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ABSTRACT

Project Return, a dual-component dropout recovery program under the administration of the Program for Pregnant and Parenting Adolescents began operating in 1990 and by 1993 had expanded to 19 sites. The Community Education Initiative operated in seven elementary schools and one satellite site to target elementary school parents of all ages who had not completed their education (the Project Return component). The Babygram Hospital Outreach component operated in 11 health care facilities to target teens who had dropped out of school or were at risk of dropping out because of pregnancy or parenting. Both components used a case management approach. The Office of Research, Evaluation, and Assessment collected data from a variety of sources to evaluate the programs. In 1992-93, there were 1,096 new intakes by the Return component and 2,392 new intakes through Babygram. Outcome data, available for almost all participants, indicated favorable outcomes for the majority of participants in both programs. In Project Return schools, 81 percent of clients received a diploma or certificate, were promoted or retained at work, or secured employment. Recommendations are made for program continuation and improvemen'. Fourteen tables present evaluation findings. (SLD

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ED 367 752

# OREA Report

## PROJECT RETURN:
## Community Education Initiative and Babygram Hospital Outreach
## 1992-93

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# EXECUTIVE SUMMARY

Project Return, a dual component dropout recovery program under the administration of the Program for Pregnant and Parenting Adolescents, began operating in 1990 at eight sites. In 1992-93, Project Return expanded its operation to a total of 19 sites. The Community Education Initiative component operated in seven elementary schools (called Return schools) and one satellite site and targeted elementary school parents of all ages who had not completed their education. The Babygram Hospital Outreach component operated in 11 health facilities in four boroughs and targeted teens who had dropped out of school or were at risk of dropping out of school because of pregnancy or parenting responsibilities. Both components utilized a case management approach, allocating a case manager to each site. Return case managers were formerly classroom teachers; Babygram case managers were family assistants.

Return case managers' primary goal was to recruit school parents and other community members who have not completed their education and provide them with guidance and referrals to educational and vocational training programs. Moreover, Return case managers offered workshops and classes in parenting skills. Babygram case managers typically worked under the supervision of hospital social workers, recruiting pregnant and parenting teens to assist them in returning to an educational setting.

OREA collected data from a variety of sources. Return and Babygram case managers provided OREA evaluators with client background information and end-of-year outcomes on a sample of their clients. In addition, case managers completed questionnaires. The program coordinator supplied quantitative summary data and program materials for review.

The 1992-93 demographic profile of parents in Return schools and clients at Babygram sites was similar to that of 1991-92. The majority of Return school parents were female, between 22 and 35 years old, and had completed tenth or eleventh grade. The largest proportion of Babygram clients was 16-17 years old and the majority were between the ages of 14 and 17 at the time of their baby's birth. The majority of teen clients were no longer attending school at the time of intake, and most of those had completed ninth grade or less.

Case managers at both the Return schools and Babygram Hospital sites recruited, referred, and placed clients in a variety of educational settings. Based on program statistics, during 1992-93 there were a total of 1,096 new intakes by Return case managers, and 2,392 new intakes by Babygram case managers. OREA determined that approximately three-fourths (73 percent) of the Return parents in the client sample enrolled in an

educational program. Of those, the majority enrolled in adult basic education (A.B.E.) programs or programs leading to a General Education Diploma (G.E.D.). Babygram case managers successfully placed over one-half (51 percent) of the teen clients who requested educational placements.

Case managers in both components were successful in following up clients at the end of the school year and provided OREA with outcome data on almost 100 percent of their client samples, a significant improvement over the previous program year. The outcome data revealed that the majority of participants in both components had favorable outcomes. In the Return schools, 81 percent of the clients received a diploma/ certificate, were awaiting G.E.D. results/test date, were promoted/remained on the same level or grade, or secured employment. In the Babygram hospitals, 59 percent of the clients had those same outcomes.

Based on the findings of this evaluation, OREA recommends the following:

- The Project Return staff should maintain the successful year-end follow-up procedure that was utilized this year. In addition, expansion of the pilot collection of long-term follow-up data would yield valuable information concerning the impact of the program, the referrals that have the highest probability of success, and the need for further intervention.

- Where feasible, Project Return should plan to include fathers as well as mothers, not only in parenting programs, but also as recipients of educational referrals. This inclusion would indirectly benefit the mother and child, and also perhaps encourage the father to support his girlfriend/spouse in her efforts to pursue her education.

- Project Return should continue to pursue daycare options for the clients. Many can turn to their own mothers or even grandmothers; however, such family members may not be available on a full-time basis. Moreover, on-site daycare options available in schools are often full and require waiting periods during which time parents might postpone returning to school.

- Project Return case managers, particularly in Babygram, should do an assessment of the viability of referrals to G.E.D. programs. The ratio of referral to placements is not as high as it might be in these programs, and the clients may have unrealistic expectations as to how easily they can achieve high school credentials through these programs.

- Project Return case managers should explore the possibility of further support services for the teens who return to regular high schools. The clients experience many difficulties in making the transition to school life and may need tutoring, counseling, and a host of other services.

- Project Return should continue its focus on assisting parents to return to educational settings but at the same time continue to implement various program components that directly benefit children of Return parents.

- Project Return case managers should continue to refine their greatly improved data collection methods. Evidence this year was that sample data supplied by case managers closely matched aggregated program office data, thereby supporting its validity. Any procedures allowing case managers to achieve the same level of accuracy with less investment of time would be worthwhile.

ACKNOWLEDGEMENTS

This report was prepared by the Office of Research, Evaluation, and Assessment's High School Evaluation Unit (OREA/H.S.E.U.) of the Board of Education of the City of New York, under the direction of Dr. Lori Mei. Jeanne Weiler coordinated the research, data collection, analysis and report writing. A special thanks to Dr. Linda Solomon who wrote sections of the report. Jan Rosenblum and Shu Ping Fu analyzed the data.

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# I. INTRODUCTION

## BACKGROUND

Project Return, a program based on recommendations set forth by the Chancellor's Working Group on Educational Opportunities for Pregnant and Parenting Adolescents in 1989*, assists pregnant/parenting teenagers and parents of elementary school children to return to and complete their education. In 1990, under the administration of the Program for Pregnant and Parenting Services of the Board of Education of the City of New York, Project Return was first implemented in eight sites in New York City. Beginning in September 1991, with funding provided by the federal School Dropout Demonstration Assistance program, Project Return expanded to an additional seven sites. In September 1992, at the start of its second year of federal funding, Project Return operated in a total of 19 sites.

According to the Allen Gutmacher Institute, 13 percent of all births nationally are to teens. Birthrates among teens have been steadily increasing; births to young women aged 15-17 were 23 percent higher in 1990 than in 1986 and the highest since 1973. Furthermore, by age 18, one in four (24 percent) teenagers will become pregnant at least once, and more than four

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*Chancellor's Working Group on Educational Opportunities for Pregnant and Parenting Adolescents, Helping Pregnant and Parenting Students Complete High School in New York City (New York: Board of Education, Office of Alternative High Schools and Special Programs, June 1989). The Working Group was comprised of public agency officials, service providers, advocates, educators, and students, and was convened by the Chancellor on October 11, 1988.

in ten (44 percent) will do so by age 20. In New York City, it is estimated that more than 28,000 girls between the ages of 10 and 17 become pregnant every year.* Because of pregnancy and parenting responsibilities, it is estimated that 25 percent of these girls will eventually drop out of school before completing their high school education. And, many mothers who remain in school are below grade level and at risk of dropping out of school. Without intervention, these students might experience curtailed education and limited future employment options. Since its inception in 1989, Project Return, a dropout recovery program, has targeted pregnant/parenting teenagers and elementary school parents who have not completed their education, and provided them with assistance and support to re-enter or enroll in educational settings.

PROGRAM COMPONENTS AND TARGET POPULATIONS

In 1992-93, based on the original design model, Project Return consisted of two elements: the Community Education Initiative, which operated in seven elementary schools and one auxiliary site** and targeted parents of all ages who had not completed their education, and the Babygram Hospital Outreach program, which operated in 11 health facilities in New York City and targeted students who had dropped out of school or were at risk of dropping out because of pregnancy or parenting

*New York Department of Health, 1991.

