ADMINISTRATIVE SUMMARY Developing Research Database Tools and Evaluating the Impact of Multi-Service School Programs

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and Evaluating the Impact of Multi-Service School Programs

ADMINISTRATIVE SUMMARY

Introduction

The SCHOOL-BASED YOUTH SERVICES PROGRAM (SBYSP) is a multi-service school program in that it

- is intended to provide a "one-stop" location or center that is naturally accessible to students and school-age youth;
- is designed to help "at-risk" youth, including dropouts and potential dropouts, those not meeting the goals of an educational program planned for all students, and/or those who are not likely to become productive workers (upon leaving high school);
- coordinates existing support services for families and children in the community with the school, including general (primary and preventative) health, mental health, and employment and training services¹; and
- fosters cooperation and collaboration between schools and service agencies/organizations, and with larger "systems" (the local school board, the community served, chambers of commerce, private business, the state government, the federal government, etc.).

The Iowa SBYSP was patterned after the school-based program in the state of New Jersey, and has also incorporated ideas from family resource centers operating in Kentucky and Connecticut through conferences and in-service training. These multi-service school-based programs are similar in concept to school-based health clinics, but provide a broader range of services, within a family-centered approach. (See Morley (1995), for a summary of research on existing multi-service school programs. For a more detailed discussion of school-based prevention programs, see Durlak (1995).) The purposes of the SBYSP, as identified in the 1989 legislation, are to enable school-age youth to (1) complete their high school education, (2) obtain skills that lead to employment and additional education and training, and (3) obtain skills that lead to a healthy, drug-free life.

The SBYSP completed its first four years in 1994 and was expanded in that year to include eighteen sites—a 4½-fold increase in program sites. The original sites (Des Moines, Marshalltown, Dubuque (including Western Dubuque), and South Tama County) were continued at a reduced funding rate. This research focused on the first four years of the SCHOOL-BASED YOUTH SERVICES PROGRAM, especially the last two years—1992-93 and 1993-94.

¹ Other services may be provided, such as educational services (tutoring, mentoring, and special courses), basic needs (clothing, food, shelter, etc.), day care, and recreation, as well as family services through a holistic, case management or case coordination approach. All of these services are provided, in varying degrees and emphases, in the SBYSP in Iowa.

Collection, Management, and Analysis of the Data

The SCHOOL-BASED YOUTH SERVICES PROGRAM has been data-driven from its inception, with a fairly extensive assessment and evaluation component. This evaluation has been *formative* in nature, with an emphasis on gathering data to help program managers and staff to be more efficient and effective in providing high quality services to youth. In the 1993-94 year-end report, a *summative* evaluation was attempted, to determine the overall worth of the program at the end of this development period (Veale, 1995a). The aforementioned expansion of the program in 1994 was taken as a "vote of confidence" in the program and a measure of its overall merit. To a large extent, this was due to the information gathered for program evaluation to insure accountability.

Data gathering mechanisms included the following:

- the EASY ("Efficient Accounting of Services to Youth") database system, developed in 1991 by Cyndy Erickson and improved through cooperation and input from SBYSP staff in each site (Erickson, 1993);
- survey instruments to assess student/youth and parent *perceptions* of progress in various outcomes, including health, mental health, social health, career development, and education, as well as to gauge the degree of *customer satisfaction* with the SBYSP;
- follow-up interview forms to assess what graduates who were once SBYSP participants are doing in terms of employment, volunteer activity, post-secondary education or training, and other indicators of productivity;
- year-end evaluation forms to assess "program outcomes" relating to *process*, e.g., family/parent involvement and coordination of schools and agencies, and those relating to *results*, e.g., ability of agencies to deliver services;
- focus groups and case studies, to assess program impact on selected youth and families—the "human dimension";
- team reviews to assist local projects to review all aspects of program implementation and provide suggestions for improving collaboration between all entities (local, regional, state, and national).

These mechanisms provided data for testing a variety of hypotheses concerning relationships between program factors (type and frequency of contact with the SBYSP) and student outcomes, including the following: attendance and GPA improvement; retention (staying in school); student and parent perception of the student's improvement/attainment in general health, mental health, social health, career development, and education; customer satisfaction; and graduates' responses to questions regarding post-secondary education and employment. In addition, the hypothesis of no differences in customer satisfaction over gender and ethnic/race groups was tested, the focus groups and case studies were used to provide educational/behavioral/social "pictures" of program impact on students, and data on the impact of the SBYSP over the four-year development phase were analyzed. Suggestions for improving longitudinal evaluation were advanced, along with specific database components (Erickson, 1995b). The data from these questionnaires and interviews and the information from the EASY database were all analyzed using statistical software available to the author and research/evaluation consultant, including Number Cruncher Statistical System (NCSS, Dr. Jerry L. Hintze) for both DOS and Windows (Microsoft Corporation). In addition, the data management and statistics package ABstat for Windows (formerly called WinSTAR, Anderson-Bell Corporation) and the spreadsheet program Quattro Pro for Windows (Novell, Inc.) were used for data entry, transfer, and processing. The utility program Apple File Exchange (Apple Computer, Inc.) was used to convert the data on the selected fields from EASY on the Macintosh to Intel-compatible input media (high density floppy disk), for analysis using the aforementioned statistics packages on a Pentiumbased PC. This report was developed using WordPerfect for Windows and WordPerfect Presentations for Windows (Novell, Inc.). The EASY database system was developed using FileMaker Pro (Claris Corporation).

