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ABSTRACT

A comprehensive study of the Adult Education for the Homeless Program (AEH) was conducted using data from the following sources: program files; focus groups conducted with state project administrators; site visits to 9 local programs in 3 states; surveys of 32 state projects, 230 local programs, 588 service delivery sites, and 2,943 program participants; and an assessment of the literacy skills of a representative sample of new enrollees at 30 local programs. The following were among the study's major findings: AEH clients are making progress but still function at a fairly low level; establishment of the AEH-created educational services where none were available previously; AEH services are offered in residential and nonresidential settings, and nearly all local programs have implemented aggressive outreach strategies to attract homeless participants; AEH clients differ from the homeless population at large; the AEH program's limited resources and the high rate of mobility among homeless individuals pose formidable challenges to the program's ability to meet its clients' educational needs. Appended are the following: state-by-state descriptive data, state/local surveys; a document literacy test; and statistical methods and detailed results of the analyses of client participation and academic improvement. Contains 66 tables/figures and 75 references.) (MN)

LEARNING TO HOPE: A Study of the Adult Education for the Homeless Program

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**LEARNING TO HOPE:
A Study of the Adult Education
for the Homeless Program**

1995

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EXECUTIVE SUMMARY

Despite America's immense wealth, hundreds of thousands of its inhabitants cannot afford even the barest essentials of life, and millions more live on the edge of economic despair. The most visible of America's underclass are the homeless, living on the nation's streets, in emergency shelters, and in other forms of temporary housing.

This report examines the Adult Education for the Homeless (AEH) Program, one of the many programs authorized by the Stewart B. McKinney Homeless Assistance Act of 1987 designed to address the longer term needs of the homeless. The purpose of the AEH program, according to authorizing legislation, is to "enable each (state) agency to implement a program of literacy training and basic skills remediation for adult homeless individuals. . . ." (Public Law 100-77, Title VII, Sec. 702).

Employing data derived from program files, focus groups conducted with state project administrators, site visits to nine local programs in three states, surveys of 32 state projects, 230 local programs, 588 service delivery sites and 2,943 program participants, and an assessment of the literacy skills of a representative sample of new enrollees at 30 local programs, this report provides a comprehensive review of the AEH program in its fifth year of operation. The study examines the program's organization and structure, the nature and accessibility of the services it provides, the characteristics of those who utilize these services, and various outcomes associated with participation in the program.

Program Outcomes

AEH clients are making progress, but still function at a fairly low level.

- Four in 5 participants accomplished one or more personal goals, 3 in 5 moved up from Level I (limited basic skills competent or functioning at grades 0-8 equivalent) to Level II (competent, but not proficient, or functioning at grades 9-12 equivalent) or within level, 1 in 5 was admitted to another educational program, 1 in 20 received a GED, and approximately 1 in 50 received an adult secondary education diploma. Among clients enrolling in English as a second language programs, a majority moved up one or more ESL levels.
- In the case of clients participating in GED instructional programs (for whom test score data are available), average scores increased significantly — by about five points — in each of the five GED subject areas.
- On average, clients received training in 8.6 life skills and exhibited "some" to "much" progress in most areas.
- Two in 5 participants obtained or improved their employment, and about 1 in 10 got off welfare, registered to vote for the first time, and/or obtained a driver's license.

Some program characteristics and instructional practices appear particularly effective.

- **Learners tend to receive more hours of instruction and are more likely to show academic improvement in programs with lower student/staff ratios.**
- **Individual instruction is a powerful instructional strategy, and shows consistent, strong relationships with academic improvement.**
- **Small group instruction is more effective in residential sites that require participation as a condition of residence than at other types of sites. We speculate that compulsory sites have more regular attendance, enabling teachers to develop and implement lesson plans appropriate for group instruction.**
- **Clients enrolled in more academically oriented programs (ABE, ASE, or GED) tend to receive more hours of instruction and have a greater probability of showing improvement.**
- **Clients enrolled in programs with fewer students per staff member tend to remain longer show more improvement.**
- **Despite instructor's expectations to the contrary, clients at residential sites performed no better than clients at non-residential sites; and**
- **Also confounding instructors expectations, clients at compulsory sites received no more hours of instruction than clients at non-compulsory sites, and fared no worse academically.**

Organization and Structure of the AEH Program

The establishment of the Adult Education for the Homeless (AEH) program provided educational services where none were available before.

- **Prior to the establishment of the Adult Education for the Homeless (AEH) Program, in 1987, only one state provided educational services for homeless adults through a program administered at the state level. Locally, most programs funded through AEH had either not existed or had not provided educational services specifically targeting the homeless.**
- **Over the past five years, the AEH program has expanded services significantly. In its first year of operation, the program served only 18,000 homeless adults nationwide. However, by 1992, AEH provided services to nearly 50,000 clients, or approximately 1 in every 10 homeless adults in the United States. These figures are all the more impressive when one considers that AEH appropriations have increased by only 42 percent during the same five-year interval.**

- In 1992, the AEH program funded projects in 35 states in support of some 282 local programs. In turn, local AEH programs administered the delivery of services at some 776 service delivery sites — e.g., emergency shelters, transitional housing, drug rehabilitation centers, community colleges, libraries, and other locations. During the program year, each local program served an average of 180 clients and each site served an average of 70.

Most funding for AEH projects comes from AEH funds, though many projects have leveraged substantial funding from other sources.

- In 1992, state projects received some \$9.8 million in AEH funds to support educational programs for homeless adults at the local level. Grants ranged in size from \$101,239 to \$600,000, averaging approximately \$285,176. Some states supplemented Federal grant money with funds from other sources.
- About one in three AEH projects were recipients of supplementary Adult Education Act funds (averaging \$208,634) and another 1 in 10 projects received supplementary state funds (averaging \$179,200). Other sources of non-AEH funding included JTPA, JOBS, and Even Start.
- In 1992, local AEH programs received state grants ranging from \$300 to \$300,000 (in one instance), averaging some \$31,327. In addition, approximately 44 percent of local programs received supplementary funds from non-AEH sources, averaging \$30,069. Many programs also benefited from in-kind support, especially in the form of volunteer services and donations of space and materials.

State project administrators support local programs in their efforts to provide educational services in several ways.

- All states provide technical assistance and monitor the development of local programs. In addition, the majority of states support staff development at the local level, develop and disseminate curricula, and conduct local program evaluations.
- Three in five states seek additional state-level funding and one in five seek additional local-level funding.
- All states coordinate services with various other Federal programs, including the Adult Education Program, Homeless Children and Youth, JTPA, JOBS, Even Start, and Head Start.
- In 1992, state-level administrative costs accounted for some 13 percent of total expenditures.

At both the state and local levels, administrators face a variety of challenges in building successful programs.

- Uncertainty regarding Federal funding ranks first among the concerns of state project administrators — nearly 9 in 10 cited this as one of the three most important challenges that they face. Inadequacy of funding and delays in funding were also cited as major concerns at the state level.
- State project administrators also expressed a desire for increased technical assistance, especially in the areas of curriculum and assessment.
- At the local level, the most critical challenges are those relating to the specific nature of homeless clients — e.g., their transiency, low self-esteem, lack of commitment, etc.

Accessibility of Services

The AEH program, which provides services in communities of every size, offer services in both residential and non-residential settings.

- The vast majority of service delivery sites (about 71 percent) are “residential” sites — i.e., locations where homeless people seek temporary shelter. The remainder are “non-residential” sites, such as adult learning centers, community centers, school classrooms, etc.
- More than one-third of residential sites impose no specific maximum stay limitations, about two in five residential sites permit longer than normal stays for residents participating in the AEH program, and the vast majority allow clients to continue in the AEH program after discontinuing residence. (Unfortunately, in one-half of the sites that permit continued participation, less than 10 percent of clients avail themselves of this opportunity.)
- Administrators of programs serving both residential and non-residential sites rated residential settings more effective than non-residential settings by nearly a two-to-one margin, although both types of sites were perceived to have specific advantages.

Nearly all local programs have implemented aggressive outreach strategies to help attract homeless participants, who often lack the self confidence to seek educational opportunities spontaneously.

- Key outreach strategies include interagency referrals, personal contacts, and other methods.
- Approximately three-fifths of service delivery sites also use incentives to reward clients for participating in the AEH program, such as certificates of achievement, gifts of clothing, or other personal effects.
- About one-third of residential sites link the provision of shelter to participation in the AEH program. Overall, about one-third of clients participate on a compulsory basis.

- About 65 percent of those who administer programs that provide services at both compulsory and non-compulsory sites express the opinion that required participation results in greater duration and intensity of instruction. Yet, more than one-third of these same administrators perceive clients enrolled on a compulsory basis to be less motivated than those who participate voluntarily, and only one in four associate compulsory participation with *greater* client motivation.

Programs offer a wide array of support services to help meet the broad needs of clients.

- About three-quarters of the clients participating in the AEH program receive 3 or more support services, and more than 10 percent receive 10 or more such services.
- Case management services, as well as the essentials of food, shelter, and clothing, are provided by about 9 in 10 local programs. Among these, the most utilized is case management, reflecting its central role in the support services network.
- Also widely available — though utilized by only one-tenth to two-fifths of participants — are substance abuse counseling, mental health counseling, health care, child care, transportation, legal assistance, and various support services aimed at enhancing clients' chances of becoming gainfully employed.

Program Participants

AEH clients differ from the homeless population at large.

- In terms of sex and family status, the two groups differ markedly. Only 55 percent of AEH participants are male, as compared with 81 percent of all homeless adults, and, while the vast majority of homeless (82%) are unattached adults, AEH participants include substantial proportions of single parents (25%) and two-adult families with dependent children (10.6%).
- About 86 percent of AEH clients were unemployed at enrollment (compared with 94 percent in the larger homeless population) and, on average, they had been without steady work for 13 months (compared with four years in the homeless population at large).
- The average AEH participant had been homeless for just seven months at enrollment, while, in the greater homeless population, the average duration of homelessness is more than three years.
- About one-third of all sites provide services to recovering substance abusers, another one in 10 serve victims of abuse, and approximately eight percent serve the mentally ill. While data collected for this study do not permit precise estimates of the proportion of AEH clients with problems of drug abuse, domestic violence, or mental illness, it is possible to gain some sense of the proportion of program participants

with personal problems of this nature by examining the distribution of sites targeting these groups.

Clients served typically function at a low educational level.

- Approximately 17 percent of AEH participants have eight years of education or less, 75 percent have between 9 and 12 years of education, and roughly 8 percent have 13 or more years of education. (Although AEH participants have somewhat less formal education than those in the greater homeless population — about one-fifth of whom have 13 or more years of education — this is almost certainly a function of AEH eligibility requirements.)
- AEH clients are approximately evenly divided between the two achievement levels — about 45 percent at Level I (eighth grade or less) and 55 percent at Level II (ninth through twelfth grade).
- A majority of participants exhibit proficiencies at the TALS Levels 1 and 2 (these levels are different than the levels mentioned above. TALS developers suggest that skills evident at these levels place severe restrictions on an individual's ability to participate fully in the labor force).
- Nearly one in five participants exhibit proficiencies at TALS Level 4. Individuals scoring at this level demonstrate proficiencies in coping with the kinds of complex literacy tasks that are increasingly common in the workplace and, thus, would appear to represent an untapped resource for the U.S. economy.
- When the range of TALS scores for clients enrolled in the AEH program is compared with those for representative samples of Job Training Partnership Act (JTPA) eligible applicants and Employment Service/Unemployment Insurance (ES/UI) participants, the three distributions are strikingly similar. This is consistent with the view that homelessness is not simply a function of poor literacy skills, but involves other variables as well, including personal problems of addiction, mental illness, and abuse, as well as the lack of adequate social supports.

Educational Services

The AEH program's limited resources and the high rate of mobility among homeless individuals pose formidable challenges to the program's ability to meet the educational needs of its clients.

- The average local program spends just \$291 in AEH funds to provide services to each of its clients, and, in some areas, where demand is greatest, program expenditures average as little as \$7 per client.
- While almost one-third of program participants receive more than 40 hours of instruction, nearly two-fifths receive *10 hours or less*.

The AEH program emphasizes instructional programs that integrate basic skills with life skills training and other programs specifically designed to meet the affective needs of homeless clients.

- Life skills training programs are most widely available — at four in five sites — followed closely by programs in adult basic education, GED preparation, self-esteem development, and employability skills. In addition, about one in four sites provide instruction in English as a second language and adult secondary education.
- Demand for life skills training programs — as indicated by enrollments — is nearly twice that for any other instructional area, and demand for programs addressing the affective needs of clients ranks second. Somewhat fewer clients participate in programs in adult basic education, employability skills, and GED, and fewer still receive instruction in adult secondary education and English as a second language.

At most AEH service delivery sites, a broad range of instructional approaches and strategies is employed.

- Individualized instruction is the most widely utilized instructional approach — employed at 9 in 10 sites — and, also rated the most effective. (Small group instruction is employed by nearly as many sites, but less highly rated in terms of effectiveness.)
- Workbook-based instruction is the most widely utilized strategy of instruction — employed at nearly 9 in 10 sites — and, also rated the most effective. Cooperative learning ranks second in both prevalence and perceived effectiveness.

Because of the AEH program's emphasis on individualized and small group instruction, instructional materials are often customized to meet the needs of individual learners or groups of learners.

- Although, on average, state projects allocate less than 1 percent of budget to curriculum development costs, two-thirds have developed curricula designed for use with homeless adults.
- Most states have focused attention on the development of instructional materials for families and single women with children, while fewer have developed curricula for victims of spousal abuse, single men, substance abusers, and other groups.

CHAPTER I

THE ADULT EDUCATION FOR THE HOMELESS PROGRAM IN PERSPECTIVE

Introduction

Despite America's immense wealth, hundreds of thousands of its inhabitants cannot afford even the barest essentials of life, and millions more live on the edge of economic despair. The most visible of America's underclass are the homeless, living on the nation's streets, in emergency shelters, and in other forms of temporary housing.

Though homelessness is not a new phenomenon, its persistence over the past decade has heightened public awareness and concern. Still, the dimensions of the problem continue to grow. In 1984, the Department of Housing and Urban Development estimated that there were between 250,000 and 350,000 homeless people in the United States (HUD, 1984). Just three years later, a study by the Urban Institute found that the number had grown to between 500,000 and 600,000 (Burt and Cohen, 1989). This latest estimate places the rate of homelessness at roughly 20 to 25 homeless persons for every 10,000 Americans.

Reliable estimates are not available, but the impact of the recession of the early 1990s seems to have further exacerbated the problem. A survey conducted recently for the Federal Emergency Management Agency's (FEMA) Emergency Food and Shelter Program found that, during the six-month interval period between August 1991 and February 1992, 90 percent of local boards and recipient organizations experienced an increased demand for services, and three out of four reported that demand had increased by at least 30 percent (CRS, 1992).

Characteristics of the Homeless

While the rate of homelessness seems to be rising, press reports of a growing number of "new homeless" — two parent families and individuals whose homelessness can be attributed to a sudden change in economic circumstances — are not supported by the evidence. The best available data (Burt, 1992) suggest that homeless households consist predominantly of single adults living alone (82%), followed by single parents with dependent children (9%), and adults living with partners but no children (8%). The remainder, adults living with partners and children, comprise only about one percent of all homeless households. These same data indicate that only about one in ten homeless persons report having held a steady job in the past three months, and the average duration of unemployment is four years.

The homeless are not a microcosm of the larger society, as some observers would suggest (Bailis et al., 1991). They are disproportionately male (81%), black (41%), and poorly educated — almost half lack even a twelfth-grade education (Burt and Cohen, 1989). About one-third are severely mentally ill, one-third or more have serious substance abuse problems, and more than half have served time in the nation's jails and prisons (Interagency Council on the Homeless, 1989). Social isolation and a lack of family ties also characterize the homeless. In a study of people who frequent soup kitchens and other emergency food programs in Chicago, three factors were found to be critical in discriminating between those who had and had not ever been homeless: living alone, alcohol abuse, and having been in out-of-home placement as a child (Sosin, Colson, and Grossman, 1988). Another study, based in Minneapolis, found that nearly two in five homeless respondents had been in foster care as children (Piliavin, Sosin, and Westerfelt, 1987). In addition to these attributes, the homeless also suffer from psychological distress at rates dramatically higher than the population at large. Using the CES-D depression scale developed by the Center for Epidemiological Studies, Burt (1992) found that about one-half

of the homeless in her sample were sufficiently demoralized or depressed to warrant immediate clinical attention. Even more striking, she found that more than one in five had attempted suicide, as compared with the national average of about three percent.

Public Policy: The McKinney Act

Explanations of the recent increase in the rate of homelessness abound. Initially, blame fell on the 1981-1982 recession, its attendant rise in unemployment, and the policies of the Reagan administration. As the recession passed, with no abatement in the rate of homelessness, some began to attribute blame to the homeless themselves, pointing to their problems of substance abuse, mental disorder, and criminality (Butler, 1989). Others focused on structural explanations, such as the shift in the economy from manufacturing to services, housing shortages, the decreasing purchasing power of public benefits, and the deinstitutionalization of the mentally ill (Burt, 1992; Rossi, 1989; Hartman, 1986).

Increasingly, it has become clear that homelessness cannot be attributed to a single cause — both individual and societal factors contribute to its enduring nature. Certainly, personal vulnerabilities increase the likelihood that some individuals, rather than others, will become homeless. However, without sustained macro-level policy interventions, and perhaps a fundamental restructuring of the economy, we are unlikely to see the eradication of homelessness in America in the immediate future.

Because homelessness was initially considered a short-term emergency, not a deep-rooted socioeconomic problem, Congress first responded by creating the Emergency Food and Shelter Program as part of the Jobs Bill of 1983, placing the program in the Federal Emergency Management Agency (FEMA). In 1987, Congress continued this approach by creating the Emergency Shelter Grants Program to expand the size of the shelter system. Later in that year, this program was folded into a much more comprehensive piece of legislation, the Stewart B.

McKinney Homeless Assistance Act of 1987. The McKinney Act was the first piece of federal legislation to acknowledge that homelessness is more than a housing problem and to address the longer term needs of the homeless. The Act authorizes some 20 programs, administered by seven federal departments, that provide not only housing assistance, but also food assistance, health and mental health care, substance-abuse treatment, education, and job training.

The Adult Education for the Homeless Program

This report examines one of the many programs authorized by the McKinney Act, the Adult Education for the Homeless (AEH) Program, administered by the U.S. Department of Education. The AEH program represents the first federal initiative aimed specifically at the educational needs of homeless adults. The purpose of the program, according to the authorizing legislation, is to "enable each (state) agency to implement a program of literacy training and basic skills remediation for adult homeless individuals. . ." (Public Law 100-77, Title VII, Sec. 702).

Since its inception, in 1987, the AEH program has awarded nearly \$50 million to states for services to more than 150,000 homeless adults. In its first two years, the program funded projects in all 50 states on a formula basis. In 1989, Congress revised the program's delivery of Federal assistance by changing the grant process to a discretionary system that is intended to increase accountability by providing funding only to those states with the most competitive project applications.

This report provides a review of the AEH program during its fifth year of operation, examining its organizational structure, staffing, evaluation procedures, and the nature of the educational and support services that it provides. While two previous reports — compiled from reports submitted to the U.S. Department of Education by participating states — have examined the program, this represents the first comprehensive review based on comparable data collected at both the state and local levels.

Review of State AEH Project Reports and Related Literature

Most of what is currently known about providing educational services to the homeless is derived from State AEH Project Reports, submitted annually to the U.S. Department of Education, two Federal reports summarizing this information (U.S. Department of Education, 1990, 1992), and published evaluations of related programs, such as the Job Training for the Homeless Demonstration Program (Bailis, Blasinsky, Chesnutt, and Tecco, 1991) and the Special Demonstration Project on Literacy Training for the Homeless, funded under Section 353 of the Adult Education Act (Spanard, 1990). Insights derived from these sources have helped to inform the development of this study and provide a useful context for interpreting results. Thus, we begin by examining what is already known, first, about providing educational services to the homeless generally and, second, about the AEH program specifically. This review centers around four principal topical areas:

- Characteristics of the population served;
- Program organization and management;
- Educational services; and
- Educational outcomes.

Characteristics of the Population Served

State AEH Project Reports and U.S. Department of Education reports that examine the AEH program as a whole provide the basis for a characterization of AEH participants. The demographic and educational characteristics of participants are summarized briefly below:

- **Age of Participants.** The majority of AEH program participants are between the ages of 25-44. More middle-aged and older adults (45 years of age and older) are served in sun-belt states, such as Florida, Texas, California, Georgia, and Alabama. However, nationally, only about two percent of program participants are 60 or older.
- **Sex of Participants.** A majority of program participants are male, though in several states — e.g., West Virginia, Kansas, and Michigan — females outnumber males by wide margins.

- ***Race/Ethnicity of Participants.*** Most program participants are white (about 46%), followed by blacks (about 35%), and Hispanics (about 16%). Other groups — including Native Americans and Asians — represent approximately three percent of the population served.
- ***Educational Level of Participants.*** Among states reporting the educational level of participants, more than one-half served a majority of Level I students (limited basic skills competent or functioning at grades 0-8 equivalent), while the remainder served a majority of Level II students (competent, but not proficient, or functioning at grades 9-12 equivalent).

A general taxonomy of the homeless population, developed by the Volunteers of America of Greater New Ycrk, is employed by several AEH programs across the country (Business Council for Effective Literacy, 1988). According to this classification scheme, the homeless population is divided into three groups — the situationally homeless, the marginally homeless, and the chronically homeless. Each subpopulation is described briefly below.

Situationally Homeless

The situationally homeless are those individuals who have been dealt an unexpected blow, such as a major medical expense or sudden job loss, which temporarily renders them homeless. This population generally can return to normality in a short time, although they find themselves temporarily in a state of crisis. The most basic needs of situationally homeless adults are housing, job referral, and a return to stability.

Marginally Homeless

The marginally homeless are those individuals who drift in and out of homelessness repeatedly. This group includes high school dropouts, single-parent families, teen mothers, non-English-speaking immigrants, migrant workers, victims of spousal abuse, and substance abusers. The marginally homeless require comprehensive help and support systems to return to mainstream society, including psychological and career counseling, life-skills training, and, in some cases, treatment for drug addiction.

Chronically Homeless

The chronically homeless include those individuals with severe psychological impairment, the destitute elderly, and others requiring lifelong supervision or institutionalization. These people generally require community-supported facilities designed to address their long-term needs.

Understanding the characteristics of the homeless included within each of these categories is useful because it may influence the types of services provided by AEH projects, as well as determine how to define successful program outcomes. There is widespread acknowledgment in the literature that shelters which focus on particular subgroups within the homeless population must have instructional programs designed to meet the needs of the target population, whether they be single men or women, single parents with children, families, limited English proficient populations, or some other subpopulation (Wesselius, 1990).

Program Organization and Management

Three aspects of program organization and management are most often addressed by the State Project Reports and related literature: (1) location of AEH services; (2) staffing; and (3) coordination of services.

Location of Services

Program services provided through the AEH program generally are located on site at residential shelters. Both on- and off-site programs tend to employ traditional delivery systems, such as community colleges, to manage educational services. Off-site services are generally offered within the context of adult education or literacy programs and typically are located at community colleges, schools, or community-based organizations. Clients are referred to these services by shelter staff and instruction is generally targeted for homeless adults.

The choice of off- or on-site training depends both on the characteristics of clients and a program's philosophy. Administrators of the Volunteers of America (VOA) Program in New York City, for example, believe that all services should be brought to the client:

In most cases today, services for the homeless are piecemeal. People are expected to go to one place for a meal, another for medical attention, another for clothing, another for housing help, another for tutoring. This is especially hard in areas where transportation is not easily available and when people are worried about where they will spend the night. All of VOA's programs for the homeless are multiservice and 90 percent of its clients' needs are met at the shelters. Education efforts have the greatest chance of success if they take place where people get 24-hour help. (VOA, 1988)

The Washington State AEH project also adopts this philosophy. Providing services where homeless people congregate is, according to Project administrators, one of the key elements of a successful program (Washington State AEH Annual Report, 1991). On the other hand, programs offering on-site instruction have found that some students are embarrassed about admitting to others that they do not know how to read (Spanard, 1990). Apparently, for many illiterate homeless, the lack of basic educational skills is a carefully hidden secret. The decision about where to locate a program raises a number of additional issues. On-site programs often suffer from a lack of space, security, or even a supportive staff within the shelter itself (Spanard, 1990), while off-site programs may fail if transportation is not provided (Potts, 1989).