**All Project Return (Community Education Initiative and Babygram Hospital Outreach) sites are identified in Chapter II.

responsibilities. Both components of Project Return utilized a case management approach, allocating an educational case manager to each site who recruited and counseled participants, coordinated educational alternatives, made educational referrals and placements, and tracked program participants. Project Return had a full staff complement: a project supervisor, a project coordinator, seven certified teachers (Return educational case managers), and 12 family assistants (Babygram educational case managers).

The Program for Pregnant and Parenting Services requested that the Office of Research, Evaluation, and Assessment (OREA) examine program implementation and selected outcomes. The evaluation encompassed six Community Education Initiative sites and 10 Babygram Hospital Outreach sites.

OBJECTIVES OF THE STUDY

OREA designed this study to determine the program's progress toward meeting its goal of assisting parents of elementary school children and pregnant/parenting teens in completing their high school education. In addition, the study documents the range and scope of Project Return's activities and services and their outcomes during the second of three program years under the School Dropout Demonstration Assistance grant. The program and OREA established the following objectives:

Community Education Initiative Program

- At least 30 percent of all program participants will remain in an educational program for at least one month.

- Program participants will demonstrate increased knowledge related to child development and child management, as measured by a standardized parenting questionnaire.

- As a result of participating in program activities, participants will demonstrate an increase in self-esteem.

- At least 20 parent activities will take place at each site during the program year.

- The parent leadership and empowerment training component will be implemented, as evidenced by documentation of all training activities, agendas, workshops, attendance lists.

- The Family Science component will be implemented and evaluated at all sites.

Babygram Hospital Outreach Program

- The percentage of pregnant and parenting adolescents served by the project will be higher than the percentage served by the project during Year I.

- The percentage of students referred to educational sites will be higher than the percentage referred during Year I.

- The percentage of pregnant and parenting adolescents placed in educational settings will be greater than the percentage placed in Year I.

- Fifteen hospital staff members will have received training in parenting skills conducted by the Bank Street College of Education.

- Each hospital staff member trained by the Bank Street College of Education will implement at least one parenting activity or workshop for project participants.

EVALUATION METHODOLOGY

During the 1992-93 school year, OREA collected data from a variety of sources. In spring 1993, an OREA evaluator provided training to Return case managers on how to select a 20-percent sample of participants for evaluation purposes and record

quantitative data from the sample using individual case files.* The data yielded participant profile information such as age,** number of children and their ages, and educational background of a 20-percent sample of Project Return elementary school parents and Babygram teen clients (N=737). In addition, case managers provided information on the total number of new intakes (N=4,607), referrals to educational programs, placements, and year-end outcomes of the sample population. The program coordinator supplied additional quantitative data in the form of aggregated monthly statistics on program activities (e.g., number of intakes, educational and social service referrals, placements, etc.).

In addition, the case managers filled out questionnaires designed to elicit qualitative information on their responsibilities and activities, school and hospital contexts, obstacles to referring program participants to educational settings, and methods used in tracking participants. The evaluator also reviewed program materials and attended staff development workshops. Finally, OREA utilized background information from the Project Return proposal. Throughout this evaluation, OREA has adhered to strict standards to protect the privacy of pregnant and parenting students.

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*Return case managers also provided data from a 20-percent sample of the previous program year's participants.

**For the purposes of this evaluation, all ages have been computed as of September 1 [illegible].

SCOPE OF THIS REPORT

This report describes the range of Project Return activities planned and carried out at each of the Community Education Initiative and the Babygram Hospital Outreach program sites, as well as educational case management referral and placement processes, and selected outcomes. Chapter I presents a short description of the two Project Return components and describes the evaluation methodology used in the study. Chapter II provides an overview of the Commmunity Education Initiative and the Babygram Hospital Outreach program sites, staff, participants, and program activities, including demographic data on program participants, and qualitative data on the case management recruitment and referral processes. Chapter III discusses the Community Education Initiative and the Babygram Hospital Outreach end-of-the year outcomes, including referrals to educational programs, placements and results. Conclusions and recommendations for both components are set forth in Chapter IV.

## II. PROGRAM DESCRIPTIONS

### COMMUNITY EDUCATION INITIATIVE SITES

The Community Education Initiative took place at seven elementary schools referred to in this report as Return schools. All are designated as New York State-funded community schools that provide pre-kindergarten and full-day kindergarten classes and a wide range of social, health, educational, and recreational services on an extended school-day and school-year basis. Project Return programs at P.S. 25 in Brooklyn and P.S. 126 in Manhattan have been operational since 1989; the program at P.S. 332 in Brooklyn began in 1990; P.S. 50 in the Bronx and C.S. 200 in Manhattan were added as Return schools in 1991-92; P.S. 105 in Queens began operations during the 1992-93 school year; and P.S. 59 in the Bronx became operational in February 1993.*

### On-Site Services at Return Schools

As mentioned, Return schools offered parents, children and community members a variety of programs during the school day, after school and during the evenings, and on week-ends. For example, five of the Return schools offered on-site General Education Diploma (G.E.D.) programs for adults, three of the six Return schools offered English as a Second Language (E.S.L.) training, and three schools provided classes in literacy skills (only one school offered all three types of programs to parent and community members). Almost all Return schools ran pre-K

*P.S. 59 has not been included in this evaluation due to the newness of the site.

classes for children, and four schools provided some type of daycare during the school day or after school for pre-school children.

COMMUNITY EDUCATION INITIATIVE STAFF

All Return case managers, formerly classroom teachers, served as staff members in each of the Return schools, and all have served in this capacity since Project Return began at their site. As staff members, they regularly attended all faculty and staff meetings and served as members on various administrative and decision-making committees such as school advisory boards, pupil personnel committees, and guidance teams.

The Return case managers' primary goal was to recruit school parents and other community members who have not completed their education and provide them with guidance and referrals to educational and vocational training programs. Moreover, case managers provided direct educational services to their Return parents either by coordinating, teaching, or assisting in on-site E.S.L., G.E.D. or job preparation programs. In addition, all case managers offered workshops in parenting skills, and some offered sessions on self-esteem or family science topics.

Case managers shared similar responsibilities but were in unique positions given the facilities, demographics, and "ethos" of their schools. For example, one case manger reported that she assumed other responsibilities such as coordinating all parent activities within the school; one case manager faciliated and coordinated all parent trips; another case manager compiled an

extensive poetry anthology based on an 11-week poetry workshop for parents and children; and finally, one case manager was given the responsibility for coordinating a parent leadership project at all Return schools.

Each Return elementary school, as a New York State-funded community school, is staffed by a community school coordinator who oversees the coordination of special school programs and acts as a liaison between the school and community. All case managers indicated that while they and the community school coordinator each had clearly defined responsibilities, they collaborated and worked as partners in facilitating efforts to serve parents and community members.

## COMMUNITY EDUCATION INITIATIVE PROGRAM PARTICIPANTS

Case managers provided OREA with demographic information from their case records on a sample of parents served during 1991-92 and 1992-93. The sample included 304 parents in the six Return schools.

### Demographic Data from Case Managers' Records

Parent background information obtained from each site indicated that the majority of parent participants were female (N=233, 83 percent) and were between 22 and 35 years old. Ten percent (N=23) were from 16 to 21 years old, 20 percent were between 36 and 45 (N=46), and six percent (N=14) were 46 years old or older. Overall, the mean age of a Project Return participant was 30 years old.

Demographic data revealed that the case managers were successful in meeting the goal of identifying parents who had not completed high school. At the time of the case managers' intake, over one-half (56 percent, N=164) of the parents had completed tenth or eleventh grade, putting them relatively close to graduation. Twenty percent of the participants (N=60) had only completed ninth grade or less, and a full quarter (N=75) had completed the twelfth grade, indicating either that they were entering Project Return for needs other than education, or that they were seeking help in entering post-secondary institutions.

On average, a Return school parent was living in a household with four members, and had two children. The majority of parents (58 percent, N=155) had at least one child enrolled in the Return school, although a sizeable group of parents (42 percent, N=112) did not have children attending the school, thus indicating Return case managers' success in reaching non-school parents in need of services. Of the parents with children in the school, almost one-half (48 percent, N=75) had one child attending, 34 percent (N=52) had two children enrolled, and 18 percent (N=28) had three or more children enrolled.

