

Predictors of Grade Retention Among Children in an Elementary School Truancy Intervention

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Abstract: This exploratory-descriptive retrospective study examined the demographic, school-related, psychosocial risk factors, and service referrals among elementary school children ($N = 2,861$) at risk for continued truancy. The study purposed to investigate the domains of staying in school and progressing in school, constructs associated with eventual school dropout. The sample of school children was enrolled in 16 individual program sites of a statewide, community-based truancy prevention intervention in the Deep South. Binary logistic regression analysis was conducted to determine which correlates among the indicators best predicted on-time grade level at 3 years postintervention among a sample of at-risk youth. Model fit to the data was modest. Findings showed ethnicity and grade at program admission were significantly associated with on-time grade attainment at 3 years postintervention. Children assessed as unmotivated by their teachers were less likely to be on time for their grade at 3 years postintervention than children who were not assessed as unmotivated. Findings also suggest the construct of school disengagement is an important concern for school social workers in practice with elementary students. Implications for school-based intervention and research are discussed. Further research should study the mechanisms and specific services within the intervention that are most effective when working with elementary-age school children. More research is needed to understand how children with differential levels of school engagement are impacted by nonacademic interventions and how this impacts school performance.

Educators, social workers, and child welfare professionals work collaboratively in the school setting to promote educational success among student populations, especially among students who face a multitude of challenges and barriers to learning (Kelly, Raines, Stone, & Frey, 2010). Prior to the reauthorization of the *Elementary and Secondary Education Act of 2001*, which required comprehensive student data to be disaggregated and disseminated to the public, school-based professionals faced barriers acquiring disaggregated student academic data. Findings from the disaggregated data showed differences in academic performance among students based on ethnicity, disability, and poverty status; additionally, disparities in school attendance, progression, and dropout were revealed (Wenning, Herdman, Smith, McMahon, & Washington, 2003).

School social work and education professionals have recognized truancy, or chronic absenteeism, in the early grades as a significant risk factor for school failure and eventual dropout (Bartholomay & Houlihan, 2014; Claessens, 2015; Rodriguez & Conchas, 2009; Sutphen, Ford, & Flaherty, 2010). Moreover, a longitudinal study found that children who averaged 16 absences in the first grade eventually drop out and that students who averaged six or fewer absences per school year are more likely to successfully graduate from high school (Alexander, Entwisle, & Kabbani, 2001). In the early school years, truancy can negatively influence a child's academic future because it is indicative of a host of psychosocial concerns that may escalate to potentially severe problems (Henry, Knight, & Thornberry, 2012; Skola & Williamson, 2012). As such, truancy is best viewed not as a problem in itself, but as a symptom of other underlying issues. Thus, early onset of truancy is a key intervention point for children in schools (Gase, Butler, Kuo, & Workgroup, 2015; Hickman, Bartholomew, Mathwig, & Heinrich, 2008).

Studying school dropout and the factors associated with it are particularly important. School dropout is not

only an educational concern, but also a serious social problem (Burrus & Roberts, 2012). Individuals who lack a high school credential are overrepresented among those in poverty, as dropping out limits training, education, and earnings; moreover, nearly 70% of those incarcerated lack a high school diploma or other high school equivalency degree (Western & Pettit, 2010).

As such, the current study examines the empirically relevant concepts of staying in school and progressing in school (What Works Clearinghouse [WWC], 2008) utilizing secondary data from an elementary school truancy intervention, namely the Truancy Assessment and Service Center (TASC) program (Office of Juvenile Justice and Delinquency Prevention, n.d.). The TASC intervention employs an intensive case management intervention developed at a school of social work at a major university to help at-risk students stay in school in the early grades to promote school completion. (For a comprehensive description of TASC, see Rhodes, Thomas, Lemieux, Cain, & Guin, 2010.)

Review of the Literature

The Institute of Education Sciences has identified three domains related to school dropout: staying in school, progressing in school, and completing school (WWC, 2008). The first domain, *staying in school*, refers specifically to attendance and the problem of chronic absenteeism. The second domain, *progressing in school*, refers to whether children are progressing from one grade level to the next grade level on time. The third domain, *completing school*, refers to successful high school graduation. These domains provide a way to examine children's school experiences in relation to school dropout and other academic outcomes, such as attendance and retention that not only impact academic success and potential, but also life outcomes across the life span.

