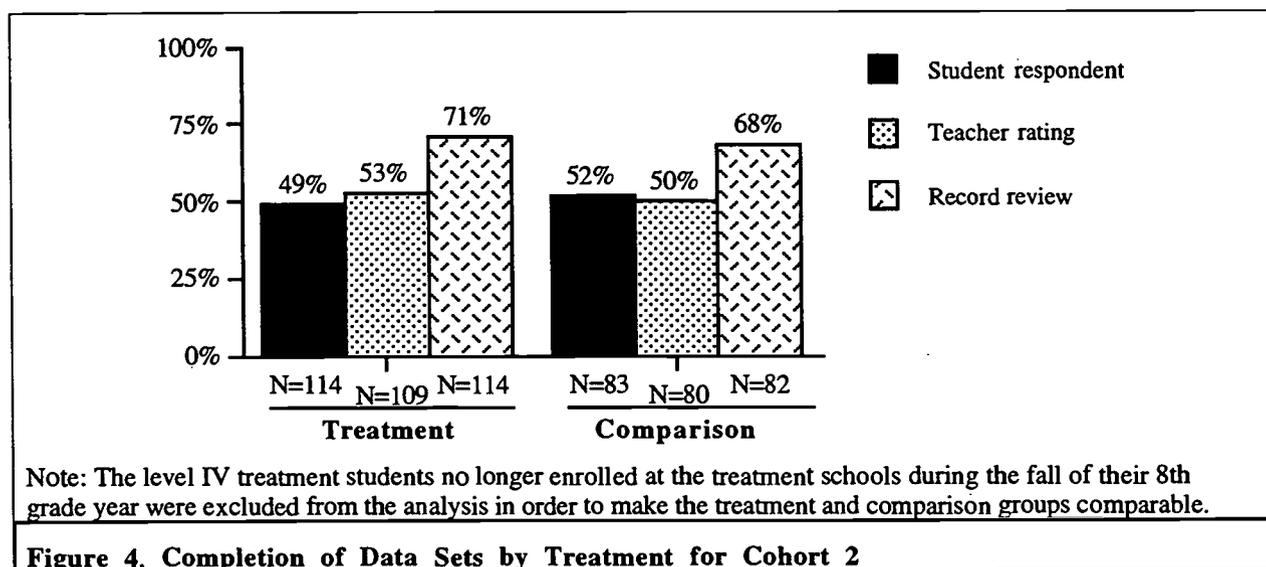
	Full 2 Years	Partial Intervention			
	20 months	19 to 16 months	15 to 11 months	10 to 6 months	5 months or less
Cohort 1 (N=121)	31%	13%	26%	18%	13%
Cohort 2 (N=138)	29%	22%	16%	18%	15%

An analysis including just those students who received a full two years of intervention is the approach that best meets the requirements of the original request for proposals. Such a treatment group would indicate the effect of two years of intervention. However, the exclusion of the students who received partial intervention does not adequately represent the total population of youth with learning and emotional/behavioral disabilities at high risk for dropping out of school. The excluded treatment students are those who were either highly mobile or interrupted their schooling, both are robust predictors of student's exit status. By including all treatment students targeted for intervention, the results reflect the effectiveness of a strategy for a more generalizable population of youth. In this later approach, the holding power of the treatment is encompassed in the analysis. The catch is that the intervention was never intended to address many of the reasons associated with student mobility (e.g., transfers for programmatic purposes either to a more or less restrictive setting, residential movement, non-negotiable administrative transfers for disciplinary infractions). Because both approaches present valid issues, post-test analyses were examined for all the treatment students and just for those who received full intervention on the relevant constructs (i.e., participation in school, identification with school, school performance beginning on p. C-72).

Post-Test Comparability of Treatment and Comparison Groups. Of the five constructs used to measure student outcomes, *enrollment status* was the only indicator for which post-test data were available for every subject (i.e., regardless of mobility). Outcome data on the remaining four constructs (i.e., progress toward school completion, participation in school, identification with school, school performance) were obtained only for those youth who were in one of the intervention schools or the comparison school during the data collection periods. The decision to limit data collection in this way was necessary due to numerous logistical constraints (such as difficulty obtaining parent permission, distance of respondents from district, and limited resources for funding additional staff).

If more high risk students from the comparison group had dropped out or transferred to another school, the post-test comparisons of the data on these four remaining constructs would be biased in the favor of the comparison group. In other words, we questioned whether the high risk comparison students (i.e., youth who are chronically absent, disruptive, fail their classes) were more likely to be out of school during the data collection periods, leaving proportionately more low risk students (i.e., youth who attend regularly, participate in classroom activities, pass their classes) to represent the comparison group.

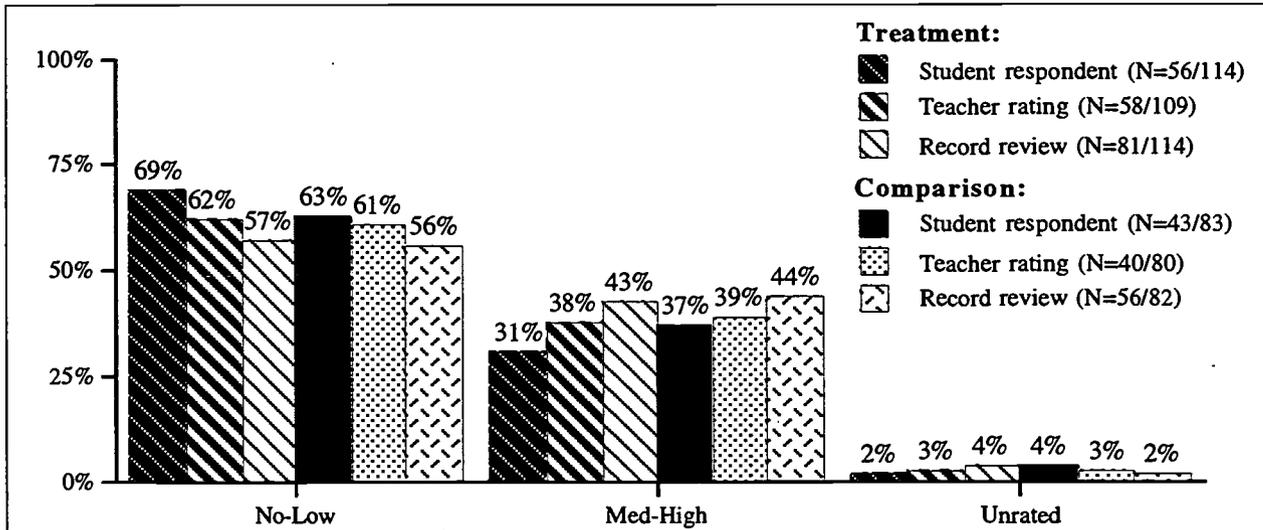
Two assumptions were investigated to test whether differential sample attrition occurred for the treatment and comparison groups. First, it was hypothesized that a larger portion of the comparison group was not available for data collection because more of the comparison students interrupted school. This assumption was not confirmed. As shown in Figure 4, about the same proportion of treatment and comparison students had complete data on the outcome variables in question.



The largest complete data set was the record reviews, as measured by the *grade* data files (71% for the treatment group and 68% for the comparison group). The instruments responded to by the students (i.e., *Secondary Student Opinion Survey*) and teachers (i.e., *Social Skills Rating System*) were complete for approximately half of the sample (49% of treatment student measures, 52% of comparison student measures, 53% of treatment teacher measures, 50% of comparison teacher measures).

Second, it was hypothesized that more of the medium and high profile students (described in Section I) were kept in school in the treatment group than in the comparison group, and therefore had more students at greater risk for dropping out (i.e., it was speculated that the high risk comparison students had interrupted or dropped out during data collection). This assumption was not

confirmed. As shown in Figure 5, the proportions of no-low profile students and medium-high profile students were relatively the same for the treatment and comparison groups. Approximately 55% to 65% of the complete data set is based on the lower profile students and 35% to 45% of the complete data set is based upon medium to high profile students.



Note: The level IV treatment students no longer enrolled at the treatment schools during the fall of their 8th grade year in school were excluded from the analysis in order to make the treatment and comparison groups comparable. The denominator for the "rated" students excludes the "unrated"; the denominator of the "unrated" students includes both "rated" and "unrated" students.

Figure 5. Profile Rating by Treatment for Cohort 2 with Complete Data

Since neither of the assumptions was confirmed about differences in data sets, it was considered appropriate to examine both post-test comparisons and changes over time for the constructs *progress toward school completion, participation in school, identification with school, and school performance*. Two to seven measures, also referred to as indicators, were selected to operationalize each construct (see Table 16). The analyses of changes over time were based on the time from the intervals the beginning of 7th grade to the end of 8th grade. Dependent t-tests were used to confirm independence of the means.

■ Enrollment Status

Student enrollment status is a primary indicator of intervention effectiveness. Enrollment status is examined here in two ways, first using a single point-in-time reference, and second examining status over time.

A standard status rate formula (the proportion of a population that has not completed high school and is not enrolled at a point in time) was used in the first analysis, with status defined by four categories: in school, corrections, dropped out, and unknown.

- "In school" refers to a student who was either in a traditional school (i.e., project or non-project school), alternative program, or treatment center and whose enrollment status had been verified through tracking system procedures (described later).
- "Corrections" refers to students receiving their education through the juvenile justice system.
- "Dropout" is defined here in accordance with school district procedures, that is as a student who had been absent 15 or more consecutive days without an excuse and was not enrolled in any other educational program. Note, these categories are generally consistent with the definition field tested by the National Center for Education Statistics in 1990:

A dropout is an individual who: (a) was enrolled in school at some time during the previous school year; (b) was not enrolled at the beginning of the current school year; (c) has not graduated from high school or completed a state- or district-approved education program; and; (d) does not meet any of the following exclusionary conditions (i.e., transfer to another public school district, private school, or state- or district-approved education; temporary absence due to suspension or school-approved illness; or death).

For the purposes of this definition: A school year is the 12-month period of time beginning with the normal opening of school in the fall; an individual has graduated from high school or completed an approved education program upon receipt of formal recognition from school authorities; and a state- or district-approved program may include special education programs, home-based instruction, and school sponsored GED preparation.

Based on an analysis of the dropout definitions and formulas used by 21 states, Williams (1987) identified five major sources of variation: (a) grade levels used in calculating rates, (b) ages of students who can be classified as dropouts, (c) accounting period for calculating rates, (d) time period for unexplained absence, and (e) acceptable alternative educational settings. She found that the notion of deviating from any one method of assessment was couched in a great deal of resistance ranging from technical incompatibility to financial restrictions to sheer opposition.

- "Unknown" includes students who had left school for unknown reasons and for whom no records request had been made. It is possible that some of these students were enrolled in another educational program.

The second analysis of enrollment status involved examining the event of being in school or out of school over time. Wagner and colleagues² suggested that "persistence in school" probably is a better measure than "graduation." "Persisters" are defined as students who have never dropped out (i.e., have not been absent for 15 or more consecutive days without an excuse). This approach provides a means of describing youth whose attendance and behavior is consistent with that of school "completers," but who are in lower grade levels and for whom a graduation rate cannot be calculated. The standard dropout rate formulas are not fully informative evaluation tools either. They do not differentiate between students who consistently "stay in" from those who have "dropped back in." Since students in lower grade levels are more likely to move in and out of school, rather than to drop out and remain out of school forever, Blackorby and colleagues³ addressed this problem by replacing the concept of "dropouts" with students who had "interrupted their education."

"Interrupters" are defined as students who have dropped out, as defined above, at least once during a designated time interval, regardless of their enrollment status at the end of the interval.

Research Questions. Two research questions were addressed for enrollment status:

- Does enrollment status differ for youth with learning and emotional/behavioral disabilities who participated in the treatment group from similar students in the comparison group?
- How does enrollment status change over time for youth with learning and emotional/behavioral disabilities in the treatment and comparison groups?

Measures and Data Collection Schedule. The tracking system is a longitudinal database used to document student enrollment status. A number of variables were logged and updated on a monthly basis, including: student name, current school or institutional placement, grade level, special education status, contact person, and reason for exit (when applicable). Information sources included project staff, school staff, the district's on-line database, probation officers, and county social workers. The district assigned each student a unique ID number that remained with that youth regardless of movement within the district or into and out of the district.

The procedure for verifying tracking variables began with asking the most accessible and knowledgeable source of information. For students in one of the three project schools, these sources were project staff and the district's on-line database. For students who moved out of the project schools, information about where the student had moved was first collected from a primary source (e.g., project staff or teacher). If the student stayed in district, enrollment status was verified by the on-line database and by calling the attendance clerk at the new school site. If the student had moved out of the district, the information source was typically an attendance clerk at the new setting. Other out-of-district contacts included teachers, assistant principals, social workers, counselors, directors of student data, and legal service staff. Methods of contact included both telephone calls and letters of inquiry. Both approaches were fairly successful. If the name of a school within a district could be obtained, the chance of success improved dramatically. For each contact, the student's name and date of birth were provided to ensure that the correct youth was being identified. Our verification hit rate was about 66% for students who were **no longer enrolled** in one of the district's secondary schools.

Results of Post-Test Comparisons: Status Rates of Enrollment. Enrollment status outcomes are presented in terms of point-in-time status rates first for cohort 1 treatment and comparison groups, then for cohort 2 treatment and comparison groups. This is followed by results on the rates of school persistence and interruption. Reentry rates are reported on students who interrupted their education at least once and returned to school at least once within the same year.

Standard status rates for grades 7 and 8 are presented in Table 18 for cohort 1 and Table 19 for cohort 2. As indicated in Table 18, there are no significant differences between enrollment status for cohort 1 level II/III treatment and comparison groups at the end of 7th or 8th grade, 7th II/III χ^2

(3) = 1.835, $p = .61$; 8th II/III χ^2 (3) = 3.011, $p = .41$. Similarly, no differences in status rates were found between the cohort 1 level IV treatment and comparison students at the end of 8th grade, χ^2 (3) = 3.516, $p = .33$.

Table 18. Year end enrollment status.							
Grade and Level (June)	Cohort 1				Test of Significance		
	Treatment		Comparison		χ^2	df	P
	%	Freq.	%	Freq.			
Grade 7, level II/III		N=68		N=26			
In School	89	61	92	24	1.835	3	.61
Corrections	2	1	0	0			
Unknown	6	4	8	2			
Dropped Out	3	2	0	0			
Grade 7, level IV		N=44					
In School	88	39	n/a	n/a	n/a		
Corrections	2	1					
Unknown	5	2					
Dropped Out	5	2					
Grade 8, level II/III		N=75		N=28			
In School	84	63	96	27	3.011	3	.41
Corrections	4	3	0	0			
Unknown	3	2	0	0			
Dropped Out	9	7	4	1			
Grade 8, level IV							
• In target schools--fall 7th grade		N=46					
In School	72	33	n/a	n/a	n/a		
Corrections	6	3					
Unknown	15	7					
Dropped Out	7	3					
• In target schools--fall 8th grade		N=27		N=45			
In School	96	26	94	42	3.516	3	.33
Corrections	0	0	2	1			
Unknown	0	0	4	2			
Dropped Out	4	1	0	0			

NOTE: Sample sizes differ from 7th to 8th grade because a small group of students were "admitted" to cohort 1 after the mid-year 7th grade cut off period. The N for each group was the denominator in calculating status rates. No 7th grade data are available for the level IV comparison group, because the level IV comparison group was identified at the beginning of its 8th grade year.

Status dropout rates for cohort 1 students at the end of grade 9 indicate that 25% (N = 18/73) of youth in the comparison group were not known to be continuing in school compared to 21% (N = 21/102) of similar students in the treatment group, χ^2 (1) = .325, $p = .61$.

As reported in Table 19, no significant differences were found between enrollment status of cohort 2 level II/III treatment and comparison groups at the end of 7th grade or 8th grade (7th II/III χ^2 (3) = 1.310, $p = .73$; 8th II/III χ^2 (3) = 3.061, $p = .40$). Similarly, no significant differences in status rates were found between the level IV treatment and comparison students at the end of 8th grade, χ^2 (3) = 1.045, $p = .79$.

Table 19. Year end enrollment status							
Grade and Level (June)	Cohort 2				Test of Significance		
	Treatment		Comparison		χ^2	df	P
%	Freq.	%	Freq.				
Grade 7, level II/III		N=84		N=36			
In School	90	75	78	28	1.310	3	.73
Corrections	1	1	0	0			
Unknown	7	6	6	2			
Dropped Out	2	2	17	6			
Grade 7, level IV		N=54					
In School	89	48			n/a	n/a	
Corrections	2	1		n/a			
Unknown	5	3					
Dropped Out	4	2					
Grade 8, level II/III		N=84		N=36			
In School	88	74	81	29	3.061	3	.40
Corrections	2	2	0	0			
Unknown	4	3	8	3			
Dropped Out	6	5	11	4			
Grade 8, level IV		N=54					
• In target schools fall 7th grade					n/a	n/a	
In School	91	49					
Corrections	0	0					
Unknown	5	3					
• In target schools fall 8th grade		N=37		N=45	1.045	3	.79
In School	95	35	94	42			
Corrections	0	0	2	1			
Unknown	5	2	4	2			
Dropped Out	0	0	0	0			

Note: Because the level IV comparison group was identified at the beginning of its 8th grade year, no 7th grade data are available for the level IV comparison group.

Further examination of the cohort 2 treatment students who were no longer in school at the end of 8th grade suggests that no differences existed across disability category or profile ratings.

Status dropout/unknown rate by disability category and profile rating:

- 10% learning disabilities-level II/III (N=7/73) were not in school
- 9% emotional/behavioral disabilities-level II/III (N=1/11) were not in school
- 8% learning disabilities-level IV (N=2/26) were not in school
- 11% emotional/behavioral disabilities-level IV (N=3/28) were not in school
- 4% no profile (N=1/28) were not in school
- 6% low to high profile (N=5/86) were not in school

No significant differences in status dropout rates at the end of grade 9 were found between cohort 2 students in the comparison group (27%, N = 22/81) and similar youth in the treatment group (26%, N = 31/121). However, a subsample of cohort 2 treatment students who received intervention through 9th grade (see Appendix C for a description of the OSEP grant to continue intervening

through 9th grade), was more likely to be enrolled at the end of the year (91%, $N = 43/47$) than similar students in the control group (68%, $N = 32/47$), $\chi^2(1) = 7.982$, $p = .004$ (see Figure 6).