Approximately one-third of the parents in the sample (31 percent) were employed either full-time or part-time.

The demographic profile of Return school parents has remained fairly consistent between the two program years, 1991-92 and 1992-93. An analysis of the two yearly samples indicated a slight increase in the proportion of men served by the program,

no change in the participants' ages, and a slightly more educated sample in 1992-93 (56 percent of the parents in 1992-93 had completed tenth or eleventh grades, while 50 percent of the parents in the previous year had). In addition, parents' household size and average number of children remained constant, as did the number of children enrolled in the Return school. The consistency of the two yearly samples indicates that case managers are drawing from very specific populations and can be certain of their clients' needs.

COMMUNITY EDUCATION INITIATIVE RECRUITMENT

Identification of parents in need of services was a crucial part of case managers' responsibilities. In general, case managers reached out to parents and other community members by advertising Project Return's services through posters, flyers, presentations, letters sent home with children, and contacts with neighborhood agencies. Case managers reported that some of their recruitment methods were more effective than others. For example, one case manager networked with involved parents to bring in their friends or relatives who might be in need of services. Two case managers reported that personal contact with parents before and after school was most effective, and still others suggested that advertising in local stores, churches, and other community schools was the most effective means of building interest among potential clients.

All case managers were required to submit monthly summaries of the number of new client intakes at their sites to the program

office. Based on these statistics, case managers reported a total of 1,096 new intakes for 1992-93 (724 in the fall and 372 in the spring). Table 1 shows that the average number of intakes a month ranged from ten to 29. Case managers also reported that in addition to serving new client intakes, they maintain on-going relationships with clients who entered the program in previous years.

PROGRAM ACTIVITIES

Number of Parent Workshops

As stipulated by the program office, Return case managers maintained a log of program activities and participants' attendance at those activities. Based on those logs, case managers reported that Return schools hosted a total of 318 different workshops attended by 3,138 participants--an average of ten participants per workshop. The Return objective stating that by June 30, at least 20 parent activities will take place at each site was fullfilled, with the exception of one site. The number of workshops held at each Return site ranged from 14 to 97, with only one site having fewer than 20 parent activities. However, it must be noted that the particular site which did not meet the objective collaborated strongly with other parent groups in the school, and thus many Return participants attended workshops sponsored by other groups.

Collaboration With Other Parent Groups

All Return schools had other parent groups, typically a parent association (P.A. or P.T.A.) and a parent volunteer

Table 1

Comparison of Mean Number of Monthly Intakes by Return Site, 1992-93

| Site | Average Monthly Intakes[a] | | Average for Year |
|---|---|---|---|
| | Fall 1992 | Spring 1993 | |
| P.S. 25K | 35 | 24 | 29 |
| P.S. 126M | 24 | 19 | 22 |
| P.S. 105Q | 34 | 3 | 19 |
| C.S. 50X | 26 | 12 | 19 |
| C.S. 200M | 14 | 8 | 11 |
| P.S. 322K | 13 | 8 | 10 |

[a]The mean number of monthly intakes is derived by averaging the number of new intakes for September through January (fall 1992) and February through June (spring 1993).

- The mean number of new parent intakes each month ranged from 10 at P.S. 332K to 29 at P.S. 25K.

program where parents provided tutorial assistance to children or general support to staff. In one Return school, the case manager reported that Project Return was the main component of all other parent groups. Another case manager reported that in sharing resources and integrating activities with other groups, Project Return paid particular attention to each group's schedule to avoid conflicts. One-half (N=3) of the case managers believed that greater collaboration could be promoted between their own and other parent programs to better serve parents. Three other case managers stated that no further need existed for greater collaboration or integration of efforts between Project Return and other parent groups, stating that a good working relationship had been established.

Parent Activities/Parenting Skills Workshops

The six Return schools hosted a number of workshops and activities throughout 1992-93 that drew school parents, children, grandparents, relatives, and other community members. In addition to on-site G.E.D., Adult Basic Education (A.B.E.), and E.S.L. classes that directly related to the program's goal of returning participants to an educational setting, Project Return offered parents a series of parenting skills workshops that focused on parent-child activities consistent with the program goal of improving participants' parenting skills. To assess the effectiveness of the parenting skills instruction, the Parent as a Teacher Test (PAAT) was administered to parents. The results are discussed in the chapter on program outcomes.

Parent Leadership Component

A ten-week parent leadership training component provided by the City University of New York (CUNY) Parent Leadership Project, which offered training and assistance to parents who wanted to become leaders in their schools and more involved in their children's education in order to maximize their children's success, was implemented in all Return schools. This component involved ten weekly two-hour workshops in skills needed to provide effective leadership. Case managers maintained weekly logs of workshop attendence and activities. Workshop topics included leadership styles, strategic planning, communication skills, and how to run meetings. The implementation of the Parent Leadership component successfully met the Return objective that by June 30, 1993, the parent leadership component will be implemented, as evidenced by documentation of training activities. In order to evaluate the effect of these workshops, CUNY project personnel administered a pre- and post- leadership training questionnaire to Project Return participants in the series of workshops. Results are discussed in the chapter on outcomes.

Science Enrichment Program

In addition to the above parent activities, the Family Science Enrichment Program, a ten-week after-school hands-on science program for parents and their children, was implemented

at P.S. 332K, P.S. 25K, C.S. 200M, and P.S. 105Q.* The program was administered and evaluated by an independent consultant with Girls, Inc.**

The primary goal of the Science Enrichment Program is to teach parents and children new ways of learning together in an environment that promotes exploration and inquiry. Specifically, the program seeks to demonstrate the relevance of science to a student's future, improve a child's self-image as a learner of science, and provide parents with instruction on how to assist their children at home, and reinforce and supplement the school curriculum. Recruitment targeted fourth grade boys and girls and their parents and strove to reach a total of ten families at each site. However, several sites found it difficult to recruit ten families and sometimes had to include children from younger grades because of the lack of fourth graders.

In most schools, sessions were conducted by elementary or junior high school science teachers who received training and on-site technical assistance provided by the consultant. (The exception was at C.S. 200, where the Return case manager led the classes.) Parents and children were instructed on conductivity and electronic schematics; on-going activities included the construction of flashlights, electrical switches, and simple

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*The program also operated at a Return satellite site not included in this evaluation.

**Girls, Inc., (formerly called Girls Club of America) is a national organization that focuses on the educational enrichment of young women.

electrically-powered machines such as fans, telegraphs, toys, etc. The construction materials used were inexpensive or common household items (e.g, batteries, paper cups, aluminum foil, etc.) which encouraged the continuation of activities at home.

BABYGRAM HOSPITAL OUTREACH SITES

The Babygram Hospital Outreach program took place at 11 hospitals. Three of the sites were in Manhattan (Bellevue, Mount Sinai, Columbia Presbyterian), two in the Bronx (Bronx Municipal, Lincoln), one in Queens (Queens Hospital Teenage Program at South Jamaica Multi-Service Center, Elmhurst Hospital), and four in Brooklyn (Coney Island, Interfaith, King's County, Woodhull). Four of the sites (Bellevue, Columbia Presbyterian, Elmhurst, Interfaith) had been added to the program in 1991-92. One of those sites (Elmhurst) operated only until February, 1992-93,* but will be reinstated in 1993-94. Three of the sites (Bronx Municipal, Coney Island, King's County) were added to the program in 1992-93. In addition, a Babygram telephone Help Line was added to the program in 1992-93.**

BABYGRAM STAFF

A case manager staffed each of the Babygram sites. The Babygram case managers worked under the supervision of a member of the hospital staff. The supervisors were typically social

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*For the purposes of this evaluation, Elmhurst Hospital has not been included in this year's report.

**The Help Line is a telephone information service for pregnant/parenting students and their families to help link them to appropriate educational and social service providers.

workers who provided the case managers with referrals and met with them regularly to discuss clients and procedures. As a new component of staff development, the program coordinator appointed two case managers (one in the Bronx and one in Queens) to act as auxiliary trainers. They regularly visited other case managers to assist in on-site training, and provided training to new case managers.