Staffing

Since the inception of the AEH program, about one-half of all staff members have been volunteers (U.S. Department of Education, 1990). Teachers comprise the majority of program personnel (59%), followed by paraprofessionals (30%), and counselors (11%). Although states often require teacher certification — either in elementary/secondary education or adult education — staff training designed to ensure greater sensitivity to the needs of homeless clients is equally important. The Wisconsin project (Wesselius, 1990) stresses the need for ongoing staff training and support from administering institutions (e.g., community colleges). Several states — New

York, New Hampshire, California, and Maryland, for example — provide staff development activities directly.

Case management is another essential element of a successful program, according to most reports. Case managers serve as confidence builders and advocates. They also provide the critical follow-up necessary for clients' success in these programs. Finally, they play an especially vital role in assisting clients as they make their way through the often bureaucratic maze of support service networks (Pelzer, 1990).

Project administrators in Maryland single out the use of mentors as a critical element in the success of that state's program. Serving a role similar to case managers, mentors become friends, advocates, and counselors of program participants. Clients interviewed in Maryland have indicated that their mentors are essential in helping them to deal with crises in their lives and in enabling them to prepare for a more successful future (Morros, 1991).

Coordination of Services

Because of the nature and characteristics of homeless clients, AEH programs require a multi-faceted delivery system with coordination of services such as housing, child care, employment, education, and counseling (Bailis et al., 1991). In its recommendations for successful programs, Washington State underscores the importance of service coordination (Washington State AEH Annual Report, 1991). In Georgia, the establishment of a Statewide Special Populations Interagency Advisory Council has assisted greatly in enhancing the visibility of the AEH program and in providing for the coordination of needed resources and services (Georgia AEH Final Report, 1990). Administrators in all states concur that coordination offers the means of providing support services to AEH clients that might otherwise be unavailable to them.

Educational Services

The delivery of educational services is central to the mission of all AEH programs. State Project Reports and related literature describe various methods of recruitment, retention, screening and placement, as well as a wide range of program structures, curricula, and instructional approaches.

Recruitment

Recruitment strategies include the use of flyers and brochures (Wesselius, 1990), networking with social service agencies (Indiana Annual Report, 1990), interpersonal outreach, and other methods of informing potential clients about the AEH program. Several programs in Washington State indicated that a shortage of shelter beds prevented the recruitment of a significant number of homeless individuals who could have benefitted from AEH services (Washington State AEH Annual Report, 1991).

Retention

Given the transient nature of homeless clients, retention is a major concern for educational programs serving this population. Administrators of the Maryland Project have recommended the elimination of time restrictions on shelter stays for AEH clients as a means of promoting greater educational gains (Morros, 1991). Other programs continue to provide educational services to clients after they leave residential sites. For example, a St. Louis program, funded under the Adult Education Act, has increased its retention rate by providing educational services (as well as transportation and child care) for a period of one year following clients' departure from shelters (Spanard, 1990). Similarly, the Job Training for the Homeless Demonstration Program provides follow-up service to its clients for at least 13 weeks after job placement (Bailis et al., 1991). Finally, some programs have experimented with the use of incentives, such as food, clothing, or other gifts, to encourage participation (Moehrlin, 1991; Spanard, 1990; Potts, 1989).

Screening and Placement

Programs providing educational services to the homeless regularly describe the critical nature of a comprehensive intake procedure, coupled with the establishment of individual educational plans (IEPs) for all clients. However, adult education programs have traditionally avoided subjecting their students — who have often experienced failure in other school settings — to formal testing procedures. This issue is compounded in the case of the AEH program, where clients are often in a state of crisis at enrollment. Program coordinators are sensitive to the need to provide positive reinforcement for clients entering these programs and hesitate to subject them to any additional stress through the administration of tests. Thus, informal instruments, state or locally developed measures, open-ended interviews, and other relatively subjective diagnostic procedures are commonly used to place clients (Washington State AEH Annual Report, 1991).

When standardized assessments are used, they typically include the Adult Basic Learning Examination (ABLE), the Test of Adult Basic Education (TABE), the Wide Range Achievement Test (WRAT), and the Comprehensive Adult Student Assessment System (CASAS). Other, less commonly used assessments include the VALPAR work sampling assessment tool (Bailis et al., 1991), the SLOSSON Interest Inventory (New Hampshire Annual Report, 1990), and the CAPP, an adaptation of the CASAS (Connecticut AEH Annual Report, 1991).

The AEH Project in California employs standardized assessments more extensively than do most other states. Seven local programs in California make use of vocational assessment surveys and the Employability Competency System (ECS), a modified version of CASAS. Between January 1 and June 30 of 1989, some 840 clients completed Goal Attainment Surveys, and, of these, 542 were administered the ECS.¹ Almost one-half (45.2%) of the participants tested

¹ Attrition accounted for the difference in the numbers surveyed and tested. Clients completed the Goal Attainment Survey at intake, while the ECS was administered later in the enrollment process.

functioned at or above the beginning high school reading level. According to test developers, these individuals are capable of following oral and written directions in both familiar and unfamiliar work situations. In math, however, the vast majority of participants (76.1%) tested below the beginning high school level. These individuals will have difficulty with anything beyond basic computational skills (CASAS, 1989).

As part of the Goal Attainment Survey, clients were asked to identify their reasons for enrollment. Educational goals were cited most often (44.3%), followed by goals pertaining to employment (29.7%) and personal/communication issues (26.4%). Nearly three in four clients attained their goals, while the remainder encountered barriers to goal completion (CASAS, 1990).

Content of Instruction

An important element of many successful programs is a curriculum that is grounded in a functional context. Effective programs typically offer instruction in performing practical tasks, thus providing assurance to clients that there are tangible benefits associated with program participation (U.S. Department of Education, 1990). Curriculum often consists of traditional instruction in Adult Basic Education, GED preparation, and English as a Second Language, combined with life skills training, self-esteem workshops, and instruction in decision making. Many programs also offer instruction aimed at enhancing the employability of clients (Rowe, 1991; Moehrlin, 1991; Pelzer et al., 1990; and Potts, 1989). At least two states, Washington and North Carolina, have developed curricula specifically designed to meet the needs of homeless clients. The former uses a simplified version of the Washington State Core Competencies (Washington State AEH Annual Report, 1991) and the latter has developed a curriculum aimed at recovering substance abusers that incorporates literacy instruction within the 12-step program of Alcoholics Anonymous (North Carolina AEH Annual Report, 1991).

Instructional Approaches

A variety of program structures have been adopted by AEH providers and other agencies serving the homeless. Several programs began as drop-in centers, but eventually developed more extensive services, including counseling and short-term course offerings (Potts, 1989; Simon, 1987). Many programs continue to operate on an open entry/open exit basis due to the transient nature of the population served (Wesselius, 1990).

Various instructional approaches are in use, including individualized, small group, intergenerational, and computer-assisted instruction. The use of "peer coaches" to assist in tutoring has proven particularly effective in one Pennsylvania program (Veghts et al., 1990). The Travelers' Aid Program in Rhode Island has found its client-produced newsletter to be an effective means of developing both writing skills and self-esteem (Rhode Island AEH Annual Report, 1990). Finally, Washington State AEH Project administrators cite several approaches that help to ensure a successful program: (1) instruction in modules requiring between one and four hours to complete; (2) therapeutic education (healing through self-expression); (3) individualized and interactive instructional modes; and (4) culture/class sensitivity exercises (Washington State AEH Annual Report, 1991).

Educational Outcomes

Although individual successes are common, a large-scale demonstration of successful outcomes has remained an elusive goal of the AEH program. In part, this is due to the transient nature of the population served. The short-term participation of many clients all but precludes the effective application of standardized assessment instruments. Several examples illustrate this point:

- Connecticut attempted to employ a competency-based assessment system requiring post-tests after 75 hours of instruction, but found that only 3 of 100 clients completed the requisite number of hours (Connecticut AEH Annual Report, 1991);

- New Hampshire reported that only 1 in 20 clients were available for testing after 30 hours of instruction, again because program participation was of such short duration (New Hampshire AEH Annual Report, 1990); and
- Washington State reported that 166 of 586 learners separated from the AEH program before achieving their goals. Of this number, 69 percent left because they were forced out of an emergency shelter at which they temporarily resided (Washington State AEH Annual Report, 1991).

In addition to the transient nature of the population served by the AEH program, other client characteristics may present barriers to the effective use of standardized assessments. For example, local programs in Kansas, where an estimated 40-60 percent of clients are special education students, have found it difficult to measure outcomes due to the low reliability and validity of tests developed for these students (Kansas AEH Annual Report, 1991; Colarusso, 1987).

Most AEH programs stress the importance of accomplishments in life skills areas such as budgeting, job seeking, and personal hygiene, but program administrators seldom formally evaluate outcomes in these areas. Self-esteem enhancement and decision-making skills also represent important components of instruction, but, again, outcomes are rarely assessed. Some programs do report impressive educational gains, however. In New Hampshire, 40 percent of program participants worked toward the GED, and 17 percent were successful (New Hampshire AEH Annual Report, 1990). In Washington State, a program serving African-American youth between the ages 16-24 reported that two in five clients found jobs and more than one-third entered another education or training program (Washington State AEH Annual Report, 1991). Prior to their involvement with the AEH program, many of these youths had been gang members engaged in drug dealing, prostitution, and protection rackets. These and other illustrations of the success of the AEH program abound. What is lacking is a systematic, across-the-board accounting of program outcomes based on a universally applied standard of measurement.

Overview of the Report

While individual State Project Reports and other sources of information provide useful insights into the operation of the AEH program and the various services that it provides, this report represents the first systematic review of the program based on comparable data collected at both the state and local levels.

Beyond this introduction, the study is divided into eight substantive chapters. Chapter II addresses several methodological issues and examines the two principal sources of data upon which the study is based: (1) the State Project and Local Program surveys and (2) a literacy assessment of new enrollees at some 30 randomly selected local programs. In Chapter III, information concerning the organization and structure of the AEH program is presented, including a discussion of: (1) the structure of the AEH program; (2) administrative and program staff; (3) state project and local program finance; (4) program monitoring and evaluation; and (5) challenges to development and implementation. Chapter IV investigates the accessibility of services provided through the AEH program, focusing on: (1) the location of services, including their geographic distribution and the perceived effectiveness of residential and non-residential sites; (2) outreach methods, incentives for participation, and the perceived effectiveness of compulsory versus voluntary program structures; and (3) the availability and utilization of support services. Chapter V offers a description of the clients served by the AEH program, including their demographic characteristics, educational level, employment status, and the duration of their homelessness. This chapter also reports information on the baseline literacy scores of program participants, derived from the administration of the TALS Document Literacy Test to a sample of new program enrollees. In Chapter VI, a description of the various services provided through the AEH program is presented, focusing on: (1) the intensity and duration of services; (2) the content of instructional programs; and (3) the various instructional practices and curricula employed in the

delivery of services. Chapter VII examines program outcomes — both educational achievements and other accomplishments. Chapter VIII explores the relationships between educational outcomes and program structures, instructional practices, and client characteristics. Finally, Chapter IX provides a brief discussion of the study's key findings and develops a set of guidelines for state and local administrators to follow in evaluating the AEH programs in their particular state or locality.

CHAPTER II

METHODOLOGY

Overview

This study is designed to provide a systematic review of the operation of the Adult Education for the Homeless Program and the services that it provides to homeless adults across the United States. The study has three underlying objectives:

- To provide comprehensive descriptive information about the AEH program that can be used by administrators at the Federal, state, and local levels to improve the program;
- To examine the range of literacy skills among program participants; and
- To identify possible procedures and methods that AEH projects may use in evaluating their operation and services.

Two principal sources of data are employed in this investigation: (1) a nationwide survey of the universe of AEH state projects and local programs; and (2) a literacy assessment of new enrollees at 30 randomly selected local programs. Each source of information is described below — including details of survey development and design, test selection, sampling, and data collection — followed by a brief methodological note pertaining to the interpretation of results.

State and Local Surveys

Survey Development

State and local surveys were developed through a process involving several steps: (1) a review of relevant literature; (2) an examination of AEH program files; (3) focus groups conducted with state project administrators; (4) site visits to nine local programs in three states; (5) survey pre-test interviews with selected state and local administrators; and (6) a review of draft surveys by the U.S. Department of Education and the Office of Management and Budget.

Literature Review

State AEH Project Reports, U.S. Department of Education descriptive summaries, and published evaluations of related programs were reviewed to provide a preliminary framework for the development of the two surveys. The information derived from this review was useful in highlighting many of the key issues related to the program's operation and services and in identifying areas where additional information was required. The principal findings of the literature review are summarized in Chapter I.

Review of Program Files

U.S. Department of Education program files for each of the 35 AEH projects funded in 1992 also were examined, and relevant data were extracted. These data are presented in Appendix A in the form of four summary tables that provide information in the following areas: (1) characteristics of target populations served; (2) organization of services; (3) educational programs; and (4) evaluation procedures.

Beyond providing additional insights relevant to the design of the two surveys, these tables represent a useful compendium of information describing the AEH program on a state-by-state basis. Because of their dual purpose, some of the information contained in these tables has been updated to reflect survey data. (Information derived from the surveys is noted as such in Appendix A.)

Focus Groups

As part of the survey development process, focus groups were conducted with state project administrators at the Second National Conference on Adult Education for the Homeless. Groups were formed based on the principal subpopulations targeted in each state — e.g., recovering substance abusers, victims of spousal abuse, mentally ill, etc. — and discussions were organized around six topical areas: (1) outreach methods; (2) placement and assessment; (3) curricula;

(4) instructional approaches; (5) measures of success; and (6) program evaluation. This approach was employed to focus discussion on the specific organizational structures and practices that have proven effective in providing services to each subpopulation. The views expressed during these discussions were particularly useful in identifying areas of concern to program administrators at the state level.

Site Visits

As an additional step in the development of the two surveys, site visits were conducted at nine local programs in three states. Sites were selected to represent a broad range of AEH program characteristics related to the following areas: (1) size of budget; (2) target populations served; (3) location of services; (4) service providers; (5) instructional approaches; (6) client placement; (7) curriculum/instructional focus; (8) client assessment; and (9) methods of evaluation. The characteristics of the three state projects selected for visitation — Connecticut, North Carolina, and Rhode Island — are described in Table II-1.

Structured interviews with state directors and local program coordinators, conducted during site visits, provided information pertaining to the operation and services of the AEH program and ensured that the views of administrators at both the state and local levels were reflected in the overall study design.

Survey Pre-Tests

Following the preparation of preliminary drafts of the two surveys, each was pre-tested through telephone interviews with several randomly selected state and local administrators. These interviews were useful in clarifying ambiguous questions, ensuring the completeness of closed-ended responses, and identifying any additional areas of concern that had not been previously addressed.

TABLE II-1

CHARACTERISTICS OF STATE PROJECTS VISITED

Selection Criteria	STATE ABE PROGRAM		
	Connecticut	North Carolina	Rhode Island
Budgets	\$153,000	\$492,107	\$199,423
Target Populations	Substance abusers; mentally ill	Substance abusers; victims of partner abuse; developmentally disabled; adults waiting for subsidized housing	Street youth; dislocated or disabled workers; mentally ill; victims of partner abuse; substance abusers
Service Delivery Sites	Shelters; adult learning centers; transitional housing; soup kitchen, alcohol rehabilitation agency; service agencies for mental patients	Shelters	Shelters; homeless service agencies
Service Providers	LEA; CBO; shelter	Community colleges	Shelters; literacy organization; CBO
Distinctive Instructional Approaches	Small Group Instruction; Computer Assisted Instruction; Connecticut Adult Performance Program (CAPP)	Computer Assisted Instruction (PLATO software)	Intergenerational; whole language approach; learner contracts; process writing
Client Placement	CAPP	CASAS; TABE; WRAT; SORT	TABE; LVA Read Test; recommendations by shelter staff or case managers
Curriculum/ Instructional Focus	ABE; GED; ESL; Life Skills; CAPP	ABE; Life Skills ("Life Skills for the Homeless" and "The Twelve Step Curriculum," both developed in North Carolina)	ABE; GED; Life Skills
Client Progress Assessment	CAPP; CASAS	TABE; entrance/exit interviews	TABE
Evaluation	SEA conducts evaluation based on: local project reports; site visits; student/staff opinions; and progress toward state goals	Independent evaluator conducts evaluation based on: student/staff opinions and progress toward state goals	Independent evaluator conducts evaluation based on: demographics; student progress; and exit data

Review of Draft Surveys

The final step in the development of the surveys consisted of an internal review by the Office of Policy and Planning and the Office of Vocational and Adult Education of the U.S. Department of Education and an external review by the Office of Management and Budget. Reviewers' comments were incorporated in a final version of the two surveys.

Survey Design

The state and local surveys are presented in Appendix B. Here, the content and design of each survey is described briefly.

State Project Survey

The State Project Survey is designed to collect information relevant to the operation of the AEH program at the state level (see Appendix B). This survey consists of five sections: (1) an overview, containing questions about the objectives of AEH projects, pre-existing programs, the duration of projects, the coordination of services at the state level, and challenges to the implementation and development of state projects; (2) a section on state project administration, designed to elicit information concerning the organization of state projects, administrative staff qualifications, and the institutional arrangements that exist between state projects and local programs; (3) a section on project finance, which deals with supplementary funding sources and budget allocations; (4) a section on staff and curriculum development, including questions pertaining to state-mandated requirements for local staff, state-supported staff development, and state-level curriculum development activities; and (5) a section on monitoring and evaluation, designed to collect information about the monitoring of local programs and the role that states play in evaluating program effectiveness.

Local Program Survey

The Local Program Survey consists of three separate components, or "instruments," designed to collect information at the program, site, and participant levels (see Appendix B). A description of each instrument follows:

- **Local Program Survey: Program Data** — The Program Data instrument is designed to provide an overall description of local programs and to obtain local coordinators' views regarding the most effective means of providing educational services to the homeless. In particular, this instrument elicits information about local program funding, costs, staffing, support services, outreach, and tracking of participants.
- **Local Program Survey: Site Data** — The Site Data instrument is designed to collect information on a site-specific basis pertaining to the location and accessibility of services, instructional approaches, curricula, and staff qualifications. Several items are addressed to local program coordinators, while others are addressed to the principal instructors at each site.
- **Local Program Survey: Client Data** — The Client Data instrument is designed to collect information regarding client characteristics, the services that they receive, and their accomplishments. Data from program records are collected retrospectively for all clients who enrolled in the AEH program during the month of June 1992 and pertain to the three-month period following each client's enrollment.

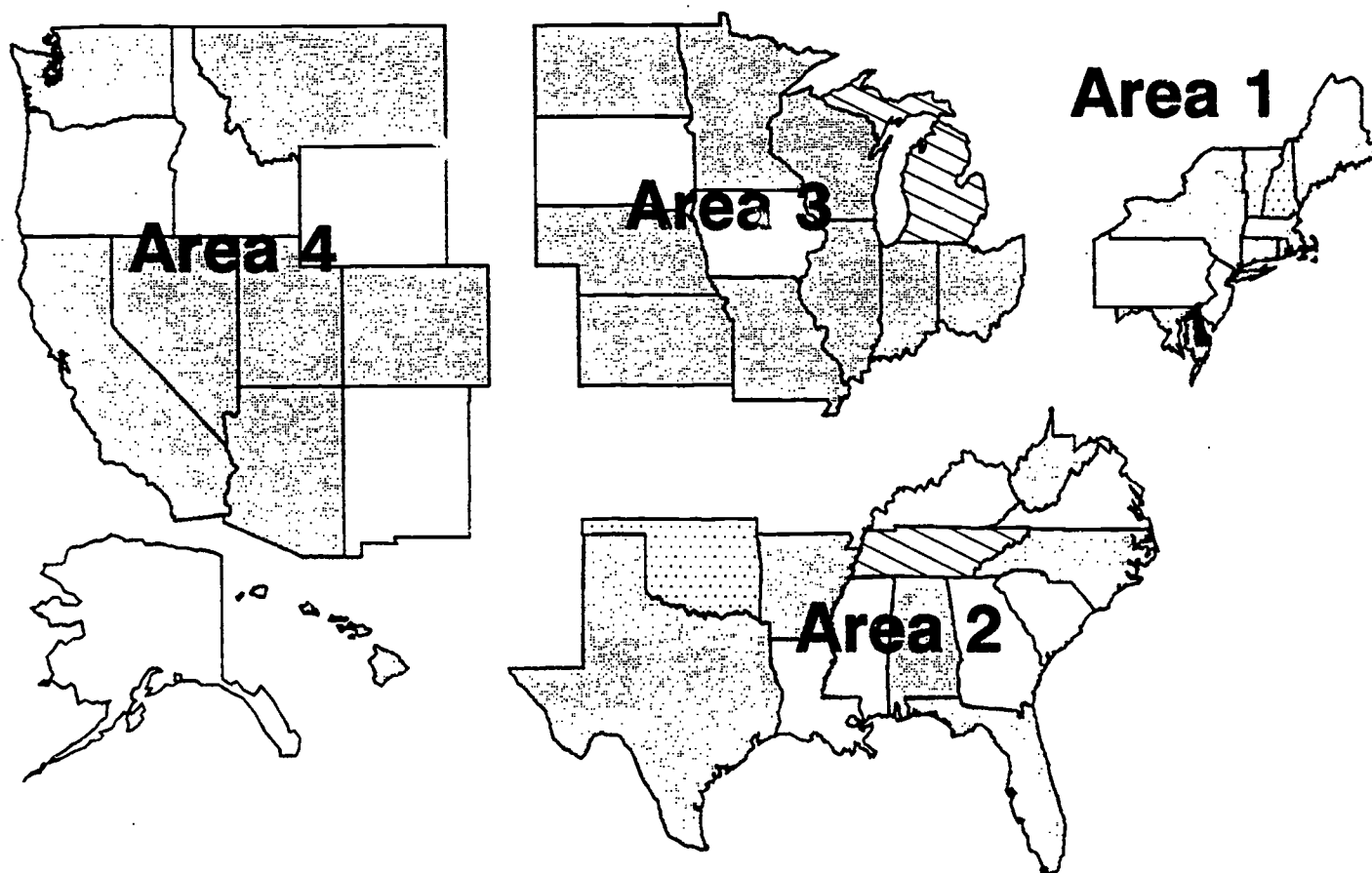
Data Collection






Data were collected in the fall and winter of 1992. In September, state directors were asked to provide information about each of the local programs in their state, including the number of sites served by each program and the number of clients who enrolled in each program in June of that year. Based on this information, survey packages were assembled for each state and mailed in December 1992. State project administrators served as intermediaries in the data collection process, forwarding surveys to local programs and returning completed surveys for processing.

This procedure resulted in an exceptionally high rate of participation. Thirty-two of the 35 states funded in 1992 participated in the State Project Survey, and 31 states participated, to varying degrees, in the Local Program Survey (see Figure II-1). Because Tennessee had ceased

FIGURE II-1

**STATES PARTICIPATING IN STATE PROJECT AND
LOCAL PROGRAM SURVEYS
(By Adult Education Area)**



Level of Participation	
	- States participating in both the State Project and Local Program Surveys
	- States participating only in the Local Program Survey
	- States participating only in the State Project Survey
	- States participating in neither the State Project nor Local Program Surveys
	- States not receiving AEH funds during 1992

operations prior to December of 1992, it was excluded from the study. Four other states — Delaware, Michigan, New Hampshire, and Oklahoma — were near the end of their funding cycles at the time the surveys were mailed. Of these states, Michigan elected not to participate in the study, while the remaining three participated on a limited basis.

Table II-2 presents the return rates for the three instruments comprising the Local Program Survey. Overall, about 93 percent of Program Data instruments, 81 percent of Site Data instruments, and 77 percent of Client Data instruments were returned. Only five states — Alabama, Delaware, Nevada, Texas, and Wisconsin — fell below a 50 percent return rate for any of the three Local Program Survey instruments, and most states achieved return rates that were substantially higher, often in excess of 90 percent.

