

# Comparing Outcomes of an Alternative School Program Offered With and Without Intensive Family Involvement

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## **Abstract**

Two cohorts of students referred to an Alternative School (AS) program for chronically disruptive youth received either the standard program (Year 1, Control Group, N = 95) or the standard program with additional intensive family involvement (Year 2, Experimental Group, N = 120). Outcome measures included self-esteem, locus of control, depression, grades, attendance, and eventual drop-out from school. Although demographically similar to the control group at pretests, the Experimental Group evidenced statistically significant improvements in locus of control, grade point averages, attendance, and reduced drop-out rate, relative to the control group. The results suggest the importance of family involvement in improving the school performance of chronically disruptive youth.

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## **Introduction**

Due to some students' antisocial behaviors, traditional schools are often

forced to suspend or expel disruptive students. The overburdening of juvenile courts indicates that suspension or expulsion of chronically disruptive youth accelerates the hostile takeover of the streets (CrossRoads Grant, 1994). Furthermore, the federally mandated policy of zero weapons tolerance imposes the dilemma of how to educate chronically disruptive students while maintaining safe schools and fostering academic achievement (School Safety and Juvenile Justice Reform Act, 1994).

In 1988, it was estimated that 25 million of the nation's 64 million children were at-risk educationally when one of five risk factors was considered: race, poverty, family structure, language background, and mother's education (Mills, Stork, & Krug, 1992). The 1990s have further demonstrated that chronically disruptive students are also at risk for early pregnancy, delinquency, and early death (Glaser & Horne, 1993).

The antisocial behaviors of chronically disruptive youth pose a unique problem for school administrators who must balance the safety and academic achievement of all students. Administrators acknowledge that short-term out-of-school suspensions have often been a convenient and simplistic response to a complex set of problems which are the shared responsibility of school personnel, the student, the family, and the community (Allen-Mearns, Washington, & Welsh, 1996; Lerner, 1995; Mizell, 1977, 1978).

The increasing number of school suspensions of disruptive students combined with the growing number of single parent households places a burden on the community and juvenile court system to deal with unsupervised youth. As a result, chronically disruptive students have been relegated to three branches of the social welfare system in order to be educated and treated: mental health, juvenile court, and school (Kennedy, Mitchell, Kleiman, & Murray, 1976; Freeman, Franklin, Fong, Shaffer, & Timberlake, 1998). The first two are usually short term interventions, while schools, ill-equipped, overcrowded, and understaffed, are forced to deal with these students for up to twenty years. A student may be in and out of the system for years, exhausting one resource and then another before finally returning to the school system. The process is overwhelming for the agencies as well as for the students and their families. If unattended, these school difficulties may develop into illegal activities, leaving the community to face the problem of how to deal with violent, criminal behaviors committed by juveniles. Studies show that if untreated, conduct problems are likely to continue (Chalker, 1994; Franklin & Streeter, 1992, 1998; Lange & Chalker, 1996; Lee, 1998; Morris, Escol, & Wexler, 1956; 1994; Robins, 1966; Zax, Cowen, Rappaport, Beach, & Laird, 1968).

Families have long been considered a critical factor in promoting student academic achievement (e.g., Bronfenbrenner, 1979; Comer, 1980; Gordon, 1968, 1969, 1972, 1973; Henderson, 1989; Henderson & Garcia, 1973; Henderson, Marbuger, & Ooms, 1986; Hoover-Dempsey, 1987; Hoover-Dempsey, Basler, & Brissie, 1992; Raywid, 1994). However, this premise, that family

involvement is an essential contributor to a student's academic achievement, has been questioned. An equally large number of studies, many of impressive quality, have failed to support the hypothesis that family-based interventions can appreciably improve a student's success in school (e.g., Fine, 1993; Lareau, 1989; White, Taylor, & Moss 1992). While some behavioral programs targeting chronically disruptive youth have shown initial successes, the follow-up results have been less encouraging (e.g., Blake, 1995; Duke & Lorch, 1989; Duke & Perry, 1978; Kazdin, 1985; 1987, 1993, 1995; MacMillan & Kavale, 1986; Patterson, 1986; Wilson & Hernstein, 1985). Most psychosocial interventions demonstrating short-term successes have been extra-school-based programs aimed at helping parents manage and discipline their problem children and at altering systemic functioning of the family (e.g., Kazdin, 1987; McMahon, Forehand, & Greist, 1981).