In general, the case managers reported that they worked together as a team with the social workers, sharing information with one another, and working together to meet the clients' needs. Nine of the ten case managers reported that they were receiving satisfactory support for recruiting and serving teens from their hospital supervisor. In addition, several case managers explained that they were fully integrated into the service provider team in the hospital as the education specialist. As a member of a larger social service team, case managers were familiar with whom to make appropriate referrals to outside of educational needs.

The case managers' primary goal was to recruit pregnant and parenting teens in order to place them in an educational setting. Accordingly, they visited hospital wards and clinics, processed intakes, and made referrals not only to educational programs, but also to daycare settings and social service agencies when appropriate. Case managers reported that they provided important links between educational settings and the returning student,

advocating on behalf of their clients to re-enroll them, sort out problems, or negotiate conflicts.

BABYGRAM PROGRAM PARTICIPANTS

Demographic Data from a Sample of Case Manager Records

Size of Sample. OREA evaluators instructed case managers to take every fifth folder from their files of teens (a 20-percent sample) who had requested services and to enter the information from that client's intake form onto an OREA-designed data retrieval form. This procedure resulted in the compilation of in-depth profiles on 433 teen clients served by Babygram case managers.

Client's Ages. Consistent with the program's goal to serve teens, almost all of the clients (N=351, 88 percent) were between the ages of 13 and 19. Eighteen percent (N=72) of the clients were between the ages of 13 and 15. The largest proportion of teens (N=183, 46 percent) was between 16 and 17 years of age, and almost one-fourth (N=183, 24 percent) were between 18 and 19 years old. The mean age of the clients was 17.

The majority of teens (51 percent, N=188) were between 14 and 17 years old at the time of their babies' births, while 48 percent (N=177) were 18 years old or older. A further breakdown revealed that nine percent (N=34) of the clients were 14-15 years old at the time of their babies' birth, 42 percent (N=154) were 16-17 years of age, 33 percent (N=121) were 18-19 years old, and 15 percent (N=56) were over 20. The average age at the time of birth for Babygram teens was 17.

Clients' Educational Status. At the time of the case managers' intake, more than one-half (N=251, 59 percent) of the teen clients were no longer attending school,* one-quarter (N=109, 26 percent) were attending school, and 15 percent (N=64) had recently transferred schools or graduated. Approximately two-thirds (N=193, 66 percent) of those who had dropped out of school had dropped out before they became pregnant.** Close to one-half of the clients (N=204, 49 percent) had completed junior high school (grade 9) or less, indicating that some of the clients may have been over-age for the level of schooling which they were attending or might attend. Most frequently, clients had completed either grade 9 (N=124, 29 percent) or grade 10 (N=106, 24 percent).

As can be seen in Table 2, the majority (N=131, 57 percent) of teen clients who were no longer attending school had completed grade 9 or less. Further, Table 3 shows that the majority (N=140, 61 percent) of those who were no longer attending school, were age 17 or above.

Clients' Living Arrangements. The majority of the clients (N=248, 58 percent) were living with their mothers at the time of

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*For the purpose of analysis, students who were designated either as dropouts or as long-term absentees were considered to have dropped out of school.

**This figure should be interpreted cautiously. According to aggregate statistics supplied by the program office, the estimate of teens who dropped out of school before becoming pregnant is 53 percent. However, both figures indicate that the majority of teens left school prior to graduation before becoming pregnant.

Table 2

School Attendance Status of Babygram Teens, by Highest Grade Completed

| Attendance Status | Grade | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| | 6 or less | 7 | 8 | 9 | 10 | 11 | 12 | Total |
| Not Attending School | 6 | 8 | 39 | 78 | 55 | 42 | -- | 228 |
| Actively Attending School | 1 | 3 | 12 | 27 | 36 | 19 | 5 | 103 |
| Total Number of Students | 7 | 11 | 51 | 105 | 91 | 61 | 5 | 331 |

Note: The number of students in each category is reported.

- The majority of those who were not attending school (N=131, 57 percent) had completed Grade 9 or less.

Table 3

School Attendance Status of Babygram Teens, by Age of Teen

| | Age | | | | | |
|---|---|---|---|---|---|---|
| Attendance Status | 13-15 | 16 | 17 | 18 | 19+ | Total |
| Not Attending School | 33 | 55 | 54 | 36 | 50 | 228 |
| Actively Attending | 26 | 26 | 31 | 9 | 10 | 102 |
| Total Number of Students | 59 | 81 | 85 | 45 | 60 | 330 |

Note: The number of students in each category is reported.

- The majority (N = 140, 61 percent) of those who were not attending school were 17 years of age or older.

the intake. Smaller numbers of clients were living with other relatives or adults, for instance, their guardians (N=27, 6 percent) or their aunts (N=25, 5 percent). Few of the clients had living arrangements that clearly included either adult or peer males. Those few included clients who were living with their father (N=8, 2 percent), both parents (N=9, 2 percent), their boyfriends (N=29, 6 percent), or their husband (N=22, 5 percent).

Similarity of 1991-92 Client Population. The profile of the 1992-93 client sample was similar in many ways to the profile of the 1991-92 client sample. For example, the 1992-93 clients were similar to the 1991-92 clients in age ($M$ = 17, rather than 16.5), and in living situation (58 percent, rather than 55 percent, lived with their mothers), in current school status (59 percent dropouts in both years), and, for those who had dropped out, in last grade completed (34 percent, rather than 31 percent, had completed grade 9). Babygram case workers reported that, at some sites, the population seemed to be shifting from one linguistic/ethnic group to another; however, the data did not allow assessment of this possibility. The consistency from year to year implies that the sample data are a reliable reflection of the population, and that caseworkers can probably expect to see a similar group in subsequent years and plan accordingly.

BABYGRAM RECRUITMENT

As can be seen in Table 4, there were 3,511 new intakes in 1992-93, an average of 351 for each of the ten sites. In 1991-

Table 4

Comparison of Mean Number of Monthly Intakes by Babygram Site, 1992-93

| Hospital | Mean Monthly Intakes[a] | | Average for Year |
|---|---|---|---|
| | Fall 1992 | Spring 1993 | |
| Bellevue | 23 | 10 | 16 |
| Columbia Presbyterian | 31 | 28 | 29 |
| Coney Island | 29 | 25 | 27 |
| Interfaith[b] | -- | 51 | 26 |
| Bronx Municipal | 36 | 27 | 31 |
| King's County[c] | 18 | 26 | 22 |
| Lincoln | 36 | 30 | 33 |
| Mount Sinai | 73 | 75 | 74 |
| Queens | 49 | 51 | 50 |
| Woodhull | 36 | 49 | 43 |
| Total | 1,656 | 1,855 | 3,511 |

[a]The mean number of monthly intakes is derived by averaging the number of new intakes for September through January (fall 1992) and February through June (spring, 1993).

[b]The Babygram site at Interfaith Hospital was not fully operational until November 1992.

[c]The Babygram site at King's County Medical Center did not operate during the month of January.

- The mean number of monthly teen intakes ranged from 16 to 74. In 1991-92, the mean number of monthly teen intakes ranged from 18 to 64.

92, there was a total of 2,392 intakes and an average of 299 for each of the eight sites. The 1992-93 statistics showed an increase of 17 percent in number of intakes per site over that of 1991-92, thus meeting the program objective stating that the percentage of pregnant and parenting adolescents served by the project will be higher than the percentage served by the project during the previous year. The range of mean monthly intakes reflected this increase. In 1992-93, the mean number of monthly teen intakes ranged from 16 to 74. In 1991-92, the corresponding numbers ranged from 18 to 64.

The data indicate that intake numbers tend to increase over time. As can be seen in Table 4, the hospitals with the largest average intake were typically those that had begun participation in the program prior to 1991-92.