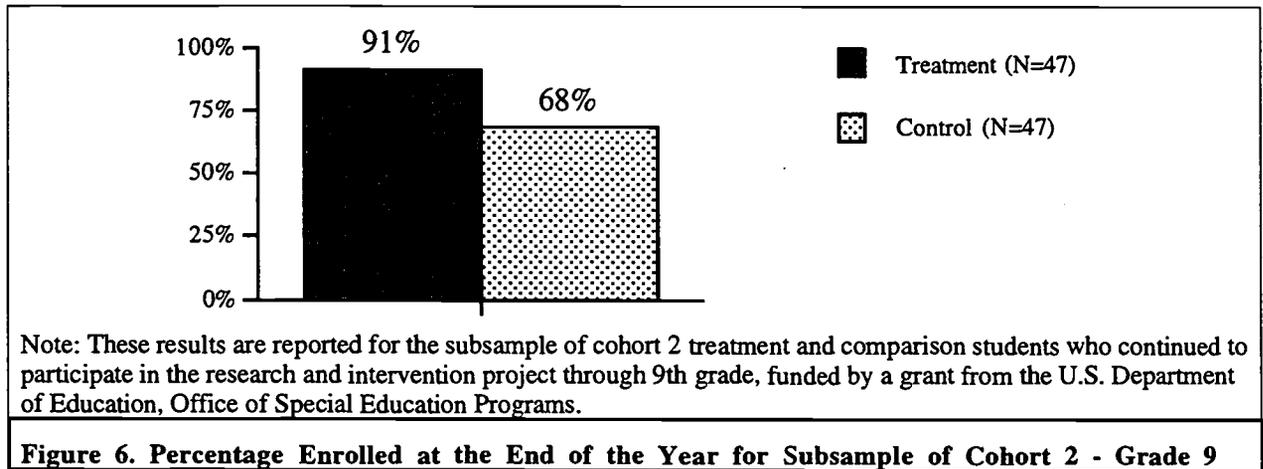


Figure 6. Percentage Enrolled at the End of the Year for Subsample of Cohort 2 - Grade 9

Results of Change Over Time Analyses. Change over time was hypothesized to be a more sensitive measure of the dropout problem for students in lower grade levels. Two aspects of change over time were examined: (a) school persistence and interruption rates, and (b) year-end re-entry rates for school interrupters.

School persistence and interruption rates define enrollment status as the extent to which students drop in and out of school over time. These are students who at any one time may be counted as school attenders because they happened to be in school when the information is collected (often at the beginning or end of a school year), but who essentially do not participate in education in a way that promotes successful progress through school. Rates of school persistence and interruption are presented in Tables 20 (cohort 1) and 21 (cohort 2) for students in the treatment and comparison groups. The total number of students in the relevant treatment or comparison group was used in each denominator.

No significant differences were found in rates of persistence between cohort 1 treatment and comparison groups (see Table 20). Rates of persistence were slightly lower among level II/III treatment youth at 72% in grade 7 and 81% in grade 8, compared to 81% and 89% among similar youth in the comparison group, 7th grade $\chi^2(1) = 1.095$, $p = .31$; 8th grade $\chi^2(1) = 0.934$, $p = .36$. Approximately 89% of the level IV cohort 1 students in the treatment group persisted compared to 76% of similar students in the comparison group, $\chi^2(1) = 1.922$, $p = .18$.

Grade and Level (June)	Cohort 1				Test of Significance		
	Treatment		Comparison		χ^2	df	P
	%	Freq.	%	Freq.			
Grade 7, level II/III		N=68		N=26			
Persisted	72	49	81	21	1.095	1	.31
Interrupted	28	19	19	5			
Grade 7, level IV		N=44					
Persisted	66	29		n/a	n/a		
Interrupted	34	15					
Grade 8, level II/III		N=75		N=28			
Persisted	81	61	89	25	0.934	1	.36
Interrupted	19	14	11	3			
Grade 8, level IV							
• In target schools fall 7th grade		N=46			n/a		
Persisted	59	27		n/a			
Interrupted	41	19					
• In target schools fall 8th grade		N=27		N=45			
Persisted	89	24	76	34	1.922	1	.18
Interrupted	11	3	24	11			

NOTE: Sample sizes differ from 7th to 8th grade because a small group of students were "admitted" to cohort 1 after the mid-year 7th grade cut off period. Furthermore, no 7th grade data are available for the level IV comparison group, because the level IV comparison group was identified at the beginning of its 8th grade year.

However at the end of grade 9, significantly more cohort 1 treatment students had persisted in school than did similar comparison students, 72% vs. 48%, $\chi^2(1) = 10.15$, $p < .003$ (see Figure 7).

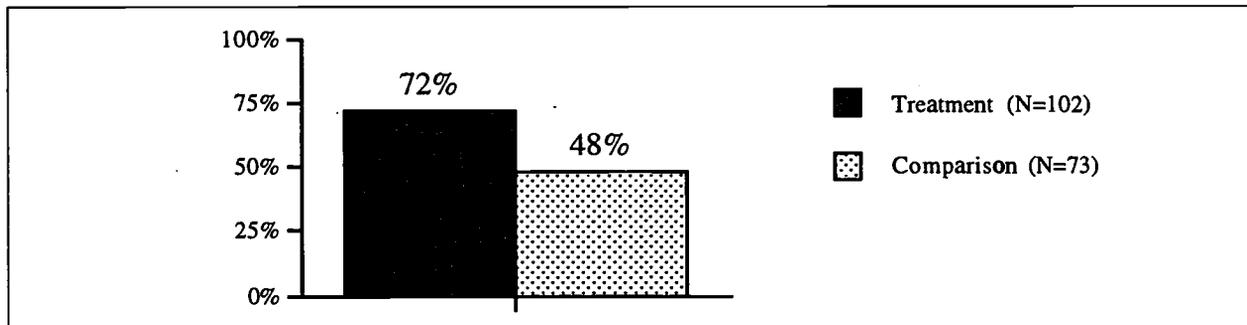


Figure 7. Persistence Rates for Cohort 1 - Grade 9

For cohort 2 (see Table 21), between-group differences were not significant at the .01 level for rates of persistence among level II/III youth in 7th grade, 81% vs. 61%, $\chi^2(1) = 5.291$, $p = .03$, nor in 8th grade, 83% vs. 72%, $\chi^2(1) = 1.944$, $p = .19$. For level IV students in grade 8, differences between treatment and comparison groups were not significant, 84% vs. 76%, $\chi^2(1) = 0.836$, $p = .39$.

Table 21. School persistence and interruption rates							
Grade and Level (June)	Cohort 2				Test of Significance		
	Treatment		Comparison		χ^2	df	P
	%	Freq.	%	Freq.			
Grade 7, level II/III		N=84		N=36			
Persisted	81	68	61	22	5.291	1	.03
Interrupted	19	16	39	14			
Grade 7, level IV		N=54					
Persisted	83	45		n/a	n/a		
Interrupted	17	9					
Grade 8, level II/III		N=84		N=36			
Persisted	83	70	72	26	1.944	1	.19
Interrupted	17	14	28	10			
Grade 8, level IV		N=54					
• In target schools fall 7th grade					n/a		
Persisted	76	41			n/a		
Interrupted	24	13					
• In target schools fall 8th grade		N=37		N=45			
Persisted	84	31	76	34	0.836	1	.39
Interrupted	16	6	24	11			

NOTE: Because the level IV comparison group was identified at the beginning of its 8th grade year, no 7th grade data are available for the level IV comparison group.

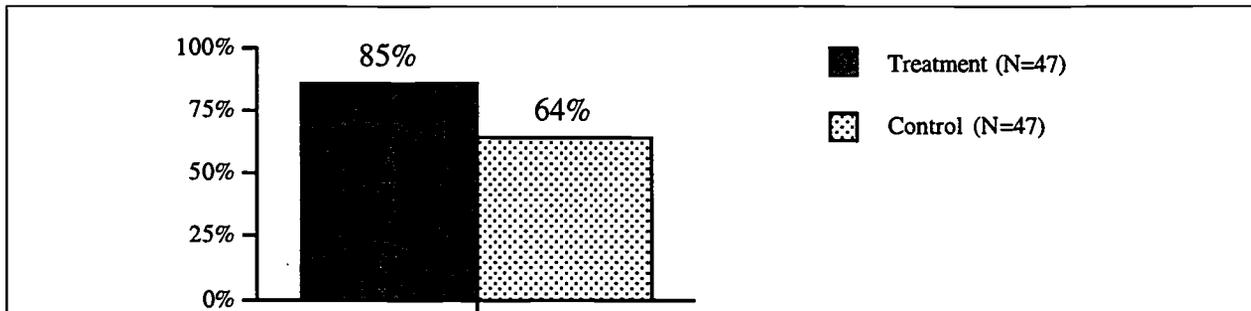
Further examination of the cohort 2 treatment group suggests that students with emotional/behavioral disorders appear to be at greater risk for interrupting their education than youth with learning disabilities, as are youth with low to high profile ratings.

School interruption rates by disability category and profile rating:

- 15% learning disabilities (N_{II/III}=11/73 and N_{IV}=4/26) interrupted school
- 27% - 32% emotional disabilities (N_{II/III}=3/11 and N_{IV}=9/28) interrupted school
- 7% no profile (N=2/28) interrupted school
- 16% low to high profile (N=14/86) interrupted school

Note results are based on students' 8th grade year in school.

Through grade 9, no significant differences in cohort 2 persistence rates were found between treatment students (70%, N = 85/121) and similar youth in the comparison group (64%, N = 52/81), $\chi^2(1) = 0.816$, $p = .39$. Of those cohort 2 treatment students who received intervention through 9th grade, 85% (N = 40/47) were enrolled at the end of the year compared to 64% (N = 30/47) of similar students in the control group, $\chi^2(1) = 5.594$, $p = .02$ (see Figure 8).



Note: These results are reported for the subsample of cohort 2 treatment and comparison students who continued to participate in the research and intervention project through 9th grade.

Figure 8. Persistence Rates for Subsample of Cohort 2 - Grade 9

Re-entry rates. Of all the students with disabilities involved in the project who interrupted their schooling at least once during the project period (1990-1994), 88% (N=59/67) of treatment group who interrupted their schooling returned at least once (in grades 7 and 8) and were enrolled at the end of the school year. Approximately 72% (N=21/29) of similar students in the comparison groups who had interrupted their schooling returned at least once and were enrolled at the end of the school year, $\chi^2 (1) = 3.576, p = .06$.

Of the cohort 1 youth who interrupted their education during 9th grade, 31% (N = 9/29) in the treatment group had returned to school and were enrolled at the end of the school year compared to 11% (N = 4/38) of similar students in the comparison group, $\chi^2 (1) = 4.415, p = .04$. Of all the cohort 2 students who interrupted their education during 9th grade, 40% (N = 12/30) of the students in the treatment group had returned to school and were enrolled at the end of the school year compared to 52% (N = 13/25) of similar students in the comparison group, $\chi^2 (1) = 0.813, p = .39$. Of the cohort 2 treatment students who received intervention through 9th grade, 57% (N = 4/7) of those interrupters had returned to school and were enrolled at the end of the school year compared to 41% (N = 7/17) of similar students in the control group, $\chi^2 (1) = 0.507, p = .48$.

■ Progress Toward School Completion

Accrual of credits is one indicator of progress toward school completion. It was assumed that students who are engaged in school during grades seven and eight, would also be engaged in grade 9 and on track eventually to graduate. Students not on track would be assumed to be at higher risk for dropping out and should be targeted for further intervention.

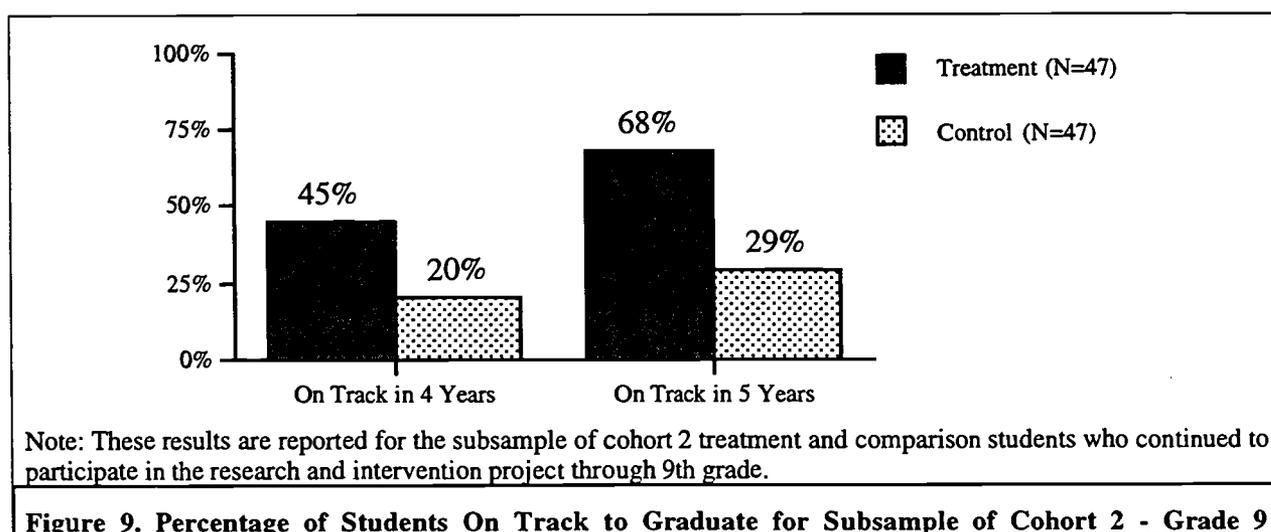
Research Question.

- Does the accrual of credits in grade 9 by youth with learning and emotional/behavioral disabilities differ for treatment and comparison groups?

Measures and Data Collection Schedule. Students were required to earn 60 credits to graduate from high school, averaging 15 credits per year from grade 9 through grade 12. Those students earning 5 or more credits per trimester were defined as being *on track to graduate in 4 years*. Those students earning 4 or more credits per trimester were defined as being *on track to graduate in 5 years*. Information on credits earned were obtained from the district's on-line database system during the last year of the project period and from the data collected by the students' monitors. Student records typically found in a cumulative file are stored on this system, including credits, demographic information, attendance, grades, class schedules, and enrollment history with the district.

Results of Post-Test Comparisons. No significant differences were found at the end of 9th grade for either middle school cohorts. For cohort 1, 32% (N = 33/104) treatment students compared to 33% (N = 22/67) of the comparison students were on track to graduate in 4 years, $\chi^2(1) = 0.023$, $p = .88$ and 36% (N = 37/104) treatment students compared to 37% (N = 25/67) of the comparison students were on track to graduate in 5 years, $\chi^2(1) = 0.053$, $p = .82$. For cohort 2, 29% (N = 33/114) treatment students compared to 31% (N = 22/72) of the comparison students were on track to graduate in 4 years, $\chi^2(1) = 0.055$, $p = .82$ and 42% (N = 48/114) treatment students compared to 39% (N = 28/72) of the comparison students were on track to graduate in 5 years, $\chi^2(1) = 0.188$, $p = .66$.

However, the subsample of cohort 2 treatment students who received intervention through 9th grade was more likely to be on track to graduate at the end of 9th grade. As shown in Figure 9, significantly more of these treatment students were on track to graduate in 4 years (45%, N = 21/47) than were similar students in the control group (20%, N = 9/45), $\chi^2(1) = 6.30$, $p = .01$ and more of these treatment students were on track to graduate in 5 years (68%, N=32/47) than were similar students in the control group (29%, N = 13/45), $\chi^2(1) = 14.53$, $p = .0001$



■ **Participation in School**

Participation in school according to Finn's model of school engagement⁴ refers to behavioral indicators of engagement and emphasizes the importance of a student's involvement in school activities.

Research Questions. Two research questions were addressed for participation in school:

- Does participation in school differ for youth with learning and emotional/behavioral disabilities who participated in the treatment group from similar students in the comparison group?
- How does participation in school change over time for youth with learning and emotional/behavioral disabilities in the treatment and comparison groups?

Measures and Data Collection Schedule. Participation in school was measured through seven variables: (a) total number of absences (including excused and unexcused), (b) percentage of time absent, (c) assignment completion, (d) students' perceptions of classroom participation in school, (e-f) special education and general education teachers' perceptions of classroom participation in school, and (g) percentage of time on task in the classroom.

These variables are drawn from four sources of data, including school attendance records, Academic Performance Teacher Rating, Social Skills Rating System,⁵ and Behavioral Observation Form.

- **The attendance** records were obtained from the district's on-line database system. Student records typically found in a cumulative file are stored on the system. The Unisys data base includes attendance, demographic information, grades, class schedules, and enrollment history with the district. Student data were uploaded at the end of every school year.
- **The Academic Performance Teacher Rating** was developed for this project. The teacher rating addresses student completion rates and quality of assigned work. The teacher was asked to rate a treatment student and a general education peer on a scale of 0 to 10, where 0 = never completes assignments and 10 = always completes assignments. The rating scale was administered to teachers at the end of students' 7th and 8th grade years in school.
- **The Social Skills Rating System (SSRS)**, developed by Gresham and Elliott,⁶ provides a broad, multi-rater assessment of student social behaviors that include social competence, academic competence, and problem behaviors. The SSRS documents the perceived frequency of behaviors influencing students' development of social competence and adaptive functioning at school. The items measure student and teacher perceptions of classroom participation using a three-point scale to assess the frequency of the behaviors (0 = never, 1 = sometimes, 2 = often). Reliability analyses of these subscales produced the following results: teacher perceptions of classroom participation, $\alpha = 0.88$ (special education), $\alpha = 0.89$ (general education); student perceptions of classroom

participation, $\alpha = 0.40$. Teacher surveys were administered in the fall of students' 7th grade year and end of 8th grade. Student surveys were read to students one-on-one or in small groups and administered at the end of 7th and 8th grades.

- The **Behavioral Observation Form (BOF)** was designed by project staff to measure student on- and off-task behavior in academic classes such as science, math, language arts, and social studies. Students were observed two to three times each spring and rated on two dimensions of on-task behavior, active attention, and passive attention. Concurrently, four types of off-task behaviors were observed and recorded: off-task, out of assigned place, noise, and physical contact with others. Observations of target behaviors were recorded every 10 seconds for 30 minutes for a total of 180 observations.

Results of Post-Test Comparisons. No significant differences using a critical value of .01 were found between treatment and comparison groups during middle school on any of the seven indicators (see Table 22). Overall, the indicators suggest that students in both the treatment and comparison groups were only moderately engaged in their education. Both groups appear to be missing a substantial amount of schooling (over 17% of the school year). Rates of assignment completion ($M = 3.9$) were below the possible median score of 5.0. Furthermore, both students and teachers reported that youth participate in class *sometimes* ($M = 1.0$ to 1.3) rather than *very often* and observations indicated that students were "on task" (either active or passive attention) 65% of the time.

Participation in School Activities	Treatment			Comparison			Test of Significance		
	Post-test			Post-test			T	df	P
	mean	SD	n	mean	SD	n			
Absences for the Year									
• total # of days	29.9	20.7	117	24.8	20.8	76	1.66	160	.099
• % of time absent	19.6	13.8	117	17.0	13.4	76	1.30	163	.196
Assignment Completion*	3.9	3.0	46	3.9	2.8	14	0.04	58	.967
Student Perception of Classroom Participation	1.2	0.5	61	1.3	0.5	42	0.78	101	.436
Teacher Perception of Classroom Participation									
• special education teacher	1.2	0.5	79	1.3	0.5	51	0.98	128	.327
• general education teacher	1.1	0.5	70	1.0	0.6	16	0.82	84	.416
% On Task Behavior*	65.7	20.1	38	62.6	18.0	11	0.46	47	.648
Rating scales:									
<u>Assignment Completion</u> - range from 0=never complete to 10=always complete.									
<u>Classroom Participation</u> - 0=never, 1=sometimes, 2=very often.									
* Includes level II/III students only.									

Similar results were found for those cohort 2 treatment students who received the full two years of middle school intervention ($N=39$). These students were absent on average 28 school days or 17% of

the school year, were rated low on assignment completion ($M = 3.5$) and on participation in class ($M_{\text{student}} = 1.3$; $M_{\text{teacher}} = 1.2$), and on task 60% of the time.