Literacy Assessment

As a supplement to the state and local surveys, an assessment of the range of literacy skills of AEH participants was conducted in the fall of 1992. New enrollees at randomly selected programs across the United States were tested to obtain baseline data on the proficiencies of AEH clients prior to their participation in the program. Test selection criteria and sampling procedures are described below.

Test Selection

Based on an evaluation of several commercially available tests, the Document Literacy Test, one of the three ETS Tests of Applied Literacy Skills (TALS), was selected for use in the literacy assessment. The TALS instrument was evaluated on the basis of several criteria, including time requirements, test format, the relevant range of achievement, comparability,

TABLE II-2
Local Program Survey Returns

State	Number of Local Programs	Local Program: Program Data Surveys Returned		Number of Sites	Local Program: Site Data Surveys Returned		Number of Clients (June 1992 Enrollees)	Local Program: Client Data Surveys Returned	
		Number	Percent		Number	Percent		Number	Percent
AL	19	18	94.7	46	43	93.5	295	147	49.8
AZ	6	6	100.0	23	22	95.6	109	107	98.2
AR	10	10	100.0	26	24	92.3	157	143	91.0
CA	12	10	83.3	24	13	54.2	347	180	51.9
CO	6	6	100.0	10	10	100.0	54	54	100.0
CT	6	6	100.0	8	8	100.0	28	28	100.0
DE	2	2	100.0	7	7	100.0	19	5	26.3
FL	7	7	100.0	43	26	60.5	220	169	76.8
HI	2	2	100.0	2	2	100.0	0	0	—
IL	4	4	100.0	9	7	77.8	25	20	80.0
IN	8	8	100.0	26	23	88.5	122	122	100.0
KS	7	7	100.0	33	19	57.6	205	158	77.1
ME	7	7	100.0	38	36	94.7	31	31	100.0
MD	8	8	100.0	28	24	85.7	142	138	97.2
MA	11	10	90.9	24	23	95.8	99	99	100.0
MN	4	4	100.0	6	6	100.0	5	5	100.0
MO	8	8	100.0	33	31	93.9	75	74	98.7
MT	4	3	75.0	6	4	66.7	28	23	82.1
NE	2	2	100.0	9	6	66.7	37	37	100.0
NV	3	2	66.7	13	9	69.2	84	35	41.7
NY	24	21	87.5	69	42	60.9	291	184	63.2
NC	14	14	100.0	40	39	97.5	332	321	96.7
ND	4	4	100.0	10	10	100.0	14	14	100.0
OH	12	12	100.0	50	48	96.0	175	144	82.3
RI	5	5	100.0	9	9	100.0	61	61	100.0
TX	18	11	61.1	62	30	48.4	434	284	65.4
UT	3	3	100.0	14	12	85.7	130	121	93.1
VT	7	6	85.7	8	6	75.0	15	14	93.3
WA	8	8	100.0	28	26	92.8	142	136	95.8
WV	13	13	100.0	15	14	93.3	55	55	100.0
WI	4	3	75.0	10	9	90.0	101	34	33.7
TOTAL	248	230	92.7	729	588	80.7	3,832	2,943	76.8

reliability, and other psychometric properties. As shown in Table II-3, the test takes only 40 minutes to complete, employs a constructed response format that may be less threatening to AEH clients, and discriminates well at the higher range of achievement. Equally important, this instrument employs the same underlying framework as several recent assessments of statistically representative samples of adults — e.g., NAEP's Young Adult Survey, the Department of Labor's Workplace Literacy Assessment, and the Department of Education's National Adult Literacy Survey — thus permitting cross-study comparisons.

The Document Literacy Test, a brief information form used to describe each new enrollee, and instructions for administering the test are presented in Appendix C.

TABLE II-3
DESCRIPTION OF THE TALS DOCUMENT LITERACY TEST

Criteria	TALS
Time Requirement	40 minutes
Test Format	Single/constructed response
Appropriateness for AEH Client Population	Items involve actual adult context materials
Relevant Range of Achievement	Adult grades 4-post-secondary achievement
Comparability to Statistically Representative Samples	TALS shares same framework underlying NAEP's Young Adult Survey, the Department of Labor's Workplace Literacy Assessment, and the Department of Education's National Adult Literacy Survey.
Reliability	Alpha = .92 (form A)/.89 (form B)
Other Psychometric Properties	Inter-rater reliability for scoring open-ended responses is .95

Data Source: Kirsch, Jungeblut, and Campbell, 1991

Sampling Procedure

Employing a stratified sampling procedure, a representative sample of thirty local programs was selected for participation in the literacy assessment. Local programs were divided, first, into three equal strata, based on an estimate of the number of participants served each month, then, into four strata, based on the adult education area in which each program is located.¹ Local programs were selected, with probability proportionate to size, from each of the 12 resulting cells to achieve a sample size of 30. Of the 30 programs selected, all but three participated in the assessment (see Figure II-2).

Within each participating program, participants enrolling between October 15 and November 14, 1992 were selected for testing. The resulting sample consisted of 405 new enrollees. Of this number, the Document Literacy Test was administered to 359 individuals (88.6%) — 14 (3.5%) did not take the test because they were judged to be limited English proficient, and 32 (7.9%) were excused for various other reasons.

Interpreting Results

The interpretation that one places on each of the findings presented in this report depends, in part, on the source of data upon which it is based. In this regard, readers should consider two issues: (1) the statistical significance of reported findings and (2) the interpretation of results based on data derived from observations over a limited time-span.

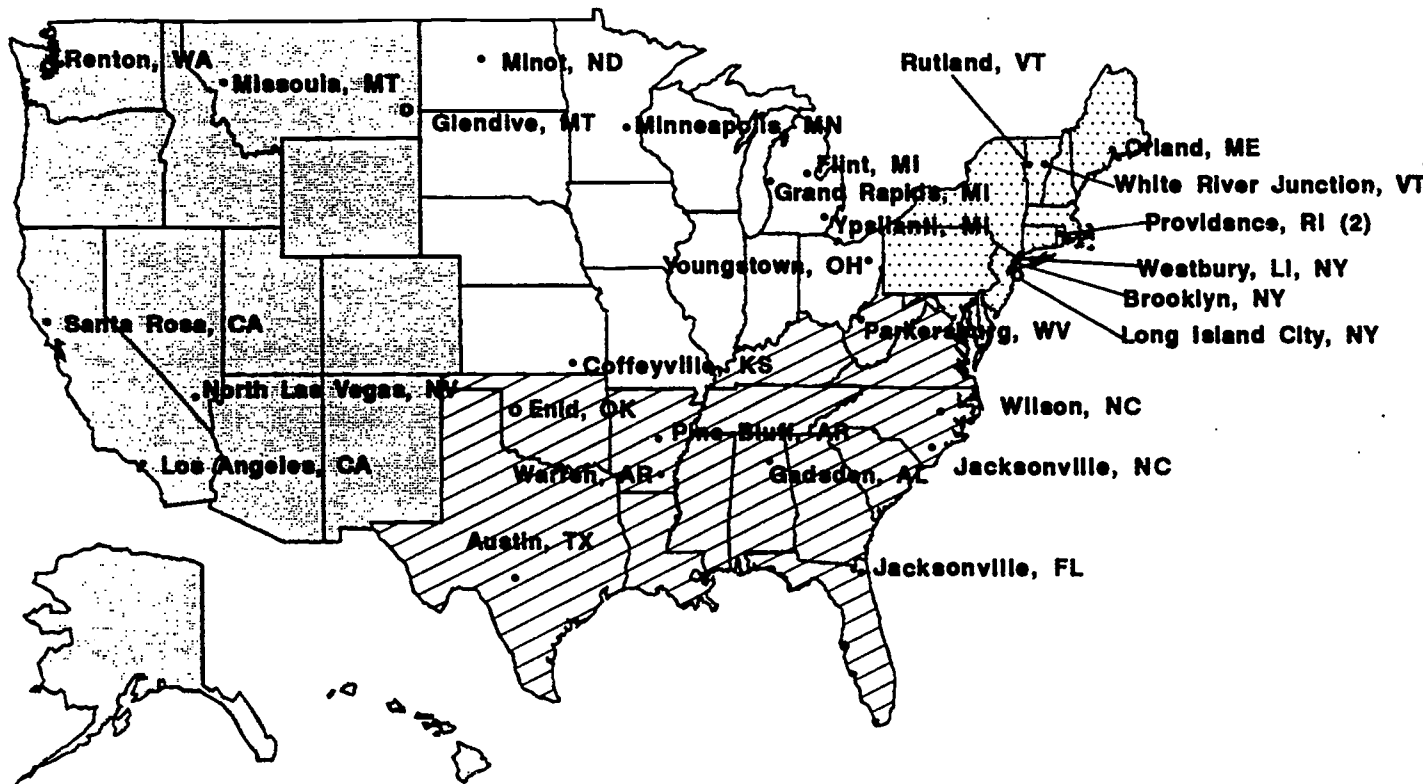
Statistical Significance

With the exception of retrospective client data, the data collected through the state and local surveys are drawn from the universe of AEH projects, programs, and sites, and, therefore, do

¹The number of new enrollees in June 1992 was used as an estimate of the number of participants served each month.

FIGURE II-2

**LOCAL PROGRAMS SELECTED FOR LITERACY ASSESSMENT:
PARTICIPATING AND NON-PARTICIPATING PROGRAMS
(By Adult Education Area)**



Adult Education Area

= Area 1	= Area 3
= Area 2	= Area 4

Sample of Local Programs

- = Participating local programs
- = Non-participating local programs*

*The local program in Long Island City elected not to participate in the Literacy Assessment. The local program in Glendive, MT participated, but completed test reports were lost in the mail. The local program in Enid, OK reported no new enrollees during the one-month test administration period.

not require the application of statistical significance tests. Retrospective client data — collected through the Local Program Survey: Client Data instrument — may be viewed either as the universe of new enrollees in June 1992 or as a representative sample of all enrollees in 1992.² While the former interpretation does not require that findings be subjected to tests of significance, the latter does. However, because the sample of new enrollees is so large — approximately 3,000 cases — nearly any *substantively* significant finding will also be *statistically* significant. Therefore, in reporting results, we have indicated statistical significance levels only in those instances where findings are based on a small subsample of the larger sample of enrollees. Finally, statistical significance levels are reported for all findings based on the literacy assessment component of this study, as these data constitute a representative sample of new enrollees drawn from 30 randomly selected local programs.

Interpreting Program Outcome Data

Findings pertaining to program outcomes are based on data derived from observations for a three-month reporting period (Local Program Survey: Client Data instrument) and, as such, represent conservative estimates. While approximately two-thirds (64.9%) of participants leave the program within three months, any outcomes accruing to the remaining one-third (35.1%) after that period are not reflected in these data. Thus, outcomes reported in this study marginally underestimate the outcomes that would have been observed had we been able to extend the reporting period beyond three months. The reader should bear this in mind in interpreting findings presented in Chapter VII.

² There is no evidence of seasonal bias, nor is the number of new enrollees in June 1992 unusually low or high — the 3,832 enrollees in that month represent approximately one-twelfth of 1992 enrollments.

CHAPTER III

ORGANIZATION AND STRUCTURE OF THE AEH PROGRAM

Overview

Prior to the establishment of the Adult Education for the Homeless (AEH) Program, in 1987, only one state provided educational services for homeless adults through a program administered at the state level. Locally, most programs funded through AEH (55.2%) had either not existed or had not provided educational services specifically targeting the homeless.

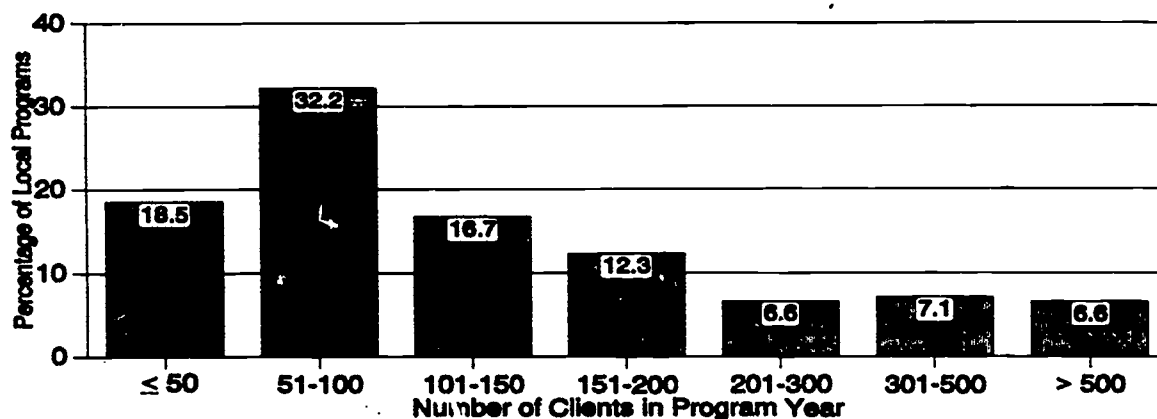
Over the past five years, the AEH program has expanded services significantly. In its first year of operation, the program served only 18,000 homeless adults nationwide. However, by 1992, AEH provided services to nearly 50,000 clients, or approximately 1 in every 10 homeless adults in the United States.¹ These figures are all the more impressive when one considers that AEH appropriations have not kept pace with the rising demand for educational services. Between 1987 and 1992, appropriations increased by only 42 percent, while, during that same period, services nearly tripled!

In 1992, AEH funded projects in 35 states, which, in turn, supported some 282 local programs. On average, each of these programs served about 180 clients. Although a few larger programs — comprising about 7 percent of the total number — provided services to more than 500 individuals, the majority (50.7%) served no more than 100 clients (see Figure III-1).

¹ The number of clients served in 1992 is estimated by extrapolating from the 227 local programs for which data are available to all 282 programs providing services during that year. This computation assumes that the number of participants in the 55 programs for which data are missing served approximately the same number of clients as those for which data are available. (Because Tennessee was funded for only six months, one-half of the estimated number of participants in that state's 11 programs are included in the total.) The actual estimate of the number of clients served in 1992 is 49,665 or about one-tenth of the 500,000 to 600,000 homeless Americans estimated by Burt and Cohen (1989).

FIGURE III-1

Distribution of Number of Clients Served by Local Programs (1992 Program Year)



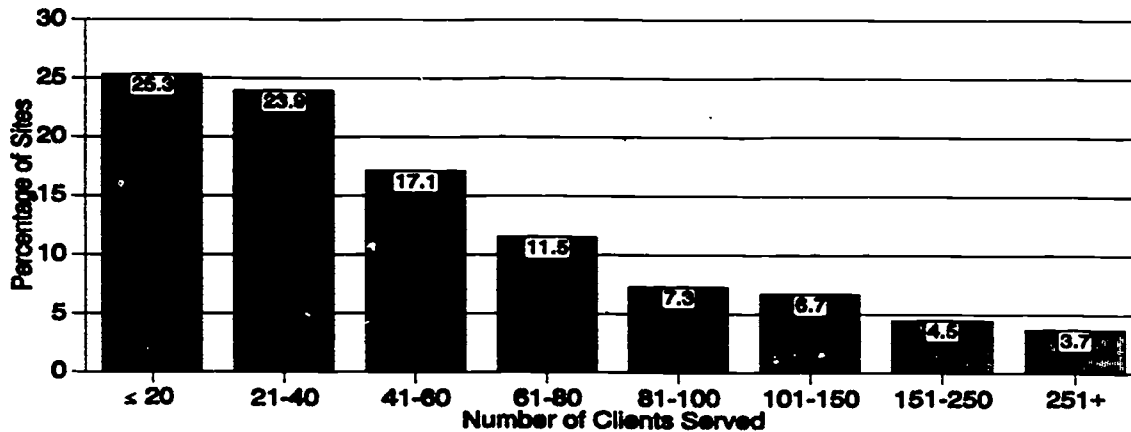
Data Source: Local Program Survey: Program Data (Top Section, page 2).

Number of Cases: 227 valid cases; 3 missing cases.

Each local AEH program administers the delivery of services at one or more sites — e.g., emergency shelters, transitional housing, drug rehabilitation centers, community colleges, churches, libraries, and other locations. In 1992, services were provided at 776 sites, and each site served an average of 70 clients. Although roughly 15 percent of these sites offered services to more than 100 clients, about one in four enrolled 20 or fewer individuals, and about one-half (49.2%) served no more than 40 (see Figure III-2). Thus, while the dimensions of the AEH program are impressive, educational services typically are provided on a small scale.

This chapter examines the organization and structure of the AEH program. First, state project administrative functions are described and the institutional relationships that frame the overall structure of the AEH program are defined. Subsequent sections describe staffing, finance, and evaluation procedures at both the state and local levels. Finally, the principal challenges that state and local administrators have faced in building the AEH program are identified and various approaches to overcoming these obstacles are discussed.

FIGURE III-2
Distribution of Number of Clients Served by Sites
(1992 Program Year)



Data Source: Local Program Survey: Site Data (Top of Survey, p. 2)
 Number of Cases: 490 valid cases; 98 missing cases.

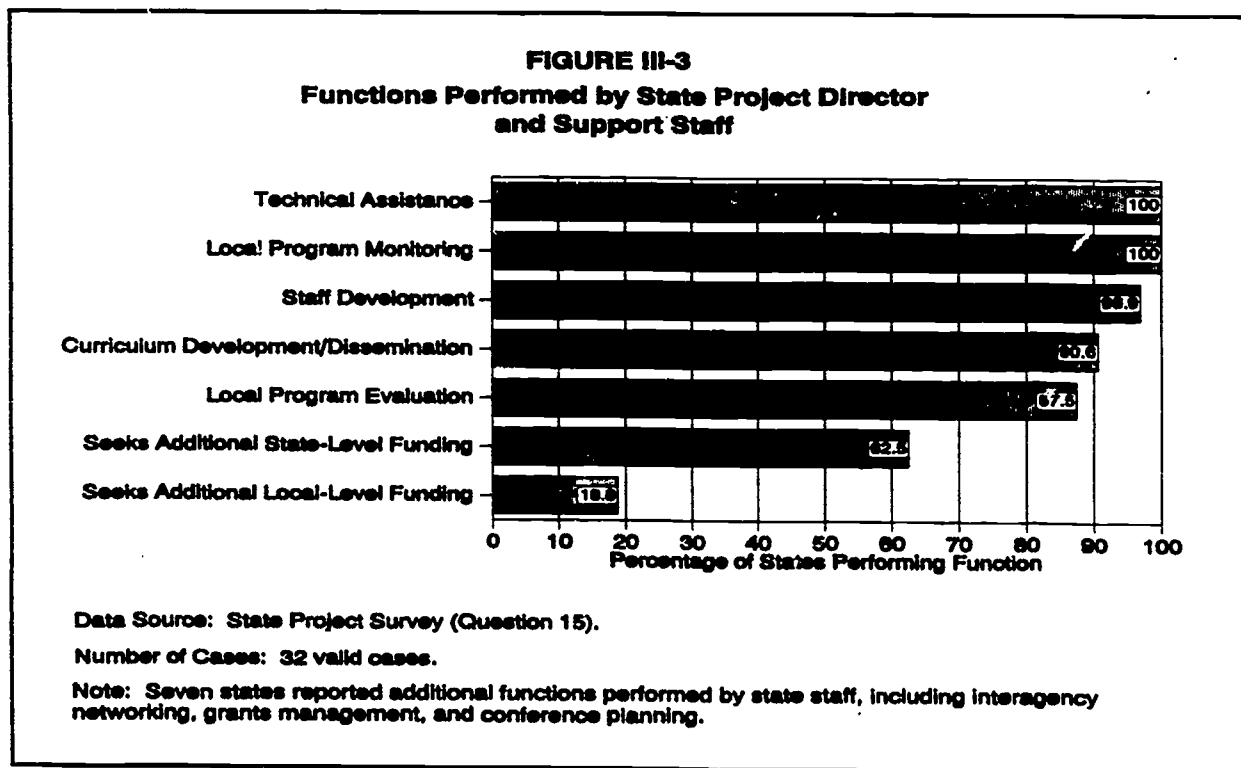
The Structure of the AEH Program

State Projects: Key Functions

Since 1989, the Federal Government has awarded funds to AEH State Projects through a discretionary process designed to provide support to those states with the most competitive delivery systems. State educational agencies compete for funds to enable them to implement, either directly or through contracts/subgrants, programs of "literacy training and basic skills remediation for adult homeless individuals within their State" (*Federal Register*, 1989). Thus, a key function of State Project administrators is to support local programs in their efforts to provide educational services in an effective and efficient manner.

States provide such support in a variety of ways (see Figure III-3). All, or nearly all, states provide technical assistance (100%), monitor the development of local programs (100%), and support staff development at the local level (96.9%). In addition, most states (90.6%) engage

in the development and dissemination of curricula designed to meet the needs of the homeless population. This includes the dissemination of curricula developed in other states (84.4%) and local programs (15.6%), support for curriculum development at the local level (56.3%), and, in some cases, the development of curricula at the state level (31.3%). Most states (87.5%) also conduct local program evaluations, either directly, through an independent evaluator, or by establishing criteria for local-level evaluations. Finally, due to the limited resources of the AEH program, State Project Directors regularly seek additional state-level funding (62.5%) and, in some cases, local-level funding (18.8%). In New York, for example, AEH funds are used as "seed money to generate additional state aid which would not otherwise be available" (New York State Project Survey, 1993).



Coordination of services has proven to be a critical element in the development of successful state projects and, therefore, represents another important function of project administrators. All state projects coordinate with the Adult Education Program (see Figure III-4),

FIGURE III-4
Federal Programs With Which AEH
State Projects Coordinate



Data Source: State Project Survey (Question 5).

Number of Cases: 32 valid cases.

Note: Seven states indicated coordination with other Federal programs including Library Literacy, Chapter 1, Drugs and Mental Health Programming, SLIAG, Community Action, Workplace Literacy, Correctional Education, and Carl Perkins.

and a majority coordinate with Homeless Children and Youth (68.8%) and JTPA (53.1%).

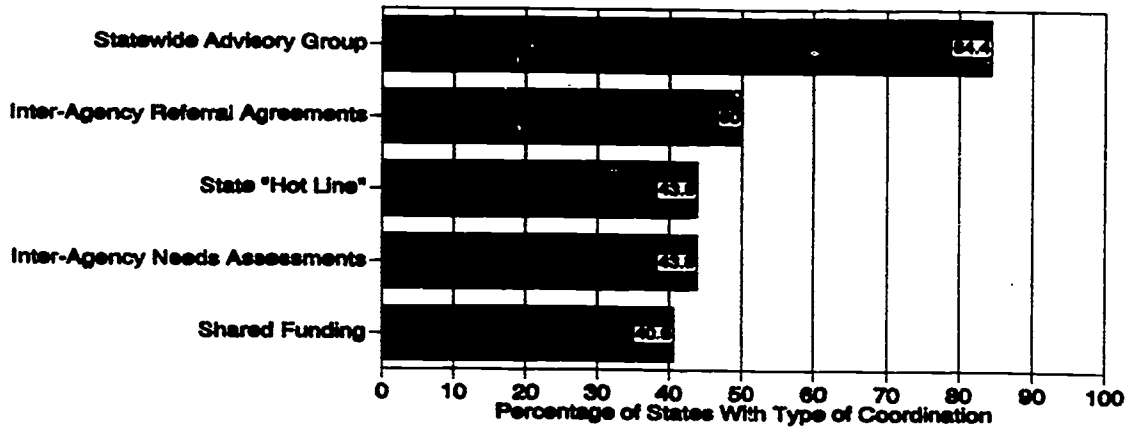
Somewhat fewer states coordinate with JOBS, Even Start, and Head Start (46.9%, 34.4%, and 25%, respectively).

The most common means of coordinating services — invoked by four in five states — is the formation of statewide advisory groups (see Figure III-5). In Rhode Island, for example, the advocacy efforts of the AEH State Project Director resulted in the creation of a task force to formulate policy initiatives. Due largely to the State Director's involvement, "literacy services now rank high on the list of priorities" (Rhode Island State Project Survey, 1993). Interagency referral agreements, state hot lines, interagency needs assessments, and shared funding represent additional means of coordinating services at the state level.