PROGRAM ACTIVITIES

Staff Development Training

In the fall of 1992, the Bank Street College of Education and Project Return cooperated to offer two staff development sessions to train Babygram case managers and hospital personnel (N=17) to serve as parenting skills instructors. This activity satisfied the objective concerning staff development which stated that 15 staff members will have received training in parenting skills conducted by the Bank Street College of Education. The major tool of instruction was the Babygram packet, which includes the book, Welcome to N.Y.C. Public Schools. This book, designed to be distributed to Babygram clients, functions as a parents'

diary of the baby's development from one stage to the next. In addition, in a colorful, appealing format, the book presents information on dangers to be avoided at each age, behaviors to be expected at each age, and individual differences between babies.

Workshop leaders used the Welcome book with the workshop participants so as to model the way the book could be used with Babygram clients. The workshops actively involved all participants and focussed on the book as a tool for directing attention to child development, establishing rapport with the client, and assessing the literacy level of the client. Issues that arose during the discussion included conflicts between the Babygram client and her mother, cultural differences in childrearing, and the importance of meeting the needs of the individual child.

Participants' Rating of Workshop

Immediately after the workshops, the 17 participants completed a three-item questionnaire. The results indicated that the participants had found the workshops to be a valuable learning experience. On a four-point scale (from "poor" to "very good"), 15 (88 percent) of the 17 participants rated the workshops as "very good" (the highest rating). The remaining two (12 percent) rated the workshop as "good." The participants noted that they had learned how to organize and run parent groups, and had learned about the need to involve the whole family in parent training efforts and the need for a range of services (in addition to educational placement). For the future,

some of the participants requested, as resources, films and books on parenting, in English and in Spanish, and information on how to involve fathers in parenting. They also requested a continuation of the workshops as a support for their efforts to implement parent training groups.

One-half (five) of the Babygram case managers reported in a post-training OREA follow-up that they had been able to make use of the training. One of the case managers had begun a parenting group that ended because of lack of space. The others, in cooperation with nurses, social workers, or teachers had used the Welcome book with individual teens. However, the objective requiring each hospital staff member (Babygram case managers and hospital personnel) trained by Bank Street College workshop leaders to implement at least one parenting activity workshop for Babygram teens was only partially satisfied.

## III. EDUCATIONAL PLACEMENTS AND OUTCOMES

### COMMUNITY EDUCATION INITIATIVE EDUCATIONAL PLACEMENTS

#### Social Service Referrals

During the initial intake interview, Return case managers assessed each client's needs and goals and created an individualized education plan for each participant. While the goal of Project Return is to facilitate parents' return to an educational setting, many parents were not yet able to do so because of unresolved problems in their lives. Often, case managers had to first deal with parents' health and social service needs before assisting parents in returning to an educational setting. Accordingly, the case managers made referrals to social service agencies that could take care of clients' needs for daycare, income maintenance, counseling, medical care, and housing, for example. On average, case managers made four agency contacts on behalf of Return parents. This represents an increase over the previous program year, when case managers made on average two agency contacts on behalf of parents. As shown in Table 5, referrals to the Human Resources Administration were the most numerous, followed by medical and counseling referrals.

#### Types of Educational Placements

The immediate goal of many other Return parents was to enroll in an educational setting in order to complete their education. Accordingly, case managers referred parents to a variety of programs that would best suit their parents' needs and

Table 5

Number and Percent of Social Service Referrals to Return Parents, by Type of Referral

| Type of Referral | Referrals N | Referrals % |
|---|---|---|
| Human Resources Administration[a] | 90 | 30 |
| Medical | 74 | 25 |
| Counseling (family and personal) | 70[b] | 23 |
| Housing | 48 | 16 |
| Rehabilitation (alcohol and drug) | 17b | 6 |
| Total Referrals | 299[c] | 100 |

[a]Human Resources Administration (H.R.A.) is a city agency that oversees welfare (including income maintenance and general social services), child protective services, and homelessness.

[b]This number includes 42 parents placed in counseling and 28 placed on waiting lists.

[c]Parents could be referred for more than one type of social intervention.

- Overall, Return case managers made 299 social service referrals for parents during the program year.

skills. OREA's sample of Return parents for whom data were available (N=296) revealed that 215 (73 percent) were enrolled in some type of educational setting during the program year.* This represents a slight increase over last year, when 70 percent of parents were placed in an educational setting.

Based on information provided in case managers' monthly summaries collected by the program office, 869 parents were placed in educational programs. As can be seen in Table 6, G.E.D. and A.B.E. programs accounted for almost three-fourths of all educational placements (70 percent, N=616). Vocational training, literacy, high school, and E.S.L. placements accounted for 29 percent (N=177, 29 percent) of all placements. Placements to G.E.D. and A.B.E. programs in 1992-93 represent a substantial increase over the previous program year, when such placements accounted for 48 percent of all placements. While the percentage of G.E.D. and A.B.E. placements increased from the previous year, the percentage of placements in vocational training and E.S.L. programs decreased (from 16 percent to 7 percent for vocational training and 17 percent to 5 percent for E.S.L. programs).

However, not all parents who were referred were able to enter programs, due to the lack of available openings. Table 6 also provides data on the percentage of parents placed on waiting lists to enter programs. Parents placed on G.E.D. waiting lists

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*It is important to note that placement data based on OREA's sample corresponded with the placement information provided by the program office. This suggests that OREA's sample was representative of the larger parent population for 1992-93.

Table 6

Number and Percent of Return School Parents Placed in Educational Programs and on Waiting Lists, by Type of Program

| | Parents Placed | | Parents Wait-Listed | |
|---|---|---|---|---|
| Program | N | % | N | % |
| G.E.D. | 317 | 36 | 202 | 44 |
| A.B.E. | 299 | 34 | 165 | 36 |
| Job Placement | 76 | 9 | 48 | 10 |
| Vocational Training | 63 | 7 | 16 | 3 |
| Literacy | 62 | 7 | 12 | 3 |
| High School | 47 | 5 | 0 | 0 |
| E.S.L. | 5 | 1 | 19 | 4 |
| Total Parents | 869 | 99[a] | 462 | 100 |

[a]Percentage does not equal 100 due to rounding.

- Slightly more than one-third (36 percent) of the Return parents who were placed in educational programs were preparing for a high school equivalency diploma.
- More parents were placed on waiting lists for G.E.D. programs than for any other type of educational program.

and A.B.E. waiting lists accounted for 80 percent (N=367) of all wait-listed parents. Case managers had more success in placing parents in literacy and vocational training programs than in any other types of programs.

On-Site versus Off-Site Placements

OREA was interested to know whether a parent was more likely to enroll in an on-site program (i.e, the program operates in the school) then in an off-site one. Based on information provided by the sample, Table 7 shows evidence that parents were overwhelmingly more likely to enroll in an educational program in the school than in a program located off the school grounds.

Number of Children and Need for Daycare

According to analysis of the OREA's sample Return population, overall, of those who enrolled in an educational program (N=197), 67 percent (N=132) had zero to two children, while 33 percent (N=64) had three or more children. This suggests that parents with fewer children were probably more likely to enroll in programs and possibly suggests a need for more available daycare. There were a total of 125 requests for daycare during the year. Of those requests, 49 (39 percent) received placement for their children, while 76 (61 percent) were placed on waiting lists.

COMMUNITY EDUCATION INITIATIVE YEAR-END OUTCOMES

Percentage of Parents for Whom Outcome Data Were Available

OREA obtained end-of-year outcome information on 98 percent (N=297) of the participants in the sample. This represents a

Table 7

Percentage Ratios of Return Parents
Enrolled in On-site vs. Off-site
Educational Programs

| Educational Program | N | Percent |
|---|---|---|
| A.B.E. on-site | 79 | 94 |
| A.B.E. off-site | 5 | 6 |
| G.E.D. on-site | 58 | 72 |
| G.E.D. off-site | 23 | 28 |
| E.S.L. on-site | 10 | 83 |
| E.S.L. off-site | 2 | 17 |

- Return parents were much more likely to enroll in on-site educational programs that operate within the Return elementary school than programs that operate outside of the school.

substantial increase over last year in the percentage of parents in the sample for whom outcome information was available (57 percent, N=189). This increase in outcome information is attributed to case managers' aggressive efforts in following up parents at the end of the program year either through letters and phone calls to educational sites to verify attendance, or in remaining in contact with parents who accompany children to and from school or participate in school activities, to inquire about their educational progress or future educational plans.

