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Enhancing GED Instruction to Prepare Students for College and Careers

EARLY SUCCESS IN LAGUARDIA COMMUNITY COLLEGE'S BRIDGE TO HEALTH AND BUSINESS PROGRAM

By Vanessa Martin and Joseph Broadus

ationwide, close to 40 million adults lack a high school diploma or a General Educational Development (GED) credential.¹ Nearly a quarter of high school freshmen do not graduate and, in many large cities, dropout rates in recent years have stood at around 50 percent.² And while most high school dropouts eventually do continue their education — usually through adult education or GED preparation programs - too few of those who start GED programs ever pass the exam. Moreover, for those who do earn their GED, the certificate often marks the end of their education, in part because few GED programs (even those that operate on community college campuses) are well linked to college or training programs. Students with only a high school diploma already face long odds of success in a labor market that increasingly prizes specialized training and college education; for GED holders, the chances are even worse.³ Given this context, the need to develop stronger pathways to college for those without high school credentials is clear. And this need is only magnified by new rules eliminating federal financial aid for aspiring college students without a high school diploma or a GED, and by the planned 2014

implementation of a new GED exam that emphasizes college readiness.⁴

To better understand how adult education programs might strengthen pathways to college and careers, MDRC, with financial support from the Robin Hood Foundation and MetLife Foundation, partnered with LaGuardia Community College of the City University of New

York (CUNY) to launch a small but rigorous study of the GED Bridge to Health and Business program. The GED Bridge program represents a promising new

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approach to GED instruction, as it aims to better prepare students not only to pass the GED exam, but also to continue on to college and training programs. MDRC has conducted several evaluations of programs that include GED preparation as one among many program components, but this evaluation is one of only a few to focus specifically on GED curriculum, program design, and efforts to forge a stronger link to college and career training. The results are highly encouraging: One year after

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enrolling in the program, Bridge students were far more likely to have completed the course, passed the GED exam, and enrolled in college than students in a more traditional GED preparation course. This brief details some of the key findings from this study as well as their implications for future research and for the development of stronger GED and adult education programming.

TEACHING THE GED

The GED exam takes over seven hours to complete and consists of subtests in five content areas: mathematics, reading, science, social studies, and writing. Due to differences in state requirements and the wide range of programs available, there is no consistent standard for GED test preparation and instruction; students can prepare for the exam in a number of ways. In

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a GED Testing Service study of over 90,000 people who took the GED exam in 2004, roughly half of the study sample participated in a preparatory program of some kind.⁵ These kinds of adult education programs are often operated by high schools, community colleges, or community-based organizations. Most often, the instructors work

part time and may not have had training in adult education methods. Lessons are unlikely to be organized around any particular themes, and instruction is generally limited to building the skills necessary to pass the exam. There is often little intention or ability to assist students in preparing for the next step in their education or career.⁶

LaGuardia's GED Bridge to Health and Business program — described in detail below — offers critical enhancements to this traditional approach. Rather than focusing solely on passing the test, the program was designed explicitly as a pathway to college and careers. The program includes an original, interdisciplinary curriculum that integrates material from the fields of health care and business. In addition, students attend more hours in class over the course of a semester than is typical for GED programs and receive intensive advising from full-time Bridge staff.

THE BRIDGE PROGRAM

The foundation of the GED Bridge program is its "contextualized curriculum." The curriculum has two broad goals: first, to build the skills that are tested on the GED exam through the use of content specific to a field of interest (health care or business) and, second, to develop general academic habits and skills that prepare students to succeed in college or training programs. The first of these goals is approached by using original material related to issues and themes specific to a career track to teach concepts that will be tested on the exam. Rather than developing math, writing, and reading comprehension skills through generic exercises, students learn by using materials specific to the health care or business track they are considering pursuing. The purpose is not for the course to simultaneously function as a GED course and an introductory health care or business course, but rather to introduce broad concepts, using career-relevant and thus more engaging materials while also allowing students to consider a career in the field in a deliberate and informed manner. The second goal of the curriculum — and of the program — is to prepare students for the academic challenges of college and the demands of the workplace. This is done by

structuring lessons and class expectations so that they mirror the assignments and expectations students are likely to face in college: Students receive a syllabus for the semester, get regular homework, and are encouraged to spend as much — or more time on out-of-class work as on in-class work. Likewise, the instructors emphasize analytical writing and critical thinking exercises in their assignments to prepare students for the instructional environment they are likely to encounter in a college classroom.