Results of Change Over Time Analyses. The analyses of change in school participation suggest that neither treatment nor comparison students improved over time (i.e., from grade 7 to 8) (see Figure 10). In this figure and others like it, the values on the vertical axis are ordered so that an **increase in slope** over time represents **improvement**. For example, the values of the vertical axis for "total number of absences" are smaller on top of the axis and larger in value on the bottom of the axis, so that an improvement in absences is represented by an increase in slope. The values of the vertical axis for "assignment completion" are larger on top of the axis and smaller in value on the bottom, again so an improvement in assignment completion is represented by an increase in slope.

The results of the change over time analyses are presented separately for level II/III students and level IV students since no 7th grade data were available for the level IV comparison group. Four of the 20 t-tests yielded significant results. The total number of absences and the percentage of time absent became more problematic over time for both the level II/III and level IV treatment students. Absences for the level II/III treatment youth increased from 22.9 days per year to 28.5 days ($t = 2.66$ (54 df), $p = .01$), accounting for an increase in the portion of time absent from 14% to 17% of the school year ($t = 2.71$ (54 df), $p = .009$). Absences for the level IV treatment youth increased from 24.4 days per year to 33.7 days ($t = 3.42$ (32 df), $p = .002$), accounting for an increase in the portion of time absent from 15% to 21% of the school year ($t = 3.54$ (32 df), $p = .001$). It is important to note, however, that the analysis of change over time for absences is based on 62% to 65% of the treatment sample and only 53% of the comparison group.

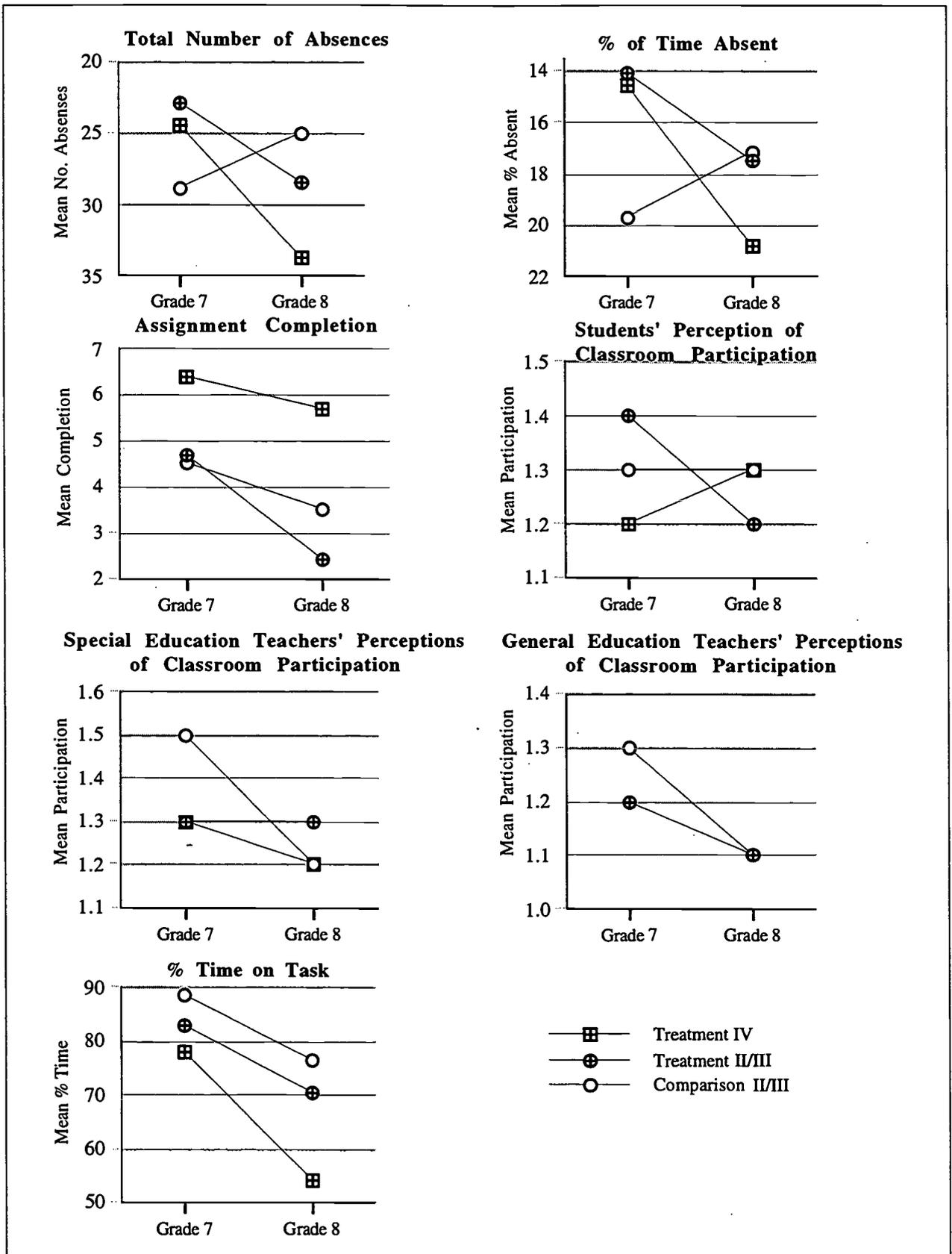


Figure 10. Changes over Time regarding Participation in School - Cohort 2

■ Identification with School

Identification with school, a component in Finn's model of school engagement,⁷ refers to emotional or psychological indicators of engagement.

Research Questions. Two research questions were addressed for identification with school:

- Does identification with school differ for youth with learning and emotional/behavioral disabilities who participated in the treatment group and similar students in the comparison group?
- How does identification with school change over time for youth with learning and emotional/behavioral disabilities in the treatment and comparison groups?

Measures and Data Collection Schedule. Information about students' identification with school was measured by five variables: (a) expectation to graduate, (b) effort (i.e., works hard in school), (c) relevance of school, (d) "non-alienation" from school, and (e) connection with adults in school. These variables were obtained from the Secondary Student Opinion Survey.

- The **Secondary Student Opinion Survey (SSOS)** was developed by the school district and modified by project staff. The SSOS assesses student opinions of their school, teachers, and family support for and attitudes toward learning. For items related to this research question, the primary response categories were a four-point Likert scale, where 1 = strongly agree, 2 = agree, 3 = disagree, 4 = strongly disagree. The response options for the question regarding expectation to graduate also used a four-point scale, where 1 = very sure I will *graduate*, 2 = probably will, 3 = probably won't, 4 = very sure I won't. To assess connection with adults in school, students were asked to indicate with which, if any, adults at their school they are able to discuss personal concerns. The list of adults consists of a teacher, a counselor or social worker, a principal or assistant principal, an office clerk, a hall monitor and a school nurse. Reliability analyses of these indicators revealed: alienation from school, $\alpha = 0.53$; relevance of school, $\alpha = 0.84$; effort - works hard in school, $\alpha = 0.64$; and connection with adults in school, $\alpha = 0.68$. (Note. The measure *expectation to graduate* is one item, therefore a reliability analysis is not applicable.) Students were read the questions aloud one-on-one or in small groups. The survey was administered at the end of 7th and 8th grades.

Results of Post-Test Comparisons. In general, the results suggest that students in both the treatment and comparison groups identified with middle school. However, the post-test analyses on the means indicated significant differences on one of the five measures (i.e., at the .01 level). As shown in Table 23, the comparison students found school to be more relevant ($M = 1.8$, *agree*) than students in the treatment group ($M = 2.2$, *agree*), $t(105) = 2.67$, $p = .009$. The analyses of the remaining measures of students' identification with school yielded no post-test differences between groups. The students in both groups expected to graduate ($M = 1.4$ to 1.3 , *will graduate*), believed they had to work hard in school ($M = 1.8$ to 1.6 , *agree*), and were not feeling disconnect or alienated from school ($M = 2.4$ and 2.3 , *agree*). Over 80% of both groups indicated that they could talk with at least one adult in the school building.

Identification with School	Treatment			Comparison			Test of Significance		
	Post-test			Post-test			T	df	P
	mean	SD	n	mean	SD	n			
Expectation to Graduate* • level II/III • level IV	1.4 1.4	0.6 0.7	42 24	1.3	0.5 n/a	16	0.78	56 n/a	.440
Effort - Works Hard in School	1.8	0.5	64	1.6	0.4	44	2.22	106	.029
Relevance of School	2.2	0.7	63	1.8	0.5	44	2.67	105	.009
Non-alienated from School	2.4	0.5	64	2.3	0.4	44	1.07	106	.286
	%	freq.		%	freq.		χ^2	df	P
Connection with Adult in Sch • No One • 1 Adult • >1 Adult	18.8 12.5 68.8	12 8 44		19.2 19.2 61.7	9 9 29		0.989	2	.610
Rating scales: <u>Expectation to Graduate</u> - 1=very sure will graduate, 2=probably will, 3=probably won't, 4=very sure won't. <u>Effort/Relevance/Non-alienated</u> - 1=strongly agree, 2=agree, 3=disagree, 4=strongly disagree. *Data are reported separately for level II/III and level IV students, because no data was available for the level IV comparison group on this subscale.									

Similar results, indicating positive identification with school, were found for the cohort 2 treatment students who received the full two years of middle school intervention. These students expected to graduate (MII/III = 1.7, *probably will*, MIV = 1.4, *will graduate*), believed they had to work hard (M = 1.8, *agree*), found school relevant (M = 2.2, *agree*), and were not alienated (M = 1.4, *strongly agree*). Approximately 85% indicated that they could talk with at least one adult in the school building.

Results of Change Over Time Analyses. Analyses of changes in identification with school over time suggest that the attitudes of treatment and comparison students remained the same, and were generally positive (see Figure 11). (Reminder: the values on an increase in slope between 7th and 8th grade represent **improvement**.) No significant differences were found on the 12 t-tests or three chi-square tests. Responses over time tended to fluctuate between *strong agreement* and *agreement* in regard to positive statements about identification with school.

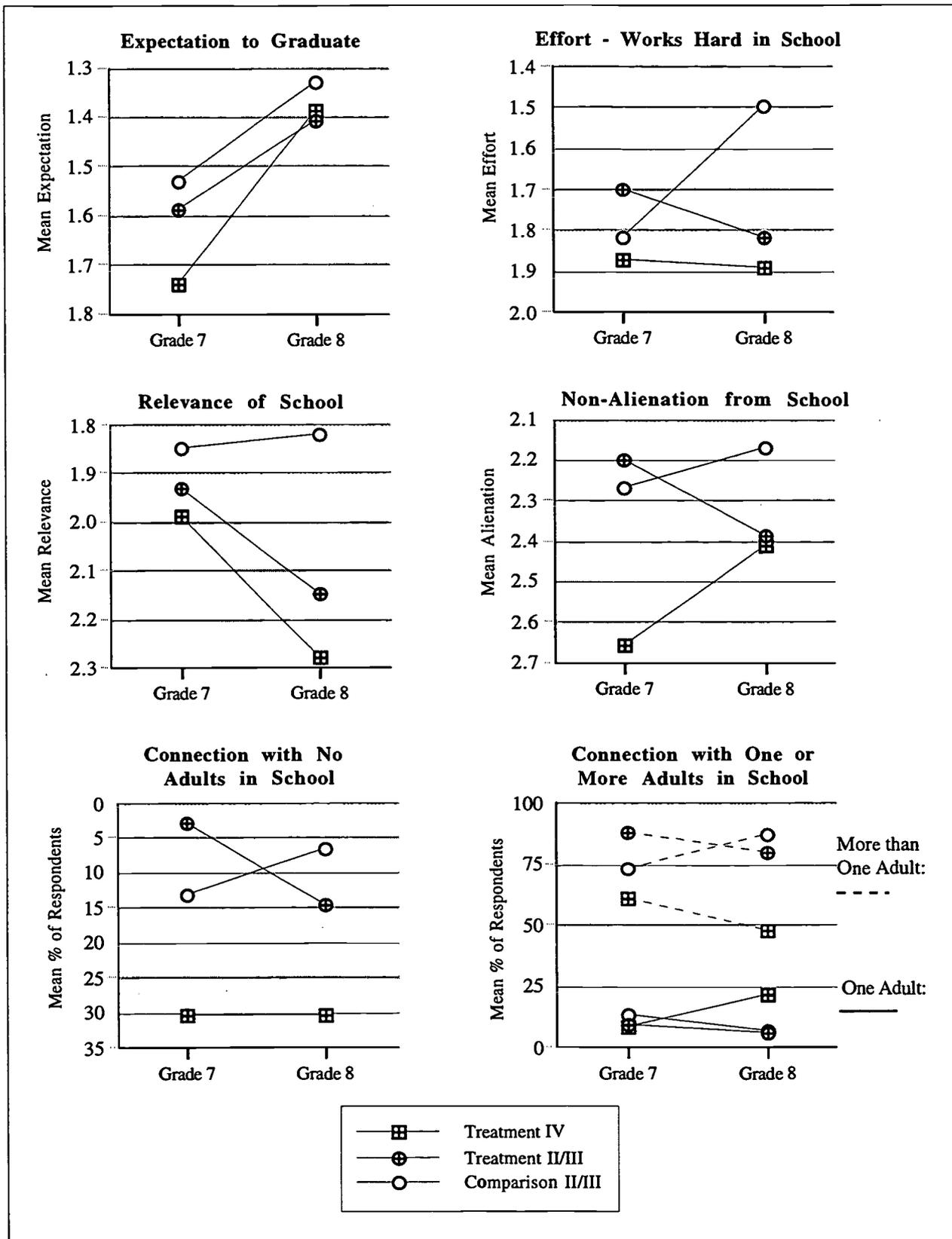


Figure 11. Changes Over Time regarding Identification with School - Cohort 2

■ School Performance - Academic Competence

Research Questions. Two research questions were addressed for academic competence:

- Does academic competence differ for youth with learning and emotional/behavioral disabilities who participated in the treatment group from similar students in the comparison group?
- How does academic competence change over time for youth with learning and emotional/behavioral disabilities in the treatment and comparison groups?

Measures and Data Collection Schedule. Academic competence was measured using five variables: (a) percentage of academic classes passed, (b) percentage of nonacademic classes passed, (c) special education teacher's perception of academic competence, (d) general education teacher's perception of academic competence, and (e) academic teacher's perception of assignment quality. Information was obtained from three different sources: the district database, Academic Performance Teacher Rating, and the Social Skills Rating System.

- Grade data are based on the student's final grades, taken from the **district database** at the end of each school year; the school year contains two semesters. Academic and non-academic courses were examined separately. Data are reported in terms of percentage of courses passed.
- The rating of assignment quality is taken from the **Academic Performance Teacher Rating** described previously. Teachers were asked to rate the quality of assignments turned in by students on a scale of 0 to 10: 0 = never meets assignment criteria, 10 = always meets assignment criteria. As indicated under Question 2, the Academic Performance Teacher Rating focuses on a special education student and a general education peer.
- The indicator of academic competence is a subscale of the **Social Skills Rating System** teacher form described previously.⁸ Items were rated on a five-point scale that corresponds to percentage clusters: 1 = lowest 10%, 2 = next lowest 20%, 3 = middle 40%, 4 = next highest 20%, 5 = highest 10%. This domain includes items measuring reading and mathematics performance, motivation, parental support, and general cognitive functioning. Reliability analyses of the academic competence measure revealed $\alpha = 0.95$ (special education), $\alpha = 0.96$ (general education).

Results of Post-Test Comparisons. There were no significant differences found between the treatment and comparison groups on any of the indicators (see Table 24). Mean scores suggest that students were performing moderately. On average, students were passing between 75% and 85% of their classes. Teacher ratings of assignment quality were higher than their ratings of assignment completion (see Table 22), still indicating less than adequate school performance ($M \approx 5.0$). Teacher ratings of academic competence revealed that special education teachers perceived the students to be

more competent than the general education teachers did, yet with both ranking students between the 4th and 12th percentile.

Table 24. Cohort 2 Analysis - School Performance

Academic Competence	Treatment			Comparison			Test of Significance		
	Post-test			Post-test			T	df	P
	mean	SD	n	mean	SD	n			
Grades (% passed)									
• academic	75.4	34.4	90	78.1	32.1	84	0.91	146	.366
• nonacademic	80.4	31.1	58	85.5	22.9	57	1.51	139	.134
Academic Competence									
• special education teacher	81.1	13.1	72	82.9	16.7	52	0.66	122	.508
• general education teacher	74.4	13.8	67		n/a			n/a	
Assignment Quality*	4.8	2.8	46	5.0	2.8	14	0.22	58	.826
Rating scales:									
<u>Academic Competence</u> - standard score: females=115 to 55, males=115 to 61; where 90≈25th percentile.									
<u>Assignment Quality</u> - range from 0=never meets criteria to 10=always meets criteria.									
* Includes only level II/III students only.									

Similar results were found for the cohort 2 students who received the full two years of middle school intervention. These treatment students performed moderately: (a) passed 85% of their academic classes, (b) passed 80% of the nonacademic classes, (c) were rated in the bottom 10th percentile for academic competence ($M_{spec} = 81$, $M_{reg} = 73$) and (d) were given median ratings regarding assignment quality ($M = 4.6$).

Results of Change Over Time Analyses. Analyses of changes in academic competence over time suggested that the performance of both treatment and comparison students generally remained the same from grade 7 to grade 8 (see Figure 12). In all, one of the 14 t-tests yielded significant results in a direction contrary to expected outcomes. The percentage of nonacademic classes passed for the level II/III treatment youth decreased, from 89% during 7th grade to 75% during 8th grade, $t(47) = 3.15$, $p = .003$. This analysis of classes passed is based on 56 to 61% of the treatment sample and 54% of the comparison sample.