Outcomes

Based on the sample provided by case managers (N=297), OREA determined that almost three-fourths (73 percent, N=215) of their clients were enrolled in some type of educational setting during the program year. Table 8 presents outcome data on 207 enrolled parents in the sample supplied by case managers. As the table indicates, 70 percent of participants attending educational or vocational schools or programs in 1992-93 either received their high school diploma or G.E.D. certificate (seven percent), were awaiting their test dates (indicating G.E.D. readiness) or test results (five percent), were promoted to the next level (21 percent) or remained on the same level (37 percent). Another ten percent of the participants secured employment and 19 percent withdrew from their programs. In general, these outcomes remained consistent between the two program years with one exception: a slightly higher percentage of enrollees were reported to have dropped out of programs during 1992-93 than

Table 8

Year-End Summary of Reported Outcomes for a Sample of Return Parents Enrolled in an Educational Program

| Outcome of Parents as of June 30, 1993 | Parents 1992-93 N | % | Parents 1991-92 N | % |
|---|---|---|---|---|
| Received high school diploma or G.E.D. certificate | 15 | 7 | 9 | 7 |
| Awaiting G.E.D. results or test date | 10 | 5 | 13 | 11 |
| Promoted to next or higher level or grade | 44 | 21 | 23 | 19 |
| Remained on same level or grade | 77 | 37 | 54 | 45 |
| Secured employment | 21 | 10 | 11 | 9 |
| Withdrew from program | 40 | 19 | 11 | 9 |
| Total Parents | 207 | 99[a] | 121 | 100 |

[a]Percentage does not equal 100 due to rounding.

- Almost three-fourths (70 percent) of the parents who enrolled in an educational program and for whom data were available received their high school or equivalency diploma, were promoted to a higher level, or maintained satisfactory progress on the same level.

during the previous year (19 percent vs. 9 percent).* However, this may be a result of more thorough follow-up by Return case managers.

Program Objective

The Return objective concerning program participation and tracking stipulated that at least 30 percent of all program participants will remain in an educational program for at least one month. As previously mentioned, 73 percent of program participants attended some type of educational program setting and 19 percent (N=40) of those parents withdrew prematurely. (It is not known how long those participants attended before withdrawing.) All of the parents who remained in programs (51 percent, N=167) attended for at least one month, thus meeting the objective on program participation. Moreover, the average length of time a parent actively attended a program was 7.2 months. It must be remembered that this calculation also included parents from the previous program year who had enrolled in an educational program during 1991-92.

PARENTING SKILLS AND LEADERSHIP TRAINING OUTCOMES

Parenting Skills Training

A pilot test was conducted on a sample of parents (N=29) at two Return schools that offered a series of parenting skills workshops focusing on parent-child activities. The control group consisted of a group of parents (N=14) at a satellite Return

*Case managers indicated that participants usually withdrew due to family illness or their own medical problems, moving out of the area, or family problems.

program (not included in this evaluation) that did not offer parent training. To assess the effectiveness of the parenting skills instruction at a sample of Return sites (N=2), the Parent as a Teacher Test (PAAT)* was used.

The PAAT, available in both English and Spanish, is a standardized test that reveals what individual mothers and fathers expect of their children, aged three to nine, and how they perceive themselves as teachers of their children. The test is comprised of 50 items, each followed by a four-point scale (strong yes, yes, no, strong no). A higher score indicates a parent who gives the more desirable answers based on child development research, values his/her role as the child's teacher, encourages play and creativity, and is not over-controlling. The test was administered in English or Spanish as appropriate.

The results indicated that the experimental group achieved somewhat higher scores ($\underline{M}$ = 136.2, $\underline{s.d.}$= 7.7) than the control group ($\underline{M}$ = 132.9, $\underline{s.d.}$= 7.2). The difference between the two groups was not statistically significant, $\underline{t}(42)=1.4$, $\underline{p}$ = .08, perhaps because of the small number of subjects; however, the difference was in the expected direction. This result provides some evidence that the program met the Community Education Initiative Objective that participants would demonstrate increased knowledge related to the content of the parenting skills curriculum.

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*Strom, Robert. Parent as a Teacher Inventory. Bensenville, IL., 1984.

Parent Leadership

In order to evaluate the effect of the CUNY Parent Leadership workshops, CUNY project personnel administered a pre- and post-leadership training questionnaire to Project Return participants in the series of workshops. The 25-item fixed-response questionnaire included items on confidence and level of activity in interactions in the schools.

Fifty-two parents completed the pre-training questionnaire and 58 completed the post-training instrument. Statistical analysis (using the chi square test) comparing the pre-training responses to the post training responses indicated that, after participating in the workshops, the participants, as a group, demonstrated changes in both attitudes and behavior. As shown in Table 9, specifically, the participants felt more confidence in speaking at a school meeting and meeting a teacher or principal. Further, the participants had increased their level of involvement in their Parents' Association and Parents' Association executive board, and had increased the frequency with which they discussed issues with the superintendent and the district staff, and the frequency with which they encouraged others to be active in the Parents' Association.

Self-Esteem

A primary goal of Project Return is to enhance participants' self-image and provide participants with skills that promote a feeling of control over their lives. The assumption is that parents who feel good about themselves and their ability to

Table 9

Statistical Comparison of Pre-training Responses to Post-training Responses

| Question | Chi Square | p |
|---|---|---|
| How confident are you in speaking at a school meeting? | 6.55 | .04 |
| How confident are you when meeting with a teacher? | 4.38 | .04 |
| How confident are you when meeting with the principal? | 6.09 | .05 |
| How often do you attend parent association meetings? | 10.93 | .01 |
| How often do you reach out to friends and neighbors to get them to participate in parent association meetings and activities? | 6.53 | .04 |
| How often do you discuss issues of concern with the superintendent or other district staff? | 7.78 | .02 |
| How active are you in the parent association executive board? | 5.80 | .05 |

- Return parents who participated in the Parent Leadership program showed an increase in the above indices of attitudes and leadership.

control their lives are more likely to invest in their own and their children's education. Therefore, OREA evaluators looked at two psychological characteristics, self-esteem and locus of control.

An abbreviated six-item self-esteem instrument (adapted from Rosenberg's self-esteem scale)* and a five-item locus of control instrument were administered midway through the school year to Return parents at two Return sites (N=43) as a pilot test. Both groups comprised parents who were actively involved in parent activities and considered by case managers' as their "core group." Self-esteem scores could range from a low of 6 (low levels of self-esteem) to a high of 24. Locus of control scores could range from a low of five (indicating feelings that life events are not controlled by themselves, i.e, an "external orientation") to a high of 20 (indicating a sense of having primary responsibility for one's outcomes in life, i.e., an "internal orientation"). As shown in Table 10, the mean self-esteem score was 20, much higher than the midpoint of 12.5. The locus of control mean score (14.7) also indicated fairly high internal orientations, higher than the midpoint of a score of ten.

Although it is difficult to draw conclusions about the impact of program participation on Return parents' levels of self-esteem and locus of control, this sample of Return parents

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*Rosenberg, M. Society and the Adolescent Self-Image. Princeton, New Jersey. Princeton University Press, 1965.

Table 10

Return Participants' Self-Esteem and Locus of Control Scores

| | Score |
|---|---|
| Number Tested | 43 |
| Self-Esteem Mean | 20 |
| Self-Esteem Range | 13-24 |
| Locus of Control Mean | 14.7 |
| Locus of Control Range | 10-20 |

- The mean self-esteem score of Return participants was 20, much higher than the theoretical mid-point of 12.5.
- The locus of control mean value was 14.7, also higher than a midpoint score of 10.

do appear to have, overall, positive self-images. Because of the late administration of self-esteem questionnaires to program participants, OREA was unable to determine whether there was an increase in self-esteem among program participants as stated by the objective. The evaluation design planned for 1993-94 will better determine program impact on parents' self-esteem and locus of control through pre- and posttesting.

Family Science Enrichment Program

In addition to maintaining attendance logs, the program teachers kept feedback forms where they recorded observations, difficulties, and overall group participation in the Family Science Enrichment program. Parents were asked to complete teacher evaluations at the end of the program. The Family Science consultant provided the results of her program evaluation to OREA evaluators.