Chronic Absenteeism

It is particularly important to understand staying in school and progressing in school as they pertain to dropout. As such, dropping out of school is not a single event, but rather the conclusion of a long process of disengaging from school (Christenson, Reschly, & Wylie, 2012; Reschly & Christenson, 2013). Patterns established early in the school years, such as chronic absenteeism and falling behind from repeating a grade, form a pathway to future school problems and place the student at risk for school noncompletion (Im, Hughes, Kwok, Puckett, & Cerda, 2013). Research indicates that patterns are clear in school attendance prior to school dropout. Students reported that with each absence, either by skipping class or missing entire school days, they were less and less willing to go back to school (Bridgeland, Dilulio, & Morrison, 2006). Truancy has become a hallmark indicator of risk for educational failure, delinquency, and social isolation. Schools located in high-poverty urban areas and poor rural areas have a significantly higher rate of chronic absenteeism (Balfanz, 2007).

Grade Retention

As with problems with school attendance, previous grade retention has been strongly associated with eventual school dropout. Past research clearly demonstrated that children who have been retained in a grade and consequently are overage for their grade level are at risk for dropping out of school (Gleason & Dynarski, 2002; Im et al., 2013). Moreover, grade retention, as early as first grade, is a robust and significant predictor of eventual school dropout (Alexander et al., 2001); and those identified as underachievers in elementary school were found to be at elevated risk for school failure (Entwisle, Alexander, & Olson, 2004). More recent research has shown mixed findings about the advantages and disadvantages for children repeating a grade in school, as this practice has been relied on heavily for academically struggling students (Heining, Hughes, West, & Im, 2014). However, students who cannot or do not engage in learning and the classroom environment have fewer and less rewarding learning experiences and are less likely to progress in school and eventually graduate (Henry et al., 2012; Hickman et al., 2008).

Risk and Protective Factors

Children's futures are increasingly jeopardized as educational risk factors accumulate (Henry & Huizinga, 2007). Individual risk factors negatively associated with poor school outcomes include gender, ethnicity, and low academic skills (Henry & Huizinga, 2007; Richman, Bowen, & Woolley, 2004). Children's school experiences, such as previous grade retention (Hughes, Kwok, & Im, 2013), special education status (Christle, Jolivet, & Nelson, 2007), and suspensions (Losen & Skiba, 2010) place them at risk for school failure (Cook, 2015). Pervasive poverty has also been identified as a risk factor for school failure (Abedi, 2015).

School engagement, or a child's attachment to school, has been identified as an important factor in school success (Christenson et al., 2012; Glanville & Wilhagen, 2007). A

child's perception of safety and being welcomed at school is associated with better school outcomes. School engagement is a protective factor within the school environment (Lawson & Masyn, 2014).

Protective factors mitigate risk, and interventions that interrupt or decrease risk for children and their futures may be conceptualized as protective mechanisms (Gandy & Shultz, 2007). Truancy intervention programs in elementary grades are designed to reduce absences and to increase attendance so that children may attend school, become engaged and connected with school, and progress and complete school (Gase et al., 2015; Lawrence, Lawther, Jennison, & Hightower, 2011; Sutphen et al., 2010; Veenstra, Lindenberg, Tinga, & Ormel, 2010).

The Truancy Assessment and Service Centers Program (TASC)

The TASC program is an intensive truancy intervention reduction program based on case management for at-risk youth in kindergarten through fifth grade (Rhodes et al., 2010). Since the establishment of the TASC program in 1999, TASC has developed 12 operating sites and served over 80,000 children. To address both truancy and the underlying factors contributing to truancy, the TASC program works with students, families, schools, public safety officials, and other agencies to improve attendance and other long-term outcomes of the children and families who utilize the services.

Children are referred to the TASC program by their schools at the fifth unexcused absence. At referral, TASC case managers collect information about each child from the TASC referral form and the Risk Indicator Survey Instrument (RISK-I). The TASC referral form is completed by school staff and collects basic demographic information (e.g., age, ethnicity, gender); the number of excused and unexcused school absences; school-related data (e.g., grade, special education status, previous retentions); and school discipline data (e.g., history of suspensions/expulsions). The RISK-I is completed by the child's teacher and examines behavioral, academic, and family-related risk factors. The RISK-I examines 54 items in 12 broad categories known to be associated with truancy, which includes externalizing behaviors (e.g., aggressive and attention-seeker); internalizing behaviors (e.g., isolated and unmotivated); and family-related risk factors (e.g., poor parental attitudes and unstable home life; Kim & Barthelemy, 2011). TASC staff utilizes the data gathered in the TASC referral and RISK-I forms to assess the risk of continued truancy for the child and assigns the child to either the low-risk or high-risk level intervention.