Recently one school system with which the authors are affiliated administratively decided to implement an intensive family-based component to its existing alternative school program for chronically disruptive students. Given the ambiguous contributions of family involvement in schooling, we conducted a comparative evaluation of the effectiveness of this alternative school program offered one year without, and in the following year, with, added family-based interventions. It was hypothesized that adding family involvement would generate greater improvements in student psychosocial functioning, academic performance, attendance, and reduce drop-outs from high school.

## Method

### Alternative School Site

The Alternative School Program (Alternative School, or AS) is a public alternative educational program for chronically disruptive students. The mission of the AS is two-fold: to promote safer schools, and to provide a place for students to receive intensive social services to prevent school dropout. A student is assigned to the AS as a result of violating the student code of conduct and after a due process hearing (Clarke County Board of Education, 1994). The length of assignment ranges from 45 to 180 school days, with length based on the severity of the violation of the code of conduct.

There are thirteen categories of referral, with the four most frequent reasons for referrals being fighting (21%), possession of alcohol or drugs (18%), possession of weapons (17%), and intimidating or threatening school personnel (11%) (Carpenter-Aeby, Salloum, & Aeby, 1998).

### Participants

The records of students (N = 215) who completed their assignments during year 1 and year 2 at the AS served as the data source. Students (N = 12) not assigned to the AS for at least 45 days were omitted, as we believe that less than 45 days created too short of an interval to legitimately evaluate the AS program.

Of this group, 95 students entered the standard AS during year 1 (designated the control group, or CG), and 115 students entered the AS during year 2 (designated the experimental group, or EG). The CG received the standard AS program, while the experimental group received the standard AS program *plus* intensive family work (described below).

### **Outcome Measures**

This study involved three measures of student psychosocial functioning (self-esteem, depression, and locus of control), two measures of academic performance (grades and attendance), and one measure of behavior (drop-out). These are described more fully as follows:

#### **The Rosenberg Self-Esteem Scale (RSE)**

The RSE (Rosenberg, 1979) is a 10-item scale designed to measure the self-esteem of high school students. One of the RSE's greatest strengths is the amount of research that has been conducted with a wide range of groups, demonstrating its concurrent, known-groups, predictive, and construct validity (Fischer & Corcoran, 1994).

#### **The Depression Self-Rating Scale (DSRS)**

The DSRS (Birleson, 1980, 1981) is an 18-item instrument specifically designed to measure depression in children between the ages of 7 and 13. The items on the scale are written in simple language and response choices are not complicated. The scale includes items dealing with mood, physiological and somatic complaints, and the cognitive aspects of depression. The DSRS has good concurrent validity, known-groups validity, and presents very few false positive errors (classifying nondepressed children as depressed) (Fischer & Corcoran, 1994).

#### *The Nowicki-Strickland Locus of Control Scale (NSLCS)*

The NSLCS (Nowicki & Strickland, 1973) is a 40-item paper and pencil test consisting of simply worded yes or no questions designed to measure a child's belief of whether reinforcement is a result of chance or fate (external) or his/her own behavior (internal). This is deemed important because a number of studies have shown locus of control to be highly related to selected student behaviors and attitudes, including academic achievement. Although

the NSLCS has been applied to a number of populations, it has been used primarily with White children and youth in the 3rd to 12th grades of varying socioeconomic backgrounds (Strickland, 1972). Nowicki and Barnes (1973) further validated the NSLCS with African American youth. The NSLCS has fair concurrent validity, correlating significantly with other measures of locus of control and various academic and nonacademic behaviors (Fischer & Corcoran, 1994).

**Academic Achievement**

Academic achievement was assessed by comparing each student’s grade point average (GPA) for their most recently completed academic term earned in the home school with their GPA for the first entirely completed academic term following their return to their home school. For example, a student referred to the AS in the middle of the winter term and returned to the home school at the beginning of the spring term would have their fall and spring GPAs evaluated. GPAs were calculated on a 0 - 100% basic, with 100% being the highest possible grade.

**Attendance**

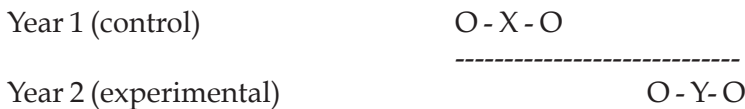
Attendance was assessed by comparing each student’s percentage of days attended for the academic terms entirely completed in the home school immediately prior to and after their participation in the AS program.

**Drop Out**

CG and EG student drop outs from high school education were assessed 180 school days after their placement in the AS.