Research Objectives

Eight objectives were posed in the proposal for the FINE Foundation research grant (Morley & Veale, 1994), as follows:

- Assess the relationships between student outcomes and (a) program factors and (b) student characteristics.
- Revise and refine the data collection instruments to measure student outcomes, customer satisfaction, graduate follow-up, and program outcomes.
- Develop a user's manual on administering and scoring the instruments for assessing perceptions of progress, customer satisfaction, and graduate productivity.
- Revise and refine the *EASY* database system, including an accompanying database to track longitudinal outcomes for each participant.
- Revise and refine the manual on how to use the EASY database system(s).
- Test the utility of the program adoption manual on the new program sites and revise it, based on data from these program sites.
- Conduct qualitative or "holistic" analyses using focus groups and case studies to develop educational/social/behavioral "pictures" of program impact on students/youth and families.
- Conduct a longitudinal analysis of the impact of the SBYSP on (a) student and program outcomes (quantitative group-level data) and (b) selected students and families (qualitative individual-level data).

The 1993-94 outcome data for Objective 1 was broken into two components: (a) population data from the *EASY* database system (GPA, absence from school, dropping out) and (b) survey data (self-assessments and parent assessments of student outcomes in the general health, mental health, social health, career development, and education of students) and the graduate follow-up data (employment and post-secondary education of graduates). The relationships of each of these outcomes to program factors (magnitude of involvement in the SBYSP service areas) and demographic characteristics (gender, race, etc.) were statistically analyzed. The level of "risk" of

the student/youth was also included in some of these analyses, using a 30-item assessment yielding low, medium, or high risk.

Objective 2 involved the review of the items used in the instruments for assessing student outcomes and customer satisfaction in 1993-94 by the SBYSP site coordinators, the state-level interagency committee members, the Project Director, and the research/evaluation consultant; the computation of item-remainder correlations to assess the internal consistency of the instruments and identify poorly performing items; the computation of coefficient alpha for each sub-instrument to assess their internal consistency reliability, and an analysis of the content and construct validity of the instrument. In addition, a *HyperCard* specialist at Drake University, Mr. Gordon Graber, was subcontracted to develop a program for developing and administering surveys on the Macintosh.

The user's manual in Objective 3 included procedures for selecting the sample, administering the surveys to students, dropouts, and parents, and scoring these instruments (Veale, 1995c). A manual for using the *HyperCard* program was also written (Graber, 1995). In addition, on-screen "help" is available for users of this program. These manuals are included with the package of materials submitted to the FINE Foundation in connection with this research grant.

Objective 4 included the development of (1) a new database system (called "2EASY"), whereby data entry is streamlined, front-line staff can directly enter service data, follow-up of participants can be monitored, monthly service reports can be generated, and unique program services may be readily tracked and (2) a longitudinal database (called "LONGEASY"), developed to track outcomes and services over time for each participant.

Two areas of concern with the system as it existed in 1993 were

- lack of consistency across SBYSP sites in what constitutes a service "contact"
- the lack of an assessment of the degree to which each participant is "at risk"

A partial solution to the first concern was to analyze the data *within* each SBYSP site. This was accomplished for the database outcome data (GPA, attendance, and retention), while "site" was incorporated as an independent variable in the analyses of the survey outcome data. An approach to the second concern is to use the specific criteria for identification of at-risk students developed in brainstorming sessions with local site leaders and utilizing results of Phi Delta Kappa research on this issue (Frymier, 1992). A 30-item instrument was produced and a scoring mechanism adopted (Veale, 1994 and 1995a). This was incorporated in the SBYSP data monitoring, beginning in 1993-94.

Objective 5 was accomplished by the development of new manuals for the revised systems 2EASY and LONGEASY, by Cyndy Erickson (1995a and b). In the 1992-93 project, the manual for the first EASY database system was written (Erickson, 1993). It is an easy-to-use guide to the database management system of the SBYSP, which is based on the Macintosh database software FileMaker Pro, by Claris Corporation.² This manual has been updated to incorporate enhancements and

² Although the focus of this manual is on Macintosh systems, it may be applied equally to PC systems running MS-Windows, since *FileMaker Pro* (Claris Corporation) is also available for use on the latter systems. These versions have virtually the same "look and feel." File compatibility is nearly perfect and there is little difficulty in going from one version to the other (aside from personal preference of computer systems).

corrections to the original system. The manuals for the new systems are included with the package of materials submitted to the FINE Foundation in connection with this research grant.

Objective 6 involved updating the program adoption manual (Morley, 1993 and 1995) and testing its utility in the development of 14 new SCHOOL-BASED YOUTH SERVICES PROGRAM sites. Testing was conducted informally, based on feedback from site leaders to specific questions drafted by interagency state teams and used during team reviews of local sites.

Objective 7 involved case studies and focus groups. The case studies consisted of "success stories" of students and families who participated in the SBYSP in 1993-94 in the four demonstration sites—Des Moines, Dubuque (including Western Dubuque), Marshalltown, and South Tama County. In this report, case studies of students and families who have participated in the SBYSP for at least two years were emphasized. (See Objective 8 below.) The focus groups were held in Des Moines and Marshalltown, with a separate focus group for each grade level, including middle and high school and, in the former site, elementary and parent groups.

Objective 8—the "longitudinal component"—was perhaps the most ambitious objective targeted in this research project. A true longitudinal analysis was not possible with the data available to the Principal Investigator at this time. However, it was possible to investigate some of the group-level statistics on student and program outcomes over the first four years of the SBY SP. In other cases, too many gaps in the data precluded such analyses. Individual-level data over time was available only through case studies. The latter data were also discussed as part of Objective 7.