Families of children assessed at *low risk* are mailed a warning letter from the TASC program, along with a copy of the state compulsory attendance law, to notify the family that their child has been flagged for truancy and their attendance is being monitored for the remainder of the academic year. Children assessed at *high risk* are more thoroughly evaluated via a family conference with the TASC case manager. As a result of the family conference, the family and case manager create a 6-month service plan for the child and family, including school and community

services that address the issues that are contributing to the chronic absenteeism. Consequently, attendance and the service plan are closely monitored for at least 6 months and up to 12 months. The TASC case manager closes open cases at the end of the school year as either successful or unsuccessful. (See Rhodes et al., 2010 for complete program description.)

The TASC intervention is closely monitored for program fidelity and accuracy of data. External monitors visit each TASC site biannually as well as examine processes and case documentation for accuracy and completeness. Case managers enter data from the TASC sites for individual cases into a web-based data system, which enables the university-based monitors to review data in an ongoing manner. Furthermore, a study using a regression-discontinuity design found the high-risk case management intervention to be effective for reducing truancy for a cohort of kindergarten to fifth-grade children during one school year (Thomas, Lemieux, Rhodes, & Vlosky, 2011).

Theoretical Framework to Understand Truancy

Truancy and school dropout can be viewed not simply as school-related problems of the individual, but rather as a result of interactions between the family and school environments (Kelly et al., 2016). Rooted in ecological theory (Bronfenbrenner, 1977) and the social development model (SDM; Catalano & Hawkins, 1996), the TASC program works within multiple systems related to the child, family, school, and community. Ecological theory suggests that chronic absenteeism in the elementary school years can be attributed to nested systems in which children are involved; these systems include the family, school, and community (Bronfenbrenner, 1977). To work in each of these systems, TASC incorporates a comprehensive assessment of functioning, as well as identification of individual, family, school, and community-level targets for intervention.

The SDM model suggests that children who are bonded to their families and to positive community values will avoid negative activities (Catalano & Hawkins, 1996). SDM proposes that prosocial behaviors are influenced first by family factors and then by the school environment, peer group, and the community (Catalano & Hawkins, 1996). SDM also identifies developmental points at which psychosocial risk factors may influence behavior and may be subject to change (Catalano & Hawkins, 1996). Research on truancy shows that interventions should be implemented with at-risk children as soon as academic or behavioral problems are detected (Christenson et al., 2012; Thomas et al., 2011). Truancy is often one of the first indicators of serious psychosocial problems affecting young children and their families. Therefore, interventions designed to address chronic absenteeism and other behavioral problems should begin in the early elementary school years (Catalano & Hawkins, 1996). The TASC program was formulated to intervene with kindergarten to fifth-grade children and their families to ameliorate risk and to increase protective factors for positive school-related outcomes.

In sum, school dropout is associated with a host of adverse life consequences. The purpose of the current

study is to examine the domains of staying in school (e.g., truancy) and progressing in school (e.g., grade retention), which are constructs associated with eventual school dropout. This study examines the combination of demographic, school-related, and psychosocial characteristics, and types of services that best predict on-time grade attainment at 3 years postintervention among elementary children in a truancy intervention program. Knowledge gained can inform school professionals about practices and intervention points that can assist children in attaining positive academic outcomes.

Methodology

Sample. The sample for this study was extracted from the TASC database, which is an archival program evaluation database designed for the intervention. The original sample was composed of all of the elementary public school children admitted to the TASC program during the 2004–2005 school year ($N = 12,644$). However, TASC follows each child only for the duration of one school year. As such, researchers used a post hoc and longitudinal approach to merge archival TASC data with state department of education data to assess on-time grade attainment at 3 years postintervention (2007–2008).

Identifying information (i.e., SSN, date of birth, sex, and race) was used to accurately match children from the TASC database to their official records in the state department of education (DOE) database. Results of the matching procedure produced 6,719 complete cases, which is slightly more than half of the original TASC sample (53.1%, $n = 6,719$). From this sample, only the students who received the intensive, high-risk intervention were included in the analysis. Thus, the final sample for the current study consists of the 2,861 (42.5%) cases from the TASC database that were accurately matched to their DOE records and who had received the high-risk TASC intervention in the 2004–2005 school year.