Finally, Bridge students receive individual and group advisement inside and outside of class, providing them with an opportunity to explore career options, complete career-interest and skills inventories, do research into local growth industries and postsecondary educational options, and develop plans for their educational and professional growth. Beginning in the second week of the course, a transitions adviser leads regular in-class activities on setting goals, the costs and benefits of higher education, and college registration. Health and business college faculty also visit the classroom to speak with students about their programs and the nature of the work in their fields.

THE EVALUATION

MDRC used a random assignment design to evaluate the effects of the GED Bridge program on student achievement compared with a more traditional GED program (GED Prep) modeled on LaGuardia's preexisting, tuition-based GED program.⁷ After learning about the study and agreeing to participate, interested and qualified students were assigned at random to either the GED Bridge program in health care or business — the GED Bridge group — or to a GED Prep course. Tuition was free for both the GED Bridge and GED Prep participants. Table 1 shows key distinctions between the two programs.

A random assignment design can provide unusually reliable information about what difference — or "impact" — a program makes. Because assignment to the research groups is random, differences between groups in students' motivation and background characteristics are minimized, thus allowing for a truer measure of a program's effects. The study examines not only whether participants receive their GEDs and enroll in college and training, but also whether they *stay* in college or

PROGRAM COMPONENT	GED BRIDGE	GED PREP
INSTRUCTION	Full-time instructor, paid for class preparation time	Adjunct instructor, paid for in-class time only
IN-CLASS TIME	108 hours over 12 weeks	60 hours over 9 weeks
CURRICULUM AND MATERIALS	Career-oriented curriculum featuring original materials	GED textbook assignment
COUNSELING AND SUPPORT	In-class and individualized transition counseling	None beyond general college resources

TABLE 1. Key Distinctions Between GED Bridge and GED Prep

TABLE 2. Selected Characteristics of Study Participants at Baseline

CHARACTERISTICS	STUDY SAMPLE
FEMALE (%)	67.2
AVERAGE AGE	26.6
RACE/ETHNICITY (%) HISPANIC/LATINO AFRICAN-AMERICAN, NON-HISPANIC/LATINO OTHER	50.1 34-5 15.4
RECEIVING PUBLIC ASSISTANCE (%)	53.4
EMPLOYED AT TIME OF RANDOM ASSIGNMENT (%)	38.4
STARTING TABE SCORE (%) 7TH-GRADE LEVEL 8TH-GRADE LEVEL 9TH-GRADE LEVEL 10TH-GRADE LEVEL OR ABOVE	24.9 25.2 16.3 33.6
HIGHEST GRADE ATTAINED (%) 9TH GRADE OR BELOW 10TH GRADE 11TH GRADE 12TH GRADE NOT KNOWN	15.2 30.1 36.3 8.9 9.5
SAMPLE SIZE	369

SOURCE: MDRC calculations from GED Bridge study enrollment data.

training programs. Findings on student achievement are based on GED Bridge program participation data, New York State GED Status Reports, GED test administration data, and LaGuardia Community College's Management Information System (MIS) data.

THE PARTICIPANTS

The GED Bridge program was targeted to low-income individuals in New York City who did not have a high school diploma or a GED. In order to qualify for the program, participants had to score at a seventh-grade reading level or above on the TABE (Test for Adult Basic Education). This requirement was lower than that of many GED preparation programs because the program was explicitly aiming to make the GED and college more accessible to those with lower literacy levels.⁸ Participants also had to be 18 years of age or older and have an income below 200 percent of the federal poverty level.

The recruitment and enrollment process for the GED Bridge program was fairly intensive, lasting about three to five weeks before the beginning of each semester. Potential participants filled out an application, took the TABE to determine their eligibility and reading levels, and completed a writing sample and an interview to signal their commitment and interest. Once they were determined eligible and appropriate for the program, they were asked to provide written consent that they wanted to participate in the study. Then they received their assignment to either the GED Bridge or the GED Prep group.

Table 2 shows selected characteristics of the full research sample, which consists of 369 participants who were enrolled in the study over four semesters — fall 2010, spring 2011, fall 2011, and spring 2012. A few characteristics in particular stand out: Over 80 percent of students were either African-American or Hispanic, about half of the students scored at a seventh- or eighth-grade reading level on the TABE, over half reported receiving some form of public assistance, and close to 40 percent reported that they were employed when they began the program.

KEY OUTCOMES

This analysis covers only the first three cohorts — fall 2010, spring 2011, and fall 2011 — representing a sample of 276 participants. Data on the spring 2012 cohort are not yet available. However, since the program was implemented consistently for every cohort, and each cohort had roughly the same number of participants, it is likely that the results will be similar when the fourth cohort (spring 2012) is added to the analysis.