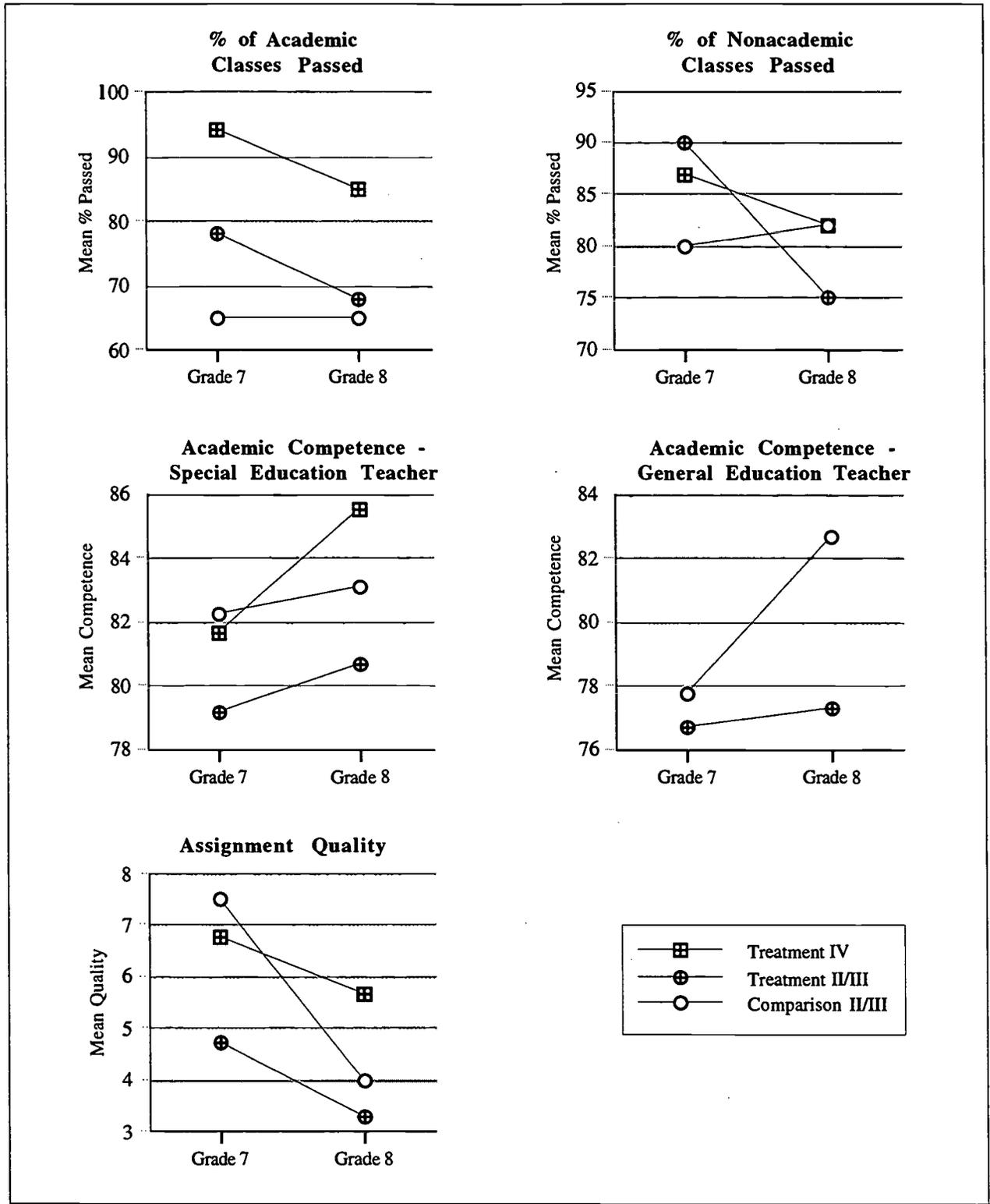


Figure 12. Changes Over Time regarding Academic Competence - Cohort 2

School Performance - Social Competence

Research Questions. Two research questions were addressed for school competence:

- Does social competence differ for youth with learning and emotional/behavioral disabilities who participated in the treatment group and similar students in the comparison group?
- How does social competence change over time for youth with learning and emotional/behavioral disabilities in the treatment and comparison groups?

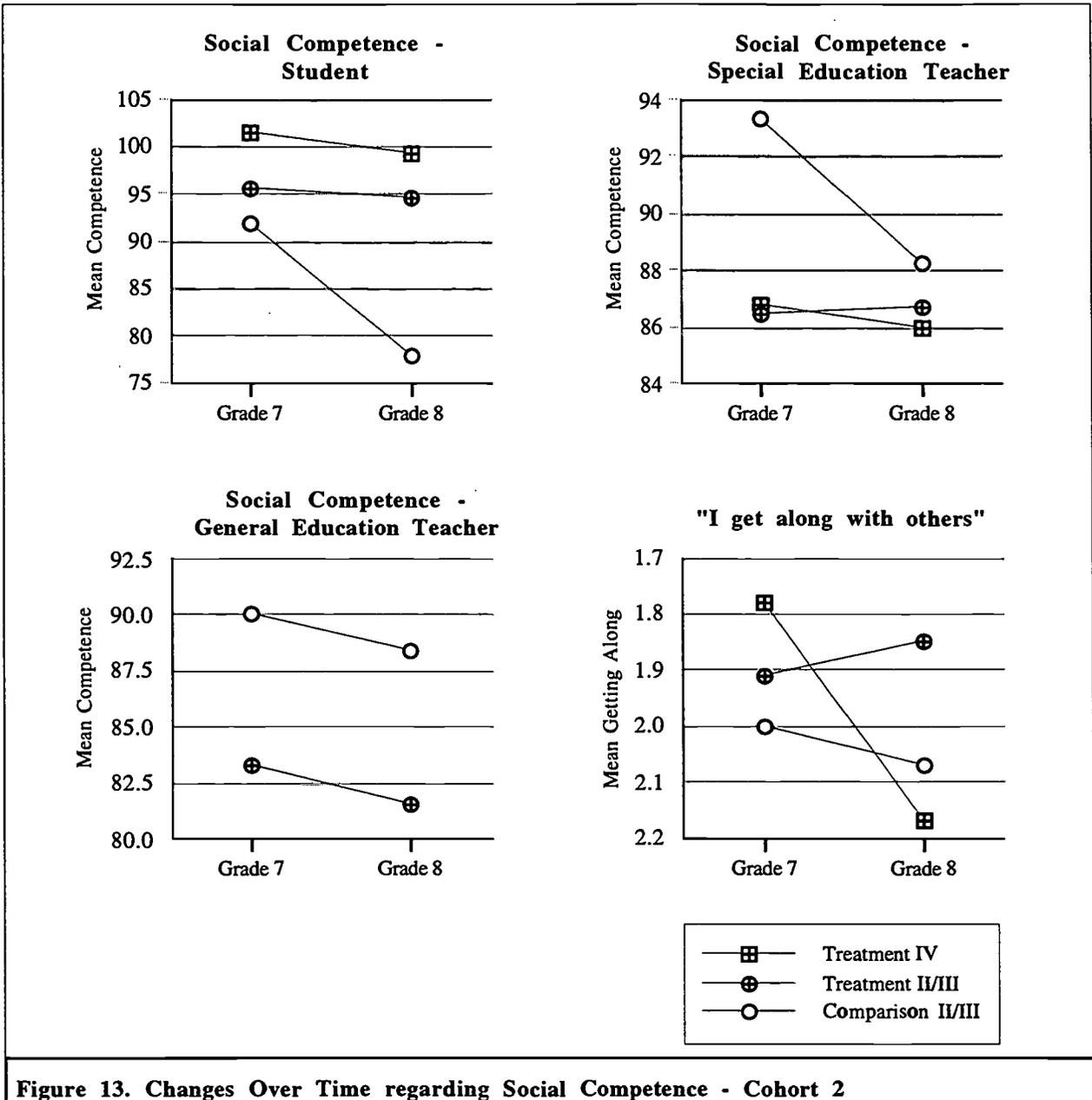
Measures and Data Collection Schedule. Social competence was measured using four indicators: (a) students' self rating of social competence, (b) special education teacher rating of social competence, (c) general education teacher rating of social competence, and (d) students' perception of getting along with others. Two sources of data were used: the **Social Skills Rating System** and **Secondary Student Opinion Survey**. Social behaviors were measured through five subscales: cooperation, assertion, responsibility, empathy, and self-control. The scale uses frequency ratings to reflect how often a social behavior occurs (0 = never, 1 = sometimes, 2 = very often). The reliability of the various ratings of social skills was $\alpha = 0.87$. The reliability of teachers' ratings of social skills was $\alpha = 0.96$ (special education teacher), $\alpha = 0.96$ (general education teacher). An item from the SSOS was also used as an indicator of social competence, based on a four-point Likert agreement scale.

Results of Post-Test Comparisons. No differences were found between the treatment and comparison groups on any of the measures of social competence (see Table 25). Mean scores suggest that students in both groups were performing moderately in terms of social competence. Students indicate that they get along relatively well with others ($M = 2.0$ and 1.9 , *agree*). Teacher ratings of students' social competence confirm the tendency for special education teachers to perceive the students as more competent than the general education teachers do, but with both teachers ranking students close to the 13th percentile. The students rated themselves higher than either special or general education teachers, placing their own social competence near the 37th percentile.

Social Competence	Treatment			Comparison			Test of Significance		
	Post-test			Post-test			T	df	P
	mean	SD	n	mean	SD	n			
Social Competence (student)	95.1	17.2	51	94.3	17.2	29	0.20	78	.844
Social Competence (teacher)									
• special education teacher	85.8	17.8	71	85.7	16.3	43	0.00	112	.999
• general education teacher	81.4	16.7	64		n/a			n/a	
"I get along with others"	2.0	0.6	64	1.9	0.7	44	0.09	78	.927
Rating scales:									
Social Competence - standard score ranges from 130 to 40, where 100=50th percentile.									
"I get along with others" - 1=strong agree, 2=agree, 3=disagree, 4=strongly disagree.									

The post-test results for the cohort 2 students who received the full two years of middle school intervention were similar. Mean scores suggest that these students perceived themselves to be performing moderately in terms of social competence ($M = 94.6$, *37th percentile*) and that they get along relatively well with others ($M = 2.0$, *agree*). Teacher ratings of students' social competence similarly placed these youth around the 13th percentile ($M_{spec} = 85.7$, $M_{reg} = 83.3$).

Results of Change Over Time Analyses. The analyses of changes in social competence over time suggest that the performance of students was stable, for both treatment and comparison students (see Figure 13). In all, one of the 10 t-tests yielded significant results. Student ratings of social competence for the level II/III comparison youth decreased over time from 91.8 to 77.8, $t(4) = 5.76$, $p = .004$, moving from the 28th percentile to the 6th percentile. This analysis of change over time for social competence was based on 30% to 31% of the treatment sample and only 13% of the comparison group.



■ School Performance - Behavioral Competence

Research Questions. Two research questions were addressed for behavioral competence:

- Does behavioral competence differ for youth with learning and emotional/behavioral disabilities who participated in the treatment group from similar students in the comparison group?
- How does behavioral competence change over time for youth with learning and emotional/behavioral disabilities in the treatment and comparison groups?

Measures and Data Collection Schedule. Three variables were used to measure behavioral competence: (a) the number of days suspended from school for the year, (b) special education teachers' ratings of problem behavior, and (c) general education teachers' ratings of problem behavior. The data sources include suspension records from the district database, uploaded annually, and the **Social Skills Rating System**. The SSRS teacher form contains a rating of problem behaviors using the same frequency scale as used for the Social Skills Rating Scale, 0 = never, 1 = sometimes, 2 = very often. Items included in the rating of problem behaviors focus on externalizing problems, internalizing problems, and hyperactivity. Reliability analysis of the problem behavior indicator revealed $\alpha = 0.84$ (special education teacher), $\alpha = 0.82$ (general education teacher).

Results of Post-Test Comparisons. Differences were found between treatment and comparison groups for one of the three indicators. Significantly fewer students in the treatment group were suspended from school than similar students in the comparison group, $t(128) = 4.84$, $p = .000$ (see Table 26). Follow-up t-tests between cohort 2 treatment and comparison groups by disability category (see Appendix B) mirrored these results for students with a learning disability receiving level II/III services ($M_{\text{treat}} = 1.0$ and $M_{\text{compar}} = 15.0$, $p = .000$). No differences were found between treatment and comparison students for teacher ratings of problem behaviors, but the special education and general education teacher ratings of the same students were discrepant, ranging between the 75th and 82nd percentile rank.

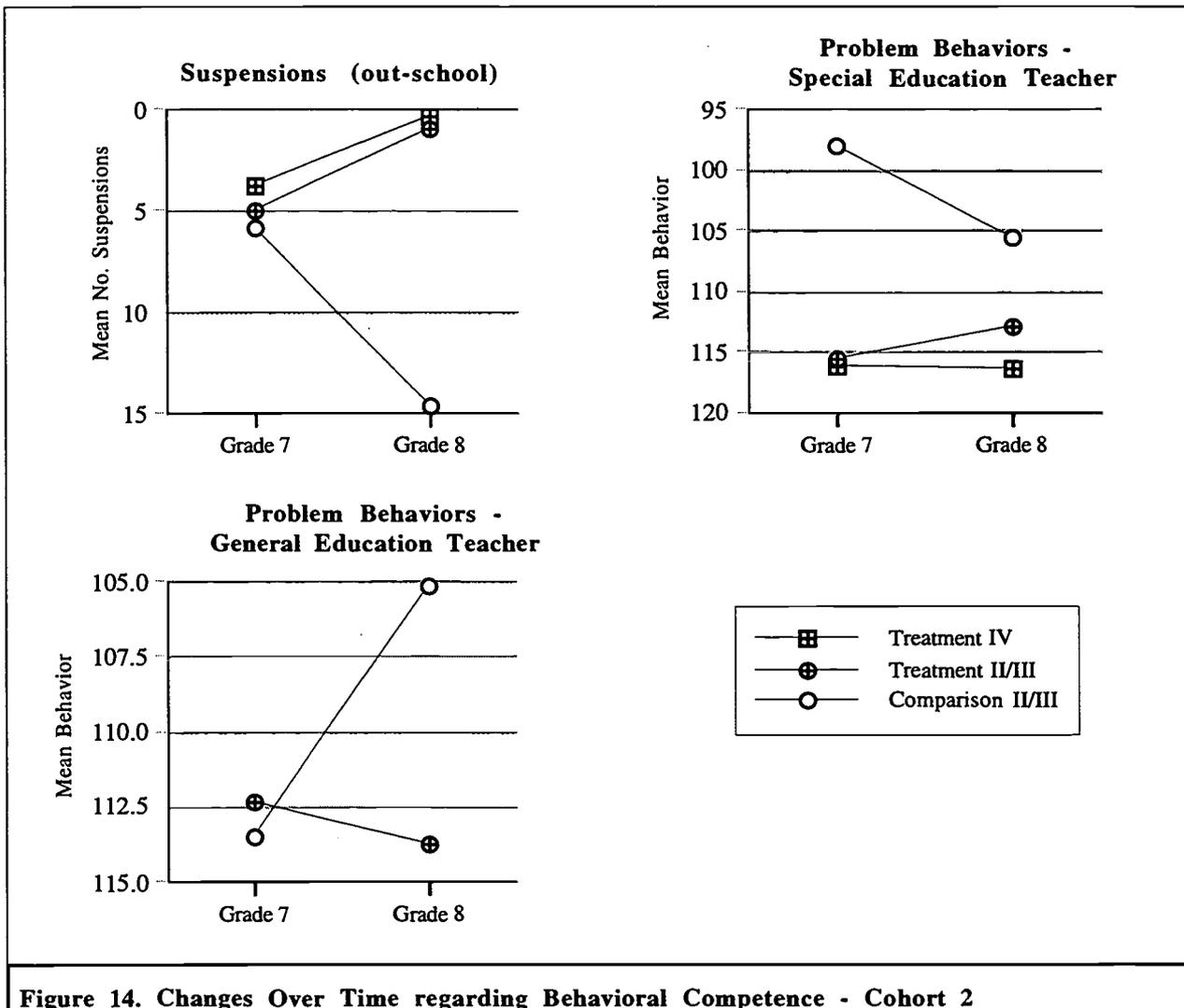
Behavioral Competence	Treatment			Comparison			Test of Significance		
	Post-test			Post-test			T	df	P
mean	SD	n	mean	SD	n				
Suspension* (out-of-school)	0.9	3.2	76	6.6	9.5	54	4.84	128	.000
Problem Behavior (Subscale)									
• special education teacher	114.8	9.9	78	110.3	23.4	52	1.54	128	.127
• general education teacher	113.4	12.0	68		n/a			n/a	

Rating scale:
Problem Behavior - standard score ranging from 145 to 16, where 110≈75th percentile.
 * Data for level IV comparison collected from different source.

The cohort 2 students who received the full two years of middle school intervention performed similarly in terms of behavioral competence. These students had fewer incidents of suspension on average for the year ($M = .03$). Special and regular education teachers rated these students' problem behavior to be between the 81st and 83rd percentile rank, respectively ($M_{\text{spec}} = 113.7$, $M_{\text{reg}} = 114.1$).

Results of Change Over Time Analyses. Analyses of changes in behavioral competence over time suggest that the behaviors of treatment students improved, while the behaviors of comparison students declined (see Figure 14). In all, two of the eight t-tests yielded significant results. The total

number of suspensions decreased (i.e., showing improvement) from grade 7 to 8 for both the level II/III and IV treatment students, represented an increase in slope. Suspensions for the level II/III treatment youth decreased from an average of 5.0 days per year to 1.0 day, $t(44) = 4.55, p = .000$, and the suspensions for the level IV treatment youth decreased over time from 3.7 days per year to 0.4 days, $t(23) = 3.34, p = .003$. The total number of suspensions became more problematic for the level II/III comparison students, represented by a decrease in slope. The analysis of change over time for suspensions was based upon 45 to 52% of the treatment sample and only 36% of the comparison group.



Parent Responses

Parent responses to the Partnership for School Success project are based on two sources of information. The first source is an evaluation that was read aloud to parents individually. It was administered during the summer of 1993 in order to capture the parents of both cohorts at a time when both were actively involved in interventions. The second source of information on parent responses was drawn from evaluations of parent meetings.

■ Project Evaluation Parent Form

Parents of over 100 treatment students from the two middle schools were asked to respond to questions about intervention components (see Table 27). The results are presented separately for parents of treatment students who were directly involved in a particular intervention component, as determined by the parent, and for parents of those students not directly involved. Parents' responses were generally positive, with mean scores ranging from 3.5 (*very important*) to 3.8 (*critical*). Involved respondents were generally more positive.

Table 27. Importance of Project Components							
	Directly Involved			Not Directly Involved			
	<i>mean</i>	<i>SD</i>	<i>n</i>	<i>mean</i>	<i>SD</i>	<i>n</i>	
Stem Question 1: How important is [project component]?							
• Monitoring	3.5	0.5	44	3.3	0.6	69	*
• Home-school partnership-parent involvement.	3.7	0.5	31	3.3	0.6	82	*
• Problem-solving activities.	3.5	0.7	33	3.4	0.6	81	ns
• Supplemental academic/ mentoring support.	3.8	0.4	22	3.3	0.6	92	*
• Recreation and community service exploration.	3.5	0.5	35	3.1	0.5	78	*
Stem Question 2: How much does [project component] help youth with disabilities do well in middle school?							
• Monitoring.	3.6	0.5	44	3.5	0.6	69	ns
• Home-school partnership-parent involvement.	3.7	0.6	31	3.4	0.6	82	*
• Problem-solving activities.	3.6	0.7	33	3.5	0.6	81	ns
• Supplemental academic/ mentoring support.	3.8	0.4	22	3.4	0.6	92	*
• Recreation and community service exploration.	3.6	0.5	35	3.2	0.7	78	*
Stem Question 3: How much does [project component] prevent youth with disabilities from dropping out of middle school?							
• Monitoring.	3.5	0.7	44	3.4	0.7	69	ns
• Home-school partnership-parent involvement.	3.7	0.7	31	3.4	0.6	82	ns
• Problem-solving activities.	3.5	0.8	33	3.4	0.6	81	ns
• Supplemental academic/ mentoring support.	3.8	0.4	22	3.4	0.6	91	*
• Recreation and community service exploration.	3.7	0.5	35	3.2	0.7	78	*

Table 27 continued on the next page

	Directly Involved			Not Directly Involved			
	mean	SD	n	mean	SD	n	
Stem Question 4: How much does [project component] help youth with disabilities stay in school through graduation?							
• Monitoring.	3.5	0.7	44	3.4	0.7	69	ns
• Home-school partnership-parent involvement.	3.7	0.7	31	3.4	0.6	82	ns
• Problem-solving activities.	3.6	0.7	33	3.5	0.6	81	ns
• Supplemental academic/mentoring support.	3.7	0.6	22	3.4	0.6	91	*
• Recreation and community service exploration.	3.6	0.5	35	3.2	0.7	78	*
Rating scales:							
Stem Q1. 1=not important, 2=somewhat important, 3=very important, 4=critical.							
Stem Q2. 1=not at all, 2=somewhat, 3=a fair amount, 4=a great deal.							
Stem Q3. 1=not at all, 2=somewhat, 3=a fair amount, 4=a great deal.							
Stem Q4. 1=not at all, 2=somewhat, 3=a fair amount, 4=a great deal.							