Students not included in the study were then compared to students in the study to assess any significant differences across several important demographic variables. Of the children who were not included in the study due to an inability to match their TASC records to the DOE, no significant differences in this group were found in terms of number of suspensions and gender. However, significant differences emerged in terms of ethnicity and the number of unexcused absences at referral. The differences in ethnicity may have been due to the overrepresentation of non-White children in the study sample. The differences in the numbers of unexcused absences may have been an artifact of attendance recording practices across the different schools and districts.

Instrumentation and Measurement

The TASC program collects data from three instruments that were developed for the intervention: (a) the TASC referral form, (b) RISK-I, and (c) Family Service Plan Agreement. The TASC referral form is a teacher-completed instrument that collects demographic and school information. RISK-I is a valid and reliable checklist composed of 54 items in 12 broad categories developed

for TASC that collects psychosocial risk-factor information (see Kim & Barthelemy, 2011). The Family Service Plan Agreement (family plan), which is completed during the family conference, collects service information. TASC case managers record data gathered from these instruments in an electronic database.

The dependent variable, on-time grade attainment at 3 years postintervention, was created from data collected from the DOE database using previous grade-failure information and the child's current grade level. Independent variables included three demographic variables (age, ethnicity, and gender), which were collected from the TASC referral form; five school-related variables (elementary grade level, suspensions, previous grade retention, special education status, and number of unexcused absences at referral), which are also collected on the TASC referral form; and 12 psychosocial risk factors, which are collected from the RISK-I. The psychosocial risk factors included defiant, manipulative, aggressive, isolated, negative parental attitudes, attention seeker, emotional response, unmotivated, risk-taking behaviors, unstable home life, developmental issues, and hyperactivity. Eighteen variables comprised the services, which were recorded by case managers on family service plan forms. Services as listed in the TASC database included Attention Deficit Hyperactivity Disorder (ADHD) screening, crisis intervention, counseling, mental health assessment, clothing assistance, financial support services, hygiene education, tutoring, school-level committee, home visits, parenting education, Medicaid/CHIP, medical referral, mentoring, recreational activity, TASC-sponsored summer camp, child protection agency, and other.

Results

This study examined characteristics of 2,861 elementary school children in the TASC program during the 2004–2005 school year who had been deemed high risk for continued truancy, who had received the TASC high-risk intervention, and who had been matched to their Department of Education records 3 years postintervention. Among the sample of children treated by TASC ($N = 2,861$), over half ($n = 1,656$, 57.9%) were male (see Table 1). The referral data originally included several different racial categories including White (non-Hispanic), White (Hispanic), African American, Asian American, and Alaskan Native. However, the racial groups of Hispanic, Asian American, and Alaskan Native were too small to report individually and this variable was recoded as either African American ($n = 1,756$, 61.4%) or non-African American ($n = 1,105$, 38.6%), which included White and other ethnicities. Children ranged from 4 to 15 years old and were, on average, nearly 8 years old ($M = 7.91$; $SD = 2.2$). Thus, the typical child served by TASC was an 8-year-old African American male. Among the sample of 2,861 high-risk children located in the DOE database, only 58.9% were on time for their grade at 3 years postintervention.

Table 1

Participant Demographic ($N = 2,861$)

	N	%			
Grade					
K	823	28.8			
1st	449	15.7			
2nd	371	13.0			
4th	356	12.4			
5th	359	12.5			
Gender					
Male	1,656	57.9			
Female	1,205	42.1			
Race					
White	1,105	38.6			
Non-White	1,756	61.4			
Previously Retained					
Yes	893	31.2			
No	1,961	68.5			
Special Education					
Yes	55	7.6			
No	651	90.0			
On-Time Grade Attainment					
Yes	1,684	58.9			
No	1,177	41.1			
			Range	M	SD
Age			4–15	7.91	2.2
Unexcused Absences at Referral			0–62	9.21	5.08
Suspensions			0–18	.57	1.4

School-Related Characteristics

The following descriptive statistics summarize the participants' school-related characteristics. These characteristics include grade level, grade retention, special education status, suspensions, and unexcused absences.