- Compared with students who went through the traditional GED Prep course, Bridge students were much more likely to complete the course. The first milestone for students in the GED Bridge program is course completion. As illustrated in Figure 1, students in the GED Bridge group completed the course at a significantly higher rate than the Prep students (68 percent compared with 47 percent).
- Bridge students were far more likely to pass the GED exam.⁹ GED Bridge students were more than twice as likely to pass the GED exam as GED Prep students: overall, 53 percent of Bridge students passed the exam within 12 months after entering the study, compared with 22 percent of Prep students, as shown in Figure 1. As expected, a large majority of these students passed the GED exam in the first six months after completing the course - 44 percent in GED Bridge compared with 20 percent in GED Prep (a difference statistically significant at the 1 percent level, not shown). The difference between groups continued to grow over time, as

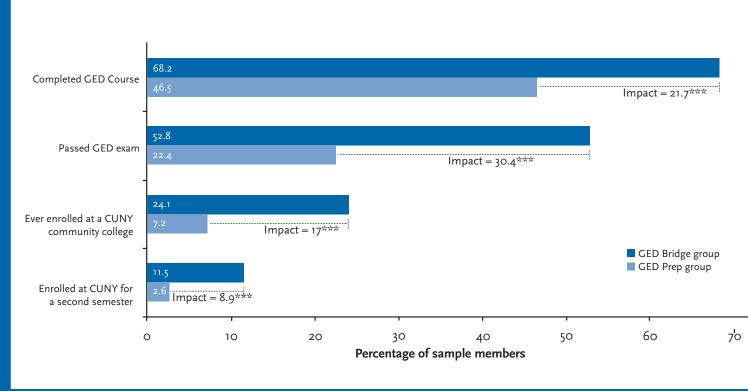


FIGURE 1. 12-Month Impacts on Course Completion, GED Pass Rates, and College Enrollment

SOURCES: MDRC calculations using GED Bridge participation data, New York State GED Status Reports, CUNY MIS data, and GED test administration data. NOTES: Figure includes sample members from the fall 2010, spring 2011, and fall 2011 cohorts. All outcomes presented in Figure 1 are calculated based on all 276 sample members in the first three cohorts. Statistical significance levels are indicated as follows: *** = 1 percent; ** = 5 percent; * = 10 percent. Estimates were regression-adjusted using ordinary least squares, controlling for cohort, age, gender, race, starting TABE score, public assistance receipt, and employment. Rounding may cause slight discrepancies in calculating sums and differences. A two-tailed t-test was applied to differences between outcomes for the program and control groups. Bridge students were also more likely than Prep students to pass the GED exam between 7 and 12 months after study entry — 9 percent of Bridge students passed during those months, compared with 3 percent of Prep students (a difference statistically significant at the 5 percent level, not shown).

 Bridge students enrolled in college at much higher rates than students in the traditional GED Prep course. As shown in Figure 1, GED Bridge students were more than three times as likely to enroll in a CUNY community college as GED Prep students: Only 7 percent of GED Prep students enrolled compared with 24 percent of GED Bridge students, a statistically significant difference of 17 percentage points.¹⁰ These

GED Bridge students were more than three times as likely to enroll in a CUNY community college as Prep students. data reveal another interesting finding, not shown in the figure: While most of the GED Bridge students who enrolled at CUNY did so in the first semester after the GED course, over one-third of those who enrolled did so in the second semester after the GED course — and they were more likely to enroll at either time than those in the GED

Prep group. In addition, Bridge students persisted in college at a higher rate than Prep students: 12 percent of all Bridge students enrolled in the first semester after completing the Bridge course and then also continued into the second semester, compared with only 3 percent of Prep students. This is the only college retention measure available at this time. Longer-term follow-up data will be presented in a later brief, which will include the fourth and final study cohort.

FINDINGS FROM THE FIELD

In the context of this study, it is impossible to isolate any single component or combination of components as the critical pieces in the Bridge program's apparent success. But numerous visits to the program by MDRC researchers between fall 2010 and spring 2012 — including interviews with staff members, observations of classroom and counseling activities, and focus group discussions with students in both Bridge and Prep — yielded a few key findings about how the staff implemented the Bridge model and how students in both Bridge and Prep felt about their experiences. It is likely that at least some of the impact results can be traced to these findings.