**Research Design**

Students assigned to the AS during year 1 received the standard AS psychoeducational program. Those assigned during year 2 received the same AS programming augmented by intensive family group work. Thus this study employed a naturalistic quasi-experimental research design involving nonrandom assignment to two treatments which did not overlap in time. Schematically, the design can be represented as:



with the dashed line representing non-random assignment to the two

groups.

### **Standard Alternative School Program (Control Group)**

The alternative educational program is an off-campus mandatory disciplinary program that provides educational services to “chronically disruptive” students, committed, and/or non-attending students. The dual mission of the alternative school in this study is to promote safer schools and provide a place for students to receive services to prevent dropout. The student is assigned to the AS as a result of violating the student code of conduct and having been afforded a due process hearing.

Every student is required to be assigned through a due process hearing conducted by the disciplinary hearings officer of the school system. Referral sources to the disciplinary hearings officer included the superintendent, a self-referral, the teacher, a school counselor, a parent/relative, the court, the special education department, an external agency, or other (i.e. regional psychoeducational school). Reasons for referral have a direct bearing on the length of assignment established by the disciplinary hearings officer. The length of assignments ranged from 45 to 180 school days, with assignments based on the severity of the violation of the code of conduct. The four most frequent referrals occur because of weapons possession, alcohol and drug usage, fighting, and intimidation/threatening of school personnel (Clarke County Code of Student Conduct, 1994).

During year one, students assigned to the AS program began the assignment with an intake interview. Pretests were conducted and information from school files, juvenile court records, and external agencies were requested. Intervention development involved the student and the AS staff without a structured family involvement intervention. Prior to completing the AS assignment, the student went through an interview involving staff, and posttesting of the psychosocial variables was conducted.

### **Alternative Schooling Plus Intensive Family Involvement (Experimental Group)**

The experimental AS program provided intensive family involvement. The assignment to the AS involved a four-step transition process: the intake interview, intervention development, evaluation, and follow-up. Based on the intake interview, the family and staff identified educational strengths and barriers and discussed strategies for maximizing the students’ educational success. Evaluation included ongoing assessment and restructuring of the student’s program of study by family and staff. A description of the services offered at the AS (Carpenter-Aeby, Salloum, & Aeby, 1996) follows:

**Intake interview.** Family involvement began at the intake interview. Each student/family was required to have an intake interview to enter the CCAPP. Since no records from the host school were provided, the intake offered an opportunity to gather information about each student in order to develop a program of study focusing on academics, attendance, behavior, and psychosocial development in order to stay in school. The intake interview had a three-fold purpose: first, to explain how a student/family moves through the Model at the AS; second, to outline the expectations of the student/family while at the AS; third, to set student/family goals during the assignment to the AS.

**Intervention development.** The student's program of study was a mutually agreed upon plan to enhance academics, attendance, behavior, and the special needs of the student. The following includes a brief description of the seven types of intervention available to the families of students receiving the intensive family-services:

1. **Staffing.** The teachers, administrators, social worker, and family members discussed individual cases for one hour on Tuesday and two hours on Thursday each week. Family members participated in staffing a minimum of six times during the assignment to the AS or one hour every fifteen days. The purpose of staffing is to review or to create programs of study and evaluate interventions for individual students (Steele & Raider, 1991).
2. **Individual counseling.** This was conducted based on referrals from AS staff, students and/or family members. The referrals often resulted from a violation of AS rules by the student. The number of hours in individual counseling ranged from three hours per family to a maximum of twenty-eight hours per family. Behavioral/social learning family therapy assisted the student/family in recognizing and modifying behaviors that were interfering with the student's learning or the learning of others (Christophersen & Finney, 1993; Glaser & Horne, 1993).
3. **Phone conferences.** The most convenient form of communication with families and other agencies, such as the courts, Department of Family and Child Services, or mental health agencies, was by phone. Phone agency conferences averaged one call per family each week. The average number of phone conference hours per family ranged from a minimum of two to a maximum of eleven. This was one way of involving others in the student's program of study and keeping all concerned parties informed of the student's progress.
4. **Family therapy.** All relevant family members participated in a minimum of eight hours of family therapy during the student's assignment to AS. Behavioral/social learning family therapy supported interven-

tions established at school and in the community (Fine & Carlson, 1992). Student and family goals were set during family therapy sessions. The student's program of study was also developed during family therapy. Careful consideration was given to empowering families in a seemingly closed system (the school) while supporting change (Boyd-Franklin, 1989).