Administrative Relationships

In a majority of states (53.1%), both educational and non-educational agencies receive funds to deliver or to coordinate the delivery of educational services at the local level. In the

**FIGURE III-5
Coordination of Services for the Homeless
at the State Level**



Data Source: State Project Survey (Question 4).

Number of Cases: 32 valid cases.

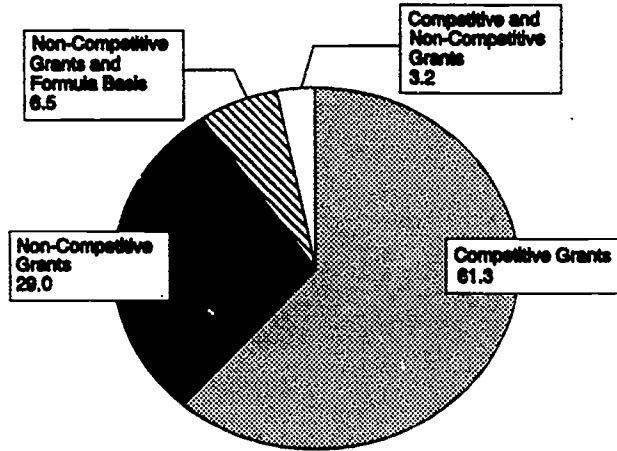
Note: One state reported that all coordination takes place at the local level.

remaining states (46.9%), educational agencies perform this function exclusively. As shown in Figure III-6, most states (61.3%) distribute funds through a competitive process. However, in nearly one-third of the states (29.0%), local programs receive funds through non-competitive grants. Other states distribute funds through a combination of competitive and non-competitive grants (3.2%) or on a formula basis combined with non-competitive grants (6.5%).

In some cases, sub-grantees act as the principal service provider at the local level, while, in other instances, sub-grantees serve a purely administrative function, coordinating the services of one or more providers (see Figure III-7). Most commonly, sites are serviced by local education agencies (46.5%). Other key service providers include community colleges (20.4%), community organizations (11.2%), shelters or transitional housing (11.1%), and volunteer literacy organizations (4.3%).

FIGURE III-6

Process by Which Local Programs Receive AEH Funds

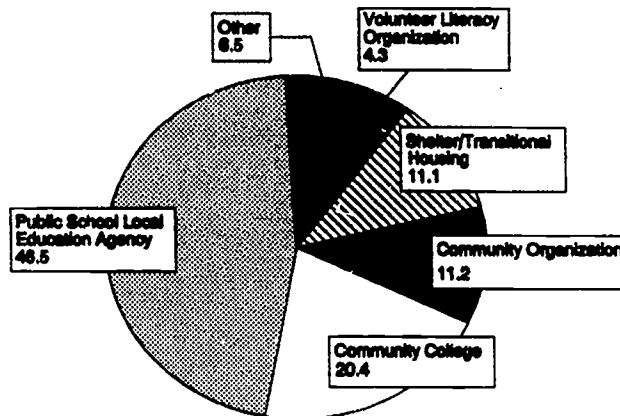


Data Source: State Project Survey (Question 18).

Number of Cases: 31 valid cases; 1 missing case.

FIGURE III-7

Distribution of Principal Educational Service Providers at Sites



Data Source: Local Program Survey: Site Data (Question 29).

Number of Cases: 579 valid cases; 9 missing cases.

Note: Other educational service providers include church-affiliated organizations, voo-tech facilities, libraries, the Bureau of Indian Affairs, and JTPA.

Administrative and Program Staff

State Project Director and Support Staff

While some AEH projects are administered by the State Project Director alone, in other cases, other professional and/or support staff assist in administrative duties. On average, projects employ 1.7 professionals, who commit a total of about 21 hours per week to project administration, and 1.3 support staff, who devote about 10 hours per week (full/part time) to support tasks.

In a majority of states (62.5%), the role of Project Director is assumed by an individual serving in an existing position (e.g., State Program Specialist). In other cases, however, a new position is created and the Project Director is hired to administer the project on a full-time basis. Often, those filling these positions have more relevant experience than do their counterparts who "wear more than one hat." This is supported by the data presented in Table III-1, which compares the number of years of experience of project administrators in newly funded and existing positions. Those in newly funded positions have more experience with the homeless, more adult education experience, and more experience administering educational programs than do those in existing positions. However, both groups bring impressive qualifications to the job.

TABLE III-1
Qualifications of State AEH Project Directors

Type of Experience	Average Number of Years of Experience		
	Newly Funded Position	Existing Position	All
Experience With Homeless	5.5	3.5	4.5
Adult Education Experience	19.5	13.9	16.2
Experience Managing Educational Programs	14.8	13.1	13.6

Data Source: State Project Survey (Questions 11-13).

Number of Cases: 32 valid cases.

Local Program Staff

Local Coordinators

Local program coordinators are typically involved in every aspect of the delivery of services at the local level. Indeed, in many smaller programs, the local coordinator doubles as a teacher or counselor. In addition to securing funding, local coordinators hire and evaluate staff, establish relationships with service delivery sites, and work to establish cooperative relationships with support service agencies. These individuals often are motivated by the highest humanitarian ideals. The testimony of one local coordinator in Florida captures the feelings expressed by many:

This is more than a job. It is really a "calling." Although we give our clients instruction in literacy and basic skills, we also try to give them the hope and will to persevere . . . our classrooms are filled with hope.

Instructional Staff and Counselors

The teachers, instructional aides, and counselors who staff the nearly 300 local AEH programs throughout the United States bring an equally high degree of commitment to their jobs. The fact that many are volunteers — 11.9 percent of teachers, 69.9 percent of aides, and 13.8 percent of counselors — is indicative of this. In a very real sense, local program staff constitute the fundamental link between the AEH program and the homeless men and women it serves.

Due to the important role that local staff play in the delivery of services, careful attention is given to their selection. The single most important criterion in selecting new staff members, cited by three in five local coordinators, is the ability to relate to homeless clients. Staff screening procedures reflect the importance of this dimension. In nearly one-third of local programs (31.1%), prospective instructional staff members are observed in a classroom setting with homeless clients before they are hired or accepted as volunteers, and, in about 1 in 10 programs (10.7%), homeless clients conduct interviews with prospective staff.

Most local programs (91.7%) provide preservice and/or inservice training for both instructional staff and counselors.² In these programs, staff receive an average of 12 hours of preservice training and roughly 24 hours of inservice training annually. Programs that provide preservice or inservice training generally emphasize student placement/assessment skills (84.5%), basic skills instruction (81.2%), orientation to the homeless population (81.2%), counseling/referral information (73.9%), and adult learning theory (70%). More than a third (36.2%) of these local programs also offer instruction in teaching English as a second language.

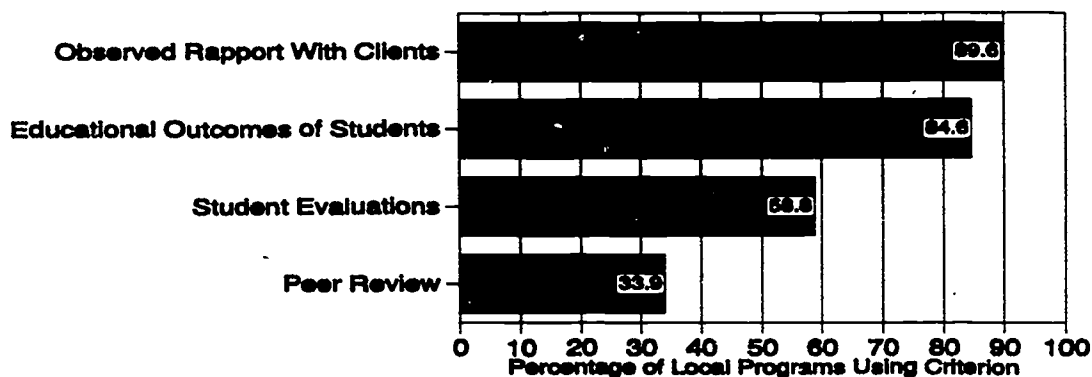
In nearly all programs (90.3%), local coordinators conduct regular site visits — on average, 14 visits per year — to monitor the performance of instructional staff and counselors. As shown in Figure III-8, staff effectiveness is most often evaluated in terms of the observed rapport between staff and clients (89.6% of programs), educational outcomes of clients (84.6%), and student evaluations (58.8%). In addition, a substantial percentage of local programs (33.9%) employ a peer review process. In some states, such as Maine, peer review is encouraged statewide. Through the adoption of this process, program staff have “learned to identify challenges and highlight successful practices” (Maine State Project Survey, 1993).

Given the careful attention that is focused on the selection, training, and evaluation of local staff, it is not surprising that average qualifications are high (see Table III-2). Nearly all teachers and counselors are college graduates (94.8% and 87.7%, respectively), as are a majority of instructional aides (52.9%). About three-fifths of teachers (59.6%) are certified in elementary/secondary education, about one-third (31.9%) are certified in adult education, and more than one-third (36.7%) of counselors hold state certification. Finally, all staff categories have considerable

² Nearly all states (97%) promote staff development at the local level. Staff development activities include general adult education training (90%), adult education training for homeless adults (80%), as well as attendance at national conferences (76.7%) and state-sponsored conferences (63.3%). In many states (43.3%), support for external consultants is also provided.

FIGURE III-8

Criteria Used to Evaluate the Effectiveness of Instructional Staff and Counselors at Local Program Level



Data Source: Local Program Survey: Program Data (Question 23)

Number of Cases: 221 valid cases; 4 missing cases; 5 cases not conducting evaluations excluded.

Note: Approximately 22 percent of local programs use other criteria to evaluate the effectiveness of instructional staff and counselors, including meeting goals and deadlines, supervisors' evaluations, host site coordinators' evaluations, and observation of the instructional process.

experience working with the homeless — an average of 4.3 years, 2.7 years, and 1.6 years for counselors, teachers, and aides, respectively.

State Project and Local Program Finance

State Project Finance

Funding

In 1992, state projects received some \$9.8 million in AEH funds³ to support educational programs for homeless adults at the local level. Grants ranged in size from \$101,239 to \$600,000, averaging approximately \$285,176.

³ This figure includes \$196,397 awarded to Tennessee. However, Tennessee ceased operation after only six months.

TABLE III-2
Local Program Staff Qualifications

Staff Characteristics	Teachers	Teachers Aides/Tutors	Counselors
Average Number of Years Post-Secondary Education	4.9 (616)	2.7 (308)	4.3 (152)
Percent With College Degree	94.8 (713)	52.9 (344)	87.7 (195)
Percent With Elementary/Secondary Certification	59.6 (673)	13.0 (324)	NA
Percent State-Certified Counselor	NA	NA	36.7 (185)
Percent With Adult Education Certification	31.9 (649)	5.1 (315)	11.5 (165)
Average Number of Years of Adult Education Experience	5.7 (685)	2.2 (344)	NA
Average Number of Years of Adult Education Counseling Experience	NA	NA	5.7 (182)
Average Number of Years Experience With Homeless	2.7 (691)	1.6 (350)	4.3 (190)

Data Source: Local Program Survey: Program Data (Question 15).

Number of Cases: Data are derived from 230 Programs. Number of cases for each cell are presented in parentheses.

In some cases, states supplemented Federal grant money with funds from other sources.

Table III-3 displays the percentage of state projects that received non-AEH funding and, for those receiving such funding, the average amount of support received. About 1 in 3 AEH projects (34.4%) received supplementary Adult Education Act funds (averaging \$208,634), and another 1 in 10 projects (9.4%) received supplementary state funds (averaging \$179,200). Other sources of non-AEH funding included JTPA, JOBS, and Even Start.

TABLE III-3
Percentage of State Projects Receiving Non-AEH Funding
and Average Amount of Funding

Source of Non-AEH Funding	Percentage of States Receiving Funding	Average Amount of Funding ¹
AEA	34.4	208,634
JTPA	9.4	12,667
JOBS	3.1	25,000
Even Start	3.1	25,000
State Funding	9.4	179,200

¹ Average amount of funding for State Projects receiving funds from the identified source.

Data Source: State Project Survey (Question 21).

Number of Cases: 32 valid cases.

Expenditures

Table III-4 presents the percentage breakdown of total project expenditures for 1992. State-level administrative costs accounted for some 12.9 percent of total expenditures — 7.9 percent for administrative staff salaries, 2.6 percent for administrative indirect costs, and less than 1 percent each for monitoring travel, evaluation, and miscellaneous administrative costs. Program costs accounted for the bulk of state-level expenditures (86.9%), nearly all of which was passed on to local programs (83.8%). One percent or less was allocated to staff development, program materials and supplies, curriculum/assessment development costs, technical assistance, and other state program costs.

TABLE III-4
State Project Expenditures
(1992 Project Year)

BUDGET CATEGORY	PERCENT OF TOTAL COSTS
Administrative Costs	12.9
Administrative Staff Salaries	7.9
Administrative Indirect Costs	2.6
Monitoring Travel Expenses	0.9
Evaluation Costs	0.8
Other Administrative Costs	0.7
Program Costs	86.9
Funding Passed on to Local Programs	83.8
Staff Development	1.0
Program Materials and Supplies	0.7
Curriculum/Assessment Development Costs	0.6
Technical Assistance	0.6
Other Program Costs	0.2
TOTAL COSTS	99.8

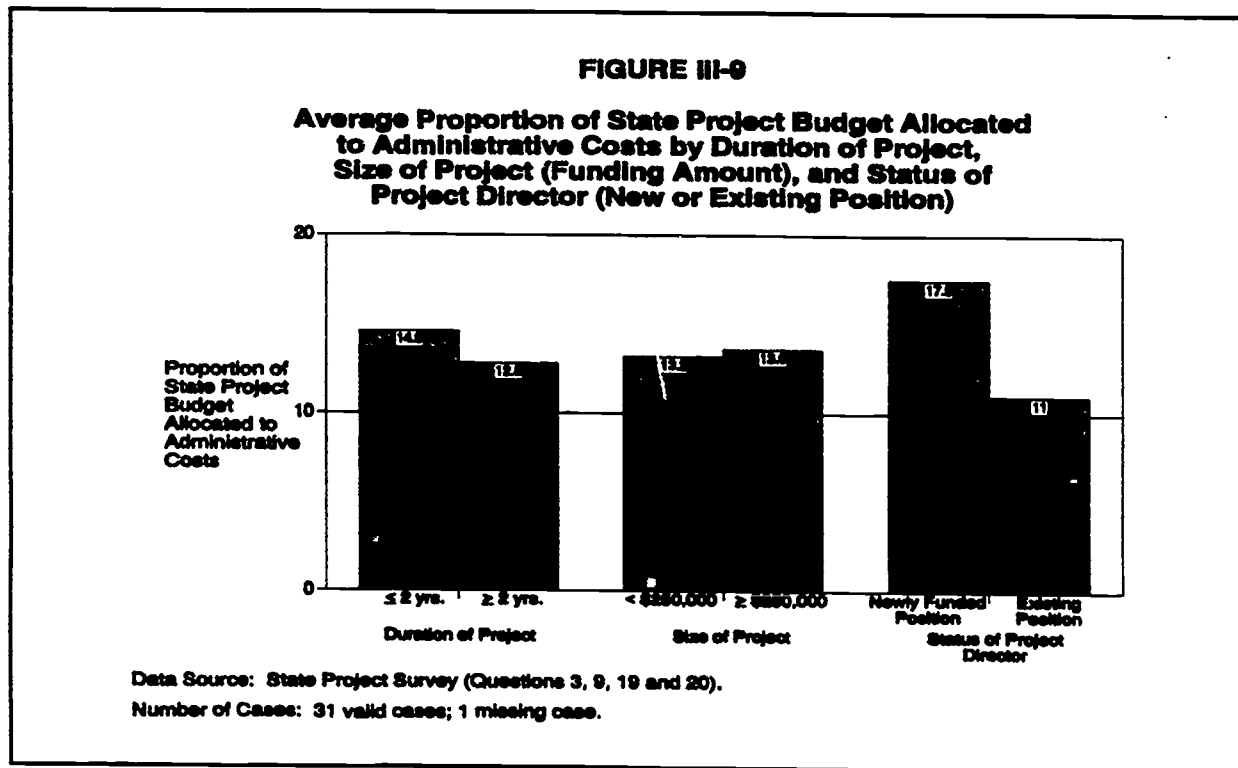
Data Source: State Project Survey (Question 20).

Number of Cases: 32 valid cases.

Note: Total costs do not sum to 100% due to rounding error.

States varied markedly in terms of the proportion of total budget allocated to state administrative costs, ranging from a low of 1.7 percent to a high of 31.5 percent. A variety of factors may account for the observed differences in administrative costs: (1) since all states share certain fixed costs, smaller projects may incur *disproportionately* higher administrative costs than larger projects; (2) due to costs associated with implementation, projects in existence for shorter

periods of time may require higher administrative expenditures than those in existence for longer periods; and (3) projects headed by newly funded (full-time) directors may incur greater administrative costs — due to differences in compensation — than projects headed by directors occupying existing positions. These factors are investigated in Figure III-9. The data most strongly support the latter of the three explanations suggested above. Projects headed by newly funded administrators incur administrative costs representing almost 18 percent of total budget, on average, while projects run by administrators serving in existing positions incur administrative costs averaging only 11 percent of total expenditures. Program size is unrelated to administrative costs differences, and duration of program bears only a small relationship, albeit in the expected direction.



Local Program Finance

Funding

In 1992, local AEH programs received state grants ranging in size from \$300 to \$300,000 (in one instance) — averaging some \$31,327 — in support of educational programs for the homeless at the local level. In addition, approximately 44 percent of local programs received supplementary funds from non-AEH sources, averaging some \$30,069. Many programs also benefited from in-kind support, especially in the form of volunteer services and donations of space and materials.

Expenditures

Table III-5 displays the percentage breakdown of local program expenditures for 1992. Administrative costs accounted for some 17.9 percent of total expenditures at the local level — 14.1 percent for administrative staff salaries, 1.6 percent for local indirect costs, and about 2 percent for all other administrative costs combined. Program costs accounted for approximately 82 percent of local expenditures, consisting primarily of instructional staff salaries (65.6%) and materials and supplies (6.9%). Expenditures for child care, transportation, and staff development each accounted for less than 2 percent, and expenditures for the rental of instructional space, technical assistance, and curriculum/assessment development accounted for less than 1 percent each. An additional 2.8 percent was allocated to miscellaneous program costs.

In most cases (58.7%), administrative costs represented less than 10 percent of local program expenditures. However, in about 1 in 10 programs (11.6%), administrative costs accounted for more than one-half of total expenditures. Typically, in these programs, instructional staff salaries were paid by local education agencies, and AEH funds were used exclusively to compensate local coordinators.

TABLE III-5
Allocation of AEH Program Funds
(1992 Program Year)

BUDGET CATEGORY	PERCENT OF TOTAL COSTS
Administrative Costs	17.9
Administrative Staff Salaries	14.1
Local Indirect Costs	1.6
Monitoring Travel Expenses	0.5
Administrative Materials and Supplies	0.4
Rental Cost of Administrative Office	0.2
Evaluation Costs	0.0
Other Administrative Costs	1.0
Program Costs	82.0
Instructional Staff Salaries	65.6
Instructional Materials and Supplies	6.9
Child Care	1.9
Transportation	1.6
Staff Development	1.6
Rental Cost of Instructional Space	0.7
Technical Assistance	0.5
Curriculum/Assessment Development Costs	0.4
Other Program Costs	2.8
TOTAL COSTS	99.9

Data Source: Local Program Survey: Program Data (Question 13).

Number of Cases: 225 valid cases; 5 missing cases.

Note: Total costs do not sum to 100% due to rounding error.

Monitoring and Evaluation

All states participating in the AEH program monitor the performance of sub-grantees within their state on a regular basis. Site visits are conducted, on average, two to three times per year, and local program reports are reviewed annually. In addition to regular monitoring, all states conduct annual program evaluations (see Figure III-10).⁴ While many states subcontract this task to an independent evaluator (40.6%), about one-third (34.4%) conduct evaluations directly. Other states establish criteria for evaluations that are conducted at the local level (9.4%) or employ some combination of direct and local-level evaluations (12.5%). In Indiana, for example, evaluations are conducted by the states, but “within the context of *local objectives*” (Indiana State Project Survey, 1992).

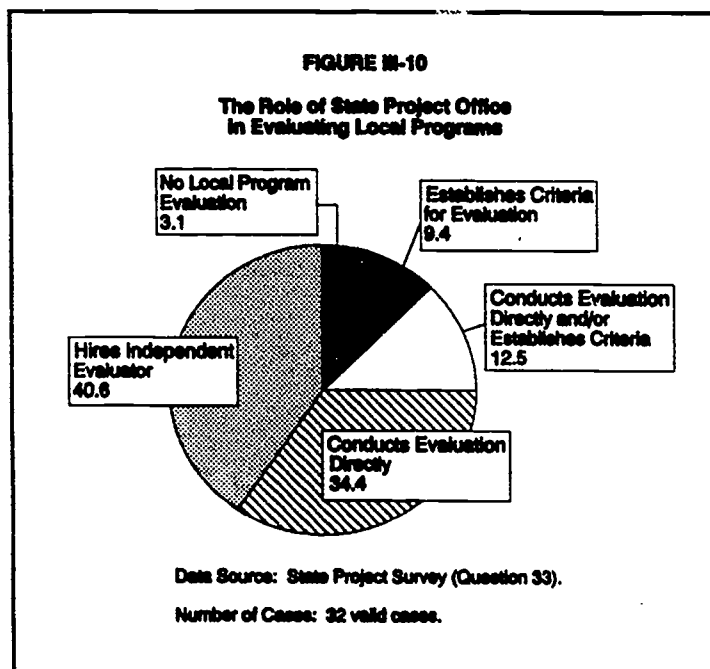
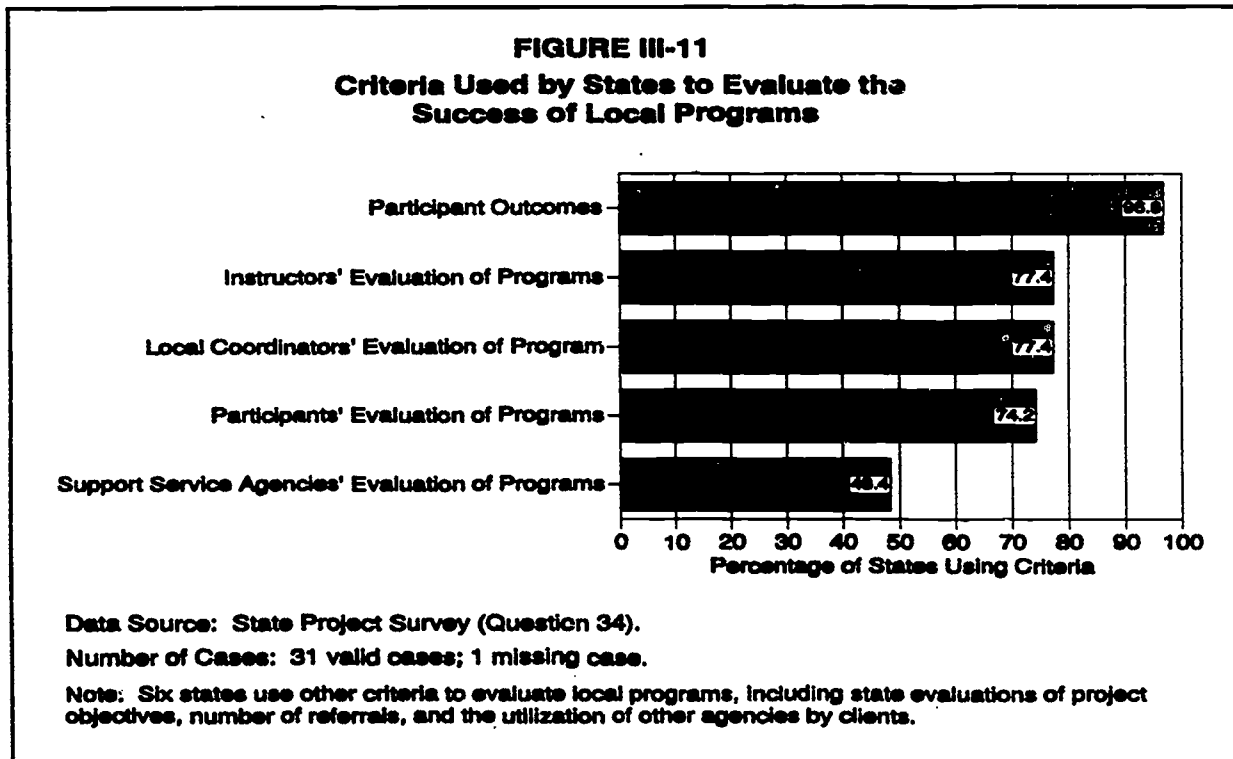


Figure III-11 displays the various criteria employed by states to evaluate the success of local programs. By a significant margin, participant outcomes represent the leading measure of program effectiveness adopted by state evaluators (96.8%). In addition, about three in four

⁴ Vermont is currently in the process of implementing local program evaluation procedures.