• Original materials and lesson plans in the Bridge course employed critical thinking skills and emphasized core concepts from the fields of business and health **care.** Throughout the evaluation, Bridge staff developed and refined an original curriculum consisting of a number of primary source materials designed to build reading, writing, and math skills through a focus on health care or business. Each semester, Bridge students were assigned a book focused on central concepts from the health and business fields. Health care students, for example, read and discussed issues of medical ethics and decision making in First, Do No Harm, a book detailing the ethical dilemmas that doctors, nurses, and families faced when working with patients in a Texas hospital. Beyond these readings, daily class activities revolved around basic concepts that professionals in the field would have to consider, and students were asked to engage critically with texts

and assignments from the perspective of professionals in their field. An example of one such classroom activity appears below. This consistent attention to the concepts of the field represented a marked contrast from the disconnected exercises that were used in the traditional GED course. As one participant put it, "The thing that's most motivating is that everything we're doing is [about] health.... It's getting us into something that we want to do. Being in a regular GED course isn't the same."

 Bridge students benefited from full-time, consistent, qualified program staff and additional in-class hours. The Bridge program staff consisted of full-time, master's-level educators trained in adult literacy instruction and contextualized curriculum development. Staff members' full-time status allowed them time to develop curricula and lesson plans collaboratively, offer support to students outside of class hours, and implement the program's elements in a robust fashion. By contrast, Prep instructors, as adjunct faculty, were paid an hourly wage solely for the time they spent in the classroom. And although some of them indicated that they had a background in

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CONTEXTUALIZING READING COMPREHENSION

As the class begins, a group of about 20 students, mostly African-American and Latina women, sit at circular tables in groups of 3 to 4. The instructor begins the class by reminding the students that a second essay draft is due in the next class meeting. He also reminds them to read their textbook chapter on disease.

The instructor hands out the first assignment for the day: a *New York Times* article describing a South African hospital that is housing quarantined tuberculosis patients. The article discusses the experiences of patients, doctors, and family members, as well as policy decisions surrounding the quarantine. The students read the article and spend 10 minutes quietly writing about the issues and dilemmas that come up for patients and health care professionals when dealing with the disease.

After the students have written their short reflection essays, the instructor distributes large sheets of paper for the groups to write out the issues they identified and then share them with the class. Half the groups are instructed to identify issues from the patient's perspective; half are instructed to identify issues from the health care professional's perspective. The groups discuss the issues from the article as the instructor passes among the students to listen.

The instructor asks the groups to share the issues that they identified, beginning with issues that arise for the health care professional. The class listens attentively as a woman lists and explains issues. The instructor asks her probing questions about how each issue arises. The class then moves on to groups with the patient's point of view. adult education, they received little or no training directly related to their position instructing Prep students. Probably for reasons related to this difference, the Bridge instruction staff remained consistent over the course of the evaluation (allowing the staff to apply lessons from one semester to the next), while there was considerable turnover among Prep instructors over the semesters. One Prep instructor, describing the frustration of not having more paid time to design original

"When you miss a class, [the instructor] will take the time to bring you up to speed. In other classes, you miss a lesson, that's your business." lesson plans and work with students, acknowledged that "all I've really done is played nanny with the GED book." Several Prep instructors described a similar feeling that their paid time did not allow them to prepare for class thoroughly or meet with students outside of class hours.

Bridge students also benefited from additional in-class hours. Students in both groups repeatedly pointed to these differences in class time and personal attention as critical elements in their experience. Many students in GED Prep complained of how little in-class time they had to prepare for the exam, with one student summing up a general feeling: "I wish we had more days. We have so little time to stuff ourselves with so much information." Bridge students often observed the opposite, describing the time commitment as "about right" and celebrating the staff's willingness to "take the time" when working with students. As one put it, "they take the time to help us in making that transition"; another said, "when you miss a class, [the instructor]

will take the time to bring you up to speed. In other classes, you miss a lesson, that's your business."