Grade level. Among the sample of high-risk youth, the largest proportion of children was kindergarteners ($n = 823$, 28.8%) and almost half were admitted to TASC during kindergarten and first grade ($n = 1,272$, 44.5%).

Previously retained. Overall, almost one fifth of high-risk children included in the sample had been previously retained at least once ($n = 556$, 19.4%).

Special education status. The vast majority of children were not enrolled in special education classes in the high-risk intervention ($n = 2,400$, 83.9%).

Suspensions. Numbers of suspensions at referral ranged from 0 to 18 among all children in the sample. However, this information was unavailable for one third of the sample ($n = 950$, 33.2%). Among the children whose suspension information was available, the vast majority had never been suspended ($n = 1,486$, 77.7%).

Unexcused absences. At TASC program admission, the average number of unexcused absences for the sample ranged from 0–62 days, with an average of 9.2 days ($SD = 5$).

Psychosocial Risk

As recorded on the RISK-I, the most frequently indicated risk factor for the high-risk group was unmotivated (44.2%) and second was attention seeker (41.3%). Teachers reported psychosocial risks among high-risk children approximately twice as often as they reported risks for low-risk children in five of the 12 categories, including aggressive, defiant, negative parental attitudes, risk-taking behavior, and unstable home life.

Services

Children who are assessed as being high risk for continuing truancy received the intensive case management intervention, which included service referrals to address needs of children and families as identified by case managers at the family conference. Among children assessed at high risk for continued truancy, approximately two thirds ($n = 1,793$, 62.6%) had service referrals recommended at the family conference. Overall, children were recommended to a total of 4,318 referrals. Service completion was calculated using the following formula: [(services completed/services referred +.1)*100]. Slightly more than 15% of participants who were referred to services failed to complete any services at all ($n = 451$). On the other hand, one third of participants ($n = 954$, 33.3%) completed 100% of their service referrals. On average, children completed one service ($M = 1$, $SD = 1.49$) with the number of completed services ranging from 0–13.

The most frequently *referred* service was parent education (27.8%) and the most frequently *completed* services were counseling ($n = 521$, 18.2%) and parenting education ($n = 462$, 16.1%). Approximately 13% ($n = 383$, 13.4%) completed other services (e.g., transportation and parent-teacher conferences). A relatively small proportion ($n = 41$, 1.4%) of children were recommended to child protection services with over 87% of child protection referrals completed.

Multivariate Analyses

The final dependent variable was coded to indicate whether the child was on-time or behind for his/her grade level at 3 years postintervention. Nearly 60% of children were on-time for their grade level ($n = 1,684$), while just over 41% were behind for their grade level ($n = 1,177$). Children ($n = 72$, 2.4%) who were ahead of their respective grades were eliminated from analyses. Because of the binary nature of the dependent variable, binary logistic regression was employed to assess which combination of participant school-related characteristics, psychosocial risk characteristics, and TASC services best predicted on-time grade attainment at 3 years postintervention.

Three control variables were added to the dataset to account for individual program site differences: District Performance Score (DPS), a poverty index, and the lead TASC agency. The DPS is a combination of school performance scores for each individual school in the school

district for one year, including high-stakes accountability test scores, attendance information, and dropout data. The poverty index is a measure of persons living below the poverty line in 2000 in the state. The lead agency variable reflected whether the local TASC site was operated by court (e.g., district attorney) or noncourt entity. Prior to analysis, 34 predictor variables were dichotomously coded. Age was eliminated because it was highly and significantly correlated with grade level ($r = .91$); grade level was retained. Because analyses of large samples often produce overestimation of significant findings, robust estimation of standard errors was used.

In the final model, 30 predictor variables were entered into the model, including the three control variables: DPS, lead agency, and poverty index. Three demographic variables (gender, race, grade at referral) and four variables measuring school-related characteristics (previous grade retention, special education status, number of suspensions, and number of unexcused absences) were entered. Variables measuring 12 psychosocial risk factors were entered (aggressive, attention seeker, defiant, developmental issues, emotional response, hyperactivity, isolated, manipulative, parental attitudes, risk-taking behaviors, unmotivated, unstable home life). Eight service variables (basic needs, child protection, educational, enrichment, family-related, medical, mental health, and other services) were entered measuring completed services.