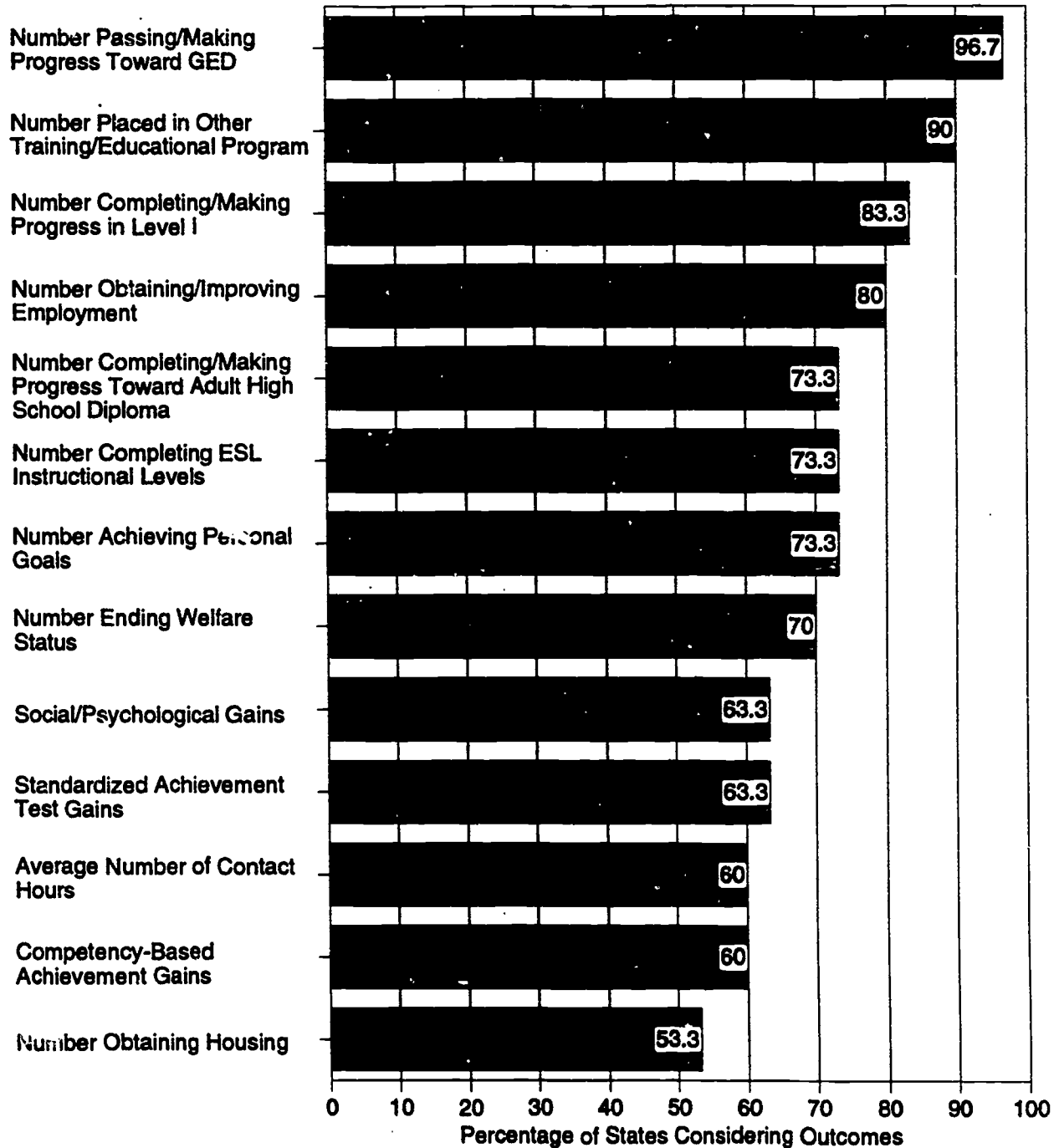
examine the evaluations of instructors, local coordinators, and participants (77.4%, 77.4%, and 74.2%, respectively) and about one-half (48.4%) consider the evaluations of support service agencies.



Participant outcomes used to evaluate the effectiveness of local programs are displayed in Figure III-12. The number of program participants passing or making progress toward the GED is employed as a measure of success in all but one state. Other participant outcomes commonly used in evaluating program effectiveness include the number of participants placed in other training/educational programs (90%), the number completing or making progress in Level I (83.3%), and the number obtaining or improving employment (80%). Those participant outcomes that are *least* commonly used in assessing program effectiveness include social/psychological gains (63.3%), standardized achievement gains (63.3%), average number of contact hours (60%), competency-based achievement gains (60%), and number of participants obtaining housing (53.3%).

FIGURE III-12

Participant Outcomes Considered in the Evaluation of Local Programs



Data Source: State Project Survey (Question 35)

Number of Cases: 30 valid cases; 1 missing case; 1 case conducting no local program evaluations excluded.

Note: Five states consider other participant outcomes in evaluating local programs, including clients' ability to demonstrate improved thinking and communication skills, citizenship activities, and the utilization of other agencies.

Challenges to Development and Implementation

State Level

State and local administrators face a variety of challenges in building successful programs. Figure III-13 presents several of the principal challenges encountered at the state level, for all projects combined and, separately, for newer and older projects. Uncertainty regarding Federal funding ranks first among the concerns of state project administrators. Nearly 9 in 10 (87.1%) cited this as one of the three most important challenges that they face. A recent shift from one- to three-year funding cycles should alleviate administrators' concerns in this area substantially.

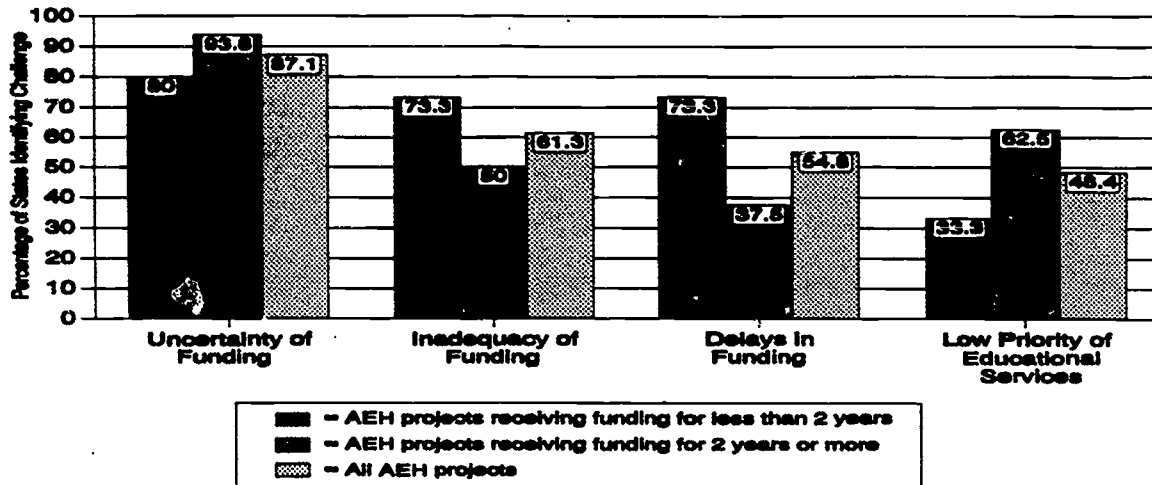
Inadequacy of funding and delays in funding were also cited as major concerns at the state level (61.3% and 54.8%, respectively).⁵ In this regard, the Director of New York's AEH project was emphatic, reporting a "severe lack of adequate funding" in his state. Funding deficiencies in New York and many other states have been at least partially overcome "by funding comprehensive educational centers that blend McKinney funds with other Federal, state, and local resources" (New York State Project Survey, 1992).

The low priority of educational services among agencies working with the homeless was a concern of nearly one-half of project administrators (48.4%), especially those administering projects in existence for more than two years (62.5%). In New Hampshire, the relatively low priority of education in some shelters was effectively addressed "by patiently and continually negotiating for educational time for shelter residents" (New Hampshire State Project Survey, 1992).

⁵ In the earliest stages of program development, a stable infusion of funds is especially critical. Consequently, administrators of newer projects — those in existence for less than two years — were particularly concerned about the inadequacy of and delays in Federal funding (73.3% in each case).

FIGURE III-13

Perceived Challenges to the Development and Implementation of AEH State Projects by Duration of Project (Three Most Important Challenges Cited)



Data Source: State Project Survey (Question 6)

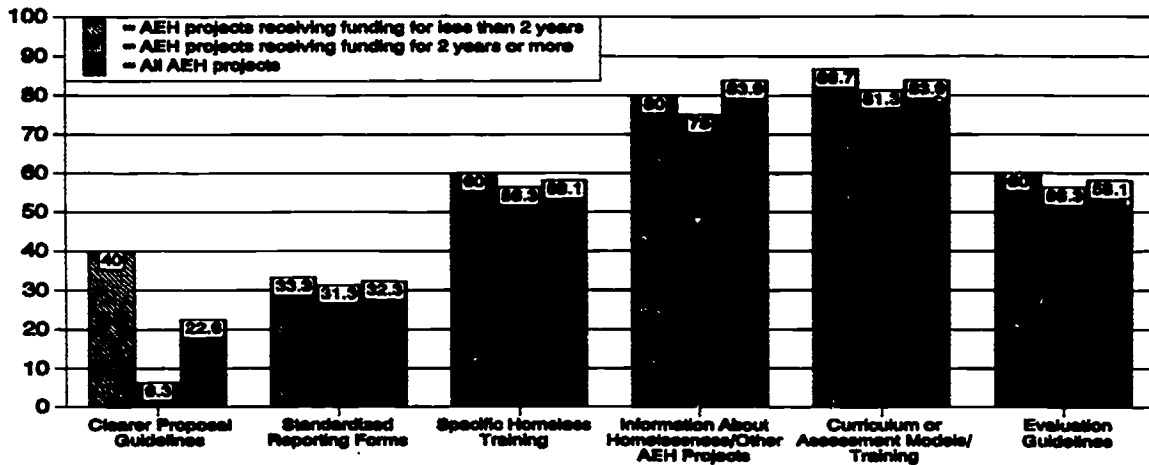
Number of Cases: 31 valid cases and 1 missing case.

Note: Eight states cited other challenges to the development and implementation of AEH projects, including lack of support from state agencies, lack of local program applicants, and lack of public awareness of the homeless problem.

Project administrators expressed a desire for increased technical assistance from the U.S. Department of Education in several areas (see Figure III-14). Chief among these was the desire for more information about other AEH projects and, especially, models of curriculum and assessment (expressed by 83.9% of project administrators). Given that allocations for curriculum and assessment development comprise just one-half of one percent (0.6%) of total project expenditures, the need for assistance in this area would seem to be especially great. Three in five project administrators (58.1%) also expressed a desire for evaluation guidelines and for specific training in providing educational services to homeless clients. Finally, several cited the need for standardized reporting forms (32.3%) and clearer proposal guidelines (22.6%). Not surprisingly, administrators of newer projects — with less experience in traversing what one called “the bureaucratic maze” — were more likely to express a desire for the latter (40%).

FIGURE III-14

Type of Technical Assistance Requested of U.S. Department of Education



Data Source: State Project Survey (Question 17).

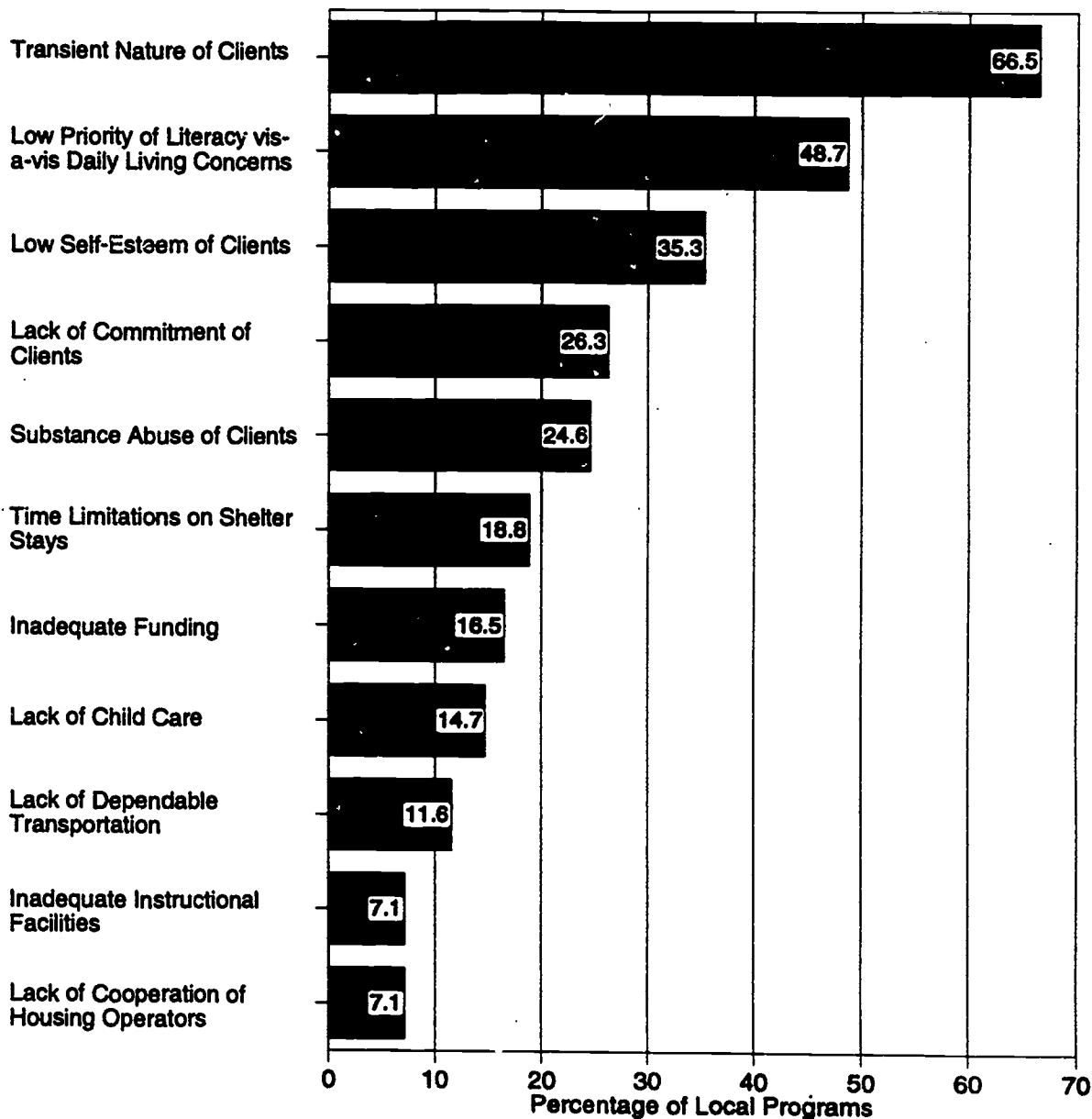
Number of Cases: 31 valid cases; 1 missing case.

Note: Four states suggested additional areas of technical assistance which could be provided by the Federal government. These included: (1) more frequent communication and training based on coordinators' needs; (2) dissemination of information on effective practice; (3) curriculum designs for this population; and (4) clarity in Federal reporting requirements.

Local Program Level

Local program administrators face a somewhat different set of challenges (see Figure III-15). Nearly two-thirds (66.5%) cited the transient nature of homeless clients as one of the three greatest obstacles to program development and implementation. As one local coordinator observed, "it is difficult to retain students when the shelter population changes daily" (Bridgeport, Connecticut Local Program Survey, 1992). In North Carolina, program administrators addressed this problem by introducing "instructor-student learning contracts" for each class session. This has had the effect of increasing the focus on students' specific needs at each class they attend. A program in Alabama has dealt with the issue of client transience in an equally innovative manner. There, individualized self-help packets have been developed so that clients have "major resources at their fingertips," even if they should drop out early (Anniston, Alabama Local Program Survey, 1992).

FIGURE III-15
Perceived Challenges to the Development and Implementation
of AEH Local Programs
(Three Most Important Challenges Cited)



Data Source: Local Program Survey: Program Data (Question 3).

Number of Cases: 224 valid cases; 1 missing; 5 cases citing no major challenges to program implementation or development excluded.

Note: Approximately 18 percent of local programs cited other challenges to the development and implementation of AEH local programs, including lack of cooperation of support service providers, lack of appropriate curricula, lack of qualified instructors, Federal-level funding requirements, and state-level funding/program requirements.

Another major concern at the local level — expressed by nearly one-half (48.7%) of local coordinators — is the low priority of literacy in the lives of homeless clients. The local coordinators of a West Virginia program expressed her frustration in this way: “The people I work with generally see just one day at a time . . . the rewards and encouragement I can give just aren’t enough” (Parkersburg, West Virginia Local Program Survey, 1992). A program in Jefferson City, Missouri reported some success in addressing this problem by beginning each class session with training in life skills — which clients find especially relevant — and subsequently progressing to more specific instruction in literacy and basic skills.

Other major obstacles cited by local administrators include low self-esteem among clients (35.3%), lack of commitment of clients (26.3%), and substance abuse (24.6%). Somewhat fewer cited such concerns as shelter time limitations (18.8%), inadequate funding (16.5%), lack of child care (14.7%), and transportation deficiencies (11.6%), and fewer still complained of inadequate instructional facilities (7.1%) or the uncooperative housing operators. Thus, it seems clear that the most critical challenges at the local level are those relating to the specific nature of homeless clients and the desperate circumstances in which they find themselves.

CHAPTER IV

ACCESSIBILITY OF SERVICES

Overview

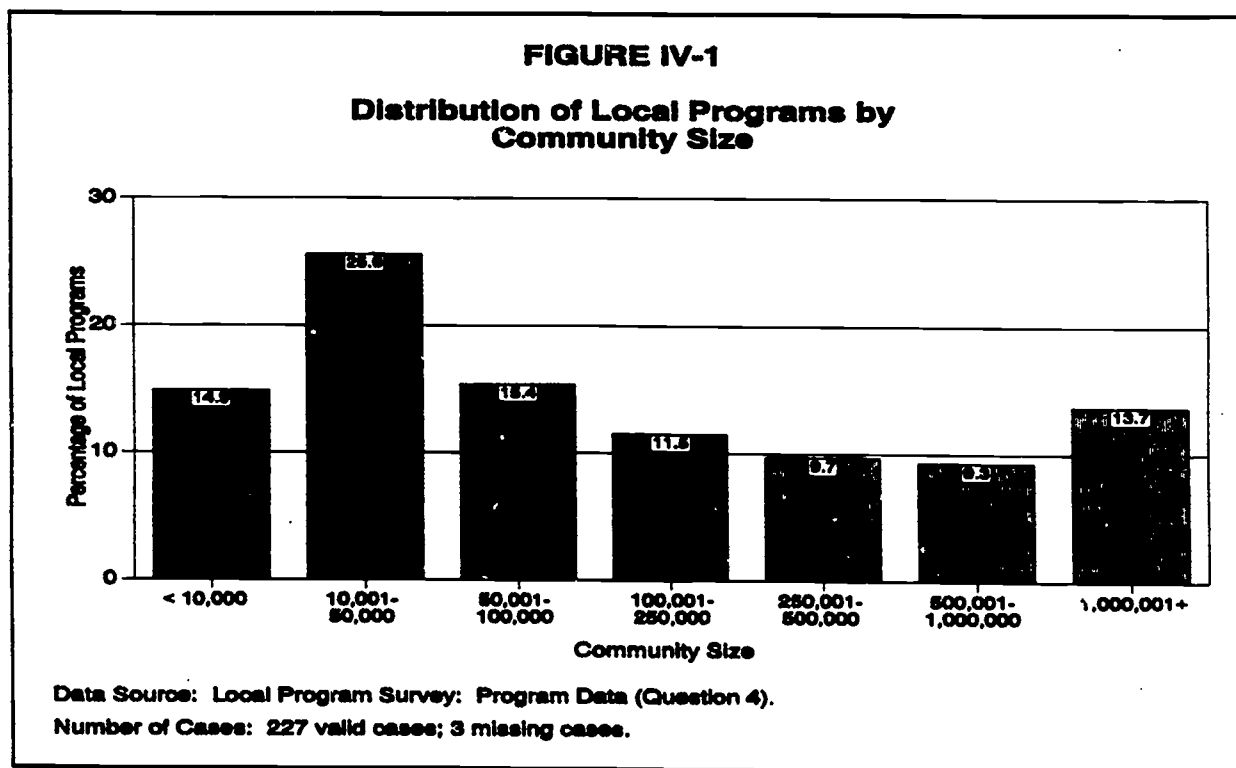
The effectiveness of any educational program is, to a large degree, a function of its ability to reach the population that it is designed to serve. However, in the case of programs serving the homeless, "accessibility" implies more than simply providing services at delivery sites that are optimally located. If, due to a sense of personal failure and diminished self-worth, clients are reluctant to avail themselves of services, even the most ideally located programs may fail to attract participants. Under these circumstances, a pro-active outreach effort, combined with incentives for participation, may be required to reach potential clients. In some cases, it may even be necessary to link the provision of some other essential service (e.g., housing) to program participation, making one contingent upon the other. Homelessness often creates additional barriers that can severely limit, or even preclude, program participation. Pressing personal needs — for health care, counseling, transportation, child care, etc. — must generally be met before educational services can be effectively addressed. The extent to which programs meet these needs represents still another important dimension of accessibility.

The present chapter examines the accessibility of services provided through the Adult Education for the Homeless Program, employing a definition of accessibility that encompasses each of these dimensions. First, the location of services is described, focusing on geographic distribution and on the perceived effectiveness of "residential" and "non-residential" sites. Second, outreach methods, incentives for participation, and "required" versus "voluntary" program structures are examined. Finally, the availability and utilization of support services — i.e., transportation, child care, counseling, etc. — are investigated.