The results from the evaluation suggested that, overall, parents and children were enthusiastic and pleased with sessions, as evidenced by parent evaluations and teacher feedback forms. Teachers, however, experienced difficulty in recruiting fourth grade students, suggesting that enrollment should be open to all grade levels. While attendance figures ranged from 76 percent to 90 percent, teachers did experience difficulties keeping parents committed to the program over a ten-week period, suggesting a shorter five-week cycle for future implementation.

The implementation of the program satisfied the Return objective requiring the implementation and evaluation of the

Family Science Enrichment component. Although the evaluation points to positive effects on parents and children, a more rigorous quantitative assessment needs to be conducted to measure the Family Science project's impact on participants.

## BABYGRAM HOSPITAL OUTREACH EDUCATIONAL REFERRALS

### Number of Referrals

Case managers attempted to find an educational placement for every client who requested one and to suit that placement to the client's needs. Based on referral statistics provided by the project office, case managers made 2,083 referrals to educational settings on behalf of Babygram clients. This represents an average of 208 referrals by each case manager (N=10) which is an increase over the number of referrals made last year, 188 per site (N=1,500), thus meeting the objective. The objective stated that there be a higher percentage of teens referred in Year II (funding year) than in the previous year.

### Types of Referrals

As can be seen in Table 11, the monthly program statistics indicated that clients were referred to a variety of programs, including P900 schools,* G.E.D. programs, regular high schools, alternative high schools, job training programs, and adult basic education (A.B.E.). Clients were most frequently referred to G.E.D./A.B.E. programs (N=667, 32 percent). However, in total,

*For the purposes of this report, Schools for Pregnant and Parenting Teens (Family Centers) are referred to as P900 schools. There are five schools in the Pregnant Teen program located in Manhattan, the Bronx, Brooklyn, and Queens.

Table 11

Number and Percent of Educational Referrals in Babygram Population Data, by Program Type

| | Referrals for Teens | |
|---|---|---|
| Educational Program | N | Percent |
| P900 Schools | 544 | 26 |
| Alternative High Schools | 214 | 10 |
| High Schools | 363 | 17 |
| Junior High Schools | 84 | 4 |
| G.E.D./A.B.E. Programs | 667 | 32 |
| Job Training | 214 | 10 |
| Total | 2,083 | 99 |

- More than one-half of the clients (53 percent) were referred to programs that lead to a high school diploma.

more than one-half of the clients were referred to programs that lead to a regular high school diploma (N=1,205, 57 percent).

Relationship between Participants' Age and Type of Referral

As mentioned previously, data from the sample of case managers' records indicated that more than one-half of the clients (N=140, 61 percent) who were no longer attending school were age 17 or above, and, therefore, possibly over-age for the grade level at which they would re-enter school. Accordingly, the sample data were analyzed to assess whether the type of referral made was related to the age of the client. As can be seen in Table 12, a relationship between type of referral and age of the client did seem to exist. The majority of the 13-to-16-year-olds (N=85, 56 percent) were referred to P900 schools; however, close to one-half of those who were 17 or 18 (N=58, 40 percent) and those who were 19 or older (N=39, 48 percent) were referred to G.E.D. programs.

BABYGRAM PLACEMENTS

A major goal of Babygram case managers was to identify teens in need and place them in educational programs. The case managers' records indicated a total of 3,511 new intakes for the year 1992-93. As noted earlier, 1,305 of those teens were attending school at the time of intake. These clients typically did not request an educational referral; however, they often required other services (e.g., daycare) in order to maintain their educational status. More than one-half of the new intakes

Table 12

Type of Referral to Educational Program, by Babygram Teens' Age

| | Age | | | | | |
|---|---|---|---|---|---|---|
| Referral | 13-14 | 15-16 | 17-18 | 19-20 | 21+ | Total |
| P900 schools | 16 | 69 | 34 | 5 | 2 | 126 |
| Alternative schools | 3 | 7 | 7 | 3 | 0 | 20 |
| High Schools | 1 | 25 | 23 | 6 | 0 | 55 |
| G.E.D. | 0 | 22 | 58 | 28 | 11 | 119 |
| Job Training | 0 | 2 | 4 | 4 | 2 | 12 |
| Other | 2 | 5 | 16 | 11 | 8 | 42 |
| Total | 22 | 132 | 142 | 58 | 23 | 375 |

Note: The number of students in each category is reported.

- The majority of 13-16 year olds (56 percent) were referred to P900 schools. Close to one-half of those 17 and above (43 percent) were referred to G.E.D. programs.

(N=2,083, 59 percent) requested and received educational referrals.

Placement Rate

As can be seen in Table 13, 51 percent of those who were given referrals were placed. This placement rate was comparable to the 1991-92 placement rate of 52 percent, indicating that in both years, the majority of those who were referred to educational programs were placed. However, the 1992-93 placement rate did not meet the program objective stating that by June 30, 1993 the percentage of pregnant/parenting adolescents placed in educational settings will be greater than the percentage placed in 1991-92. This may indicate difficulty finding available programs.

As can be seen in Table 13, placement rates varied from setting to setting. Placement rates were highest for regular high schools and alternative high schools. Placement rates were less than 50 percent for each of P900 schools, job training, and G.E.D. programs, and were lowest for G.E.D. programs.

Reasons for Lack of Placement

Referral was not necessarily followed by placement for a variety of reasons. In some programs, the registration process was complex and rigid, and clients were not able to or willing to follow the requisite steps. In other programs (e.g., E.S.L., G.E.D.) space was limited, and clients were placed on a waiting list. In addition, some programs were inconveniently situated for the client or clients did not have the resources (daycare,

Table 13

Comparison of Placement Rates, by Type of Program
1991-92 and 1992-93

| | Percent of Referrals Who Were Placed | |
|---|---|---|
| Type of Placement | 1991-92 | 1992-93 |
| P900 Schools | 50 | 48 |
| Alternative H.S. | 57 | 57 |
| Regular H.S. | 64 | 75 |
| Junior H.S. | -- | 69 |
| G.E.D. | 42 | 37 |
| Job Training | 59 | 44 |
| Total | 52 | 51 |

- Overall placement rates were similar in 1991-92 and 1992-93 (52 percent and 51 percent, respectively).

etc.) to attend the programs. Some families (particularly boyfriends or husbands of the teen client) were opposed to further schooling for the client. Case managers reported that many of the clients came from a culture or family in which it is considered undesirable for a young mother to spend so much time outside of the home. In those cases, the girls' boyfriends or husbands often wanted them to remain home with their children. One case manager indicated that she attempted to provide educational referrals for husbands or boyfriends in order to encourage them to support their girlfriend or spouse in her efforts to return to school.

In 1992-93, as can be seen in Table 11, more clients were referred to G.E.D. programs or the P900 schools than to regular high schools. However, the successful placement rate at regular high schools may indicate that case managers should refer students to regular high schools whenever possible and appropriate.

Babygram case managers noted that many of their clients had unrealistic views of G.E.D. programs. Clients saw G.E.D. as an easier option than completion of regular high school, not recognizing the discrepancy between their existing skills and the level that they would need in order to pass the G.E.D. exam. On the other hand, clients who attempt to re-enter high school often encounter difficulties orienting themselves mid-year, in catching up with work, or maintaining their attendance while parenting.

Daycare Needs

Many of the Babygram clients could not participate in an educational program without access to daycare. Case managers noted lack of daycare programs as one of the difficulties that they faced when attempting to meet the clients' needs. This difficulty was reflected in the fact that only approximately one-quarter (N=119, 26 percent) of those who requested daycare for their children received placement. This placement rate was somewhat lower than that in 1991-92, when 230 of the sample of 760 clients requested daycare. Of those, more than one-third (N=88, 38 percent) of the clients received daycare placements for their children.