- Postsecondary transition advisement was well incorporated into the student experience. Bridge students had regular meetings with a transitions adviser and were more aware of requirements to enter college and training programs than Prep students. In keeping with one of the program's central goals, transition advisement was integrated with the classroom experience. An adviser routinely visited the classroom to discuss the transitions process, assist students with their research into college and career programs, and remind students of upcoming events or deadlines. The adviser also met individually with students to discuss educational and career goals. Further, speakers from the business and health care faculty at LaGuardia spoke to Bridge classes about what they could expect in college. This emphasis appeared to give the Bridge students an advantage over Prep students in thinking about their next steps: during focus groups, the Bridge students consistently demonstrated greater knowledge about deadlines and college application requirements than Prep students.
- Overall, Bridge students appeared more engaged in the classroom and more encouraged by the program experience.
 Probably thanks to the effective integration of the program components already described, Bridge students consistently demonstrated more engagement with their classmates and with course material, and were generally more excited about their

program experience than Prep students. While Bridge students talked freely among themselves and referred to classmates as "my family" on multiple occasions, Prep students tended to interact less frequently during classes and focus group discussions. Likewise, although the majority of students in both groups were hopeful about their futures, Bridge students spoke more frequently and directly about the program's influence on their thoughts and plans for the future. One business student, reflecting on the transitional emphasis, said, "If you'd have asked me five years ago, I'd have said 'no, I'm not going to college,' but ... when I got here, I got the vibe: [college] is the place I need to be."

IMPLICATIONS FOR POLICY AND PRACTICE

With national interest growing in programs that prepare individuals for careers in highgrowth industries, and with changes coming to the GED exam, these promising findings could hardly come at a better time. They contribute to a growing body of evidence that sector or career-based initiatives may offer an effective route for low-income, lowskilled adult learners to complete secondary education and gain access to higher education and training. While LaGuardia chose health care and business as its career. tracks — because those industries have high growth potential in New York City and because there is particular interest in those fields among students — field research suggests that the success of the program did not hinge on the career paths per se. Rather, the Bridge program's success depended on the integration of key program components, particularly the use of course materials that

were relevant to student aspirations, strong instruction, and proactive advisement to guide students on to the next step in their education.

It will be important to continue to follow GED Bridge students over the next few years to learn how well their college persistence holds up compared with GED Prep students. While the Bridge program succeeded in the vital task of increasing access to college for its students, many Bridge students still had to take remedial classes upon entering LaGuardia, and college persistence rates for remedial students are generally quite low." The study

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at LaGuardia faced the obvious limitations of a small sample size and the fact that only a single community college was operating the program, so moving forward it will be important to understand how well this or similar models can be implemented elsewhere. Nonetheless, the program's dramatic impacts on GED pass rates and on college enrollment and persistence suggest that the model holds considerable promise for strengthening the links between lowincome students who need to complete their secondary education and college or skills training programs. Ultimately, continued studies of this and similar models preferably at a scale sufficient for researchers to better determine for whom the program works best — would provide an even clearer picture of how to strengthen GED and adult education for low-income people.

N O T E S

1 GED Testing Service (2012a).

2 Stillwell and Sable (2013); Swanson (2009).

3 Tyler (2005).

4 The new GED exam, planned for release in 2014, will "measure a foundational core of knowledge and skills that are essential for career and college readiness." GED Testing Service (2012b); Fain (2012).

5 McLaughlin, Skaggs, and Patterson (2009).

6 Beder and Medina (2001).

7 Since 2010, the GED tuition program at LaGuardia has implemented new instructional practices; the Prep classes were kept in place for study participants through spring 2012.

8 For this and other reasons, the results presented here are not comparable to GED statistics that may appear in other reports on GED outcomes. GED outcomes are often calculated by dividing the number of those who passed the GED exam by the number who took it, or by the number who completed a GED course. Results here are shown for everyone who enrolled in the study.

9 The GED pass rates reported here are for the full study sample, including people who left their course after enrolling or who completed their course but never took the test.

10 MDRC's review of CUNY enrollment suggests that most if not all of the study sample members who enrolled in CUNY enrolled at LaGuardia Community College.

11 Adelman (1999, 2004); Bailey (2009); Bailey, Jeong, and Cho (2010).

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Enhancing GED Instruction to Prepare Students for College and Careers

By Vanessa Martin and Joseph Broadus

ationwide, close to 40 million adults lack a high school diploma or a General Educational Development (GED) credential. About a quarter of high school freshmen do not graduate in four years, and while many high school dropouts eventually do attend GED preparation classes, too few ever pass the GED exam or go on to college. Students with only a high school diploma already face long odds of success in a labor market that increasingly prizes specialized training and college education; for GED holders, the chances are even worse. MDRC partnered with LaGuardia Community College of the City University of New York (CUNY) to launch a small but rigorous study of its GED Bridge to Health and Business program, which aims to prepare students not only to pass the GED exam, but also to continue on to college and training programs. The results are highly encouraging: Bridge students were far more likely to complete the class, pass the GED exam, and enroll in college than students in a more traditional GED preparation class.