A summary of the results of Objectives 1-8 follow. This includes conclusions and indications based on the data analysis, recommendations for future policy, and questions regarding research on and evaluation of these multi-service, school-based programs in Iowa. For more details see the comprehensive narrative (Veale, 1995b).

Conclusions, Indications, Recommendations, and Ouestions

Term	Meaning
Conclusions	Definitive statements concerning the results of a data analysis; traditionally quantitative, but may include qualitative results (based on case studies, focus groups, etc.) that are clear-cut; confirmatory analysis (e.g., use of randomization, 5% level, one hypothesis-one test, more emphasis on statistical hypothesis testing)
Indications	Less definitive (more vague) than conclusions; may be qualitative, where results are somewhat "fuzzy"; exploratory analysis (e.g., stepwise regression, 10% level, multiple hypotheses-multiple tests, more emphasis on graphical displays)
Questions	Informal hypotheses, often stimulated by indications or conclusions (research); query concerning the process or results of the system being investigated (evaluation)

The following is a "key" for interpreting the material in this section.

Term	Meaning
Recommendations	Suggested courses of action to improve program; implied from conclusions and action suggested; different categories of recommendations (formative vs. summative, audience-specific, content vs. process, operations vs. management, etc.) ^a

^a See Patton (1982), pp. 278-282.

Patton (1982) pointed out that "not all recommendations are created equal" and that it is important for evaluators to make distinctions between formative and summative ones (derived from formative and summative evaluations, respectively), content and process ones, those directed at operations and those directed at management, etc. The same goes for the other types of summary or concluding statements—indications and conclusions. The various types of concluding statements regarding this research were organized by objective. Other distinctions were made when deemed necessary. The questions are presented at the end of this section.

Objective 1: The Research Findings on GPA, Attendance, Dropping Out of School,

and Perceived Student Progress (Student and Parent Surveys)

Indications (formative)

- Case management was shown to be positively associated with GPA (P<.05) in one site and, marginally, with parent's assessments of their child's general health (P<.10).³ It was negatively associated with other outcomes in some situations, but evidence of the long-term positive effect of this type of service was provided in the focus groups and case studies in the Des Moines and Marshalltown programs.
- The total number of contacts in the SBYSP was associated with staying in (not dropping out of) school in one site (P<.05). Moreover, *among high risk students*, the dropout rate among SBYSP participants with a high level of involvement (more than 25 contacts) was significantly lower than the dropout rate among SBYSP participants with a low level of involvement (less than or equal to 25 contacts) (P<.05).
- In Des Moines, serving the most ethnically and socioeconomically diverse population among the five sites, the dropout rates for Hispanic students was 17.9%, by far the highest of all ethnic/race groups. Only Caucasian students re-enrolled later in the same year; all dropouts in non-Caucasian groups stayed out for the rest of the year.
- High school students who had a high degree of involvement in the SBYSP were generally somewhat more satisfied with the program than those who had a low degree of involvement. With middle school students, the relationship was reversed—the more involvement with the program, the lower the level of satisfaction. There was no statistically significant relationship between student involvement in the program and the level of satisfaction their parents had with the SBYSP. There were some gender

³ When an association or difference is cited, it may be assumed to have been significant at the .05 level (P-value less than .05), unless otherwise stated. Results that are said to be *marginally* significant are those that are significant at the .10 level (but not at the .05 level). Thus, in the latter (marginal significance), the P-value is somewhere between .05 and .10.

and ethnicity/race differences in customer satisfaction, e.g., non-Caucasians indicated less discussion with the SBYSP staff about drugs or alcohol than did Caucasians.

- The number of contacts in the service area "other" (mostly, leisure and recreational activities, basic needs, and day care) was marginally significant and positively associated with attendance in one site, in which leisure and recreation was emphasized (P<.10). Moreover, the number of student contacts in "other" services was positively related to the parent's positive outcome score for their child in general health (P<.05) and career development (P<.05).
- Of the 17 who responded to the graduate follow-up telephone interview, 13 or 76.5% indicated they were full- or part-time employed; including two "homemakers," one of whom was also attending a technical or trade school, the percentage became 88.2%. Unfortunately, only 37% of those selected for these interviews responded, so these results could be biased (not representative of the population).

Recommendations (formative/operations/management)

- All five sites lost ground in terms of attendance in 1993-94 (P<.05). Since GPA and attendance are strongly associated, it is important to put more emphasis on getting students to attend school regularly.
- Case management and leisure/recreational activities are important change agents and should continue to be utilized in multi-service, school-based programs. Consideration should be given to staff development in these areas. Health and mental health services may require a *longer time span* (than one year) to produce successes that lead to gains in GPA, attendance, or even positive outcome scores on an affective instrument. Evidence from qualitative studies (see Objective 7) indicate that these services are having a positive impact on students. They should continue to be utilized in multi-service, school-based programs.
- Expand outreach to students in non-Caucasian ethnic/race groups who (1) drop out and attempt to re-enroll them in school and (2) need information or counseling about drugs and/or alcohol.

Objective 2: The Instruments for Data Collection

Indication (operations)

• The student outcomes survey instruments for high school students, middle school students, and parents had sufficient internal consistency reliability considering (1) the domain assessed (affective) and (2) the number of items used in each outcome score. Good agreement was observed between students (as a group) and their parents (as a group).

Conclusions (operations)

• Content validity of the student outcomes surveys, the graduate follow-up interview form, the risk assessment instrument, and the year-end reporting forms was assured based on the *process* used to develop, revise, and refine the instruments (involving stakeholders and customers).