BABYGRAM YEAR-END OUTCOMES

Case managers provided follow-up and continuing support for clients so that they could be successful in their educational programs. The sample of case manager records provided outcome information as of June 30, 1993 for 427 Babygram clients. As can be seen in Table 14, the majority of the sample of 1992-93 clients (N=255, 59 percent) had favorable outcomes, including receipt of a high school diploma or G.E.D. certificate (5 percent), promotion to the next level or grade (24 percent), remaining in school on the same level or grade (21 percent), awaiting G.E.D. test date or results (8 percent), and/or securing employment (one percent). The proportion of clients with favorable outcomes in 1992-93 was higher than that in 1991-92,

Table 14

Year-End Summary of Reported Outcomes for Babygram Sample, 1991-92 and 1992-93

| Status of Client as of June 30 | 1991-92 N | 1991-92 % | 1992-93 N | 1992-93 % |
|---|---|---|---|---|
| Received H.S. Diploma or G.E.D. | 12 | 5 | 23 | 5 |
| Promoted to Higher Level or Grade | 59 | 26 | 103 | 24 |
| Remained on Same Level or Grade | 17 | 7 | 90 | 21 |
| Awaiting G.E.D. Test Date/Results | 20 | 9 | 35 | 8 |
| Secured Employment | 3 | 1 | 4 | 1 |
| Withdrew from Program | 3 | 1 | 24 | 6 |
| Expects to Enroll in Ed. Program/Fall | 40 | 18 | 87 | 20 |
| Cannot be Placed | 22 | 10 | 19 | 4 |
| Does Not Wish to be Enrolled | 15 | 7 | 14 | 3 |
| Other | 35 | 16 | 28 | 7 |
| Total | 225 | 100 | 427 | 99[a] |

[a]Percentage does not equal 100 due to rounding.

- A higher percent of teens had favorable year-end outcomes in 1992-93 than in 1991-92.

when slightly less than one-half (N=111, 48 percent) of the sample clients had a favorable outcome.

Outcome data collection in 1992-93 was a great deal more thorough than that in 1991-92. In 1992-93, outcome data were available for virtually all of the sample clients (N=427, 97 percent), whereas in 1991-92, outcome data were available for less than one-third (N=225, 30 percent) of the sample clients. This can be attributed to case managers' aggressive follow-up activities despite the difficulty of maintaining contact with clients who move often, have housing problems or who may have provided the case manager with incorrect information. Case managers reported that they often found clients during clinic appointments, made phone calls to educational programs and schools, called clients at home, or sent postcards to verify enrollment and attendance after a client had been referred.

Two-year Follow-Up on Babygram Teens

OREA was interested in knowing the current educational status of teens (as of September 1993) who received assistance during 1991-92 from Babygram case managers. A non-random sample (N=58) of Babygram teens who either maintained their enrollment (with the aid of the case manager) in a N.Y.C. public school or were referred and placed in a N.Y.C. public school by a case manager was selected for follow-up. Thirty-seven teens (64 percent) were located in the on-line database of New York City

public school children.* OREA evaluators determined that, of the 37, eight (22 percent) had graduated from high school, 15 (41 percent) were currently enrolled and attending, 12 (32 percent) had been discharged prior to graduation,** and two (5 percent) had moved from the area. While it is difficult to draw conclusions from such a small sample, the findings suggest a positive trend among teens who were served by Babygram case managers--the majority (63 percent) either graduated or were attending school.

*There are several reasons why some of the teens were not located in the central database: providing the case manager with wrong information at intake; moving prior to re-enrolling in school; or not officially enrolling in school although they indicated that they had.

**Most of the discharged teens were over 17 years old and designated as dropouts.

## IV. CONCLUSIONS AND RECOMMENDATIONS

In both the Return schools (Community Education Initiative sites) and the Babygram Hospital Outreach sites, the case managers were successful in recruiting clients who required educational support and placing them in appropriate educational settings.

The 1991-92 OREA report recommended that Project Return plan for more aggressive follow-up of clients to facilitate both evaluation and continuing service. The 1992-93 data reflected the case managers' success in making this change. In 1991-92, outcome data were available for only 57 percent of the Return school sample and 30 percent of the Babygram sample. At the end of the 1992-93 program year, case managers in the Return Schools were able to obtain outcome information on 96 percent of the participants in their sample, and case managers in the Babygram hospitals were able to obtain outcome information on 99 percent of the participants in their sample. These numbers are particularly notable given the difficulty of maintaining contact with Return clients, who may not have a phone, may have problems in housing, and may be suspicious of what they perceive as a government agency.

The outcome data for both segments of the program indicated that the majority of the clients had favorable outcomes. In the Return schools, 81 percent of the clients who were placed received a diploma/certificate, were awaiting G.E.D. results/test date, were promoted/remained on same level or grade, or secured

employment. In the Babygram hospitals, 59 percent of the clients had those same outcomes. The rate of success in the hospitals, while notable, was lower than that in the Return schools, perhaps because the Babygram client was younger, less educated, and parent of an infant, rather than a preschool or school-age child.

Additional outcome data were available for the workshops provided to the Return school parents. Evaluation results provided by the consultant for the Family Science Enrichment program indicated that both parents and children attended most sessions and were enthusiastic about the program. In addition, an OREA pilot evaluation of Return parenting workshops, conducted by administering a standardized instrument, indicated that the parents who had received parent training achieved somewhat higher scores (indicating better parenting skills) than the group of parents who did not received training. Finally, the CUNY Parent Leadership Project evaluated their leadership training workshops by administering both a pre-training and post-training questionnaire. Responses indicated that the participants, as a group, demonstrated considerable change in both attitude and behavior.

Project Return's goal to further their clients' education should ideally be assessed through long-term follow-up. Case managers in the Return schools accomplished this on an informal basis since they were able to maintain continued interaction with some parents of children in the Return schools; however, case managers in the Babygram hospitals found long-term follow-up

particularly difficult. Accordingly, OREA gathered pilot long-term follow-up data on a non-random sample of 1991-92 Babygram clients who had registered in a N.Y.C. high school in 1991-92 and determined that the majority had either graduated from high school or were actively attending school. Further attempts to gather long-term follow-up data seem advisable in the future to determine which referrals have the highest probability of success and where further intervention might be advisable.

Case managers in both the Return schools and the Babygram hospitals reported obstacles in the way of returning their clients to or maintaining them in educational programs. In both segments of the program, finding reliable daycare was an issue. Places in programs were limited, and even when programs could be located, some clients were reluctant to leave their children in them. Many of the appropriate programs, particularly in bilingual or E.S.L. education, had long waiting lists, and the young parents tended to lose their interest as they waited. Many of the Return parents and Babygram teens had not experienced success in their earlier educational experiences. Accordingly, many of the clients lacked confidence in their ability to complete an educational program.

Based on the findings of this evaluation, OREA recommends the following:

- The Project Return staff should maintain the successful year-end follow-up procedure that was utilized this year. In addition, expansion of the pilot collection of long-term follow-up data would yield valuable information concerning the impact of the program, the referrals that have the highest probability of success, and the need for further intervention.

- Where feasible, Project Return should plan to include fathers as well as mothers, not only in parenting programs, but also as recipients of educational referrals. This inclusion would indirectly benefit the mother and child, and also perhaps encourage the father to support his girlfriend/spouse in her efforts to pursue her education.

- Project Return should continue to pursue daycare options for the clients. Many can turn to their own mothers or even grandmothers; however, such family members may not be available on a full-time basis. Moreover, on-site daycare options available in schools are often full and require waiting periods during which time parents might postpone returning to school.

- Project Return case managers, particularly in Babygram, should do an assessment of the viability of referrals to G.E.D. programs. The ratio of referral to placement is not as high as it might be in these programs, and the clients may have unrealistic expectations as to how easily they can achieve high school credentials through these programs.

- Project Return case managers should explore the possibility of further support services for the teens who return to regular high schools. The clients experience many difficulties in making the transition to school life and may need tutoring, counseling, and a host of other services.

- Project Return should continue its focus on assisting parents to return to educational settings but at the same time continue to implement various program components that directly benefit children of Return parents.

- Project Return case managers should continue to refine their greatly improved data collection methods. Evidence this year was that sample data supplied by case managers closely matched aggregated program office data, thereby supporting its validity. Any procedures allowing case managers to achieve the same level of accuracy with less investment of time would be worthwhile.