■ Evaluations of Parent Meetings

As was reported, attendance varied at the evening meetings for parents, ranging from 20% to as high as 80% participation. Several parents did not attend meetings because of conflicts with work, but asked to be kept informed of the meeting activities and outcomes. Over the course of a year, 70% of the parents had attended meetings with some regularity. Meeting participants were asked to complete an evaluation form at the end of the meetings. The responses were consistently positive (see Table 28). At the beginning of each year, parents would often ask when the meetings would start up again.

Response based on a random sample of 30 surveys	Percentage
How was today's meeting? Did it meet your expectations? Favorable responses: e.g., "Very nice, yes; friendly and informative; session was OK; session was really helpful." Unfavorable responses: e.g., "No [did not meet expectations] because I need to be able to express myself more."	96% 4%
What did you like? Favorable responses: e.g., "The friendly atmosphere; I like meeting with all the teachers and other parents to solve problems; telling about things going on in school; for us parents to be able to have input." Unfavorable responses: n/a	100% 0%
What could have been done differently? Favorable responses e.g., "Nothing." Unfavorable responses e.g., "Involving other parents and teachers; Is there an easier way for the students to learn the five steps? Have day care [we were short staff one night] so parents can get more involved in in-depth conversation; Have better food.	70% 30%

School Responses

The school response to the project is evaluated in two ways: (a) responses to the project evaluation and (b) interventions that remained in place after project funding for interventions was discontinued.

■ Project Evaluation Teacher Form

Approximately 100 teachers from the two intervention middle schools were asked to respond to questions about intervention components. The results are presented separately for teachers who indicated that they were directly involved in a particular intervention component (see Table 29). Teacher's comments were not quite as positive as parents, with mean scores ranging from 2.4 (*somewhat important*) to 3.4 (*very important*). Involved respondents were generally more positive. The evaluation was administered both in the spring of 1993 and 1994. Data from the 1994 administration are reported here.

Table 29. Importance of Project Components							
	Directly Involved			Not Directly Involved			
	<i>mean</i>	<i>SD</i>	<i>n</i>	<i>mean</i>	<i>SD</i>	<i>n</i>	
Stem Question 1: How important is [project component]?							
• Monitoring.	3.2	0.6	70	3.0	0.8	37	ns
• Home-school partnership-parent involvement.	3.4	0.6	61	3.4	0.6	46	ns
• Problem-solving activities.	3.4	0.6	52	3.1	0.7	55	*
• Supplemental academic/ mentoring support.	3.3	0.7	63	3.2	0.6	42	ns
• Recreation and community service exploration.	3.2	0.7	41	2.8	0.7	63	*
Stem Question 2: How much does [project component] help youth with disabilities do well in middle school?							
• Monitoring.	3.0	0.8	70	2.5	0.8	35	*
• Home-school partnership-parent involvement.	3.0	0.8	61	2.8	0.6	44	ns
• Problem-solving activities.	3.0	0.7	53	2.7	0.6	52	*
• Supplemental academic/ mentoring support.	3.0	0.7	62	2.6	0.6	39	*
• Recreation and community service exploration.	3.0	0.7	40	2.6	0.8	61	*

Table 29 continued on the next page

Table 29. Importance of project components (continued)

	Directly Involved			Not Directly Involved			
	mean	SD	n	mean	SD	n	
Stem Question 3: How much does [project component] prevent youth with disabilities from dropping out of middle school?							
• Monitoring.	2.7	0.7	70	2.2	0.5	33	*
• Home-school partnership-parent involvement.	2.7	0.8	61	2.7	0.7	42	ns
• Problem-solving activities.	2.8	0.6	53	2.5	0.6	52	*
• Supplemental academic/ mentoring support.	2.7	0.7	63	2.5	0.7	39	ns
• Recreation and community service exploration.	2.9	0.7	40	2.5	0.7	61	*
Stem Question 4: How much does [project component] help youth with disabilities stay in school through graduation?							
• Monitoring.	2.7	0.7	70	2.3	0.4	34	*
• Home-school partnership-parent involvement.	2.8	0.7	61	2.5	0.6	41	ns
• Problem-solving activities.	2.7	0.7	53	2.4	0.6	50	*
• Supplemental academic/ mentoring support.	2.7	0.7	63	2.4	0.7	38	ns
• Recreation and community service exploration.	2.8	0.7	41	2.3	0.7	61	*
Rating scales:							
Stem Q1. 1=not important, 2=somewhat important, 3=very important, 4=critical.							
Stem Q2. 1=not at all, 2=somewhat, 3=a fair amount, 4=a great deal.							
Stem Q3. 1=not at all, 2=somewhat, 3=a fair amount, 4=a great deal.							
Stem Q4. 1=not at all, 2=somewhat, 3=a fair amount, 4=a great deal.							

■ Continuation of Intervention Beyond the Project Period

One goal of the Partnership for School Success project was to develop and implement dropout prevention and intervention strategies that would remain in place beyond the finite time period of the project. Deliberate choices were made in relation to how the intervention strategy was developed and implemented. For example, we began the planning phase of the project with individuals from the community at large who were directly affected by the dropout problem. The advisory committee was comprised of individuals that the intervention was intended to benefit. Furthermore, direct attempts were made to build on existing programs and services to support youth. We tried to avoid duplication of existing youth programs and instead identify and establish connections between the school and other available resources.

Research on organizational change and the dropout prevention literature that existed at the time the projects began suggested that a participatory approach potentially could lead to a more powerful intervention. Maximizing the use of local resources was also suggested as a means of promoting the replicability of the intervention and to a certain extent generalizability to other settings.

Intervention strategies still in place that were initiated or put in place by project staff reflect bits and pieces of our total intervention approach. Both schools continued to fund a number of parent worker positions, and the school with the level IV program for youth with behavioral problems opened a parent room. Several staff from both schools have infused the five step problem solving strategy into their daily curriculum. The community service tutoring program is continuing for its fourth year at the middle school (with the level IV program for youth with challenging learning disabilities) and the adjoining early childhood center. Last year, several staff vowed to make better use of our evening parent-teacher meeting format by scheduling sessions in the community, supporting transportation needs, and so on. Finally, the DISCOURSE system and CCC computer aided instruction continue to be used on a regular basis. An entire second set of the DISCOURSE system hardware and software was installed in conjunction with another University grant in the fall after project interventions stopped.

Check & Connect: SECTION III

Endnotes

- ¹ Finn, J.D. (1993). School engagement and students at risk. (U.S. Department of Education, National Center for Educational Statistics) Buffalo, NY: State University.
- ² Wagner, M., Newman, L., D'Amico, R., Jay, E.D., Butler-Nalin, P., Marder, C., & Cox, R. (1991). Youth with disabilities: How are they doing? The first comprehensive report from the national longitudinal transition study of special education students. SRI International (Contract 300-87-0054). Washington, D.C.: U.S. Department of Education, Office of Special Education Programs.
- ³ Blackorby, J., Edgar, E., & Korterling, L.J. (1991). A third of our youth? A look at the problem of high school dropout among students with mild handicaps. The Journal of Special Education, 25(1), 102-113.
- ⁴ Finn (1993), Op. cit.
- ⁵ Gresham, F.M., & Elliott, S.N. (1990). Social Skills Rating System. Circle Pines, MN: American Guidance Service, Inc.
- ⁶ Gresham, & Elliott (1990), Op. cit.
- ⁷ Finn (1993), Op. cit.
- ⁸ Gesham, & Elliott (1990), Op. cit.

SECTION IV

What Does It All Mean?

Presented in the fourth section of this project evaluation are a discussion of findings and reflections of the project directors on the experiences of the past five years. The discussion and reflections are followed by recommendations to middle school administrators and recommendations for further research. Major findings and themes that are explored in this section include:

- the need to start preventive efforts before middle school and to engage parents in the process of supporting students' educational success early on,
- the power of sustained intervention and persistent monitoring of school engagement,
- the multiplicity of risk factors confronted by youth with learning and emotional/behavioral disabilities,
- the need and ability to establish trust and build relationships among high risk students, educators, and parents,
- the need for, and ability of, secondary schools to reach out to families of high risk students in order to help parents provide educational support for their adolescents, and
- the need to evaluate school policies and practices that alienate students from school.

Discussion of Intervention Efficacy

The primary aim of the Check and Connect/Partnership for School Success project was to collect research information on the effectiveness of an intervention to prevent students with learning and emotional/behavioral disabilities from dropping out of school. Because the focus of the research was students in middle schools, it was important to look at more than just the occurrence of a drop out event. We also needed to examine indices of satisfactory progress toward school completion. The theoretical framework of Finn's Participation-Identification Model¹ was used to guide the assessment of treatment effect using multiple indicators of school engagement and the prevention of dropping out. Five constructs were examined: (a) enrollment status, (b) progress toward school completion, (c) participation in school, (d) identification with school, and (e) school performance.

We approached the Request for Proposal's (RFP) primary aim of studying treatment effectiveness with the assumption that it was important to work within the existing educational system. Research on organizational change had indicated that this approach to intervention could potentially have an impact on a much greater number of students than the 259 targeted by the project. Based on specifications in the original RFP, we intervened with two cohorts of students for two years each (i.e., grades 7 and 8). Information is also reported on a subsample of cohort 2 students who received a

third year of intervention as a separate project, funded by OSEP, to examine the effect of sustained support during students transition through the first year of high school (i.e., grade 9).

In this discussion of the project findings, we will summarize and discuss the student outcomes resulting from the project's intervention. Implications of this research for the broader dropout prevention efforts that are the focus of our nation's second national education goal are addressed in the remaining parts of section IV.

■ Student Outcomes Resulting from Project Intervention

Slavin and others² have cautioned against a premature summative evaluation of intervention effectiveness regarding complex social phenomenon, such as dropout prevention. Our results support this recommendation. Of all the post-test comparisons and analyses of change-over-time, 14 of 116 (12%) tests yielded significant results using a critical value of $p = .01$. Yet, the fifteen analyses that cover a three year time span (i.e., from grades 7 to 9) yield four significant results or 27% of the comparisons. The remaining analyses included only grades 7 and 8 and yielded 10 of 101 significant results, approximately 10% of the comparisons.

From this perspective, it is not surprising that few significant treatment effects were found during the middle school interventions. The post-test analysis at the end of 8th grade indicated that most students with disabilities were enrolled in an educational program, although a substantial portion of the students had interrupted their middle school education (i.e., dropped out) at least once. Chi-square tests did not reveal any significant differences in enrollment status during the middle school period between the treatment and comparison groups. Overall, four of the 10 middle school analyses that yielded significant results were of practical significance. These outcomes were related mostly to a dramatic reduction in out-of-school suspensions for students in the treatment group.

- Students in the treatment group were suspended on average less than 1 day per year, compared to an average yearly suspension of 7 days for similar students in a comparison group.
- Out-of-school suspension incidents decreased on average from 5 to 1 days for level II/III treatment students between grades 7 and 8.
- Out-of-school suspension incidents decreased on average from 4 to less than 1 day for level IV treatment students between grades 7 and 8.
- Self-rating of social competence declined over time from the 25th percentile to the 6th percentile for students in a comparison group; no significant changes were found in the comparable treatment group.

Because suspension or behavioral/social competence is such a robust predictor of dropping out, the intervention encompassed the development of alternative disciplinary consequences to out-of-school suspension and the promotion of a behavioral-cognitive problem-solving strategy. Project staff

worked closely with school administrators to consider the history of individual students, their disability, and the context of the situations in the process of applying broad school practices and district policies. Students were actively engaged in the problem-solving strategy to help them learn to resolve their conflicts constructively. We hypothesize that over time continued reductions in out-of-school suspension incidents would be associated with increased rates of school completion.

The remaining six middle school analyses that yielded significant results were of minimal practical value. They reflected changes in school engagement from what might be characterized as "moderate engagement" to slightly "more or less moderate engagement." For example, significantly more students in the comparison group reported that school was more relevant than students in the treatment group. However, the mean values ($M_{\text{compare}} = 2.2$, $M_{\text{treat}} = 1.8$) indicated that both groups of students *agree* that school was relevant, where 1.0 = strongly agree, 2.0 = *agree*, 3.0 = disagree, 4.0 = strongly disagree. Yet even though the middle school intervention did not result in numerous differences in student outcomes, we have speculated that the intervention did have a major impact on two factors necessary for the promotion of school completion among high risk youth: (a) *trust building* between the monitors and project staff (i.e., educators), the students and their families, and (b) *establishing partnerships and ongoing dialogue between parents and educators* that is focused on promoting school engagement and student success. These and other issues are discussed in the remaining parts of section IV.

More dramatic treatment effects were found for the subsample of students who were involved in the Check and Connect procedure through 9th grade. The following outcomes led us to conclude that *sustained intervention and persistent monitoring of school engagement* (i.e., beginning in grade 7 and continued over the transitional period from middle to high school) is a critical component of the dropout prevention and intervention strategies for youth with learning and emotional/behavioral disabilities.

- 85% of youth with disabilities who received intervention from grade 7 through 9 had persisted in school, compared to 64% of similar students who received intervention in grades 7 and 8 only.
- 9% of youth with disabilities who received intervention from grade 7 through 9 had dropped out of school, compared to 32% of similar students who received intervention in grades 7 and 8 only.
- 68% of youth with disabilities who received intervention from grade 7 through 9 were on track to graduate in five years, compared to 29% of similar students who received intervention in grades 7 and 8 only.

Of the comparison students who received no intervention, 64% had persisted in school, 27% had dropped out of school at the end of 9th grade, and 39% were on track to graduate in five years.

Reflections

Implications of research for the broader dropout prevention efforts that are the focus of our nation's second national education goal begin here with the reflections of the project directors. Conclusions and speculations are drawn from quantitative, qualitative and anecdotal evidence. An overview of the reflections is presented in Table 30.

Table 30. Summary of Reflections

<p>Insights</p> <ul style="list-style-type: none"> • Magnitude of student's risk for dropping out. • Amount of student mobility. • Degree of school interruption. • Educators' misperceptions about students' families. • Intensity of support required to maintain systemic support.
<p>What We Think We Know</p> <ul style="list-style-type: none"> • Persistence is a critical element of prevention and intervention strategies. • There is no quick fix. However, the Check and Connect intervention offers a means of parceling resources in a manner that is reasonable to sustain over time. • The <i>specific</i> intervention activity is not as essential as providing <i>some</i> intervention that meets the individualized needs of the student. • Parents care about their adolescent's education. • Trust can be established. • The social distance that exists between home and school can be reduced by creating opportunities for positive interaction and ongoing dialogue. • The educational system is not inclined to find or keep youth who act out in school.
<p>What We Don't Know and Need to Know</p> <ul style="list-style-type: none"> • How effective were the interventions for ensuring school completion? • How do we reach the most difficult students with learning and emotional/behavioral disabilities?

■ Insights

We gained new insights into the magnitude and nature of several prevalent issues that began as a collection of informal operating assumptions. The most pervasive issues regarding intervention-based research with urban adolescents at high risk for dropping out include: (a) the magnitude of student risk, (b) amount of student mobility; (c) the degree to which students in lower grade levels interrupt their schooling, which is a problem that is **not** reflected in the point-in-time dropout rates; (d) the educators' misperceptions about many students and their families; and (e) the intensity of support required to maintain systemic reform that is sensitive to the needs of high risk youth.

Students' Risk for Dropping Out. We found that youth with learning and emotional/behavioral disabilities were confronted with multiple risk factors--none of which in isolation necessarily placed a youth at higher risk for dropping out, but in total *challenged the abilities of the schools and families to meet the needs of these youth*. The evidence clearly indicates that we must not only intervene before high school and during middle school, but we must implement more primary preventive efforts at the elementary grade levels.

Risk has been defined in this document in two ways: (a) in terms of status risk factors over which educators have little control, and (b) in terms of behavioral warning signs of school withdrawal that are amenable to intervention. The most commonly known predictors of dropping out are status risk factors, such as socioeconomic status and racial/ethnic composition. Our results indicated that the majority of students who participated in the project could be characterized by these types of correlates associated with high risk for dropping out. Three quarters of the special education samples were from lower socioeconomic backgrounds compared to half of the general education population. Less than 20% of the youth with disabilities lived with both their parents, which is half the rate of youth without disabilities. Five times as many parents of the general education sample had completed high school compared to the parents of students with disabilities. And by definition of the RFP, the students targeted for intervention had learning and behavioral difficulties that required special accommodations ranging from instructional modifications to adaptations of administrative policy. Students receiving special education services were rated by their teachers as significantly lower in academic functioning and higher in overall risk for school failure than the general education population. From the start, these students with learning and emotional/behavioral disabilities entered the educational system with fewer resources to promote and maintain school success than the majority of their peers.

In addition to the status risk factors, the youth with disabilities in the treatment and comparison groups exhibited many behavioral indicators of risk during middle school that are highly correlated with dropping out. Our greatest concern was the prevalence of chronic absenteeism, followed by poor academic performance and the propensity for students to be punitively disciplined for behavioral problems.

- Students with disabilities were absent on average 15% to 20% of the school year, missing 25 to 30 days of instruction.
- The average portion of the intervention or monitoring period during which students exhibited high risk behaviors for absenteeism ranged from 16% for no profile students, to 38% for low profile, 52% for medium profile, and 74% for high profile students.
- Teachers did not perceive students poor academic performance to be a warning sign of school withdrawal and potential risk for dropping out of school.
- Students with disabilities failed 15% to 25% of their classes during 8th grade.
- The level of school engagement for half of the students with learning and behavioral disabilities was rated as "medium" or "high" profile, indicating multiple absences, course failure, and/or behavioral problems.
- Students with disabilities in the comparison group were suspended from school an average of 7 days per year, with 34% of these students being suspended between 7 and 17 days.
- Teachers rated the problem behaviors of students with disabilities at or above the 75th percentile of typical secondary school age youth.

Mobility. The multiplicity of risk factors associated with the students targeted for intervention was compounded by high mobility rates. The amount of student mobility was far greater than we had anticipated. It affected not only the delivery of interventions, but also the technical aspects of the research component (e.g., sample selection procedures, strategies to obtain parent permission, data collection). In terms of intervention issues, mobility was defined as both a status and amenable risk factor because of the duplicity associated with the causes. Students moved from school to school and in and out of school as a function of absenteeism, suspensions, residential movement, administrative transfers, and to a lesser extent personal choice. For these students, who have a high need for consistency and stability, each new program or school meant they had to adapt to new rules, new expectations, new teachers, and new peers. The net result was a lack of instructional continuity for a group of students who has difficulty learning in the best of environments.

- Fewer than 40% of the students with disabilities remained in the same middle school for the full two years.
- Only 19% of all youth with emotional/behavioral disabilities remained in the same middle school for the full two years.
- Rates of school persistence during middle school indicated that on average 59% to 83% of students with disabilities were receiving continuous education.
- On average, 16% of treatment students with low to high profile ratings interrupted school at least once compared with 7% of treatment students with a no profile rating.
- Over 75 new students with IEPs for learning and emotional/behavioral disabilities entered one of the three middle schools after the project cut-off period.