• The risk assessment instrument had construct validity, as well as content validity, in that predicted or anticipated results were often confirmed in the data analyses for assessing other objectives in this study.

Recommendations (formative/operations)

- Two changes in the student outcomes survey instruments were recommended: (1) new, easier-to-use format for student outcomes survey items and (2) use of the program *SurveyMaker* for developing and administering surveys on the Macintosh (similar program available for DOS/Windows-based PCs). These changes were based on feedback from stakeholders (site coordinators) and customers (students). The first of these was implemented in 1994-95; the second will be implemented in 1995-96.
- The changes in the "ability of agencies to deliver services" instrument and two other program (process) outcomes instruments were recommended and implemented in 1994-95.
- The surveys should be sent out earlier in the year, in order to achieve maximum response rate. The survey development/administration computer programs should give local coordinators more flexibility in this regard.
- Volunteers for administering the graduate follow-up telephone interviews should be trained in order to (1) standardize the interview process and (2) increase the response rate.

Objective 3: The Manual for Administering and Scoring Surveys

Recommendations (formative/operations)

- Based upon feedback from the local site leaders, revise and refine the manual as needed.
- Incorporate the manual for administering and scoring surveys into the program adoption manual for developing multi-service, school-based programs.

Objective 4: Revision of the *EASY* Database System

and Development of a Longitudinal Database System

Recommendations (formative/operations/process)

- Demonstrate the revised database system (2EASY) in a workshop in the fall of 1995 and allow local sites to practice with this system to assess the feasibility of switching to it in 1996-97. Sites should be given the option of staying with EASY or switching to 2EASY.
- Data managers in all 18 sites need to be trained on the longitudinal database system (*LONGEASY*), in order to begin tracking multi-year data on students. A workshop should be scheduled in the fall or winter of 1995-96 to provide such training.

• Provide technical assistance to local sites in implementing EASY, 2EASY, and LONGEASY databases so that they maximize use of available data.

Objective 5: The Manuals for 2EASY and LONGEASY

Recommendations (formative/operations)

- Based upon feedback from the local site leaders, revise and refine the manuals as needed.
- Incorporate the manuals for 2EASY and LONGEASY into the program adoption manual for developing multi-service, school-based programs.

Objective 6: Testing the Utility of the Adoption Guide on the New Program Sites

Conclusions and Recommendations (formative/management/process)

- It appears that the adoption manual should be updated to address some locally identified issues of implementation.
- It also appears that more time needs to be devoted to the locally identified issues in specifically set-aside staff development time at state level workshops. If time is not taken at the workshops to convey information utilizing techniques beyond distribution of printed material, the information that may be helpful will not be utilized.
- Finally, it appears that more effort must be made by the state level team for follow-up with local sites to encourage use of printed resources that are disseminated for use.

Objective 7: Case Studies and Focus Groups

Conclusions (summative)

- The case studies illustrated the kind of progress that is difficult, if not impossible to quantify. Students and families gained in their levels of independence, setting and achieving goals, obtaining work experience and job skills, and staying in school, on track for graduation.
- The focus groups yielded information about the impact of the SBYSP in terms of promoting personal accountability, dealing with eating disorders and substance abuse, coping with death in the family, improving school performance through tutoring, gaining credits through work experience, learning to see the need for completing high school, and providing options to students and support when healthy decisions were made. Many of these outcomes are difficult, if not impossible to quantify.

[Note: See the Appendix for actual case studies and more details on the focus groups conducted in Des Moines and Marshalltown.]

Recommendations (operations/management)

• Develop a set of materials, including andiotape or videotape, and provide training sessions to assist local SBYSP leaders to conduct their own focus groups. Moderators

should be members of the local community who are not on the SBYSP staff and who have people skills and experience in groups, so that students participating in the focus group will feel free to express their true feelings about the SBYSP and its impact on their lives.

Objective 8: "Longitudinal" Analysis of the Impact of the SBYSP

Indications (summative)

- Retention rate (100% minus the dropout rate) in schools served by the SBYSP was more or less stable over the first four years of the program. Steady improvement was made by Des Moines until 1993-94, whereas Dubuque, Marshalltown, and Western Dubuque showed minor fluctuation around their 1989-90 baselines. South Tama County improved their retention rate the first year, then decreased slightly in each year thereafter. The difficulty of using year-to-year comparisons in programs that are changing in terms of populations served and service delivery systems was noted. The possible influence of the factor "history" (e.g., the flood of 1993) in such time series analyses was also noted.
- Two "longitudinal case studies" were analyzed and provided evidence of the long-term impact of the SBYSP on a high risk family and a high risk student. In the former, progress was made in terms of enrollment of children in school and increasing the level of independence of the mother; in the latter, progress was made in keeping the student in school and on track for graduation, developing job seeking skills, and obtaining an unsubsidized job. Areas where improvement is still needed were also noted.
- Longitudinal tracking of results from instruments for assessing program outcomes led to improvement in those instruments. The instruments were revised and refined with input from local agency representatives and the local SBYSP site leader.

Recommendations (operations)

• The longitudinal database system LONGEASY should be implemented in all SBYSP sites in 1995-96 in order to track services and outcomes for students over time (up to 20 years). This will help us to determine the true impact of the SBYSP, especially for the most at-risk students who may need several years of program involvement to produce measurable, positive outcomes.