Location of Services

Community Size

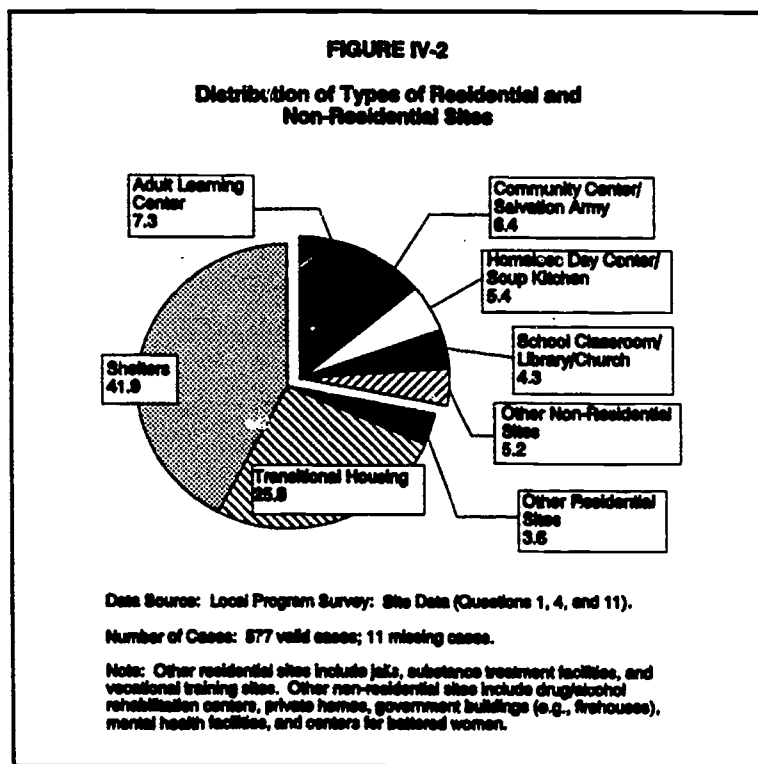
The Adult Education for the Homeless Program provides services in communities of every size throughout the United States (see Figure IV-1). A substantial proportion of local programs — about 14 percent — are located in the nation's largest cities, those with populations in excess of 1,000,000. Another one in five programs (19%) are located in medium-size cities (with populations of 250,001-1,000,000), approximately one-quarter (26.9%) are found in less populous urban areas (with populations of 50,001-250,000), and about two in five (40.5%) are located in small towns and rural areas (with populations of no more than 50,000). These figures not only attest to the wide availability of AEH services, but also underscore the fact that homelessness — contrary to popular belief — is not the exclusive problem of America's largest cities.



Description of Sites

Non-Residential Sites

Each local AEH program provides educational services to homeless adults at one or more service delivery sites. More than one-quarter (28.6%) of these sites are non-residential — that is, sites at which clients do not obtain temporary shelter (see Figure IV-2). The most common non-residential locations include adult learning centers (7.3%), Salvation Army and community centers (6.4%), homeless day centers and soup kitchens (5.4%), and school classrooms, libraries, and churches (4.3%). Less common locations — comprising 5.2 percent of all sites — include drug/alcohol rehabilitation centers, private homes, government buildings, mental health facilities, shopping malls, and in one case, a mobile “literacy van.”

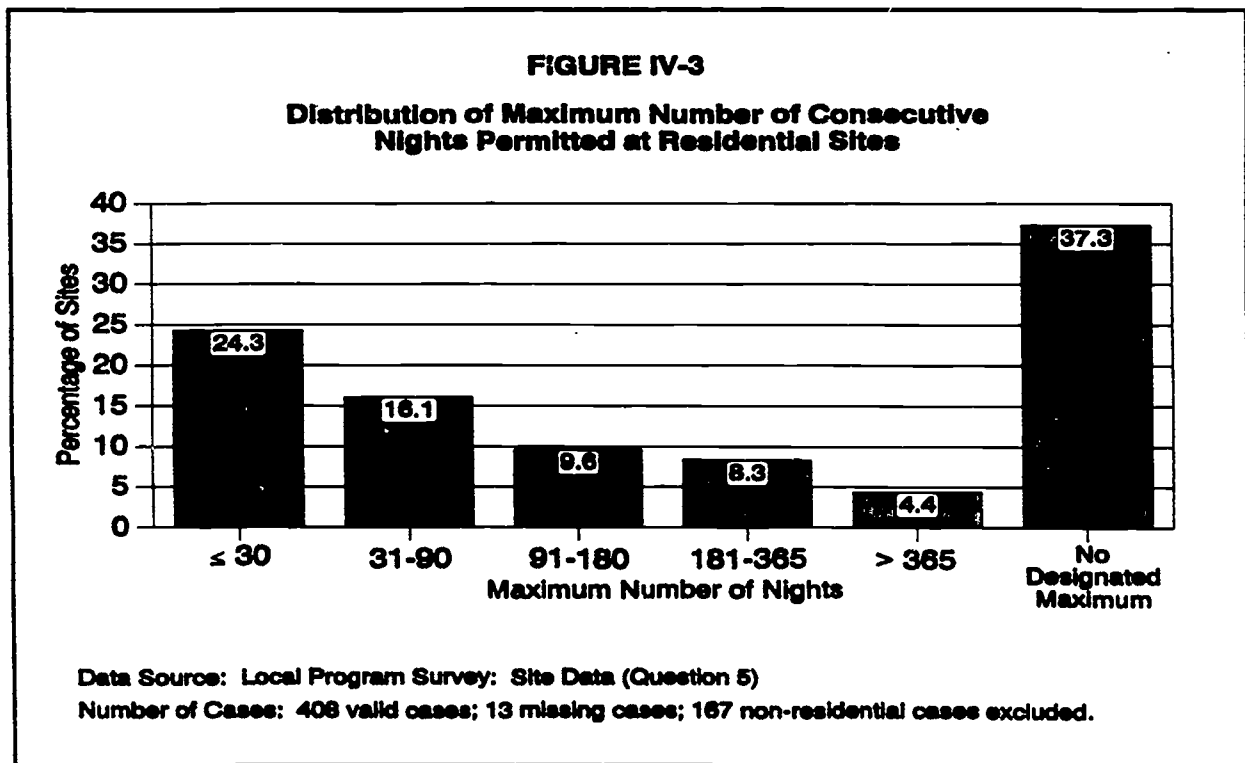


Residential Sites

More typically, AEH programs provide services at locations where homeless people seek temporary shelter. Such residential locations make up about 71 percent of all service delivery

sites. For the most part, these locations consist of emergency shelters and transitional housing — about 42 and 26 percent of all sites, respectively. However, other locations — even jails — are represented (3.6%) as well. On average, approximately 45 percent of the residents at these sites receive AEH services and, conversely, about 81 percent of program participants at these locations reside on-site. Overall, nearly three-quarters (73.8%) of those served by the AEH program enroll at a residential location and reside there temporarily.

More than one-third of residential sites (37.3%) impose no specific maximum stay limitations (see Figure IV-3). Nearly one-quarter (24.3%) impose a one-month maximum stay, another quarter (25.7%) restrict stays to between one and three months, and about 1 in 10 (12.7%) permits residents to remain for longer than three months.



In some cases (40.4%), residential sites permit longer than normal stays for residents participating in the AEH program. Some sites permit extended stays of up to one month (16.8%), others permit an additional one to three months residence (28.7%), and still others allow program

participants to remain for more than three months (13.9%). About two in five sites (40.6%) with extended stay policies allow program participants to reside on-site until program completion.

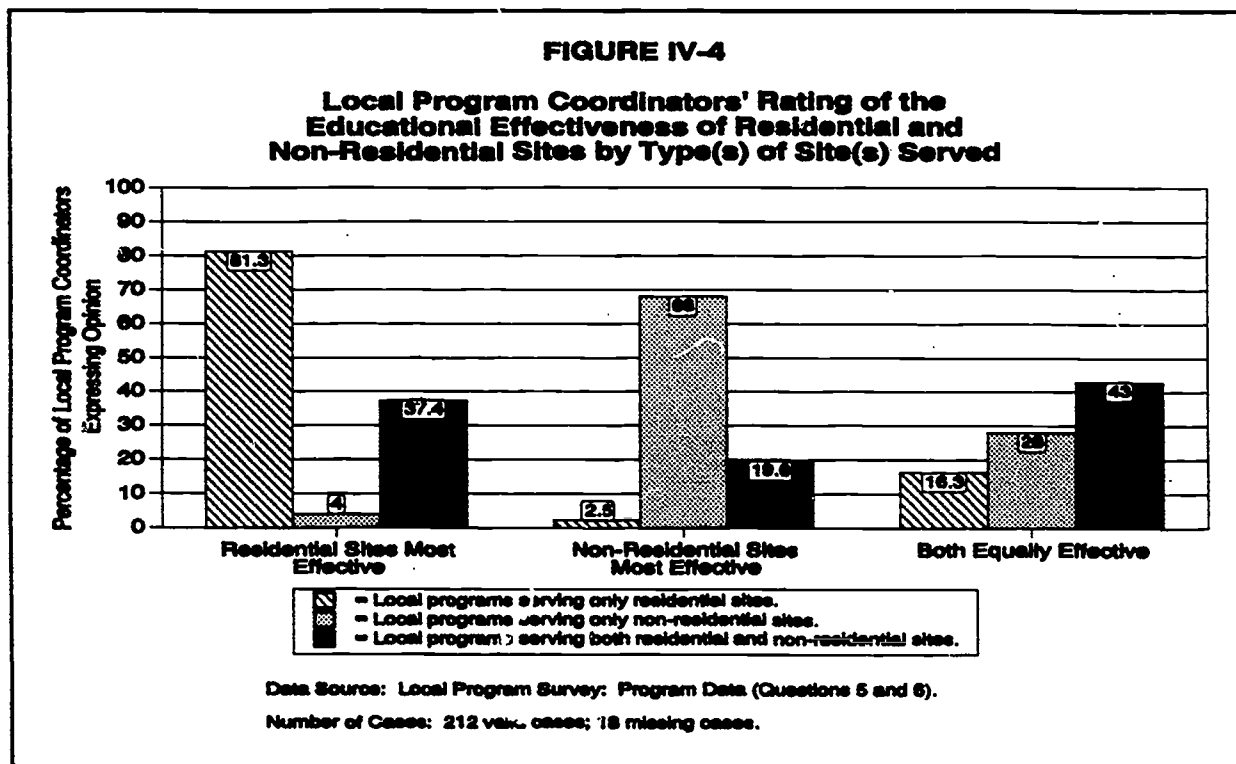
In addition to the practice of permitting extended stays for AEH clients, the vast majority of residential sites (85.4%) allow clients to continue in the AEH program after discontinuing residence. Unfortunately, in one-half of the sites that permit continued participation, less than 10 percent of clients avail themselves of this opportunity.

Location and Program Effectiveness

Whether educational services are more effectively provided at residential or non-residential locations has been a subject of considerable debate among administrators of the AEH program. Some contend that residential sites are more accessible, allow providers to address client needs in a more systematic manner, and result in higher rates of participation. Others argue that the constant turnover at many of these sites presents an obstacle to the effective delivery of educational services and suggest that non-residential sites offer an atmosphere more conducive to learning.

In part, this difference of opinion reflects the actual experience of individual administrators (see Figure IV-4). About one-half administer programs that serve both residential and non-residential sites, approximately 38 percent head programs serving only residential sites, and roughly 12 percent administer programs that serve non-residential sites exclusively. When asked to rate the educational effectiveness of residential and non-residential settings, administrators of programs that served only residential sites rated these locations more effective than non-residential settings by a wide margin — 81.3 percent versus 2.5 percent. By a similarly wide margin — 68 percent versus 4 percent — administrators of programs serving only non-residential sites rates *these* settings most effective. By comparison, administrators of programs serving *both* types of sites rated residential settings more effective than non-residential settings by nearly a two-to-one

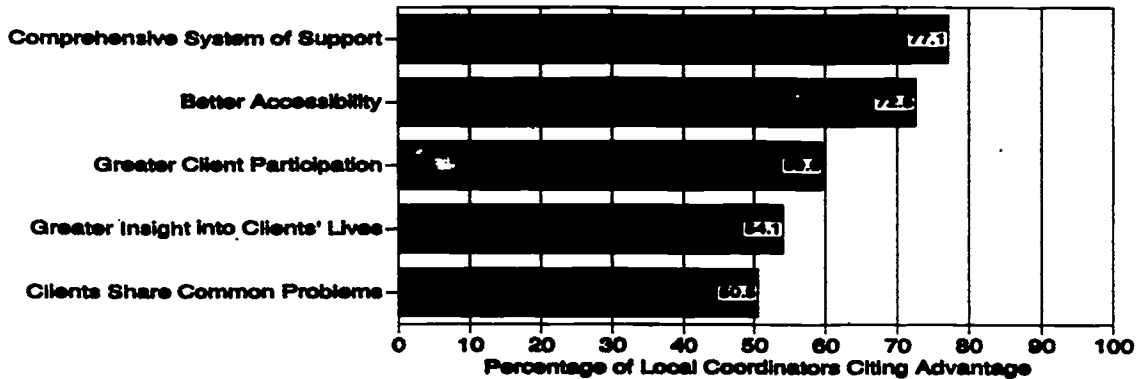
margin — 37.4 percent versus 19.6 percent. Given their direct comparative experience, the judgments of these administrators are likely to be more objectively based. However, these data also are inconclusive. In Chapter VII, this issue is investigated further, focusing on the actual outcomes associated with each type of delivery site.



Beyond their overall assessments, administrators of programs providing services at both residential and non-residential sites identified several important advantages of residential settings (see Figure IV-5). These include a more comprehensive system of support (77.1%), better accessibility (72.5%), greater client participation (59.6%), greater insight into clients' lives (54.1%), and a greater likelihood that clients will share common problems (50.5%). These same administrators also pointed to several key advantages of non-residential settings (see Figure IV-6), including a greater focus on education (61.1%), reduced "stigma" due to participation in a program for the homeless (61.1%), better instructional facilities (48.1%), greater diversity of

FIGURE IV-5

**Principal Advantages of Providing Educational Services at Residential Sites
(According to Coordinators of Local Programs Serving Both
Residential and Non-Residential Sites)**



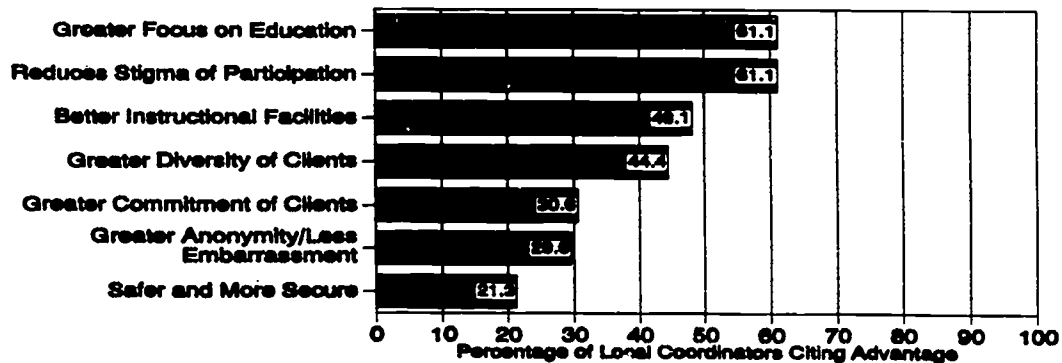
Data Source: Local Program Survey: Program Data (Questions 5 and 7)

Number of Cases: 109 valid cases; 6 missing cases; 115 cases not serving both residential and non-residential sites excluded.

Note: Approximately 17 percent of local coordinators cited other advantages of providing educational services at residential sites, including client availability, clients' increased comfort level, fewer child care problems, and on-site classes that facilitate parenting programs.

FIGURE IV-6

**Principal Advantages of Providing Educational Services at Non-Residential Sites
(According to Coordinators of Local Programs Serving Both
Residential and Non-Residential Sites)**



Data Source: Local Program Survey: Program Data (Questions 5 and 8)

Number of Cases: 108 valid cases; 7 missing cases; 115 cases not serving both residential and non-residential sites.

Note: Approximately 19 percent of local coordinators cited other advantages of providing educational services at non-residential sites, including self-esteem building, opportunities for role modeling, better coordination with non-residential social service agencies, and greater opportunity for social contacts outside the shelter system.

clients (44.4%), greater commitment of clients (30.6%), less embarrassment associated with attending "school" (29.6%), and a safer and more secure environment (21.3%).

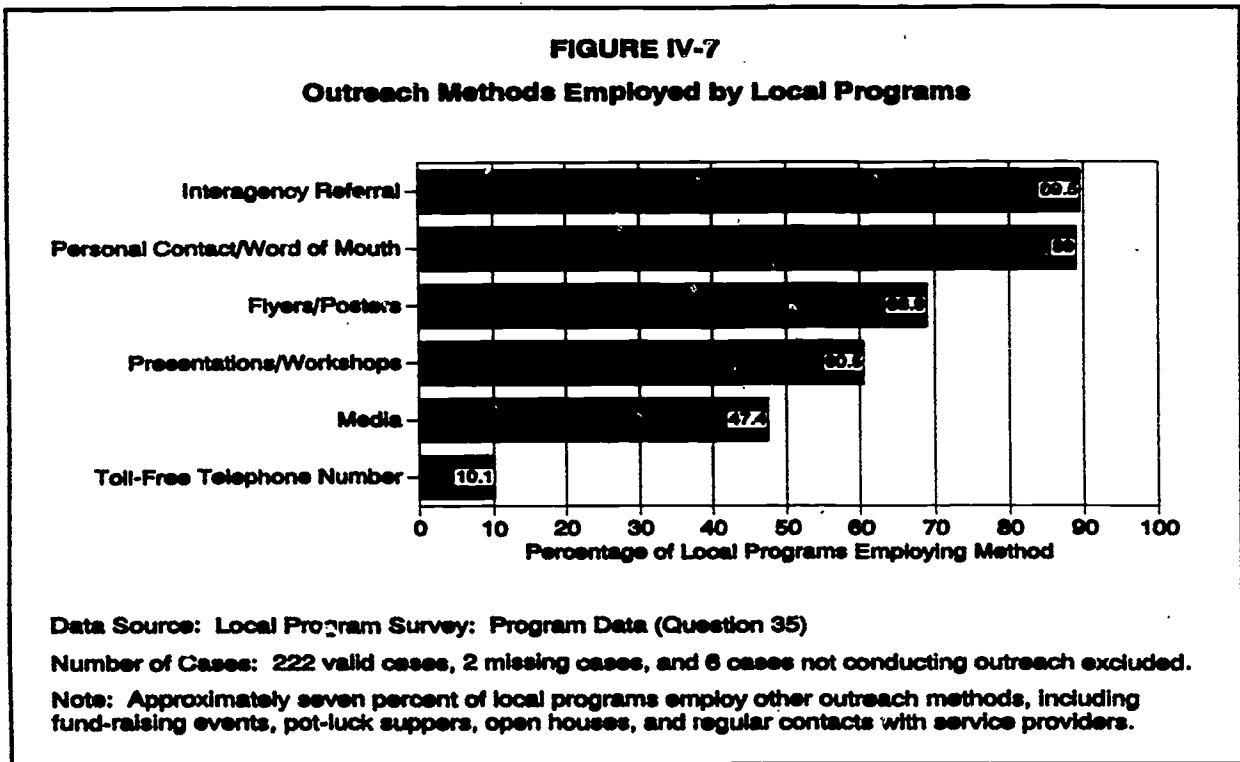
While the data presented in Figures IV-4 through IV-6 suggest that residential sites are particularly well-suited for the delivery of educational services to homeless adults, they also highlight the special advantages of non-residential settings. It is likely that the relative effectiveness of the two types of service delivery sites varies, depending upon the particular subpopulation served. Residential settings, because of their accessibility and comprehensive support systems, may be most appropriate for those individuals with special needs — e.g., recovering drug abusers, victims of spousal abuse, etc. — while non-residential settings may offer a more effective milieu for the marginally homeless, those who might otherwise eschew participation in a program too closely identified with the perceived stigma of homelessness. Future analyses of these data should address this issue in more detail.

Outreach, Incentives, and Participation as a Condition of Residence

Outreach Methods

Simply providing educational services at locations that are physically accessible to homeless clients may be insufficient to ensure high rates of participation. Poorly educated adults often suffer from feelings of inadequacy and low self-esteem that may hamper, or even preclude, their participation. To overcome these psychological impediments, almost all local programs (97.4%) have implemented outreach programs designed to boost participation (see Figure IV-7). Nearly 9 in 10 of these programs employ interagency referrals and/or personal contacts (89.5% and 89%, respectively), more than two-thirds (68.9%) distribute flyers and posters, and about 3 in 5 (60.5%) offer presentations or workshops to introduce prospective clients to the AEH program. Fewer programs employ media campaigns (47.4%) and fewer still have established toll-free

telephone numbers (10.1%). Fund-raising events, pot-luck suppers, and open houses represent additional means of getting the message out.



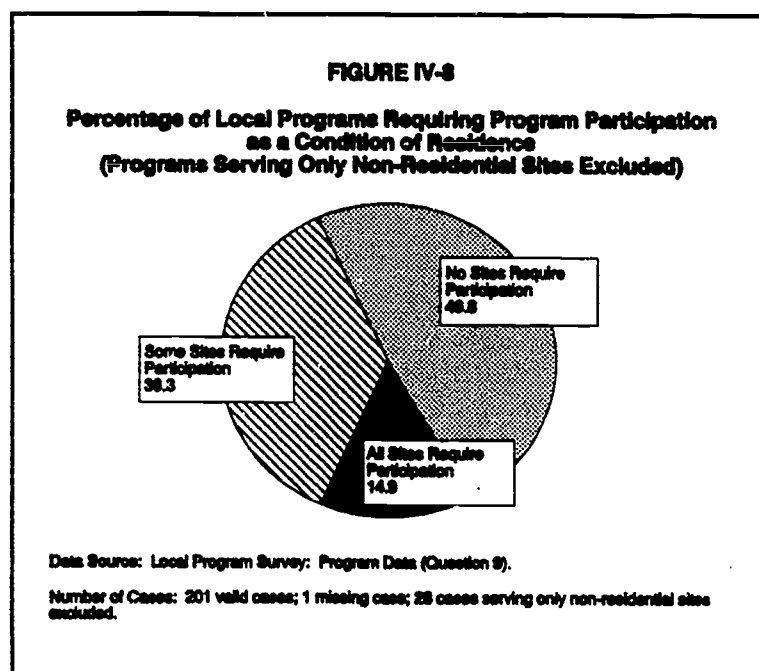
Incentives for Participation

Nearly three-fifths of service delivery sites (58.8%) use incentives to reward clients for participating in the AEH program. In addition to offering extended stays (discussed previously), incentives include certificates of achievement (77.9%), gifts of clothing or other personal effects (37%), and special trips or outings (21.8%). Many local coordinators report that certificates of achievement — the most widely used incentive — represent an especially effective means of overcoming homeless clients’ inhibitions and self-doubts.

Participation as a Condition of Residence

Approximately one-third of residential sites (35%) link the provision of shelter to participation in the AEH program, and, overall, about one-third of clients (35.6%) participate on a compulsory basis. Among programs that provide educational services at residential sites, more

than one-half (51.2%) serve at least one site that requires participation, and about 15 percent provide services exclusively at such sites (see Figure IV-8).



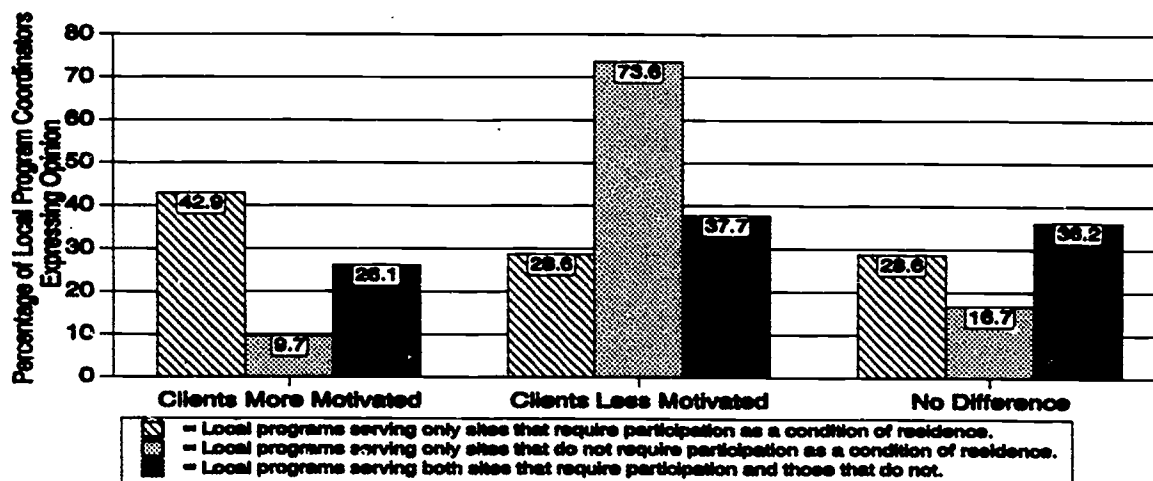
While some program administrators question the educational effectiveness of linking participation to the provision of shelter, others see it as just another means of boosting enrollments. Not surprisingly, opinions vary according to individual administrators' experience. About 70 percent of those administering programs that require participation at all sites expressed the opinion that this approach results in greater duration and intensity of instruction, while only 21 percent of those administering exclusively voluntary programs subscribed to that view. Most striking, however, is the fact that the vast majority (65.1%) of those administering "mixed" programs — i.e., programs that provide services at sites that require participation as well as those that do not — subscribed to the view that compulsory participation results in greater duration and intensity of instruction. Because of their direct comparative experience, the viewpoint expressed by these administrators is likely to be more objectively based than that of their peers.