While the vast majority of the students with disabilities were still enrolled in school at the end of 8th grade, few of these youth consistently demonstrated good habits of school success (i.e., attending regularly, completing coursework, passing classes, resolving conflicts constructively). The project participants could be described as having been moderately engaged in middle school at best.

The consequences of continuing with poor school habits into 9th grade tend to be more severe than in middle school. Fifteen absences from any class is an automatic fail. Failure to pass classes and accrue minimum credit requirements results in grade retention. Holding students, teachers and parents more accountable for student performance in middle school seems like the obvious response and may improve outcomes for some youth. Yet, higher standards and stiffer consequences (e.g., grade retention) are correlated with higher dropout rates. Accountability must be coupled with the supports necessary for high risk students to be successful. Our experiences clearly indicate that just saying "do it" is not sufficient.

The degree of student mobility also effected research efforts. Determining who was and was not in the treatment was a complex task, even though the district had a sophisticated online database that included students enrollment history and movement throughout the district. No standard

procedures existed for following up with "no shows" (i.e., students who were pre-registered in the spring but did not show up for the designated school in the fall) and special education data was logged on a separate system that was not readily accessible and lagged behind the school building information by months. Hours and hours were spent on a list of no shows in an effort to make sure these students were not dropouts sitting at home, but were just indeed enrolled in another school or school district. Many students eligible for participation in the project (i.e., students with IEPs for a learning disability or emotional/ behavioral disability) entered the treatment schools well after September of their 7th grade year (27%). The late arrival of cohort 1 students was not as great a concern as was the late arrival of cohort 2 students, for whom refined interventions were in place. The students in cohort 2 who had entered the target school late in the fall (e.g., December) missed several months of viable intervention. While exclusion of these students from the study might have dramatically increased the impact of the intervention, we chose to include a portion of the late-comers (i.e., students who entered up until January of their 7th grade year) in order to obtain a research sample that would more closely represent the entire population of at-risk youth. Over 75 students with IEPs for a learning or emotional/behavioral disability enrolled in one of the three project schools after our January cut off date. While these students were not included in the project, it is important to keep in mind that these 75 youth were part of the teachers' regular caseloads as well as the youth participating in the project.

Furthermore, a better tracking procedure as part of the regular school program and an immediate systemic response to truant or "missing" students was critically needed. Initial efforts to keep track of who was and was not present for intervention all but required the skills of a detective. High mobility rates influenced several other aspects of the research as well. If a student left one of the intervention schools, the intervention support was no longer available and daily monitoring was stopped. The enrollment status of the student was then verified on a monthly basis through the tracking system. Ideally we would have continued working with students throughout the district, if the parameters of our research design and project resources had allowed. Nevertheless, a challenging task for the project staff was to constantly watch for the return of students who had previously left the treatment schools (e.g., checking with teachers about the return of former students, checking the district database) and watching for new students throughout the fall (e.g., asking special education teachers if any new students had arrived) in order to promptly fold them into intervention activities--before they were gone again. The potential for a new student or returning student to go "unnoticed" for a week or two was heightened by the part-time nature of the monitor position, in conjunction with unreliable internal school communication.

The minimal requirements of obtaining parent permissions and completing student and parent interviews were essentially doubled by the task of first finding the parents and students. Collecting the pre-test data for cohort 1 before interventions were underway was barely

accomplished. In the first year of the project, parent permission slips asked for the return of a positive response for student participation. Obtaining these permissions was a three month process, averaging two hours of personnel time per student. The parents of students who were most difficult to connect with were pursued until the permission slip was signed, noting either refusal or approval. We thought it was important to maintain the pursuit of difficult students (e.g., track down correct addresses, knock on doors) in order to avoid biasing the sample by excluding potentially high risk youth. After the first year, permission forms were included in the new student orientation packets; these required return only if it was desired that the student **not** participate in interventions. Students and parents could refuse the additional intervention support at any time, and surveys were administered to all students in the schools so youth who were part of the research sample were not singled out, thereby avoiding the need for individual permission forms. The costs incurred by the additional data collection required for this approach were minimal compared to the time and resources that were saved by using the revised consent procedure.

School Interruption Rates versus Dropout Rates. When graduation is several years away (i.e., students are in grades 7, 8, 9), the examination of persistence and interruption rates may be more indicative of immediate program effectiveness and a more robust predictor for identifying who is unlikely to graduate than standard year-end dropout rates. The standard dropout rate formulas are not fully informative indicators of the level of school engagement for students in lower grade levels. Standard dropout rates do not differentiate between students who consistently "stay in" from those who have "dropped back in." Since students in lower grade levels are more likely to move in and out of school, rather than drop out and remain out of school forever, we found that "school persistence" or "interruptions" more adequately measured the continuity of enrollment.

Although the dropout rates were not insignificant (generally a status rate close to 4%, yet reaching as high as 23% during middle school including students in the *unknown* category), this statistic did not seem to capture what was really happening. While the enrollment data suggested that relatively few students on average were dropping out during the middle school years, the monitoring sheets and monthly tracking logs indicated that there was much more movement in and out of school. The preliminary analyses of standard dropout rates did not seem to coincide with this other evidence. An examination of student enrollment over time revealed patterns of school interruption twice the size of standard dropout rates and with figures that more closely resembled the perceptions of the monitors and information documented on the monitoring sheets and in the tracking database (with the majority of school interrupt rates ranging between 11 and 41%).

Educators' Misperceptions about Youth and Families. One surprise encountered during the project was the extent to which some teachers and resource staff allowed their perceptions of fear and danger to interfere with their interactions with students and parents. These perceptions were often

misperceptions stemming from a fear of the unknown and unfamiliar. It would not be an exaggeration to state that 80% of the school staff were reluctant to venture into the city's neighborhoods. We were surprised by teachers who declined our invitations to attend evening parent meetings, not because they were busy, but because they were afraid to enter after dark the neighborhoods where meetings were held. One teacher indicated that she would participate only if the meetings were located at the school site.

Several educators tended to avoid confrontations or conflicts of any kind, sometimes creating larger problems in the process. Teacher concerns about parent workers were almost always channeled through the intervention coordinator, rather than the teacher directly discussing the concern with the parent worker. Teachers worried that their comments or attempts at constructive criticism might be taken personally or misconstrued. Project staff hypothesized that stronger mediation and conflict management skills among the school staff and parents would have greatly enhanced project efforts, in conjunction with the increase in opportunities for parents and teachers to interact. The experiences of project staff confirmed that parents and students welcomed school staff into their homes and community, and that teachers enjoyed and benefited from parents in the classrooms.

Intensity Required for Implementing Interventions at a Systemic Level. A fourth insight was our underestimation of the intensity of support required to maintain systemic reform, sensitive to the needs of high risk youth. It is clear that extra resources are needed if school staff are to adequately engage at risk students in school. The project-based reform efforts intended to build systemic capacity included parent outreach initiatives, promoting alternatives to suspension, and facilitating computer aided instructional strategies (see Section II for more detail). Each of these initiatives required continual attention of the intervention coordinator and other project staff. Hardware would break down or student schedules would change and their tutoring time would need to be altered. The physical presence of a project staff member was almost always required to negotiate an alternative option to out-of-school suspension. And, the parent worker program was by far the most resource intensive intervention targeting systemic change. More than 40 parents of youth with disabilities were hired to work part-time in the schools during the three years of intervention. The anticipated demands of managing this many staff were compounded by the fact that the vast majority of parents had no prior formal work experience. The intervention coordinator spent a great deal of time with each parent worker addressing job readiness skills such as being to work on time, calling in to notify the schools of absences, dressing appropriately, and keeping records on hours worked in order to fill out time cards. Some parents expected paychecks when they had not put in the hours or had turned in their time card after the cut off date. Several parent workers were also concerned about how the earned income would affect their public assistance benefits. In response, the intervention coordinator helped the parents fill out and process any new forms requested by the public assistance office.

■ What We Think We Know

A synopsis of what we think we know is based on data presented in Sections I and III: (a) persistence is a critical element of the prevention and intervention strategy, (b) parents care about their children's education, (c) trust can be established, and (d) the educational system at the current time is not inclined to find or to keep youth who act out in school.

Persistence is a Critical Dropout Prevention Element. Determination and tenacity were evident throughout the project period. Themes of persistence were echoed in the process of intervention design, delivery, and development. To begin with, the Check and Connect monitoring and school engagement procedure is by nature a mechanism designed to continually monitor and engage students' connection with school. Each monitor was assigned a caseload of students and with the exception of staff turnover, the monitor continued with the same group of students throughout 7th and 8th grade and for some 9th grade. More importantly, we found that some level of ongoing support was necessary. Students' profile ratings (i.e., an indicator of students' levels of engagement with school) were quite volatile, moving from no or low profile to medium or high profile and back again. This information affirmed our assumption that students with learning and emotional/behavioral disabilities cannot be "cured" of their risk for dropping out of school. There is no quick fix. However, the two levels of Check and Connect intervention (i.e., the core intervention strategies and supplemental strategies) offer a means of parceling resources in a manner that is reasonable to sustain over time. Core interventions can be targeted for all high risk students requiring only monthly contact and supplemental strategies, which are more resource intensive, can be reserved for youth exhibiting high risk behaviors.

Further demonstration of persistence was in our unwillingness to be discouraged. It was our intent to learn "what it takes" to keep kids in school. Parent attendance at the monthly evening meetings ranged from 20% to 80%, averaging reasonable participation of 70% of the families over the course of the year. However, each monthly meeting was preceded by an invitational flyer mailed out 10 days before the meeting, at least two phone calls and/or two home visits, averaging 4.0 contacts per parent per event. Students were asked to participate in the monthly litany of discussing risk factors and reviewing scenarios using the five step plan, regardless of whether they appeared bored with the repetition. Over time, most youth indicated that they found the problem solving strategy helpful and appreciated the feedback on their school performance. Project staff members who had a higher tolerance for the kind of chaos and inconsistency frequently encountered in the process of intervention delivery tended to fair better than those staff members with lower tolerance. Some staff members were overwhelmed by a sense of frustration and uncertainty about functioning effectively within the broad parameters of the job description. The more tenacious project staff seemed to achieve greater impact within the systems of home, school, and community, as evidenced by less

reliance upon the intervention coordinator to assist with follow-up activities. Perhaps the greatest weakness of the middle school intervention was not being able to follow students along with the Check and Connect procedure after they left the treatment schools, particularly given student mobility. The intervention was refined for the continuation project (i.e., the study that allowed us to investigate the affect of monitoring students through 9th grade) so that treatment followed the students regardless of the metro area school they attended.

Finally, persistence was also a critical factor in the development and maintenance of the intervention. But more importantly, we found that persistence was necessary only in terms of fulfilling the intended goal of the intervention (i.e., multiple means could be used to successfully achieve the end). The **specific** intervention activity (e.g., tutoring, computer aided instruction) did not seem as essential as providing **some** intervention (e.g., academic support) that met the individualized needs of the student. Given the tentative nature of youth oriented programs and our decision not to create our own, it was essential to go with what was available and to anticipate the task of piecemealing support services. Several attempts were made to establish individualized interventions and to initiate systemic programs, especially during the first years of the project. Some efforts to forge a link with community programs never materialized (e.g., Junior Achievement, after school activities), other intervention strategies ran for a while and then faded away (e.g., the learning lab, family focus, Outward Bound, one of the high school tutor-mentoring programs, the guest lecturer and parent visitor program). However, these experiences did not deter the project from identifying other intervention strategies that would meet the same underlying goals (i.e., providing students with academic support, problem-solving support, and recreational and community service exploration).

Parents Care about their Adolescent's Education. The degree to which "parents cared" was frequently defined by educators as the number of times the parents attended school meetings. In essence, a narrowly defined set of behaviors were being interpreted as validation for a lack of shared values and beliefs. Contrary to this perception, the parents cared about their children's education, and without exception, wanted their adolescents to complete school. What we found was that either parents did not know how to help their adolescents do well in school or the mechanisms for family members and school staff to effectively communicate and collaborate were not in place. The parents in the project, including those of the medium and high profile students, participated in school functions and project activities when they were provided enough support, encouragement, and resources--such as a personal invitation, transportation, and day care. The project interventions served as those outreach mechanisms. Project staff provided or coordinated the access to resources that helped parents gain confidence, skills and knowledge. The monitors worked persistently with family members to keep education a salient issue. Often, the resources and energy parents had to devote to educational support were in direct competition with family crises and the basic demands of securing and

maintaining food, shelter, clothing, safety, and health. Outreach strategies can provide parents with the ability and support needed to act upon their beliefs and value for education.

Trust Can be Established. Trust building was an ongoing process of Check and Connect, facilitated by the longitudinal nature of the project, the participatory approach of the intervention, and the persistent focus on developing long-term relationships. Promoting levels of trust were important across multiple dyads - parents and teachers, teachers and students, monitors and students, teachers and monitors, parents and monitors. Almost without exception, we found that students will begin to trust and build relationships with an adult - if the adult is persistent, reliable, and honest with the student. Gender and ethnic match was not as important after an initial "trial" period as was the persistence of the adult in reaching out to the student over time (i.e., at least one year).

The parent-teacher dyad was also of particular interest to us. It was hypothesized that less trust existed between the home and school of students who were at higher risk for school failure. Teachers frequently perceived their interactions with parents as abrasive and confrontational. Parents indicated to us that they found the teachers' "polite" approach to be confusing and misleading. The Home-School Partnership Survey was developed by University of Minnesota researchers to assess the degree of collaboration, communication, and parent involvement from both the teachers' and parents' perspectives.³ In general, measures of trust between parents and teachers indicated that parents trusted teachers significantly more ($M = 1.9$) than teachers trusted parents ($M = 2.3$), where 1 refers to high trust and 4 refers to low trust, $t(381) = 7.37$, $p = .000$. This discrepancy was larger for students with higher profile ratings, which denotes greater risk for school failure. Analyses indicated that parents of high profile students were less trusting of school staff ($M = 2.3$) than were parents of no and low profile youth ($M = 1.5$ to $M = 1.8$), again where 1 refers to high trust and 4 refers to low trust. However, those parents and teachers who were involved in the parent-teacher action research teams and parent worker program (whose youth ranged in profile rating from *no* to *high*) tended to be more mutually confident of each others' educational efforts. Survey responses indicated both high trust and lower discrepancy between the parents and teachers involved in the action-research teams and parent worker program ($M_{\text{teacher}} = 2.0$ and $M_{\text{parent}} = 1.9$; a difference in means scores of 0.1) compared to those parents and teachers who were not involved in these activities ($M_{\text{teacher}} = 2.5$ and $M_{\text{parent}} = 1.9$; a difference in mean scores of 0.6).

We have found that the social distance that exists between home and school can be reduced by creating opportunities for positive interaction and ongoing dialogue. Without the opportunity for two-way communication, people tend to make assumptions and assumptions build walls and animosity. Project staff, particularly the monitors, let parents, students and teachers know that the conversation and problem solving would be an ongoing effort. The project brought trustworthy resources to the interaction, so that teachers or parents or students knew they would not be

confronting problems alone. Trust cannot be mandated, it must be built piece by piece - which takes dialogue and persistence.

Educational System Not Inclined to Keep Youth in School. Currently, the educational system is not inclined to find or to keep in school those youth who act out or who are weeks behind. Teachers with class enrollments of 32 to 38 students are often grateful for absences, particularly when the missing student has a reputation for being disruptive. No-shows are not regularly tracked down by resource staff, particularly when the building enrollment is well over recommended capacity. The disciplinary environment often escalates the problem. Power struggles between teachers and students are not uncommon. Over 45% of all district suspension incidents are for "defiance and disrespect" and account for 62% of one of the intervention middle school's suspension incidents.

Routine procedures to facilitate the connection of high risk youth to school are not in place. We found that for high risk youth to stay in school, particularly youth with learning and emotional/behavioral disabilities, secondary school policies must address the following issues:

- *Need for inservice . . .* school staff need intensive inservice about stereotypes and knowledge including:
 - safety of city
 - parents' expectations for their adolescents and their desire for them to remain in school
 - how to collaborate with parents to support student learning
 - knowledge about the court system
 - how to interact with community agencies
 - cost to society when a student permanently disengages from school
 - knowledge about amenable risk factors
 - how to respond to high risk behaviors in a timely fashion
- *Need to examine . . .* school administrators need to examine the degree to which suspension and transfer policies alienate students from school.
- *Need to inform . . .* school administrators need to inform staff that keeping students in school is a major issue, both a national education goal and a school goal.
- *Need to maintain . . .* school administrators need to maintain a continuum of services that is conducive to keeping youth with disabilities engaged in school, providing adequate supports so students can fully participate in the school community.
- *Understanding of . . .* out-of-school issues must be acknowledged - family problems, mobility, proper clothes for school, concern for parents' health. Students are relieved when staff are aware of conditions - even if staff can't really do much about them.
- *Coordination of . . .* school staff must help coordinate outside resources -- especially the court system -- helping students or parents get treatment.
- *Connection of . . .* school systems need to design a means of keeping the same key staff in connection with high risk students when a student experiences mobility (including alternative schools, treatment, corrections) -- so that their transition from setting to setting can be held to a minimum and not be the cause of failure.

■ Remaining Questions: What We Don't Know and Need to Know

Two critical questions have not been answered: (a) How effective were the interventions for promoting school completion? (b) How do we reach the most difficult students with learning and emotional/behavioral disabilities? The first question cannot be answered until we know the graduation rates and post-school outcomes of the students who participated in the project. This information is needed to properly assess the effectiveness of the dropout prevention interventions. The second question is still unanswered; we still do not know how to reach all youth with learning and emotional/behavioral disabilities. Some students remained beyond the influence of our efforts, efforts of the school, and efforts of the social service system. We were unable to incorporate the needs of some youth.

Graduation Rates and Post-School Outcomes. The most fundamental question remains unanswered: What are the graduation rates and post-school outcomes for the youth who participated in the project? At present (Fall 1995), the first cohort of students should have completed 10th grade and the second cohort of students completed 9th grade. It will be another three years, at least, before we can examine the on-time graduation rates of both cohorts. While the results indicated that the treatment students who received continued intervention through grade 9 were the only group to be significantly more engaged in school at the end of their first year of high school (see Section III), we do not yet know the extent to which the interventions will increase school completion rates for any of the treatment students. Nor are we able to assess the extent to which youth who are at high risk for school failure will find a meaningful niche in life after graduation.

Reaching the Hardest to Reach. The second question reflects our continued inability to significantly alter the educational experiences for a portion of the adolescents, and our lack of understanding of how we might if we could do anything we wanted to do. The educational demands of these treatment students were for the most part unmet, exceeding the resources of the project and the schools. Approximately 24% (23/96) of the students whose intervention intensity was evaluated were considered a "no match" in regard to the intervention and their needs; 82% of the "no match" students had a medium to high profile rating. Of the 23 no match students, 9% were not known to be continuing in school by the end of 8th grade, 48% had interrupted their education at least once, and only 17% remained in the intervention schools for the full 2 years. Furthermore, an additional 15% of our treatment sample spent less than 3 months in the intervention school and was not around long enough to be assigned a profile or intervention intensity rating (see Table 31).