Questions for Future Research and Evaluation

- Can the SCHOOL-BASED YOUTH SERVICES PROGRAM act as a change agent for the school to help bring about the kind of school environment changes required for students to put the classroom in their "quality worlds" (Glasser, 1990)? Can we begin to measure *quality* of service delivery and thus, assess the impact of high quality vs. lower quality service delivery on student outcomes? What other change agents are operating on schools to encourage these transformations, e.g., total quality management efforts? Can the SBYSP work with these other change agents to help facilitate these transformations?
- We may need to calculate a "program attraction factor"—an indicator of services that are most effective at bringing students of diverse backgrounds into the SBYSP. It

might be hypothesized that recreation and leisure activities will be one type of service that will be "highly loaded" on this factor. Methods for assessing this program attraction factor might include (1) survey questions on what attracted students to the program and (2) factor analysis using data from these survey questions and data on service contacts in the major service categories.

- We may need to begin to look at the "flip side" of the issue of risk, namely that of *resiliency*. What characterizes families and students who have been seriously at-risk and who are now succeeding? What services or other controllable factors were considered crucial to these families and students in supporting and strengthening this resiliency?
- With 18 SBYSP sites presently in operation in Iowa, can we continue to conduct the in-depth evaluation at the state level that we have been able to do with the original four sites (plus Western Dubuque) from 1991 to the present? If not, can we get each site to conduct their own formative evaluations, providing them with technical assistance in accessing summary data from the *EASY* (or *2EASY*) database, entering data into the longitudinal database, analyzing the survey data, and writing the report? Can we utilize the Iowa Communications Network (fiber optics system) in providing some of this assistance?
- Is the continued focus on the *student* as the unit of analysis/evaluation an appropriate one? As the SBYSP becomes more family-centered (as, for example, in the Des Moines program), should we consider the possibility of using the *family* as the unit of analysis/evaluation, at least in some cases? Can we use any of the existing data collection software and instruments for assessing families, or do we need to develop entirely new approaches to assessment and evaluation?
- As the SCHOOL-BASED YOUTH SERVICES PROGRAM grows in size with differences in demographics, program emphases, student and family needs, and so on—can we continue to use a single student outcomes instrument across all sites? Can we continue to use a single database system (or variations on a database system, such as *EASY* and *2EASY*)? Can we adapt evaluation tools to accommodate elementary, pre-school, and younger populations as more emphasis is placed on prevention and early intervention?
- Is collocation of services in the school a better delivery approach than referral of services? How far along are we toward true collaboration between schools and local agencies and organizations? (The revised instrument for assessing "coordination of schools and agencies" should improve the assessment of this process.)
- How are we doing business differently now? Are we becoming a more "customerdriven" service delivery system, one that is "user-friendly," "holistic," and "transparent" (Osborne & Gaebler, 1992)? Are we becoming more "results-oriented," with increasing emphasis on outcomes rather than inputs, and using performance measurement as a tool for pinpointing problems to be remedied (not for judging individuals) (*ibid.*)? Are we truly operating as a "system," in which the components (individuals, departments, etc.) cooperate and work together as a team to achieve the "aim" or goal of the system, and which includes preparation for the future (e.g., lifelong learning for employees) and the taking of joy in work (e.g., engaging one's mind, as well as one's labor) (Deming, 1993)?

Comparisons with the 1992-93 Study on SBYSP

In 1993, an analysis of the first two years of the SCHOOL-BASED YOUTH SERVICES PROGRAM was conducted through a grant from the FINE Foundation (Veale, 1993b). The 1995 research was to be, in part, an attempt to replicate the previous study. The dynamic nature of this program made such a replication difficult to accomplish---instrumentation, service delivery systems, and populations served all changed to some extent from 1993 to 1995. Nevertheless, the following results provide some evidence of successful cross-validation:

- The instruments had more or less comparable internal consistency, inter-group reliability, and content validity.
- The relationships between (a) GPA in previous year and (b) GPA in current year, for all SBYSP sites, were similar in both studies. The year-to-year relationships for attendance were also similar in both studies.
- The case studies and focus groups provided qualitative data supporting the positive impact of the SBYSP on the lives of students and families in both studies.

The results regarding demographic and program input factors (logged counts of contacts in the various service areas) and measurable outcomes (GPA, attendance, and positive outcome scores based on the student/parent surveys) were <u>not</u> consistent over the two studies. This may be due to one or more of the following:

- low practical significance of program effects (low contribution to R² and relatively small "beta weights");
- dynamic nature of the program;
- difficulty in establishing real impact in one-year "snapshots" of student activity in the program.

Many of the most "at-risk" students and families need a longer time span in which to show the kind of improvement that can be measured quantitatively. The utilization of the longitudinal database system (LONGEASY) developed as a part of this research project should help to provide a clearer indication of the true impact of the SBYSP.

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Appendix

1. The Human Dimension: Case Studies

The following case studies were submitted by each SBYSP site to the state project director as part of the year-end evaluation.

UCCESS Program (Des Moines SBYSP): The following case study summary was provided by Cyndy Erickson and the staff of the Des Moines SBYSP.

Most challenges that families face are not met in the limited amount of time that we generally select to review progress—for example an annual evaluation. In fact, things may actually appear to be worse at a given point if we don't "continue the story." We get a much better sense of the struggles and triumphs that are encountered when we review progress over an extended period of time.

For example, a young family who has received case management services for four years. If we looked at the family's situation at the end of the first year, it would appear that nothing had improved. The mother was suicidal, the children frequently missed school, the family was homeless, and all five children had been removed from the home. Many no fewer than 13, were subsequently enlisted to support this family in their desire to stay together and to strengthen the mother's ability to provide for herself and her children's needs.