5. **Family meetings.** Family meetings were held when decisions regarding the student's program of study were necessary. During these meetings families also received family skills training on how to work with the student at home and the teachers at school to enhance the student's academic achievement (Setley, 1995). Families participated in a minimum of three family meetings during the student's assignment to the AS.
6. **Family-teacher conferences.** Conferences between families and teachers to revise the student's program of study were necessary to assure that the student had family support and to empower the families to act on behalf of the student. The number of conferences required ranged from a minimum of one to a maximum of five per family. Family members were required to attend the conference. By promoting family-teacher communication, both parties could "team up" to educate the student. Breaking down the physical and emotional barriers of school as a system was the primary goal of family-teacher conferences (Fine & Carlson, 1993).
7. **Miscellaneous meetings.** A variety of meetings were held to discuss the student's progress at the AS. Most of these meetings were held with the assistant principal from the host school and family members to discuss the return of the student. Each family participated in a minimum of two meetings. The majority of the families were involved in an average of four meetings during the student's assignment to AS.
8. **Transition Meeting.** The family actively participated in evaluating the students' interventions and program of study to make adjustment to further the educational plan. A major part of transitioning to another academic setting is determining the best fit for the student, a task accomplished through a collaborative effort by the family, AS, student, and the referring home school. The exit interview was the official release from the AS. It allowed the student and family to transition back to the home school. Families attended the presentation of the student's portfolio to re-enter the "host" school. The transition meeting was an opportunity for families, "host" school teachers, and the AS staff to exchange information about each student and to plan transition and follow-up services to continue the student's educational achievement.

## Results

## Integrity of the Independent Variable

Table 1 presents the numbers of hours of family-focused services received by the students assigned to the experimental and control groups. These data indicate that EG students received statistically significantly greater amounts of family-based services than students receiving the standard AS program [ $t(215) = 2.76; p < .05$ ].

## Demographic Factors

Selected demographic factors of the experimental and control group students are presented in Table 2. The students assigned to the CG and EG did not statistically significantly vary in terms of their ages, gender, race, assigned grade level, or duration of AS placements. The data indicate that the two cohorts of students were equivalent on these selected demographic measures.

**Table 1:** Amount of Family-Focused Services (in hours) Received by Students Assigned to the Control and Experimental Groups.

Component	Group		M	(SD)	t	p
	Control	Experimental				
Intake	1.00	.00	2	.00		
Staffing	5.86	4.97	6	.28		
Counseling	3.16	4.98	10	.34		
Telephone	2.12	2.74	4	.63		
Family Therapy	1.37	1.16	8	.23		
Family Meeting	1.33	.64	3	.44		
Teacher Conference	.53	.96	3	.47		
Other Meetings	.49	1.05	4	.96		
Evaluation	.56	.55	2	.00		
Transition Meeting	.74	.49	2	.00		
Total Mean Hours	17.6		44		2.63	<.05
Total	1.71	1.68	4.4	2.76		

**Psychosocial Outcomes**

Data on self-esteem, depression, and locus of control are presented in Table 3. According to two-sample *t*-tests, none of the three psychosocial variables statistically significantly differed between the two groups as assessed upon their immediate assignment to the AS. The students' self-esteem scores following their completion of their first complete academic term upon return to the home school also failed to significantly differ. This finding fails to support

**Table 2:** Selected Demographic Variables for Students Assigned to the Control Group and the Experimental Group Alternative School Program.

Variable	1994-1995 Control Group (N = 95)	1995-1996 Experimental Group (N = 120)	Significance*
	[M(SD)]		
Age	15.2 years (1.6)	15.3 (1.6)	n.s.
Gender			
Males	76(80%)	89(74%)	n.s.
Females	19(20%)	20(26%)	
Race			
White	13 (14%)	11 (9%)	n.s.
Black	81 (85%)	107 (89%)	
Hispanic	1 (1%)	2 (2%)	
Duration of AS Placement			
90 Days	86(91%)	104(87%)	n.s.
180 Days	9(9%)	16(13%)	

\*Comparison of Control vs. Experimental Group

the hypothesis that adding family involvement will augment improvements in students' self-esteem.

Similarly, the two groups of students failed to differ on the measure of depression either pre- or post-completion of the AS program. Retrospectively we believe this is because overall, the students' mean scores did not reflect problems with clinical depression for either group.