Although, according to the collective judgment of these administrators, sites requiring participation may provide instruction of greater duration and intensity, this apparent advantage could be partially offset — or even negated — if participants at these sites are not motivated to learn. Local program coordinators were asked whether clients who are required to participate in the AEH program as a condition of residence are more or less motivated than those who participate on a wholly voluntary basis. Again, responses varied according to the actual experience of administrators (see Figure IV-9). Approximately 43 percent of those who administered programs requiring the participation of all clients indicated that such clients tend to display greater motivation than those who participate voluntarily. The remainder were evenly split between those who associated compulsory participation with low motivation (28.6%) and those who found no difference in motivation according to program type (28.6%). Local coordinators of programs offering services on an entirely voluntary basis expressed a dramatically different opinion. Nearly three-quarters (73.6%) indicated that clients who are required to participate tend to be *less* motivated than those participating voluntarily. Administrators of mixed programs — those serving both sites that require participation and those that do not — generally supported this view (37.7%), but were almost equally likely to express the opinion that there is no difference in motivation according to program type (36.2%).

While these findings raise provocative questions regarding the most appropriate program structure for the delivery of educational services to homeless adults, the questions that they raise cannot be answered in terms of these data alone. These issues will be taken up again in Chapter VII, in the context of our investigation of program outcomes.

FIGURE IV-9

Local Program Coordinators' Rating of Motivation Among Clients Required and Not Required to Participate as a Condition of Residence, by Type(s) of Site(s) Served



Data Source: Local Program Survey: Program Data (Questions 9 and 11).
Number of Cases: 169 valid cases; 61 missing cases.

Support Services

Homeless clients often have pressing needs that must be met before educational deficiencies can be effectively addressed. Individuals who are hungry, in poor health, "strung out" on drugs, or suffering from emotional trauma are unlikely to be able to focus on education. Thus, in examining the accessibility of services provided through the AEH program, it is important to consider the availability and utilization of support services designed to meet these critical needs.

Institutional Arrangements

Legislation authorizing the Adult Education for the Homeless Program permits the use of AEH funds to support counseling, child care, and transportation provided in connection with the program's broader educational goals. These and other services may also be provided by referral or through cooperative agreements with other agencies. While some local programs supplement AEH supported services through referrals or cooperative agreements alone — 29.1 percent and 6.4

percent, respectively — most employ a combination of the two (62.7%). Only about 1 in 50 (1.8%) programs offers no support services at all.

The critical role that these services play in the overall educational process, and the important link that the AEH program provides to the broader community, are perhaps best described by a local program coordinator in North Carolina:

The fact is, there are a lot of agencies in place to help the homeless, but until now [the AEH program], there has never been anyone or anything to assist the homeless in making the connections between the social service agency on one side of town, the substance abuse counselor on the other side of town, the job training agency in the middle of town, the vocational rehab service on the outskirts of town, etc. These clients, because of their deficits, have lacked the wherewithal to make these necessary connections. The AEH program, through its unique position and emphasis on education as life-skills curriculum, has been able to assist the homeless in understanding and making the necessary connections for themselves. Because of this practical, hands on life skills approach to literacy, the AEH program is not just another weak attempt to throw money at a problem, but instead [represents] a viable, successful, working model for a solution to ending the homeless problem. (Burlington, NC: Local Program Survey, 1992)

Provision and Utilization of Services

About three-quarters (74%) of the clients participating in the AEH program receive 3 or more support services, and more than 10 percent receive *10 or more* such services. The percentage of local programs providing various support services — directly or by referral — as well as the percentage of clients receiving or referred to each service are displayed in Table IV-1.

Case management services, as well as the essentials of food, shelter, and clothing, are provided by about 9 in 10 local programs. Among these, the most utilized is case management (73.5% of clients), reflecting its central role in the support services network. Case managers assist clients by assessing their needs, providing counseling, and making referrals to other support services. Not surprisingly, more than 8 in 10 local program administrators (82.9%) rated this service as “critical” or “very important” to the overall mission of the AEH program.

TABLE IV-1

**Percentage of Local Programs Providing Support Services
(Directly or by Referral) and Percentage of Clients
Receiving/Referred to Services**

Support Service	Percentage of Local Programs Providing Support Services (Directly or by Referral)	Percentage of Clients Receiving or Referred to Support Service
Food	92.1	61.4
Case Management	91.3	73.5
Shelter	91.6	58.4
Clothing	88.1	49.0
Substance Abuse Counseling	84.1	33.8
Mental Health Counseling	81.9	23.0
Health Care	81.1	36.6
Job Skills Training	78.0	27.6
Job Counseling	77.1	39.2
Job Referral	72.2	26.9
Child Care	70.9	17.5
Transportation	66.1	27.4
Legal Counseling	62.1	11.0
No Support Services	1.8	NA

Data Source: Local Program Survey: Program Data (Questions 29, 32, and 33).

Number of Cases: 227 valid cases; 3 missing cases.

Note: Approximately 21 percent of local programs provide other support services (directly or by referral), including vision screening, AIDS screening/awareness programs, and parent counseling.

Substance abuse counseling, mental health counseling, and health care are provided, either directly or by referral, at more than four in five local programs and utilized by roughly one-quarter to one-third of participants. Among these services, substance abuse counseling is most widely available (84.1%), while health care is most widely utilized (36.6%). Many programs have successfully combined life skills instruction in health care and substance abuse counseling with literacy training. In North Carolina, for example, several local programs employ a curriculum — based on the Alcoholics Anonymous 12-step program — that simultaneously addresses clients' needs for literacy instruction and drug addiction counseling.

Also widely available are various support services aimed at enhancing clients' chances of becoming gainfully employed. Job skills training, job counseling, and job referral services are provided, directly or by referral, through most local programs (78%, 77.1%, and 72.2%, respectively), and about one-quarter to two-fifths of participants utilize these services. One client's poignant testimony illustrates the potential impact of this type of service:

[I learned] how to present my work experience in "stories" during interviews. For the first time, I felt confident during a job interview, and the job I got is the job of my dreams. (Indianapolis, IN: Local Program Survey, 1992)

Child care is provided, either directly or by referral, by about 71 percent of local programs and utilized by approximately 18 percent of clients. This represents an especially critical support service in the case of many AEH programs serving victims of spousal abuse. At Family Tree, a residential safe house for battered women in Colorado, clients contract with one another for child care during literacy instruction. Other local programs allocate AEH funds to provide child care directly.

Overall, nearly two-thirds of local programs offer some type of assistance with transportation, and more than one-quarter of participants make use of these services. In the case of non-residential sites, as well as residential sites that provide services to non-residential clients,

lack of transportation can present a major barrier to program participation. Some 36 percent of sites serving one or more non-residential clients offer transportation vouchers to participants and about 15 percent transport clients to and from classes in program-supported vans.

Finally, homeless clients sometimes require legal assistance in contesting an eviction, obtaining child support, taking legal action against an abuser, or even in their own defense when charged with a crime. More than 3 in 5 local programs (62.1%) provide access to legal counseling and approximately 1 in 10 clients (11%) utilizes these services.

CHAPTER V

PROGRAM PARTICIPANTS

If the AEH Program is to meet the educational needs of its clients, it is important to understand their characteristics and how they differ from those of other adult learners. Previous studies, reviewed in Chapter I, have demonstrated that the homeless are not simply a microcosm of the greater American society. They are disproportionately male, black, poorly educated, and often suffer from mental illness, drug addiction, and other personal problems. But to what extent are AEH participants representative of homeless people in general, and how do their educational accomplishments and literacy skills compare with those of other adult populations?

This chapter addresses these issues in two parts. First, the characteristics of AEH clients are compared with those of the larger homeless population, and, second, the educational level and literacy skills of AEH participants are compared with those of two statistically representative samples of American adults.

Characteristics of AEH Participants

Demographics

A recent Urban Institute study, based on interviews with some 1,700 homeless adults, describes the characteristics of the larger population from which AEH participants are drawn (Burt and Cohen, 1989). According to that report:

- Most are males (81%);
- Approximately 30 percent are between 18 and 30 years of age, 51 percent are between 31 and 50, 16 percent are between 51 and 65, and 3 percent are 66 years of age or older;

- More than half are non-white (41% black, 10% Hispanic, and 3% other racial/ethnic groups); and
- About 82 percent live alone, 9 percent are single parents, 8 percent live with an adult partner, and only 1 percent live in the company of another adult and dependent children.

Although participants in the AEH program are similar in many respects to the greater homeless population, in some ways, they differ substantially. As shown in Figure V-1, the racial and ethnic composition of the two populations are strikingly similar — in each case, a majority are white, and blacks are disproportionately represented (Hispanics represent about 10% of each population). The age distributions of the two populations are also similar, although older individuals are somewhat less represented among AEH clients.

In terms of sex and family status, however, the two groups differ markedly. According to Figure V-1, only 55 percent of AEH participants are male, as compared with 81 percent of all homeless adults. Moreover, while the vast majority of homeless are unattached adults (82%), AEH participants include substantial proportions of single parents (25.3%) and two-adult families with dependent children (10.6%). This latter difference is likely attributable to the fact that a substantial number of AEH programs specifically target victims of domestic violence, many of whom have dependent children.

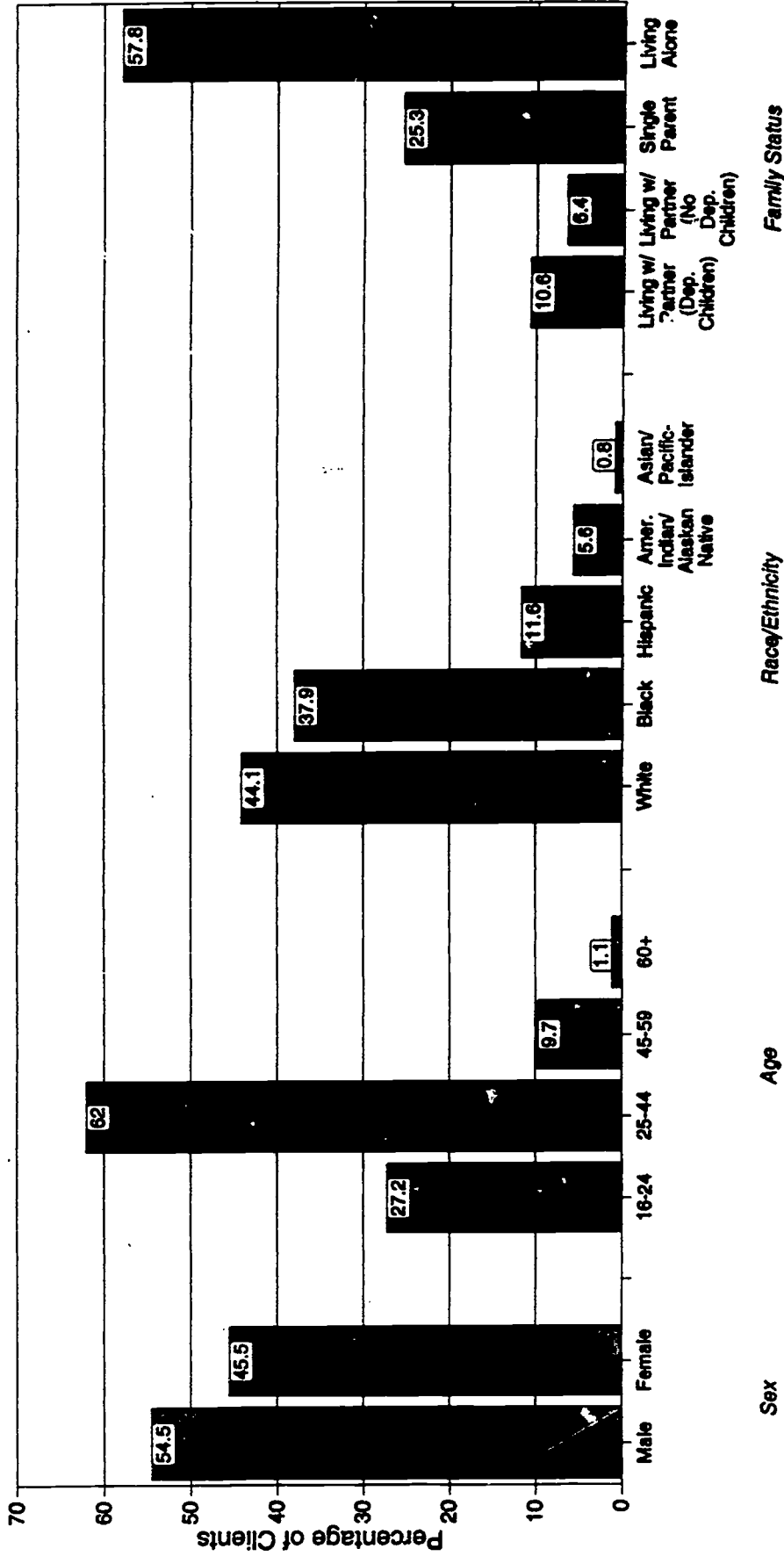
Employment Status and Duration of Homelessness

The Urban Institute study also provides a basis for comparing AEH participants with the larger homeless population in terms of their employment histories and the duration of their homelessness. According to that report: (1) about 94 percent of homeless adults lack a full- or part-time job; (2) they have been unemployed for an average of four years; and (3) they have been without permanent shelter for more than three years, on average.

Figure V-2 presents equivalent data for participants in the AEH program. About 86 percent of AEH clients were unemployed at enrollment — compared with 94 percent in the larger

FIGURE V-1

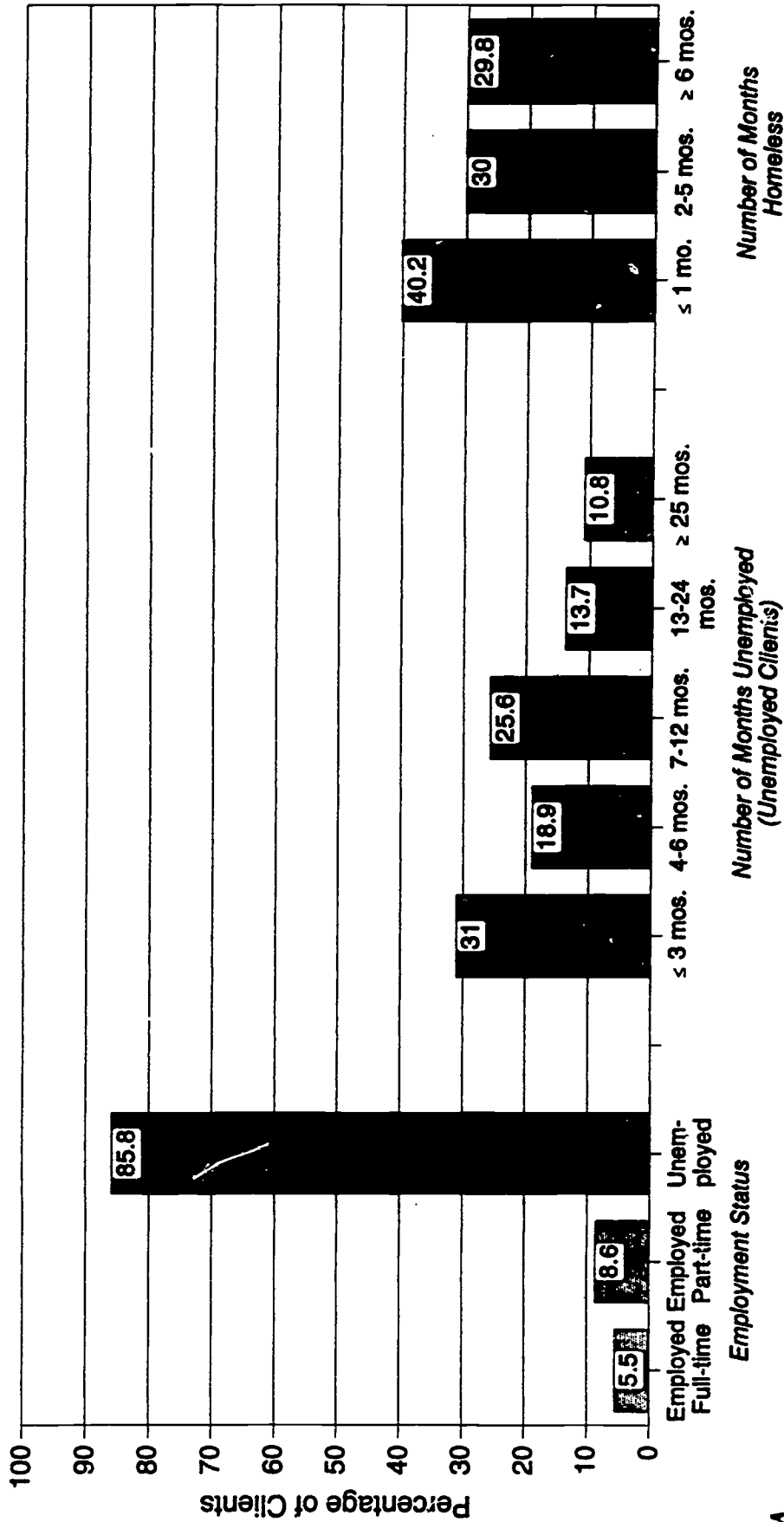
**Demographic Characteristics of AEH Clients
(New Enrollees for June 1992)**



Data Source: Local Program Survey: Client Data (Questions 1-4).

Number of Cases: Sex — 2,931 valid cases; 12 missing cases/Age — 2,805 valid cases; 138 missing cases/Race and Ethnicity — 2,917 valid cases; 26 missing cases/Family Status — 2,657 valid cases; 286 missing cases.

FIGURE V-2
Employment and Homelessness Status of AEH Clients
(New Enrollees for June 1992)



Data Source: Local Program Survey: Client Data (Questions 5-7).

Number of Cases: Employment Status — 2,688 valid cases; 255 missing cases/Number of Months Unemployed — 1,147 valid cases, 1,796 missing cases; 381 cases employed full- or part-time at enrollment/Number of Months Homeless — 1,625 valid cases; 1,318 missing cases.

homeless population — and more than three-quarters (75.5%) had been unemployed for just one year or less, averaging, overall, about 13 months. More than 7 in 10 AEH clients (70.2%) had been homeless for less than six months prior to enrollment, and the average participant had been without permanent shelter for just seven months.

These data, when compared with the findings of the Urban Institute study, suggest that the AEH program tends to provide services to a particular segment of the homeless population — specifically, those who have been out of work and without shelter for relatively brief periods of time. Current outreach methods, though impressive, may simply be insufficient to attract those elements of the homeless population with prolonged histories of homelessness and unemployment. Alternatively, these individuals may have adapted to their homeless condition, effectively placing themselves beyond the reach of this or any other social program. Whatever the explanation of these findings, the AEH program, as currently structured, does not appear to reach the more chronic element of the homeless population — i.e., those individuals who literally “live in the streets.” The fact that the vast majority of AEH participants reside temporarily in either emergency shelters or transitional housing is consistent with this view.

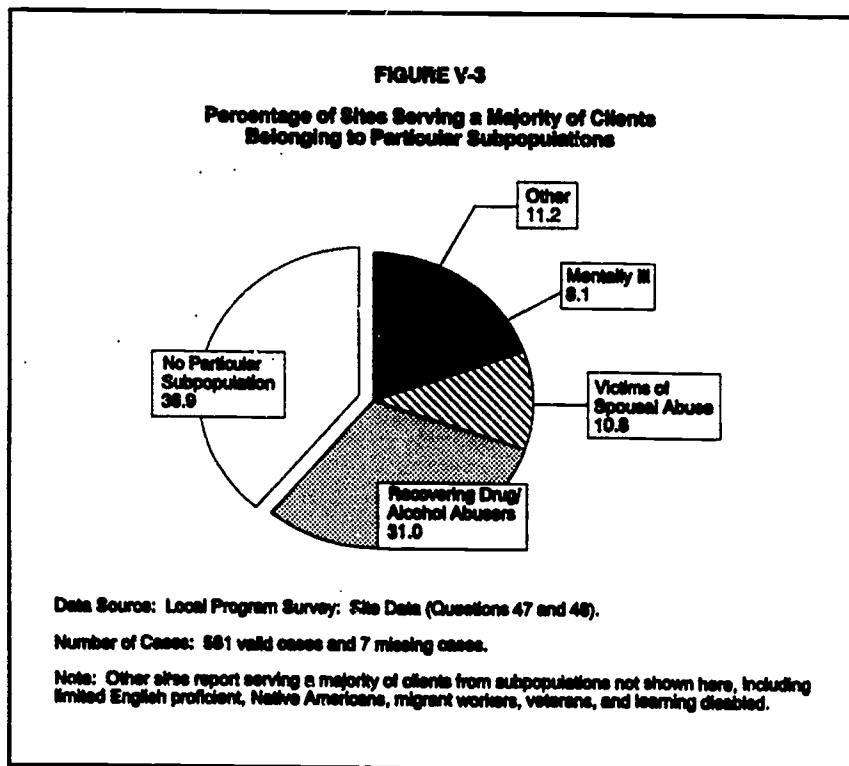
Subpopulations

About one-third of the homeless are severely mentally ill, one-third or more have substance abuse problems, and between two- and three-fifths of homeless women have been abused over the course of their adult lives (D’Ercole and Struening, 1990; Interagency Council on the Homeless, 1989; Bassuk and Rosenberg, 1988). While data collected for this study do not permit precise estimates of the proportion of AEH clients with these kinds of problems, crude approximations are possible.¹ Many programs provide services at sites that specifically target

¹ During site visits, it was learned that personal data of this nature were often unreliable or incomplete. Such information is generally not recorded during the enrollment process, either because staff do not feel qualified to evaluate complex personal problems of addiction and mental illness, or because clients are reluctant to reveal this information.

people with personal problems of one kind or another. The clients at these sites are generally screened by experienced professionals or, in some cases, referred there by the courts or other government agencies. Thus, it is possible to gain some sense of the proportion of AEH clients with personal problems of addiction, mental illness, and abuse by examining the distribution of sites targeting these groups.

In Figure V-3, the percentage of sites serving a majority of clients belonging to each of these groups is displayed. About one-third (31%) provide services to recovering substance abusers, another 1 in 10 (10.8%) serves victims of abuse, and approximately 8 percent serve the mentally ill. A comparison of these figures with estimates of the proportion of each group in the greater homeless population suggest that, while recovering substance abusers and victims of domestic violence are served by the AEH program in proportion to their numbers in the larger homeless population, the level of services provided to the mentally ill is more limited.



Educational Level and Literacy Skills

In this final section, the educational level and literacy skills of AEH clients are examined and the literacy skills of program participants are compared with those for two other adult populations.

Educational Level

At enrollment, most AEH programs record the educational level of participants by assigning students to one of two achievement levels. Level I signifies that a student has limited basic skills or is functioning at approximately the eighth-grade level or below, while Level II indicates that one has achieved relative competency in basic skills or is functioning between the ninth- and twelfth-grade levels.