By the end of the second year, things had improved but were not stable. The children were returned to the mother, temporary housing located, and the mother was participating in parenting classes and day treatment. Her attendance in her day treatment program was sporadic and another baby was on the way. You could still tell from the school-age children's faces and by their attendance when mom was having a bad day.

Year three finds the family in public housing where there is access to a variety of services on-site. Mom has learned to take the bus and is beginning to speak up for herself when she feels her needs are not being met. As goals are met, there is less need for multiple service providers. The children are successful in school and attendance has improved.

At the present time, all but the youngest child are enrolled in educational programs and mom is becoming increasingly independent. With the budgeting skills she has developed, she feels that she can afford to leave public housing and move into a house. If this is the next goal that she will realize, she may continue to want support in a new environment that will have different challenges for her. With all of the changes this family has experienced over the past four years, their case manager and the school have been constants in their lives. That support will continue as long as they feel it is valuable and helpful to them.





ubuque SBYSP: The following case study summaries were provided by Pat Kearns and the staff of the Dubuque SBYSP. (Note: The names used in these stories have been deleted to protect the privacy of the individuals involved.)

Story #1 - In order to offer support for students returning from treatment or who are in placement, Hempstead offers a small group on a weekly basis called RAD for short, and Returning Adolescent Dialogue, whenever anyone says "What's RAD?"

This is a collaborative effort between the school and Medical Associates. The group meets weekly throughout the year. Recently, as a group ended I watched the students walk into the crowd of students heading for their next class. They looked so normal, blending into the rivers of teenagers flowing through the halls. But they have been in treatment for substance abuse or for depression, or they live in shelter or state placement. They look like your everyday teen, but they do not have the support that we imagine and hope teens have in order to grow up into mature and capable adults.

I wondered how they really make it. I thought about one girl, who was abusing substances and eventually began selling them to others. Her parents have met with her counselor and teachers many times this year in an effort to save this child. The Child Study Team recommended the additional support of individual substance abuse counseling and group participation in RAD. The teachers have given her extra help and written weekly progress reports. People are noticing if she skips and are dealing with it right away and hoping to give her a hundred positive interventions for every negative one so that she will see the value of her life and her education. She looks like any other teen. You would never know her history by looking at her, And with the constant and vigilant intervention of the SBYS team, she will graduate. She has been a drug dealer since she became a 9th grader. As I write this and think about success and ... making a difference, I think about this student who made it through 9th grade and plans on being back next year. If we keep this up, by the time she is a senior she will have those hundreds of positive interventions.

Story #2 - "I think this whole year has been a success story (for me). At the beginning of the year I was pregnant with my daughter. I stayed in school, got the credit I needed and now I am caught up in credit after messing around my freshman and sophomore year(s). I will be graduating on time next year for my senior year. If I work hard enough, I might even graduate a little early next year."

Story #3 - The greatest success story, I believe, involved two students in my journaling class. One young man was fairly immature, loud and occasionally obnoxious. The other was a senior, a young woman who had experienced a lot in her short life. She had a tendency to speak first and think later .. if at all. These two began at each other's throats. I would continually confront their behaviors, in an attempt to help them see the impact their callous statements had on the others. Through my continued efforts and their positive attempts, I saw their attitudes mature. The year ended with these two as friends, respectful of each other's needs.





estern Dubuque SBYSP: The following case study summary was provided by Julie Norby and the staff of the Western Dubuque SBYSP. (Note: The names used in these stories have been deleted to protect the privacy of the individuals involved.)

This student came to our school in the middle of last year as a freshman. She had a multitude of problems, some (of which) she had created for herself and (others that) she had no control over. At the time of her arrival, her family had moved halfway across the country and her parents were in the process of a divorce. She had been raped, faked her own kidnapping and had a long history of alcohol and drug problems. Naturally, her school effort was not a top priority. This was a student who needed a lot of services and support from school personnel.

Her first semester at our school was a good one where we all got to know each other and the appropriate testing was completed. This year a more comprehensive effort was expended. The student was placed in the EXCEL program to bolster her academic progress. She used several community agencies that come to our building, including the Gannon Mental Health Center, SASC (substance abuse), and JTPA. She was also a frequent visitor to her guidance counselor. As a result, her grades improved dramatically and her decision-making became more mature.

The coordination of many services and the school, along with improved communication with the student's mother, has been a major factor in her success. There have definitely been crisis times during the year, but because we were all working together, we could provide a safety net ... Her mother appreciated the support from the school through the increased communication. The student ... is better prepared to face difficult situations. After school was out this year, this student rehurned for a visit to her previous school in another state. Within one day she was faced with drugs, alcohol and other inappropriate behavior she had been a part of just a year and a half ago. This time, however, she made mature decisions and avoided getting caught up in the old behaviors. She was amazed at (how) much she changed and how comfortable she was in her new life.

"Within one day she was faced with drugs, alcohol and other inappropriate behavior she had been a part of just a year and a half ago. This time, however, she made mature decisions and avoided getting caught up in the old behaviors."

> Western Dubuque SBYSP project manager, concerning a student in that program





aring Connection (Marshalltown SBYSP): The following case study summary was provided by Todd Redalen and the staff of the Marshalltown SBYSP.

This young man has utilized multiple services provided through the Caring Connection. He just completed his junior year at Marshalltown High School and had been identified as high risk. His original referral to the program dates back to October of 1991. His mother had concerns about his behavior at home, as well as in the community. He had been caught stealing and has been belligerent at home. She contacted his school guidance counselor who then referred him to the program.