Treatment Groups	Cohort 1		Cohort 2	
	%	Freq.	%	Freq.
LD II/III	11	7/61	20	15/74
LD IV	10	2/21	4	1/26
EBD II/III	7	1/15	18	2/11
EBD IV	30	7/26	11	3/27
Total Treatment	14	17/123	15	21/138

The educational system as currently structured does not have the capacity nor resources to effectively communicate and broker services with county and community agencies. A great deal of time and determination were required to ensure that a productive interaction between the agency, student, and family was accomplished, particularly for mobile students and families. Furthermore, the schools lacked the systemic resources and inclination to seek out students who were truant, particularly those youth who had a reputation for acting out. If the student was gone and no longer causing problems, the school's only obligation was to mail out a formal truancy notice to the courts and the family, a procedure often stymied by unknown and incorrect addresses. Within the current system, educators are typically relieved when difficult students are not present. An essential element of school reform is the creation of an educational system built on shared responsibility, in which the school's response to truancy goes from the distribution of paper to the direct teaching of skills to students and collaborative problem-solving with educators, parents, courts, and social services to increase school retention.

Recommendations to Middle School Administrators

The final section of this project evaluation challenges administrators to critically examine the holding power of their schools, particularly for students with disabilities. We know that youth with learning disabilities and emotional/behavioral disorders are at highest risk for dropping out of school. The cumulative effect of risk factors, such as learning difficulties, behavior problems, poverty, and mobility, tax the student's capacity to successfully adapt to the secondary school environment and the family's capacity to support the educational needs of the student. The consequences of school failure come at considerable cost to both the youth and to society. Our experiences in the Check and Connect/Partnership for School Success project lead us to make three recommendations. They relate to three critical topics: signs of withdrawal, home-school communication, and school policies and practices. We address each one in turn here.

■ Focus Resources on Signs of Withdrawal

Even though resources are limited, we strongly encourage administrators to focus resources on the students exhibiting signs of disengagement. More specifically, administrators must work to minimize student absenteeism and promote regular school attendance. Behavioral warning signs of withdrawal are the most direct indicators of risk for dropping out of school. These warning signs include chronic tardiness, absenteeism, late homework assignments, failing course grades, behavior referrals to the office, and multiple suspension incidents. Limited school resources can be used more efficiently if students are selected for support services using these observable criteria, rather than relying strictly on status variables such as ethnicity or even disability status to identify students for program eligibility. For example, we can conceive of a situation where an administrator will redefine the job description of personnel to encompass monitoring the predictors of dropping out, provide regular feedback to high risk students (i.e., regarding the economics of staying in school, the importance of earning credits, and student's progress in terms of attendance, behavior, coursework), and establish routine communication between home and school for high risk students.

Particular attention should be given to two of the more subtle warning signs. First, watch for students who are **passively** withdrawing from classroom participation, as evidenced by performance on classroom tests, homework completion rates, and course grades. It was our experience that the highly visible activities of young adolescents tended to overshadow these less disruptive, but just as risky, behaviors. The persistence needed to fulfill course requirements is a critical skill to acquire for survival in high school because the accumulation of credits is essential for graduation. Second, interruption of schooling is more likely to occur than permanent school withdrawal during the middle school years. A significant impact on the dropout problem could be made by promoting the habit of regular school attendance and minimizing periods of absenteeism.

■ Facilitate Communication between Home and School and Within the School

Support school policies and practices that facilitate communication, particularly between home and school and among educators within the school building. The collaboration of parents, teachers, and resource personnel from the school and community can minimize the potential for negative school experiences among high risk youth. Collaboration and trust is based upon two-way sharing of information and multiple opportunities for dialogue (i.e., communication). It is clear to most administrators that the possibilities for misunderstanding are infinite. Prior to secondary school, parents have been accustomed to interacting with one teacher for their child's academic needs and are likely to have lived within walking distance of the elementary school. The secondary system is not as accessible nor as small. Parents must now contact seven teachers instead of one in order to monitor

their child's academic progress and visiting the school can entail a 30 to 45 minute bus ride, one way. Teachers are now responsible for communicating with 150 parents instead of 35 and communicating among their colleagues regarding 150 students and all in a timely fashion. Consider the following suggestions:

- Establish a regular, reliable communication system between home and school. Parents need to know who and how to contact at school. Educators need to know how to reach out to parents.
- Part of creating a collaborative ethic between home and school requires an inclusive definition of parent. The term "parent" must include the significant adults in a child's life, which may be a biological parent, foster parent, older sibling, aunt or uncle, grandparents, or friends. The identification of several contact people may also be necessary since the primary caregiver may change over time.
- Involvement and parent support for student learning should not necessarily be defined as attending a meeting that is scheduled at the convenience of the teacher. Be sensitive to working parents and single parents. Institute multiple family outreach strategies, including home visits, proactive phone calls, homework hotlines, scheduling day and evening meetings, and supporting transportation and day care needs. Involve in planning and development a few parents who are among those that are to benefit from the strategies. Continue to work in partnership with parents when program modifications and refinement is needed.
- Encourage regular communication tied closely to improving student performance and promoting positive school experiences (e.g., passing classes, completing homework, constructive conflict management - no suspensions, creating means for better home-school communication). Parent involvement for the sake of parent involvement can be resource intensive and runs the risk of not producing the desired impact on student performance. Educators may be reluctant to maintain parent partnership activities if they fail to yield meaningful results. Parent interest may also waver and subsequently perpetuate the myth that parents "don't care."
- Insist on the assumption that all parents want their children to do well in school. Do not allow educators to avoid parent interactions out of unsubstantiated fear. However, know that the first contact with some parents may be confrontational, particularly if the contact is for a negative reason. Move the dialogue along to a problem-solving mode and minimize conversation concerning the assignment of blame. It is possible to move beyond the initial feelings of anger and frustration when parents know they are heard and are treated like a concerned member of the child's educational team.

Try beginning each grading period with positive, information communication and establish a dialogue, before potential negative issues arise.

- Allow for joint prep periods and common planning time for teachers and resource staff. Establish procedures and mechanisms that facilitate frequent and timely communication.

Home-school communication empowers parents to help their children when the school staff are responsive to family needs, afford parents opportunities to contribute to their children's developmental and academic progress, value parents' commitments and contributions, and view parents as active peers instead of passive clients. Preventive interventions can be implemented when educators communicate with each other on regular basis.

■ Evaluate School Policies and Practices that Alienate Youth

Evaluate school policies and practices that alienate youth, particularly in the wave of rising concerns about safe schools and the prevention of violence. Strict adherence to rigid discipline policies may exacerbate the dropout problem. Incidents of out-of-school suspension are reported by students to be one of the primary reasons for dropping out of school. Dropouts consistently hold more negative perceptions about the effectiveness and fairness of school discipline. One obvious hazard of sending a student home is that it directly impedes that youth's opportunity to attend school and to engage in the learning process. Furthermore, it does not use suspension as an opportunity to dialogue about changes in a problem-solving fashion. Still, many administrators find themselves operating in a reactive mode - responding to the immediate demands of misconduct and student-teacher power struggles spurred on by unmanageable classroom behaviors, overcrowded schools, high mobility rates, and fear.

Should a female student with a learning disability, who is uncomfortable waiting in the dark for the morning bus to arrive, be expelled from school because a can of mace (i.e., a weapon) was found during a locker sweep one week after a student was shot in another metro area school district? She was suspended for five days and almost expelled.

Several disciplinary approaches, based on behavior management and conflict management research, are less likely to contribute to the dropout problem while maintaining an orderly school climate. Teachers and parents of youth who have been suspended are encouraged to work together with students to identify and implement alternative practices, such as instituting in-school suspension rooms, implementing mediation programs for both students and staff, infusing curriculum with problem-solving skill building (i.e., the 5 step plan), and so on.

Recommendations for Further Research

Three recommendations for further research in dropout prevention and intervention strategies are suggested. The first concerns critical constructs, the second methodology, and the third attrition and missing data:

1. Critical constructs to include in future research are (a) school persistence and dropout/completion rates (e.g., monthly enrollment status), (b) student levels of school engagement (e.g., participation in school, identification with school--including expectations to graduate, and school performance), (c) support for learning by family, teacher, and school, (d) trust and communication between home and school, (e) risk and protective factors associated with the family, and (f) eventual outcomes (e.g., school completion and ideally post-school outcomes perhaps using the National Center on Educational Outcomes model⁴ for students with disabilities or some modification of it).

2. The second recommendation concerns methodology. We would suggest a blend of quantitative and qualitative prospective inquiry. Quantitative data should include the student specific constructs of school persistence, school engagement, support for learning, and outcomes. A subsample of case studies or enriched vignettes could be used to supplement the primary data base. Retrospective analyses of school and family support practices for high risk students who completed school could provide valuable policy and programmatic recommendations, in conjunction with more intensive experimental research designs.

3. The third recommendation addresses the issue of attrition and missing data. Demographic information should be provided on study participants who are not represented in the data sets. In-depth interviews regarding the major constructs of investigation should be conducted with a random selection of a few students who were missed in the initial data collection sweep.

Check & Connect: SECTION IV

Endnotes

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SECTION V
Appendices

**APPENDIX A: Post-Test Comparisons by Disability Category -
Cohort 1 Analysis**

**APPENDIX B: Post-Test Comparisons by Disability Category -
Cohort 2 Analysis**

APPENDIX C: Description of Check and Connect 9th Grade OSEP Project

APPENDIX A

Post-test Comparisons by Disability Category Cohort 1 Analysis

Outcome Tables (1.1 to 1.5):

Participation in School

Identification with School

Academic Competence

Social Competence

Behavioral Competence

Table 1.1 Cohort 1 Analysis - Participation in School

	Treatment			Comparison			Test of Significance		
	mean	SD	n	mean	SD	n	T	df	P
Absences									
Total Number Days Absent									
TOTAL	27.0	18.1	87	26.2	17.4	23	0.19	108	.847
LD II/III	27.6	17.5	45	25.8	18.0	21	0.37	64	.712
LD IV	16.9	11.4	17	-	-	0		n/a	
E/BD II/III	32.3	23.2	11	30.0	13.4	2		n/a	
E/BD IV	33.4	18.6	14	-	-	0		n/a	
Percent Time Absent									
TOTAL	16.8	11.6	87	16.2	11.0	23	0.24	108	.810
LD II/III	16.9	11.2	45	15.5	11.3	21	0.49	64	.624
LD IV	11.8	9.7	17	-	-	0		n/a	
E/BD II/III	19.2	13.7	11	23.8	0.8	2		n/a	
E/BD IV	20.9	12.0	14	-	-	0		n/a	
Assignment Completion									
TOTAL	6.8	2.5	29	10.0	0.0	1			n/a
LD II/III	5.5	3.3	4	10.0	0.0	1			n/a
LD IV	7.6	1.6	14	-	-	0			n/a
E/BD II/III	3.5	2.1	2	-	-	0			n/a
E/BD IV	6.9	2.8	9	-	-	0			n/a
Classroom Participation									
Student Perception									
TOTAL	1.2	0.4	68	1.3	0.5	44	0.93	110	.354
LD II/III	1.2	0.4	36	1.3	0.4	17	1.26	51	.215
LD IV	1.1	0.5	14	1.2	0.6	19	0.53	31	.601
E/BD II/III	1.1	0.5	9	-	-	0			n/a
E/BD IV	1.4	0.4	9	1.3	0.3	8	0.67	15	.512
Special Ed Teacher Perception									
TOTAL	1.2	0.5	46	1.3	0.5	43	0.67	87	.507
LD II/III	1.3	0.6	20	1.1	0.2	7	1.08	25	.292
LD IV	1.3	0.4	13	1.4	0.5	23	0.35	34	.728
E/BD II/III	0.9	0.5	5	-	-	0			n/a
E/BD IV	1.3	0.3	8	1.4	0.5	13	0.25	19	.805
Regular Ed Teacher Perception									
TOTAL	1.3	0.5	23	1.3	0.5	6	0.11	27	.913
LD II/III	1.4	0.4	18	1.3	0.5	6	0.62	22	.543
LD IV	-	-	0	-	-	0			n/a
E/BD II/III	0.9	0.5	5	-	-	0			n/a
E/BD IV	-	-	0	-	-	0			n/a
% On Task Behavior									
TOTAL	79.9	16.4	23	63.9	29.4	5	1.70	26	.100
LD II/III	79.2	23.4	11	63.9	29.4	5	1.12	14	.281
LD IV	79.9	7.4	8	-	-	0			n/a
E/BD II/III	82.4	0.0	1	-	-	0			n/a
E/BD IV	81.9	6.3	3	-	-	0			n/a

Rating scales:

Assignment Completion: range from 0=never complete to 10=always complete.

Classroom Participation: 0=never, 1=sometimes, 2=very often.

Table 1.2 Cohort 1 Analysis - Identification with School									
	Treatment			Comparison			Test of Significance		
	Post-test			Post-test			<i>T</i>	<i>df</i>	<i>P</i>
	<i>mean</i>	<i>SD</i>	<i>n</i>	<i>mean</i>	<i>SD</i>	<i>n</i>			
Expectation to Graduate									
TOTAL	1.5	0.6	119	1.4	0.5	33	0.58	150	.562
LD II/III	1.5	0.5	59	1.4	0.5	32	0.32	89	.749
LD IV	1.5	0.6	26	–	–	0		n/a	
E/BD II/III	1.5	0.7	14	1.0	0.0	1		n/a	
E/BD IV	1.5	0.6	20	–	–	0		n/a	
Effort - Works Hard in School									
TOTAL	1.6	0.5	66	1.6	0.4	44	0.11	108	.914
LD II/III	1.6	0.5	35	1.5	0.4	16	1.30	49	.200
LD IV	1.6	0.5	13	1.6	0.4	20	0.27	31	.787
E/BD II/III	1.6	0.5	8	–	–	0		n/a	
E/BD IV	1.6	0.5	10	2.0	0.4	8	1.84	16	.084
Relevance of School									
TOTAL	2.0	0.8	66	1.9	0.5	44	0.75	108	.458
LD II/III	2.0	0.7	35	1.8	0.5	16	0.54	49	.592
LD IV	1.8	0.7	13	1.8	0.5	20	0.06	31	.954
E/BD II/III	2.0	0.8	8	–	–	0		n/a	
E/BD IV	2.1	1.0	10	2.1	0.6	8	0.08	16	.937
Non-Alienation from School									
TOTAL	2.4	0.6	66	2.3	0.5	44	0.51	108	.614
LD II/III	2.3	0.6	35	2.3	0.6	16	0.30	49	.763
LD IV	2.6	0.5	13	2.4	0.5	20	1.42	31	.165
E/BD II/III	2.4	0.7	8	–	–	0		n/a	
E/BD IV	2.3	0.6	10	2.1	0.3	8	0.78	16	.448
	<i>%</i>		<i>freq.</i>	<i>%</i>		<i>freq.</i>	<i>x²</i>	<i>df</i>	<i>P</i>
Connection with Adults in School									
TOTAL	No One	16.7	11	19.2	9		3.84	2	.147
	1 Person	9.1	6	21.3	10				
	>1 Person	74.2	49	59.6	28				
LD II/III	No One	17.1	6	6.3	1		2.69	2	.261
	1 Person	2.9	1	12.5	2				
	>1 Person	80.0	28	81.3	13				
LD IV	No One	0.0	0	23.8	5		6.45	2	.040
	1 Person	15.4	2	33.3	7				
	>1 Person	84.6	11	42.9	9				
E/BD II/III	No One	25.0	2	0.0	0				n/a
	1 Person	12.5	1	0.0	0				
	>1 Person	62.5	5	0.0	0				
E/BD IV	No One	30.0	3	30.0	3		.424	2	.809
	1 Person	20.0	2	10.0	1				
	>1 Person	50.0	5	60.0	6				
Rating scales:									
Expectation to Graduate: 1=very sure I will, 2=probably will, 3=probably won't, 4=very sure I won't.									
Effort/Relevance/Non-Alienation: 1=strongly agree, 2=agree, 3=disagree, 4=strongly disagree.									

Table 1.3 Cohort 1 Analysis - School Performance

Academic Competence	Treatment			Comparison			Test of Significance		
	mean	SD	n	mean	SD	n	T	df	P
Grades (% passed)*									
Academic Classes									
TOTAL	81.0	0.3	86	72.1	0.3	24	1.19	108	.235
LD II/III	79.5	0.3	44	74.1	0.3	21	0.66	63	.510
LD IV	96.7	0.1	17	-	-	0		n/a	
E/BD II/III	62.9	0.4	11	37.5	0.5	2		n/a	
E/BD IV	79.5	0.3	14	100.0	0.0	1		n/a	
Non-Academic Classes									
TOTAL	83.6	0.3	88	80.5	0.2	24	0.55	110	.585
LD II/III	79.9	0.3	45	80.5	0.2	21	0.08	64	.934
LD IV	95.3	0.1	18	-	-	0		n/a	
E/BD II/III	76.1	0.3	14	70.8	0.1	2		n/a	
E/BD IV	86.4	0.3	14	100.0	0.0	1		n/a	
Academic Competence									
Special Ed Teacher									
TOTAL	83.8	10.8	46	82.4	17.5	44	0.47	88	.637
LD II/III	79.0	10.0	20	79.6	13.5	7	0.12	25	.906
LD IV	86.6	11.3	13	78.8	19.8	24	1.31	35	.197
E/BD II/III	84.8	4.8	5	-	-	0		n/a	
E/BD IV	90.8	10.4	8	90.6	12.0	13	0.03	19	.979
Regular Ed Teacher									
TOTAL	80.6	11.6	22	83.7	6.8	6	0.61	26	.549
LD II/III	79.6	10.9	17	83.7	6.8	6	0.84	21	.412
LD IV	-	-	0	-	-	0		n/a	
E/BD II/III	84.0	14.4	5	-	-	0		n/a	
E/BD IV	-	-	0	-	-	0		n/a	
Assignment Quality									
TOTAL	6.7	2.4	29	10.0	0.0	1		n/a	
LD II/III	5.5	3.3	4	10.0	0.0	1		n/a	
LD IV	7.7	1.6	14	-	-	0		n/a	
E/BD II/III	5.0	0.0	2	-	-	0		n/a	
E/BD IV	6.2	2.7	9	-	-	0		n/a	

Rating scales:

Academic Competence: standard score: females=>115 to 55, males=>115 to 61, where 90=25th percentile.

Assignment Quality: 0=never, 1=sometimes, 2=very often.

* Data for Level IV comparison collected from a different source.