At pretreatment, the two groups did not statistically significantly differ on their locus of control scale scores, but the two groups did differ [*t*(163) = 2.3; *p*

< .05] after their return to the home school setting. This finding is consistent with the hypothesis that adding family involvement to an alternative school program produces augmented improvements in student's locus of control, towards greater self-direction.

### Grade Point Averages

Grades are reported on a percentage basis, with 100% the highest possible grade. Upon their initial assignment to the AS the CG and EG students' grades did not significantly differ. Upon their return to the home school, and completion of an entire academic term, the EG students' grades were statistically significantly higher than those of the CG students' [ $t(197) = 2.6; p < .05$ ]. This supports the hypothesis that added intensive family involvement

**Table 3:** Pre and post AS Placement Mean Scores for Self-Esteem, Depression, Locus of Control, Grade Point Average, and Attendance.

Variable	1994-1995 Control Group (N = 95)	1995-1996 Experimental Group (N = 120)	Significance*
	M(SD)	M(SD)	
Self-Esteem			
Prior to AS	7.8(2.1)	7.9(2.3)	n.s.
After AS	8.1(1.9)	7.9(2.1)	n.s.
Depression			
Prior to AS	9.9(4.3)	10.9(5.3)	n.s.
After AS	10.7(4.8)	9.6(4.7)	n.s.
Locus of Control			
Prior to AS	18.2(4.5)	17(4.9)	n.s.
After AS	17 (4.6)	15(4.5)	<.05
Grade Point Average			
Prior to AS	58.6(20.3)	60.1(18.9)	n.s.
After AS	57.7(26.1)	66.7(22.4)	<.05
Follow-up	56.1(30.4)	66.3(28.1)	<.05
Attendance (% days attended)			
Prior to AS	72.5(11.7)	74.2(10.0)	n.s.
After AS	66.5(23.5)	74.6(15.1)	<.05
Follow-up	64.8(28.3)	72.4(18.0)	<.05

\*Comparison of Control vs. Experimental Group

to a standard alternative school program promotes student academic improvements. However, the low mean scores indicate continuing problems in obtaining passing grades for both groups. A similar data pattern emerged at the end of the second grading period completed upon the students' return to the home school, again favoring the EG [ $t(183) = 2.5$ ;  $p < .05$ ]. (See Table 3)

### **Attendance**

When the students began the AS program their home school attendance (percentages of days attended) did not significantly vary between the CG and EG. However, following completion of the AS program and upon their return to the home school, attendance dropped for the students in the CG, but remained stable in the EG yielding a statistically significant difference in favor of the EG [ $t(198) = 2.9$ ;  $p < .05$ ]. This difference was maintained at the end of the second completed academic term following completion of the alternative school [ $t(187) = 2.2$ ;  $p < .05$ ]. (See Table 3)

### **Drop Outs**

At follow-up 180 days after their return to their home school, 1.7% of the experimental group students and 10.5% of the control group students had dropped out of school. This is a statistically significant difference [ $X^2 = 10.19$ ,  $df = 2$ ,  $p < .05$ ] favoring the provision of intensive family involvement in the Alternative School program.

## **Discussion**

These data are subject to a number of interpretations. On the less optimistic side, the overall levels of change *within* each group for self-esteem, depression, locus of control, grades, and attendance were low for both cohorts, so low as to perhaps make it difficult to justify the appreciable resources which went into providing the family psychoeducational services. A detailed cost-benefit analysis would be required to determine if the changes we obtained are 'worth' the expenses of time and resources to add family involvement.

The nonrandom nature of assigning students to the two programs makes causal inferences problematic, a common failing in field-based, naturalistic research studies conducted within the context of providing regular educational programming. Even perhaps our most impressive finding, the significantly reduced numbers of drop-outs among the experimental cohort, cannot be unambiguously ascribed to the added family involvement, given potential differences in the two groups not discernible in the demographic variables we assessed.

On the more positive side, the students receiving the AS program with the added family psychoeducational component displayed a more internal locus

of control orientation at the conclusion of their AS placement, better grade point averages and attendance in the two terms following AS placement, and lower percentages dropping out of school, all relative to the earlier cohort of AS students who did not experience the augmented family involvement. The reduced drop-out rates seem particularly notable.

The complexities of educating disruptive students are formidable. These are encouraging findings as one considers the realization that problems of disruptive youth, left untreated, result in a significant personal, emotional, and financial burden to the student, family, and society. Any improvement however slight suggest that AP with strong parental involvements was an effective strategy for intervening with students at risk for psychosocial barriers and academic failure, and/or drop out as a result of their behaviors.

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