He was first seen by the mental health counselor. Subsequent referrals included the Family Development Specialist who responded to the mother's request for family assistance. The Family Development Specialist along with a counselor from Marshall County Youth Runaway and Family Services made home visits. They worked with the mother to help her establish (rules) and limits for her children. The mother was invited to attend nurturing classes sponsored by Marshall County Youth Runaway and Family Services but she did not attend.

Another referral was made to the substance abuse counselor working in the Caring Connection. The mother had called about her son drinking heavily and spending nights away from home. An initial assessment for substance abuse and children of alcoholics was done. The student completed six sessions.

This young man was also referred and enrolled in a vocational skills class taught by the JTPA youth specialist. A referral was also made for assistance in helping (him) find a job. Through the vocational skills class he developed job seeking skills, learned how to complete job applications, and interview property. By acquiring employability skills through the vocational skills class, the student was able to go out and secure an unsubsidized job in a field of interest.

This young man had also been seen by the health services component 12 times during the 1993-94 school year. He had been involved in three altercations with other students, receiving minor abrasions and bruises.

The student was not able to rectify problems at home with his mother and eventually moved in with a family he knew. Although this student did not improve his attendance or grades over the past year, he continued to attend school and progress towards graduation. He also has been open to assistance and appears to be dealing with his problems. Recently he enlisted in the Iowa Army Reserve and plans to receive training as a mechanic. This would provide him the transferable skills necessary for a civilian career.



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artnership Center (South Tama County SBYSP): The following case study summary was provided by Donna Hempy and the staff of the South Tama County SBYSP.

Story #1 - A ninth grade girl was referred to the Partnership Center through the High School Athletic Director on a charge of consumption of an alcoholic beverage under legal age on school grounds. Because the girl was involved with athletics, she fell under the school's code of conduct requiring her to obtain a substance abuse assessment to retain her eligibility to participate in sports. An initial intake meeting was scheduled by the Family-School Coordinator where pertinent information was gathered. Direct family contact was made during this meeting as well. A referral was made to the Covenant Medical Center's Substance Abuse Unit to do a substance abuse screening. A certified addiction specialist came down from Waterloo to conduct the interview and administer the testing. The family was very grateful having the services brought closer to home. Otherwise, they would have needed to travel 30 miles to do the evaluation.

The screening came back positive for several areas of concern. Among these included substance abuse by a family member of the teen and suicidal ideation. The family was then contacted immediately by the Family-School Coordinator to relay the results of the exam. The family was very concerned and a referral was made immediately to the Mental Health Clinic for an emergency assessment regarding the suicide issue. The Mental Health Clinic met with the girl who is ... currently seeing a counselor regularly to address the suicide issue as well as other areas of concern. The family is also involved with the counselor to establish better lines of communication, goals, etc. The girl is also taking an "Early Intervention" class to address her family's involvement with alcohol. The class meets regularly ... she receives the support she needs to understand her role in an alcoholic family. Collateral contact was also made with the girl's school counselor, so he could be made aware of the girl's situation. She is now fulfilling her requirements to the school's code of conduct where she actively continues to participate in sports and clubs.

Through the Partnership Center, the family was able to obtain services that were (1) accessible and (2) (available) at the time of crisis. The family has developed honest relationships with the Partnership Center staff and area service providers.

Story #2 - A 14-year-old boy has been extensively involved with the many facets of the Partnership Center. His initial contact came through the Activities Center where he began to develop trusting relationships with the staff ... in this non-threatening environment. The boy then had initial contact with the Juvenile Court Officer because of an assault and criminal mischief charge. He was at this time put on informal probation but was charged a few months later with theft. He was then adjudicated delinquent though the Juvenile Court system. The Juvenile Court Officer was concerned about proper supervision within the home. Alternative Services was then contacted through the Department of Human Services to monitor the boy at home. Families Incorporated were also contacted for in-home counseling/family preservation. The Family-School Coordinator maintained contact with the boy through the Juvenile Court Officer and Alternative Services. His school attendance and grades were very poor.

A friend of the family was then charged with allegedly sexually abusing the boy. The Family-School Coordinator contacted the Mental Health Clinic to arrange an appointment to set up family counseling. The Department of Human Services remained in close contact with (those involved in) the coordinating efforts due to the unstable family history, the abuse charge, and the possible need for long term counseling.

Currently, the boy has raised his grades in school considerably and is continuing the family counseling set up by the Partnership Center. Alternative Services continues to serve the family with supervision and the Juvenile Court Officer visits with the boy regularly. Because most of the services are under one roof, the Partnership Center enables the family to meet with each provider without confusion and frustration. With the aid of the Family-School Coordinator, all of these services were successfully tied together to avoid overlap. This family received the necessary services due to the fact that the Coordinator quickly referred the family to the necessary provider and served as a link between the family, the school, and the agencies.

Currently, the boy has raised his grades in school considerably and is continuing the family counseling ... This family received the necessary services due to the fact that the coordinator quickly referred the family to the necessary provider and served as a link between the family, the school, and the agencies.