Table 1.4 Cohort 1 Analysis - School Performance									
Social Competence	Treatment			Comparison			Test of Significance		
	<i>mean</i>	<i>SD</i>	<i>n</i>	<i>mean</i>	<i>SD</i>	<i>n</i>	<i>T</i>	<i>df</i>	<i>P</i>
Social Competence									
Student Perception									
TOTAL	91.7	22.3	51	97.2	21.4	34	1.13	83	.262
LD II/III	89.5	24.2	28	95.5	28.1	13	0.70	39	.486
LD IV	101.8	14.7	9	99.7	18.9	13	0.28	20	.784
E/BD II/III	84.4	18.1	8	-	-	0		n/a	
E/BD IV	96.3	26.5	6	95.8	13.1	8	0.05	12	.957
Special Ed Teacher Perception									
TOTAL	89.5	18.7	40	85.6	17.8	34	0.92	72	.360
LD II/III	90.4	23.0	17	83.6	17.3	5	0.61	20	.550
LD IV	94.7	13.0	10	85.2	20.9	21	1.31	29	.201
E/BD II/III	85.0	25.2	5	-	-	0		n/a	
E/BD IV	84.0	8.0	8	87.8	8.7	8	0.90	14	.384
Regular Ed Teacher Perception									
TOTAL	88.9	15.2	19	94.2	15.4	5	0.69	22	.496
LD II/III	88.9	12.0	15	94.2	15.4	5	0.81	18	.431
LD IV	-	-	0	-	-	0		n/a	
E/BD II/III	89.0	14.4	5	-	-	0		n/a	
E/BD IV	-	-	0	-	-	0		n/a	
"I get along with others"									
TOTAL	1.9	0.7	66	1.8	0.8	44	0.28	108	.782
LD II/III	1.8	0.6	35	1.8	0.8	16	0.11	49	.914
LD IV	2.3	1.0	13	1.8	0.6	20	2.03	31	.052
E/BD II/III	1.8	0.5	8	-	-	0		n/a	
E/BD IV	1.8	0.4	10	2.3	0.9	8	1.42	16	.174
Rating scales:									
Social Competence: standard score 130 to 40, where 100=50th percentile.									
"I get along with others": 1=strongly agree, 2=agree, 3=disagree, 4=strongly disagree.									

Table 1.5 Cohort 1 Analysis - School Performance

Behavioral Competence	Treatment			Comparison			Test of Significance		
	mean	SD	n	mean	SD	n	T	df	P
Suspension (out-school)*									
TOTAL	5.1	5.9	82	4.9	5.9	56	0.27	136	.787
LD II/III	4.6	6.0	43	6.7	3.8	16	1.31	57	.196
LD IV	2.1	3.2	15	1.5	3.6	23	0.53	36	.596
E/BD II/III	8.6	5.7	11	19.0	7.1	2		n/a	
E/BD IV	7.5	6.6	13	6.1	6.6	15	0.53	26	.599
Problem Behavior									
Special Ed Teacher									
TOTAL	117.0	12.0	44	112.7	25.2	44	1.02	86	.313
LD II/III	113.7	13.2	18	114.7	16.1	7	0.17	23	.868
LD IV	117.4	10.4	13	106.2	30.4	24	1.28	35	.209
E/BD II/III	118.0	6.6	5	-	-	0		n/a	
E/BD IV	123.3	13.2	8	123.7	12.8	13	0.08	19	.940
Regular Ed Teacher									
TOTAL	113.7	13.1	22	103.0	15.0	6	1.73	26	.096
LD II/III	115.1	13.6	17	103.0	15.0	6	1.82	21	.083
LD IV	-	-	0	-	-	0		n/a	
E/BD II/III	109.2	11.2	5	-	-	0		n/a	
E/BD IV	-	-	0	-	-	0		n/a	

Rating scale:

Problem Behavior: standard score 145 to <16, where 110≈75th percentile.

* Data for level IV comparison collected from different source.

APPENDIX B

Post-test Comparisons by Disability Category Cohort 2 Analysis

Outcome Tables (2.1 to 2.5):

Participation in School

Identification with School

Academic Competence

Social Competence

Behavioral Competence

	Treatment			Comparison			Test of Significance		
	Post-test			Post-test			T	df	P
	mean	SD	n	mean	SD	n			
Absences									
Total Number Days Absent									
TOTAL	30.6	20.7	90	24.9	19.6	57	1.65	145	.100
LD II/III	28.6	22.0	50	23.8	18.2	18	4.04	1,66	.048
LD IV	28.2	19.2	22	19.8	16.3	23	1.58	43	.121
E/BD II/III	32.6	21.0	6	6.0	0.0	1		n/a	
E/BD IV	42.3	15.0	12	33.1	22.4	14	1.21	24	.239
Percent Time Absent									
TOTAL	18.9	13.0	90	16.5	13.1	57	1.13	145	.262
LD II/III	17.7	13.6	50	17.9	14.3	19	3.18	1,66	.079
LD IV	17.2	11.1	22	13.1	11.8	23	1.20	43	.238
E/BD II/III	20.4	15.2	6	3.5	0.0	1		n/a	
E/BD IV	26.8	11.0	12	21.0	12.9	14	1.21	24	.238
Assignment Completion									
TOTAL	3.9	3.0	46	3.9	2.8	14	0.04	58	.967
LD II/III	4.0	3.0	40	4.1	2.8	13	0.09	51	.931
LD IV	-	-	0	-	-	0		n/a	
E/BD II/III	2.7	2.9	6	1.0	0.0	1		n/a	
E/BD IV	-	-	0	-	-	0		n/a	
Classroom Participation									
Student Perception									
TOTAL	1.2	0.5	61	1.3	0.5	42	0.78	101	.436
LD II/III	1.2	0.5	35	1.4	0.4	14	1.75	47	.087
LD IV	1.3	0.4	17	1.2	0.6	19	0.49	34	.627
E/BD II/III	1.3	0.3	3	1.3	0.0	1		n/a	
E/BD IV	1.3	0.5	6	1.3	0.3	8	0.12	12	.903
Special Ed Teacher Perception									
TOTAL	1.2	0.5	79	1.3	0.5	51	0.98	128	.327
LD II/III	1.3	0.6	43	1.2	0.4	14	0.22	55	.828
LD IV	1.2	0.4	21	1.4	0.5	23	1.28	42	.207
E/BD II/III	1.1	0.8	6	0.5	0.0	1		n/a	
E/BD IV	1.2	0.5	9	1.4	0.5	13	0.91	20	.375
Regular Ed Teacher Perception									
TOTAL	1.1	0.5	70	1.0	0.6	16	0.82	84	.416
LD II/III	1.2	0.5	42	1.0	0.6	15	1.05	55	.297
LD IV	1.2	0.7	15	-	-	0		n/a	
E/BD II/III	1.0	0.6	5	0.8	0.0	1		n/a	
E/BD IV	0.8	0.4	8	-	-	0		n/a	
% On Task Behavior									
TOTAL	65.7	20.1	38	62.6	18.0	11	0.46	47	.648
LD II/III	68.5	18.0	22	61.5	18.6	10	1.00	30	.323
LD IV	59.7	26.0	9	-	-	0		n/a	
E/BD II/III	53.3	0.0	1	73.3	0.0	1		n/a	
E/BD IV	66.4	19.8	6	-	-	0		n/a	

Rating scales:
Assignment Completion: range from 0=never complete to 10=always complete.
Classroom Participation: 0=never, 1=sometimes, 2=very often.

Identification with School	Treatment			Comparison			Test of Significance		
	Post-test			Post-test			<i>T</i>	<i>df</i>	<i>P</i>
	<i>mean</i>	<i>SD</i>	<i>n</i>	<i>mean</i>	<i>SD</i>	<i>n</i>			
Expectation to Graduate									
TOTAL	1.4	0.6	130	1.3	0.5	32	0.83	160	.406
LD II/III	1.4	0.6	76	1.3	0.5	30	1.45	104	.151
LD IV	1.4	0.5	34	-	-	0		n/a	
E/BD II/III	1.3	0.5	6	2.0	0.0	2		n/a	
E/BD IV	1.4	1.1	14	-	-	0		n/a	
Effort - Works Hard in School									
TOTAL	1.8	0.5	64	1.6	0.4	44	2.22	106	.029
LD II/III	1.8	0.5	37	1.4	0.4	15	2.84	50	.006
LD IV	1.8	0.6	17	1.6	0.4	20	1.48	35	.149
E/BD II/III	1.3	0.3	3	2.0	-	1		n/a	
E/BD IV	2.1	0.5	7	2.0	0.4	8	1.37	13	.194
Relevance of School									
TOTAL	2.2	0.7	63	1.8	0.5	44	2.67	105	.009
LD II/III	2.1	0.6	37	1.8	0.4	15	1.94	50	.058
LD IV	2.2	0.8	16	1.8	0.5	20	1.80	34	.080
E/BD II/III	1.6	0.8	3	1.8	-	1		n/a	
E/BD IV	2.5	0.6	7	2.1	0.6	8	1.37	13	.194
Non-Alienation from School									
TOTAL	2.4	0.5	64	2.3	0.4	44	1.07	106	.286
LD II/III	2.3	0.5	37	2.2	0.5	15	1.20	50	.234
LD IV	2.5	0.4	17	2.4	0.5	20	1.11	35	.277
E/BD II/III	2.2	0.4	3	3.0	0.0	1		n/a	
E/BD IV	2.2	0.3	7	2.1	0.3	8	0.28	13	.784
		<i>%</i>	<i>freq.</i>		<i>%</i>	<i>freq.</i>	<i>x²</i>	<i>df</i>	<i>P</i>
Connection with Adults in School									
TOTAL	No One	18.8	12	19.2	9		0.989	2	.610
	1 Person	12.5	8	19.2	9				
	>1 Person	68.8	44	61.7	29				
LD II/III	No One	13.5	5	6.7	1		0.503	2	.778
	1 Person	5.4	2	6.7	1				
	>1 Person	81.1	30	86.7	13				
LD IV	No One	17.6	3	23.8	5		1.900	2	.387
	1 Person	17.6	3	33.3	7				
	>1 Person	64.7	11	42.9	9				
E/BD II/III	No One	0.0	0	0.0	0		0.444	1	.505
	1 Person	33.3	1	0.0	0				
	>1 Person	66.7	2	100.0	1				
E/BD IV	No One	57.1	4	30.0	3		3.631	2	.163
	1 Person	28.6	2	10.0	1				
	>1 Person	14.3	1	60.0	6				
Rating scales:									
<u>Expectation to Graduate:</u> 1=very sure I will, 2=probably will, 3=probably won't, 4=very sure I won't.									
<u>Effort/Relevance/Non-Alienation:</u> 1=strongly agree, 2=agree, 3=disagree, 4=strongly disagree.									

Table 2.3 Cohort 2 Analysis - School Performance

Academic Competence	Treatment			Comparison			Test of Significance		
	mean	SD	n	mean	SD	n	T	df	P
Grades (% passed)*									
Academic Classes									
TOTAL	75.4	34.4	90	80.4	31.1	58	0.91	146	.366
LD II/III	70.6	36.8	50	61.9	41.3	19	0.85	67	.398
LD IV	96.1	13.6	22	95.6	14.9	24	0.11	44	.915
E/BD II/II	60.6	40.0	6	100.0	0.0	1		n/a	
E/BD IV	64.6	35.5	12	78.1	22.7	14	1.18	24	.251
Non-Academic Classes									
TOTAL	78.1	32.1	84	85.5	22.9	57	1.51	139	.134
LD II/III	76.0	34.6	46	80.6	24.0	18	1.30	2,59	.279
LD IV	85.4	19.2	22	93.8	14.6	24	1.66	44	.104
E/BD II/II	72.5	43.7	5	100.0	0.0	1		n/a	
E/BD IV	74.7	38.1	11	76.7	29.6	14	0.15	23	.885
Academic Competence									
Special Ed Teacher									
TOTAL	81.1	13.1	72	82.9	16.7	52	0.66	122	.508
LD II/III	79.7	13.1	43	82.6	13.4	14	0.73	55	.469
LD IV	79.9	12.7	14	78.5	19.8	24	0.19	36	.852
E/BD II/III	76.3	10.9	6	84.0	0.0	1		n/a	
E/BD IV	92.8	10.6	9	90.6	12.0	13	0.43	20	.668
Regular Ed Teacher									
TOTAL	74.4	13.8	67	80.3	14.5	16	1.51	81	.136
LD II/III	77.3	11.9	42	79.9	14.9	15	0.68	55	.498
LD IV	66.9	20.7	12	-	-	0		n/a	
E/BD II/III	73.6	12.2	5	86.0	0.0	1		n/a	
E/BD IV	71.3	7.0	8	-	-	0		n/a	
Assignment Quality									
TOTAL	4.8	2.8	46	5.0	2.8	14	0.22	58	.826
LD II/III	4.9	2.6	40	5.3	2.7	13	0.56	51	.581
LD IV	-	-	0	-	-	0		n/a	
E/BD II/III	4.7	3.8	6	1.0	-	1		n/a	
E/BD IV	-	-	0	-	-	0		n/a	
Rating scales:									
Academic Competence: standard score: females=>115 to 55, males=>115 to 61, where 90=25th percentile.									
Assignment Quality: 0=never, 1=sometimes, 2=very often.									
* Data for Level IV comparison collected from a different source.									

Table 2.4 Cohort 2 Analysis - School Performance									
Social Competence	Treatment			Comparison			Test of Significance		
	Post-test			Post-test			<i>T</i>	<i>df</i>	<i>P</i>
	<i>mean</i>	<i>SD</i>	<i>n</i>	<i>mean</i>	<i>SD</i>	<i>n</i>			
Social Competence									
Student Perception									
TOTAL	95.1	17.2	51	94.3	17.2	29	0.20	78	.844
LD II/III	91.8	17.3	29	84.3	15.1	8	1.12	35	.270
LD IV	96.0	16.2	14	99.7	18.9	13	0.55	25	.589
E/BD II/III	115.7	5.7	3	-	-	0		n/a	
E/BD IV	99.8	17.9	5	95.8	13.1	8	0.47	11	.645
Special Ed Teacher Perception									
TOTAL	85.8	17.8	71	85.7	16.3	43	0.00	112	.999
LD II/III	88.3	19.6	39	86.9	11.2	13	0.25	50	.803
LD IV	84.7	12.7	17	85.2	20.9	21	0.09	36	.927
E/BD II/III	77.2	21.9	6	66.0	0.0	1		n/a	
E/BD IV	82.4	15.1	9	87.8	8.7	8	0.87	15	.397
Regular Ed Teacher Perception									
TOTAL	81.4	16.7	64	83.3	20.3	12	0.33	74	.742
LD II/III	84.5	15.6	38	83.5	21.2	11	0.17	47	.867
LD IV	82.6	18.9	14	-	-	0		n/a	
E/BD II/III	70.0	15.8	4	80.0	0.0	1		n/a	
E/BD IV	70.6	13.9	8	-	-	0		n/a	
"I get along with others"									
TOTAL	2.0	0.6	64	1.9	0.7	44	0.09	78	.927
LD II/III	2.0	0.6	37	2.0	0.5	15	0.16	50	.872
LD IV	2.2	0.8	17	1.8	0.6	20	2.01	35	.050
E/BD II/III	1.3	0.6	3	2.0	0.0	1		n/a	
E/BD IV	2.0	0.0	7	2.3	0.9	8	0.74	13	.471
Rating scales:									
Social Competence: standard score 130 to 40, where 100≈50th percentile.									
"I get along with others": 1=strongly agree, 2=agree, 3=disagree, 4=strongly disagree.									

Behavioral Competence	Treatment			Comparison			Test of Significance		
	Post-test			Post-test			T	df	P
	mean	SD	n	mean	SD	n			
Suspension (out-school)*									
TOTAL	0.9	3.2	76	6.6	9.5	54	4.84	128	.000
LD II/III	0.9	3.2	45	15.0	12.4	15	7.06	58	.000
LD IV	0.0	0.0	18	1.5	3.6	23	1.79	39	.081
E/BD II/III	6.0	10.4	3	2.0	0.0	1		n/a	
E/BD IV	1.0	1.8	10	6.1	6.6	15	2.39	23	.026
Problem Behavior									
Special Ed Teacher									
TOTAL	114.8	9.9	78	110.3	23.4	52	1.54	128	.127
LD II/III	113.1	10.7	42	104.4	10.9	14	2.65	55	.011
LD IV	115.1	8.6	21	106.2	30.3	24	1.30	43	.200
E/BD II/III	115.5	5.9	6	115.0	0.0	1		n/a	
E/BD IV	121.6	9.3	9	123.7	12.8	13	0.43	20	.674
Regular Ed Teacher									
TOTAL	113.4	12.0	68	107.6	14.4	16	1.67	82	.098
LD II/III	111.7	12.4	40	107.7	14.9	15	1.01	53	.317
LD IV	113.5	12.5	15	-	-	0		n/a	
E/BD II/III	113.6	7.0	5	106.0	0.0	1		n/a	
E/BD IV	121.5	9.7	8	-	-	0		n/a	
Rating scale:									
Problem Behavior: standard score 145 to <16, where 110=75th percentile.									
* Data for level IV comparison collected from different source.									

APPENDIX C

Description of Check and Connect 9th Grade OSEP Project

Abstract

The University of Minnesota, in collaboration with the Minneapolis Public Schools, conducted a 12-month project to implement a dropout prevention procedure for students with learning and emotional/behavioral disabilities who were making the transition from middle school to high school. This procedure built upon the dropout prevention research involving middle school students. The move from middle school to high school is a significant transition for students. While it is difficult for all students, this transition is particularly difficult for students with disabilities who may not have been very successful in the middle school setting and who may not pick up as easily as other students the changes in expectations, rules, and strategies for being successful in the high school setting. The monitoring and school engagement procedure that was used in middle school was continued with adaptations for high school in order to give students a foundation for remaining engaged in, and connected to, high school. The adapted procedure was referred to as "Check and Connect".

The project involved approximately 100 students with learning and emotional/behavior disabilities who were enrolled in ninth grade (during 1994-95) after exiting from two middle schools in which the procedure was used when the students were in grades 7 and 8. The effects of using the **Check and Connect** procedure during the first year of high school (grade 9) was tested with approximately 50 of these students. The comparison group was approximately 50 similar students who received the monitoring and school engagement procedure during middle school but not during grade 9.

In the adapted **Check and Connect** procedure, students were monitored, with key risk behaviors (e.g., absenteeism, suspensions, etc.) **checked** and charted on a weekly basis, and individualized **connect** strategies implemented throughout the year. Interactions with students were initiated by monitors every week, with instruction on the economics of staying in school, the use of social problem solving strategies, and hints about surviving in high school. Because the students in the target group moved frequently, individualized intervention were designed to build skills for increased resiliency. Parent involvement in the **Check and Connect** procedure was continued from the middle school to high school through orientation meetings at the beginning of the year, and contacts on an "as needed" basis throughout the remainder of the year.

In addition to the variables that were monitored (e.g., absenteeism, tardiness, suspensions), the primary outcome variable was dropout status defined according to OSEP task force recommendations. Contextual information on other dropout programs and reform efforts occurring in the schools was documented. Also, an alienation-from-school measure and a teacher rating of academic performance were obtained for all students.

The Check and Connect project is answering the question of how important it is to provide a monitoring and school engagement procedure during the difficult transition from the middle school setting to the high school setting. It is also carrying the field's research knowledge a step beyond "admiring the problem" to actually modifying and streamlining a research intervention for schools to use to address the dropout problem with a challenging group of students. Finally, the project is providing an empirical check of dropout models like that of Finn.¹

Check & Connect: SECTION V

Endnotes

- ¹ Finn, J.D. (1993). School engagement and students at risk. (U.S. Department of Education, National Center for Educational Statistics) Buffalo, NY: State University.



Publications in the ABC Dropout Prevention and Intervention Series

- **Staying in School: Strategies for Middle School Students with Learning and Emotional Disabilities**
- **Staying in School: A Technical Report of Three Dropout Prevention Projects for Middle School Students with Learning and Emotional Disabilities**
- **Tip the Balance: Practices and Policies that Influence School Engagement for Youth at High Risk for Dropping Out**
- **Relationship Building and Affiliation Activities in School-Based Dropout Prevention Programs**
- **PACT Manual: Parent and Community Teams for School Success**

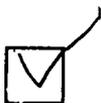


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