Regression results indicated that the overall model of 30 predictors was statistically reliable in distinguishing between children who were on time for their grade at 3 years postintervention. Model fit was confirmed by significance of the Wald chi-square test (Wald = 86.766, $df = 1$, $p < .001$). The Nagelkerke R-square statistic indicated that inclusion of the independent variables explained approximately 10% of the variance in the dependent variable. The large -2 log likelihood (-2LL = 2,376.20) indicated questionable fit of the model to the data. Goodness-of-fit indexes showed significance of model fit, $X^2(30, N = 1,888) = 152.255$, $p < .001$, indicating that the predictors differentiated between children who were either on time or behind for their grade level at 3 years post intervention. H-L X^2 statistic indicated goodness-of-fit, H-L $X^2(8, N = 1,888) = 4.575$, $p = .802$. According to the classification table, the model correctly classified about two thirds (64.1%) of the cases.

As seen in Table 2, the odds of a child being on time for grade level at 3 years postintervention were negatively related to poverty, being assessed as unmotivated at referral, and completing educational services. The odds of being on time for grade were positively related to race and grade at referral. However, odds ratios for poverty, race, or grade at referral indicated little difference in the likelihood of on-time grade attainment (OR = .974, 1.331, and 1.189, respectively).

Children with higher levels of poverty in their communities were less likely to be on time for their grade than children residing in communities with lower poverty rates. However, the odds of living in communities with higher poverty rates and being on time for grade at 3 years postintervention were nearly the same (OR = .969) as the odds of residing in communities with lower poverty rates. The

Table 2

Binary LR Model Classifying Children as On Time or Not On Time for Grade

Predictor	P	Exp(B)
Constant	.59	n/a
<i>Controls (3)</i>		
District Performance Score	.24	1.007
Lead Agency	.09	1.201
Poverty	.02*	.969
<i>Demographic Factors (2)</i>		
Gender	.25	.886
Race	.01**	1.345
<i>School-Related Factors (5)</i>		
Grade	.001***	1.195
Previously Retained	.18	1.184
Special Education Status	.87	.980
Suspension	.19	.796
Unexcused Absence	.50	.993
<i>Psychosocial Factors (12)</i>		
Aggressive	.79	1.043
Attention Seeking	.58	.930
Defiant	.98	.996
Developmental Issues	.09	.812
Emotional Response	.68	.943
Hyperactivity	.96	1.020
Isolated	.21	1.193
Manipulative	.13	.794
Parental Attitude	.91	1.016
Risk-Taking Behavior	.20	1.315
Unmotivated	.001***	.536
Unstable Home	.80	.968
<i>Services (8)</i>		
Basic Needs	.53	.883
Child Protection	.56	.805
Educational	.01**	.639
Enrichment	.83	1.049
Family-Related	.87	1.021
Medical	.06	1.429
Mental Health	.33	.876
Other	.31	.859

odds of being on time for grade 3 years postintervention decreased only slightly (0.969) as the poverty rate increased. Non-African American children were more likely to be on time for grade than African American children. However, the odds of being non-African American and on time for grade were only 1.345 times greater than the odds for African American children.

In relation to grade, the higher the grade level at referral, the greater the likelihood that the child was on time for grade at 3 years postintervention; however, the odds of being on time for grade were only 1.195 times greater and increased only slightly as the grade level increased by one year.

For children who were assessed by teachers as unmotivated at referral, odds ratios showed that children assessed as unmotivated were less likely to be on time for their grade at 3 years postintervention. The odds of having been assessed as unmotivated and being on time at 3 years postintervention were about half ($OR = .536$) that of not being assessed as unmotivated. An examination of completed educational services determined that children who completed this type of service were less likely to be on time for their grade at 3 years postintervention. The odds of completing educational services and being on time for grade were about half ($OR = .636$) that of not completing educational services.

Discussion

This study examined children with truancy problems and whether they were progressing in school on time (WWC, 2008). Chronic absenteeism and failing a school grade have both been associated with the phenomenon of dropout. Ecological systems theory and SDM provide the theoretical moorings to examine the interconnectedness of young children's attendance patterns in school, their ability to progress on time, and ultimately to graduate from high school. Although the current literature on truancy in children is largely limited to studies examining yearly outcomes (Sutphen et al., 2010), the current study examines on-time grade attainment at 3 years after intervention. Additionally, the current study utilized multivariate analyses in the examination of characteristics in a sample of elementary school children, which is a demographic underrepresented in the literature and can provide more information about the predictors for grade retention and eventual dropout (Henry et al., 2012). Although findings of the study showed few statistically significant associations, information was generated regarding the risk characteristics of children who were assessed at high risk for continuing truancy and their progression in school.