> South Tama County SBYSP (Partnership Center) project manager, regarding the progress made by one of their students and his family



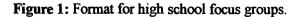
2. The Human Dimension: Focus Groups

Focus groups were conducted in Des Moines and Marshalltown in the spring of 1995 with elementary students and their parents, middle school students, and high school students in the Des Moines SBYSP (SUCCESS Program), and with middle school and high school students in the Marshalltown SBYSP (The Caring Connection). A variant of the traditional focus group was used with the elementary school students in Des Moines. They were individually interviewed (on the same day that their parents participated in their focus group) and then got together for group activities and a pizza. The middle school and high school students participated in a traditional focus group with two moderators, Dr. Lee Halverson (Student Development Consultant at Heartland AEA) and Cheryl Huisman (Superintendent of the United Community School District). Dr. Halverson and Ms. Huisman also conducted the interviews of the elementary school students, as well as the parent focus group. The Des Moines sessions were held at North High School, Harding Middle School.

The focus group participants were selected by the project managers and program coordinators in the Des Moines and Marshalltown SCHOOL-BASED YOUTH SERVICES PROGRAMS. These groups each consisted of 5-10 students and/or parents. The format of the high school and middle school focus groups consisted of the directions and questions presented in Figure 1, developed by Dr. Halverson, Ms. Huisman, and Dr. Veale. Technical assistance was provided in a previous application (the 1992-93 FINE Foundation study) by Professor Ed Saunders of the University of Iowa School of Social Work (Des Moines campus). The "funnel approach" to questioning was used, beginning with broad questions followed by gradually more narrow and specific ones (Stewart and Shamdasani, 1990). This helps to put the participants at ease and is more likely to yield useful information—especially when some of the questions are sensitive or "personal."

The sessions were audiotaped, so that all verbal information generated in the focus groups was made available to the author. Permission was obtained from the students at the beginning of each session to tape it—"so we don't miss anything." There were no objections to the taping.

format o	f the high school focus group consists of the following directions and questions:
1.	Have each of the participants introduce her/himself.
2.	When did you first enter the SUCCESS Program?
3.	Thinking back to when you first became involved in the SUCCESS Program, what were your f
	about getting help? What kind of help did you get?
4.	Has the SUCCESS Program staff helped you to do better in school? How has it helped you?
5.	Are you healthier now? Are you happier now?
б.	Where would you have gone for help if there was no SUCCESS Program?
7.	How have you been treated in this program?
8.	If a friend of yours needed help, would you recommend the SUCCESS Program?
	or the middle school focus groups was similar but with simpler wording. The above format is for the



Based on notes taken by the moderators and the audiotape, the following is a list of issues with which students indicated the SBYSP was helping them:

- deaths in the family
- family member in hospital
- problem within the family or extended family (stepfather)
- homework and test-taking skills
- self-esteem
- personal trust
- girlfriend/boyfriend problems
- eating disorders (primarily, bulimia)
- drug abuse
- accountability; responsibility for their life and actions
- self-control (anger management)
- talking about feelings
- meeting (new) friends
- stress (e.g., pressure to get good grades)
- taking them, and their problems, seriously
- health issues
- job skills; academic credit for work on a job

Two testimonies of high school students illustrate the approach of one SBYSP (the SUCCESS Program) to behavioral problems:

Testimony #1: A young woman would make excuses to stay home from school. Her SBYSP case manager would call her at home to check up on her and make sure that she had a good reason for staying home. One day the student made an excuse to stay home so she wouldn't have to take a final exam. The case manager found out and *came over to her house, got the key to her room from her mother, got her out of bed, and took her to school.* She took the final in her "PJs" (!), passed it, and did well in the course. This illustrates the "no games" attitude of the SBYSP staff and the insistence on accountability.

Testimony #2: A young man just wanted to "party through life" when he turned 16. He planned to drop out of school and pursue his "goal." His SBYSP case manager took him aside and asked "*How are you going to do this?*" Since the young man was not planning a life of crime, this question made him think about issues such as earning a living and the need for education. He remains in school and has a much better attitude toward it. This illustrates an approach called

"Socratic therapy" that emphasizes questions (not preaching) and which offers choices, followed by support if the choices the student made were healthy ones.

Dr. Lee Halverson, one of the moderators, provided the following summary for each of the focus groups in the two SBYSP sites:

Des Moines SBYSP		
Grade level/Group	Summary	
Elementary school participants	Sought out student in relation went to families, provided m with sibling or parents who	ediation, worked
Middle school participants	Provided socially-oriented (g and classes where the studen gether on projects	
High school participants	Emphasized value of relation would seek them out (go to hospital, home, etc.); "one-o approach; <i>lives were saved</i> (fied to eating disorders, suic drug abuse - problems that t Program has helped them to	visit student in n-one" students testi- ide attempts, he SUCCESS
Parent participants	Taught how to access and us (e.g., food stamps and legal others and volunteered for th staff as mediator when atten education or general education SBYSP provided support an between" to better communic	help); helped e SBYSP; used ding special on conferences; d a "go-

Des Moines SBYSP

Marshalltown SBYSP

Grade level/Group	Summation
Middle school participants	Positive feedback on academic tutoring and building relationships with students; staff would call them if they missed class (seen as positive now, though not initially)
High school participants	Strong points indicated were tutoring (through the Individual Assistance Center), jobs training (nurses aide), academic credit for job; program staff would conduct follow- up interviews, which encouraged them to do better on their jobs

The validity of the above insights is strengthened with the case study information. Together, the case studies and the focus groups provided a "picture" of a caring program staff, collaborating and cooperating service provider agencies, and participants who are making progress in school and in

their lives. One thing that came through loud and clear, in all of the focus groups, is that the students feel that they have been treated well in this program. A Des Moines SBYSP participant in a focus group conducted for the 1992-93 FINE Foundation study put it eloquently (and with obvious sincerity): "The SUCCESS Program is one of the places you can go where each individual in there treats you with respect and dignity."