Examination of basic demographic and psychosocial risk factors showed that the majority of participants were African American and most truancy intervention research has not oversampled from ethnic minority groups (Lehr, Sinclair, & Christenson, 2004). In addition, the sample was drawn from children attending state public schools, which enroll a large proportion of children living in poverty (Louisiana Department of Education [LDOE], 2017). Individual poverty-level measures were not avail-

able for the sample in the current study; however, at the time of the study, nearly two thirds of children (61.6%) attending K-12 state public schools received free or reduced-price lunch, a common proxy for poverty (LDOE, 2017). The findings of the current study also confirm what is known about how the unalterable characteristic of race is a predictor for poor school outcomes (Abedi, 2015). It was found that African American children were less likely to be on grade level than the non-African American children. Thus, culturally competent practice is critical for school social workers as well as the other members of the TASC program engaged with ethnic minority populations. Moreover, the study suggests the TASC intervention program may need to adjust its practice with African American populations.

The current study examined at-risk children in an intervention program that referred children at five unexcused absences, a relatively low threshold for unexcused absences. Because so many school-related and psychosocial risks were associated with the children in the current study, findings suggest that just a few unexcused absences is an acceptable threshold for intervention and that indicators for school failure and eventual dropout begin in the early grades (Chang & Romero, 2008; Gase et al., 2015).

Another finding that emerged was that children who were assessed as unmotivated were less likely to be on time for their grade than children not assessed as unmotivated. The construct of school disengagement focuses children's school problems away from strictly individual problems to issues of the school environment (Glanville & Wilhagen, 2007; Henry et al., 2012; Lawson & Masyn, 2014). The findings of this study suggest that school social work practices should extend beyond amelioration of individual-level problems and toward forming partnerships with educators and administrators to work with children and their families to promote school engagement (Finlay & Heilbrunn, 2006; Kelly et al., 2016). As school disengagement is occurring early in a child's school experience, more effort is needed for school social workers and school counselors to intervene with children manifesting school disengagement behavior. The findings of this study confirm that children who are uninterested in school are also often truant from school, and this is consistent with the literature that children who are uninterested in school are at risk for grade retention and eventual school dropout (Glanville & Wilhagen, 2007).

Findings about services were inconclusive, except for those services closely aligned with educational supports. Children who received educational services were less likely to be on time for their grades than children who did not receive these services, most likely indicating that the child was already having learning difficulties. However, this confirms that school social workers and school counselors need to work closely with teachers to promote school-related behavior that will maximize a child's ability to learn (Kelly et al., 2016).

One of the greatest limitations of the current study was limited knowledge regarding services to which the child and family were referred. In order to improve the understanding

of the services and their impact, it is crucial there be better measurement of type, frequency, and duration of services, including information about qualifications about service providers. Moreover, more information should also be collected about case management practices and procedures for assessment of case management services. Because of the limited significant findings shown in the current study, more information could be gained by qualitative and other innovative methods to understand the dynamics of practices that may help or hinder at-risk children progress through school.

Truancy or chronic absenteeism, as an indicator of other problems, is an intersection for social workers, school counselors, and other behavioral health professionals to intervene in the lives of at-risk children and their families. Because chronic absenteeism and its related legal concern of truancy are school-related issues, social workers and counselors need to be knowledgeable about not only the child and family, but also about the system of the school. Additionally, because most truancy intervention studies have been conducted among older children in middle and high school, this study provides information about young children in elementary school (Hammond, Linton, Smink, & Drew, 2007; WWC, 2008).

Despite the limitations of the current study, this study contributes to the knowledge base generating information about children at risk for truancy and its correlates. Even at referral, the level of risk among the children varied widely with some children exhibiting no psychosocial risk characteristics, suggesting that the children were referred due to school-related risks, such as number of unexcused absences and previous suspension and grade retention history. The current study suggests that the construct of school disengagement is an important concern for school social workers in practice with elementary students and that poor academic functioning among school social work clients places children at grave risk for future school-related problems, such as grade retention and resultant school dropout. School social workers need to work collaboratively with teachers and schools to promote academic success, a key indicator for their clients' future life trajectories.

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