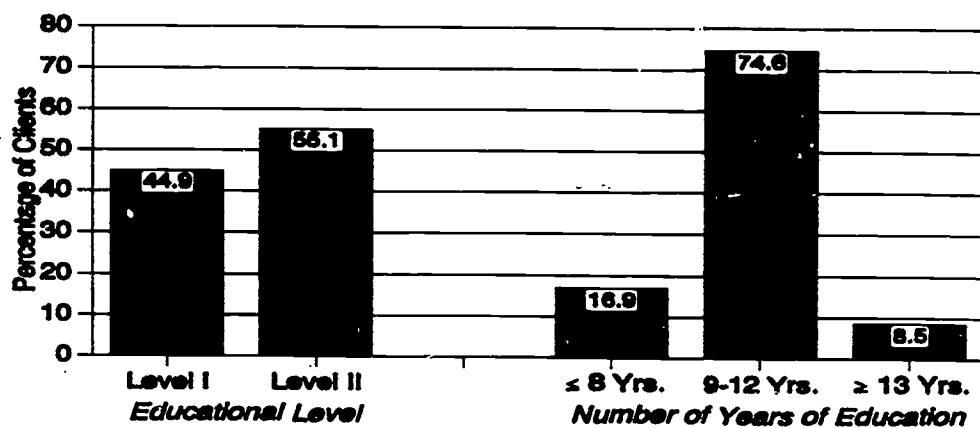
Figure V-4 describes the educational level of AEH participants in terms of these skills levels and in terms of the number of years of education achieved. AEH clients are approximately evenly divided between the two levels of achievement — about 45 percent at Level I and 55 percent at Level II — and about 92 percent have completed no more than 12 years of education. Although AEH participants have less formal education than those in the greater homeless population — about one-fifth of whom have 13 or more years of education (Burt and Cohen, 1989) — this is almost certainly a function of AEH eligibility requirements. Legislation authorizing the AEH program states that the program is restricted to those who do not have “a high school diploma, a GED, or the basic education skills to obtain full-time employment” (*Federal Register*, 1989). Thus, those who have a high school diploma *as well as* the basic skills to obtain employment are effectively excluded from program participation.

Literacy Skills

As part of this study, the literacy skills of a sample of AEH participants were assessed using the TALS Document Literacy Test. This instrument is designed to measure the knowledge

FIGURE V-4

**Educational Characteristics of AEH Clients
(New Enrollees for June 1992)**



Data Source: Local Program Survey: Client Data (Questions 8 and 9).

Number of Cases: Educational Level — 2,613 valid cases; 330 missing cases/Number of Years of Education — 2,643 valid cases; 300 missing cases.

and skills needed to process information found in a variety of documents, such as tables, schedules, charts, graphs, maps, and forms. Because these skills are essential, both in managing a household and in meeting most job requirements, the performance of AEH participants on the test should be of interest to educators and policymakers alike.

Although the Document Literacy Test employs a scale ranging from 0 to 500, to facilitate interpretation of the proficiencies measured by the test, test developers have categorized scores in terms of five levels of proficiency. Each level is described below:

- **Level 1 (≤ 225)** — Level 1 proficiency indicates the ability to perform relatively undemanding tasks, such as locating information based on a literal match or entering information from personal knowledge.
- **Level 2 (226-275)** — Proficiency at this level demonstrates the ability to match information where there are several distractors or where the match is based on low-level inferences. Some ability to cycle through or integrate information is also required of individuals at this level.

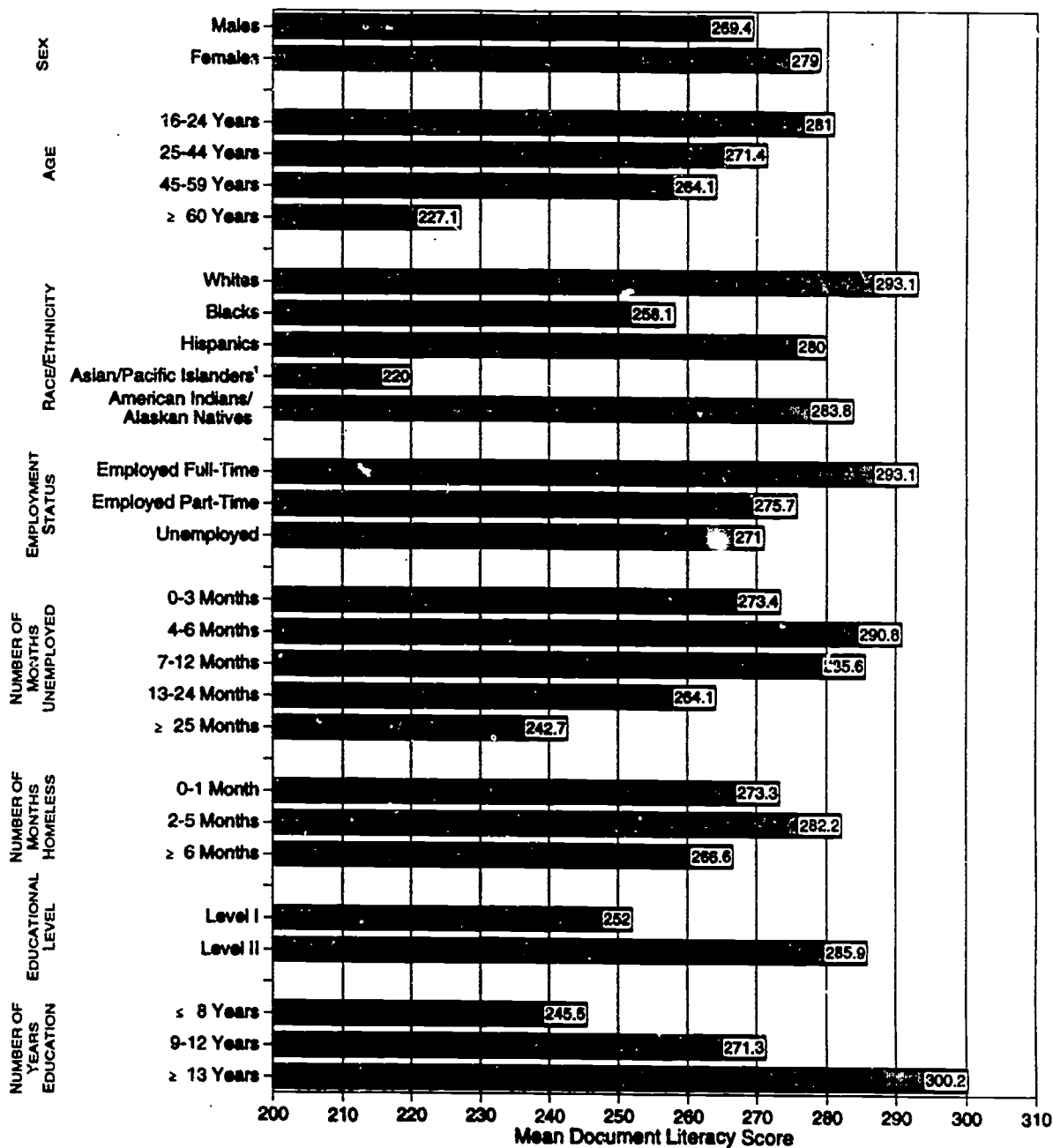
- **Level 3 (276-325)** — Level 3 proficiency indicates the ability to integrate or cycle through material in relatively complex tables or graphs in which distractor information is present.
- **Level 4 (326-375)** — Proficiency at Level 4 demonstrates the ability to perform multiple feature matching, cycling, and integration tasks, often involving conditional information that must be taken into account, and to make higher-level inferences.
- **Level 5 (≥ 376)** — Level 5 proficiency indicates the ability to search through complex displays containing multiple distractors, make high text-based inferences, or apply specialized knowledge.

AEH participants score an average of 273 points on the Document Literacy Test, with approximately 17 percent scoring at Level 1, 37 percent at Level 2, 27 percent at Level 3, and 19 percent at Level 4 (none scores at Level 5). The fact that a majority of participants exhibit proficiencies at Levels 1 and 2 is particularly noteworthy, as test developers suggest that skills evident at these levels place severe restrictions on an individual's ability to participate fully in the labor force. Equally striking is the fact that nearly one in five program participants exhibit proficiencies at Level 4. Individuals scoring at this level demonstrate proficiencies in coping with the kinds of complex literacy tasks that are increasingly common in the workplace and, thus, would appear to represent an untapped resource for the American economy.

Figure V-5 displays mean Document Literacy scores for participants in the AEH program, disaggregated by demographic characteristics and several other variables. Most of the findings presented here conform to prior expectations: females score higher than males; younger participants score higher than their older counterparts; whites score higher than Hispanics, who, in turn, score higher than blacks; employed participants score higher than those who are unemployed, or employed only part-time; Level II participants score higher than those at Level I; and participants with more years of education score higher than those with fewer years of education. Somewhat less obvious are the findings relating to duration of unemployment and homelessness. The most recently unemployed as well as those who became homeless just prior to enrollment

FIGURE V-5

Mean Document Literacy Scores by Characteristics of Clients



Data Source: Literacy Assessment (Enrollee Information Form, Questions 1, 2, 3, 4, 6, 7, 8, 9, and 10).

Number of Cases: Sex — 359 valid cases/Age — 340 valid cases; 19 missing cases/Race/Ethnicity — 357 valid cases; 2 missing cases/Employment Status — 343 valid cases; 16 missing cases/Number of Months Unemployed — 285 valid cases; 33 missing cases; 41 cases employed full- or part-time excluded/Number of Months Homeless — 323 valid cases; 36 missing cases/Educational Level — 329 valid cases; 30 missing cases/Number of Years Education — 344 valid cases; 15 missing cases.

¹ Mean score based on fewer than 10 cases.

Note: Differences among categories for each of the seven client characteristics are significant at the .05 level (one-way ANOVA).

score lower than those who have been unemployed or homeless for longer periods of time. While seemingly counter-intuitive, these findings may merely reflect heightened anxiety associated with the shock of sudden unemployment or the loss of permanent shelter.

Cross-Study Comparisons

Because the Document Literacy Test employs the same underlying framework as several recent assessments of statistically representative samples of adults, cross-study comparisons are possible. Figure V-6 compares the range of scores for new enrollees in the AEH program with those for representative samples of Job Training Partnership Act (JTPA) eligible applicants and Employment Service/Unemployment Insurance (ES/UI) participants.

FIGURE V-6
Comparison of TALS Document Literacy Scores for
AEH New Enrollees, JTPA Qualified Applicants, and
ES/UI Participants

Document Literacy Level	AEH (New Enrollees)	JTPA (Qualified Applicants)	ES/UI (Participants)
Level 1 (≤ 225)	17.1%	14.1%	13.1%
Level 2 (226-275)	37.0%	37.3%	30.1%
Level 3 (276-325)	26.6%	35.4%	35.9%
Level 4 (326-375)	19.3%	12.2%	18.5%
Level 5 (≥ 376)	0.0%	1.1%	2.4%
TOTAL	100.0%	100.1%	100.0%

Data Source: AEH — Literacy Assessment (TALS); JTPA and ES/UI — Kirsch, Jungeblut, and Campbell, 1992.

Number of Cases: AEH — 359 valid cases/JTPA — 1,100,000 valid cases (weighted)/ES/UI — 18,937,087 valid cases (weighted).

Note: Percentages do not always sum to 100% due to rounding error.

While the three distributions displayed in Figure V-6 are remarkably similar, there are two notable differences. First, a greater proportion of AEH enrollees than JTPA-eligible participants demonstrate proficiencies at Level 4, and, second, more AEH enrollees than ES/UI participants score in the Level 1-Level 2 range. These differences notwithstanding, the fact that the three distributions are so similar is consistent with the view that homelessness is not simply a function of poor literacy skills, but involves other variables as well, including personal problems of addiction, mental illness, and abuse, as well as the lack of adequate social supports.

CHAPTER VI

EDUCATIONAL SERVICES

Overview

Ultimately, the success or failure of any educational program rests upon its ability to provide effective educational services. In this chapter, the Adult Education for the Homeless Program is examined in terms of several factors commonly associated with program effectiveness. These include: (1) the intensity and duration of services; (2) the content of instructional programs; and (3) the curricula and instructional practices employed in the delivery of services.

Intensity and Duration of Services

Expenditures Per Client

Each year, the AEH program's limited resources pose an ever greater challenge to its ability to meet the educational needs of homeless adults. Since the program's inception, in 1987, demand for services has nearly tripled, while Federal appropriations have increased by less than 50 percent.

Today, the average local program spends just \$291 in AEH funds to provide services to each of its clients, and, in some areas, where demand is greatest, program expenditures average as

little as \$7 per client.¹ By comparison, the average learner cost of publicly supported workplace literacy programs is nearly \$3,000, and the most effective private programs report average costs more than double that (Mikulecky and d'Adamo-Weinstein, 1991).

Duration of Services

The high rate of mobility among homeless individuals poses an additional obstacle to the effective delivery of educational services. Only about one-third of program participants receive services for more than three months, and, for the remainder, the average length of program participation is just three weeks.

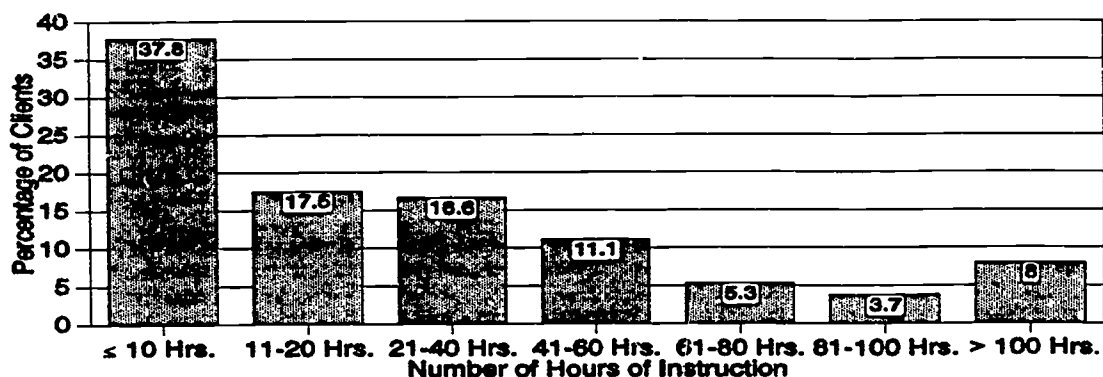
While almost one-third of program participants (28.1%) receive more than 40 hours of instruction, nearly two-fifths (37.8%) receive *10 hours or less* (see Figure VI-1).² These figures are low, especially when viewed in light of recent evidence suggesting that the most effective workplace literacy programs, which spend substantially more per client than AEH programs, require between 50 and 100 hours of instruction to produce even marginal learner gains (Mikulecky and d'Adamo-Weinstein, 1991).

¹ These figures are based on the expected number of clients reported by program personnel on the local program survey. Our individual client survey provides an alternative way to estimate the number of clients served in a year. We collected data on each client entering in June, so we can count the number of clients entering each site, and aggregate across sites within programs to estimate the number of clients entering in June. Assuming that an average number of clients enter programs in June, we can multiply the number of clients entering in June by 12 to estimate the number of clients served over the course of a year. Using this method, we estimate that the average program serves 102 clients. By this calculation, the largest program serves 1,560 clients in a year. Using these figures, the average program spends \$410 per client, 75 percent of programs spend \$115 or more per client. The highest spending program spends about \$5,000 per client, and the lowest spending program spends only about \$13 in AEH funds per client.

² The data presented in Figure VI-1 pertain to a three-month reporting period immediately following enrollment and, therefore, represent conservative estimates. Additional hours of instruction for those participants who remain in the program for more than three months are not reflected here.

FIGURE VI-1

**Number of Hours of Instruction Received by AEH Clients
(New Enrollees for June 1992)**



Data Source: Local Program Survey: Client Data (Question 14)

Number of Cases: 2,837 valid cases; 111 missing cases

Note: Figure is based on censored data for a three-month reporting period. Approximately 34 percent of clients continue to participate in the AEH program beyond the three-month period.

Content of Instruction

Background

Another important factor associated with the effective delivery of educational services is the degree to which the content of a program's instruction addresses the needs of its clients. According to Darkenwald and Valentine (1984), adult education programs often fall short in this regard. These authors contend that a substantial proportion of skills learned in ABE programs are "meaningless," in the sense that they are never applied outside of the classroom. Adult learners, in particular, must perceive instruction to be relevant beyond an academic context or they may begin to lose interest and, ultimately, drop out (Grubb et al., 1991; Sticht, 1988).

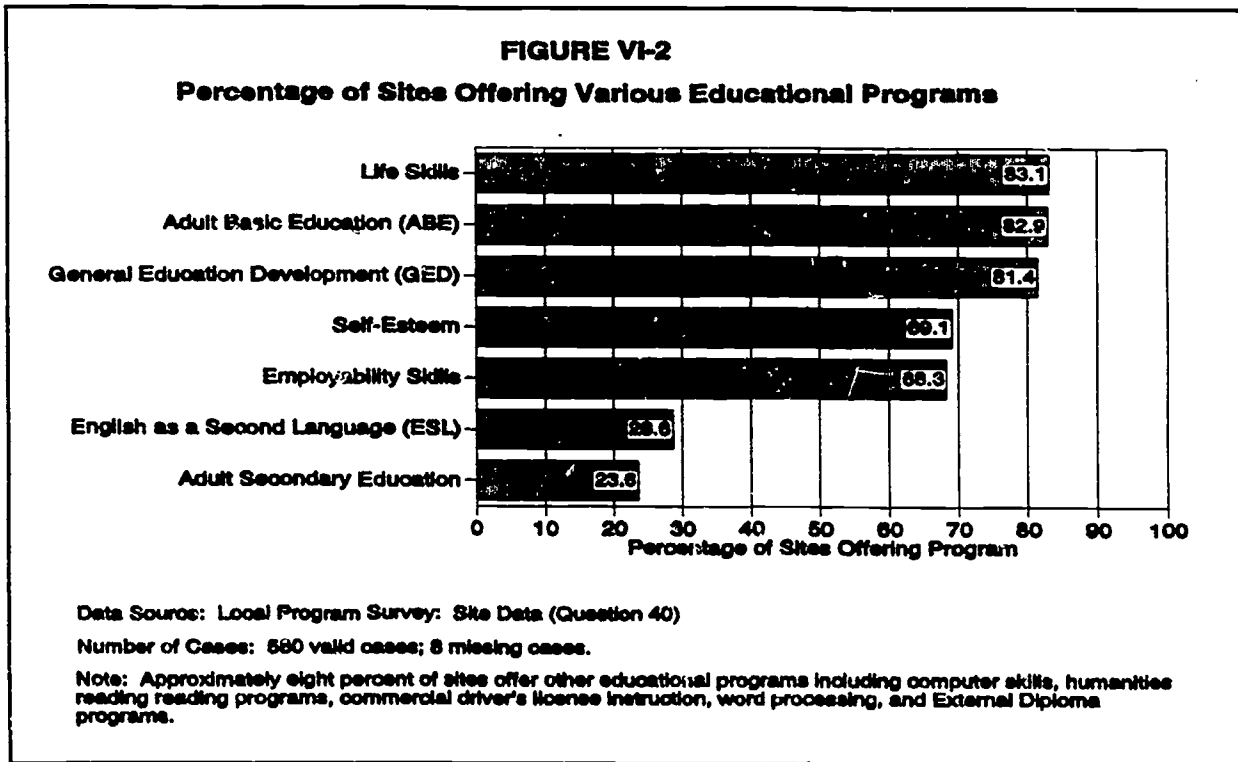
However, the application of newly acquired skills to real-life situations often depends as much on learners' self-confidence as on their proficiency (Fingeret and Danin, 1991). Indeed, when participants in adult education programs were asked to identify "the most important benefit"

of participation, effective outcomes (i.e., self-confidence and self-esteem) ranked nearly as high as academic improvement (Darkenwald and Valentine, 1985).

AEH Instructional Programs

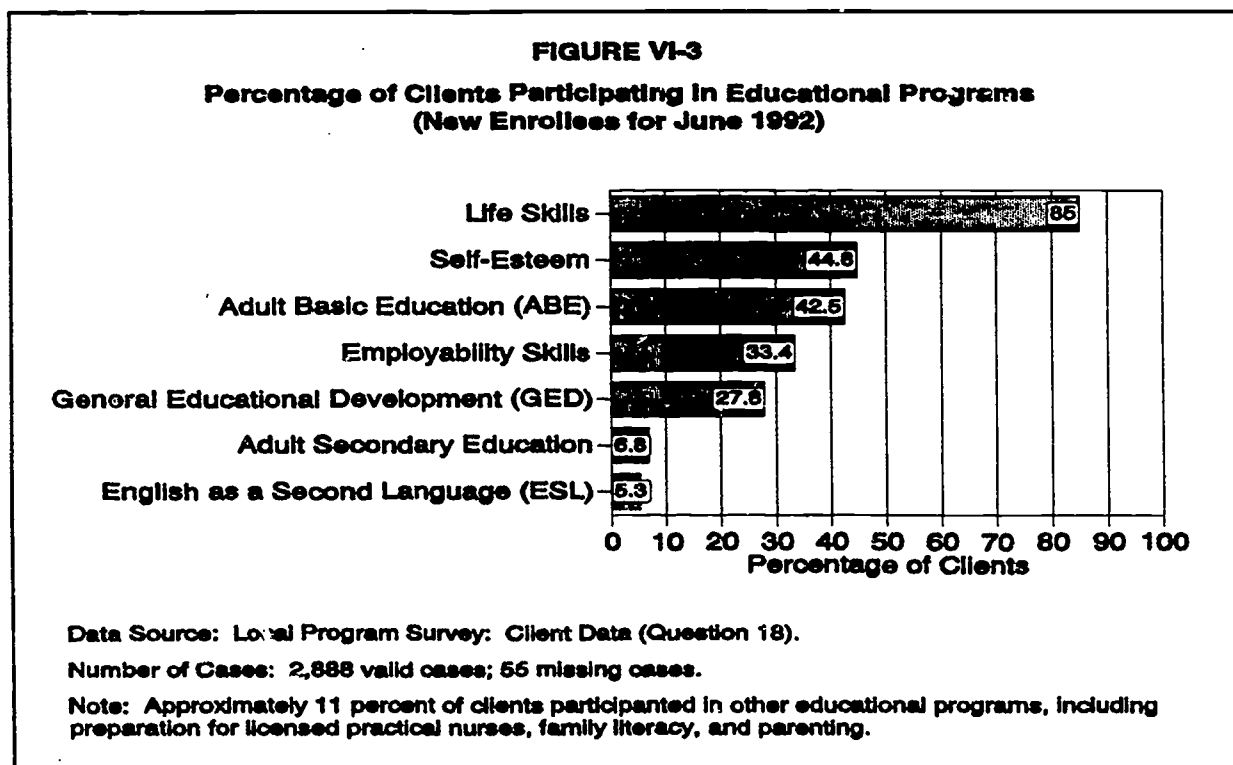
The Adult Education for the Homeless Program addresses these concerns by emphasizing instructional programs that integrate basic skills with life skills training, and other programs specifically designed to meet the affective needs of homeless clients.

Figure VI-2 displays the distribution of service delivery sites offering various programs of instruction. Life skills training programs are most widely available (83.1%), followed by programs in adult basic education (82.7%), GED preparation (81.4%), self-esteem development (67.1%), and employability skills (68.3%). In addition, about one-quarter of sites provide instruction in English as a second language (28.6%) and adult secondary education (23.6%).



Client demand for various instructional programs — as indicated by enrollments — is described in Figure VI-3. According to these data, demand for life skills training programs is

nearly twice that for any other instructional area (85%), and demand for programs addressing the affective needs of clients ranks second (44.8%). Somewhat fewer clients participate in programs in adult basic education (42.5%), employability skills (33.4%), and GED (33.4%), and fewer still receive instruction in adult secondary education (6.8%) and English as a second language (5.3%).



Instructional Practices and Curricula

The educational effectiveness of AEH programs is further influenced by the various instructional practices and curricula employed in the delivery of services. As indicated in Chapter V, homeless clients do not constitute a homogeneous population and, thus, one would not expect to identify a single ideal program model. Rather, a variety of effective approaches, strategies, and curricula are likely to exist, depending on the particular characteristics of clients served. As Fingeret (1984) explains:

The question confronting the adult literacy community is not "Which program model is better?" or "Which set of underlying assumptions is true?" Rather,

educators must question which approach appears to meet the needs of which persons in particular circumstances.

This section addresses these issues in two parts. First, the utilization and perceived effectiveness of various educational practices (i.e., instructional approaches and strategies) are investigated, and, second, the various curricula employed in the delivery of educational services are examined.

Instructional Practices

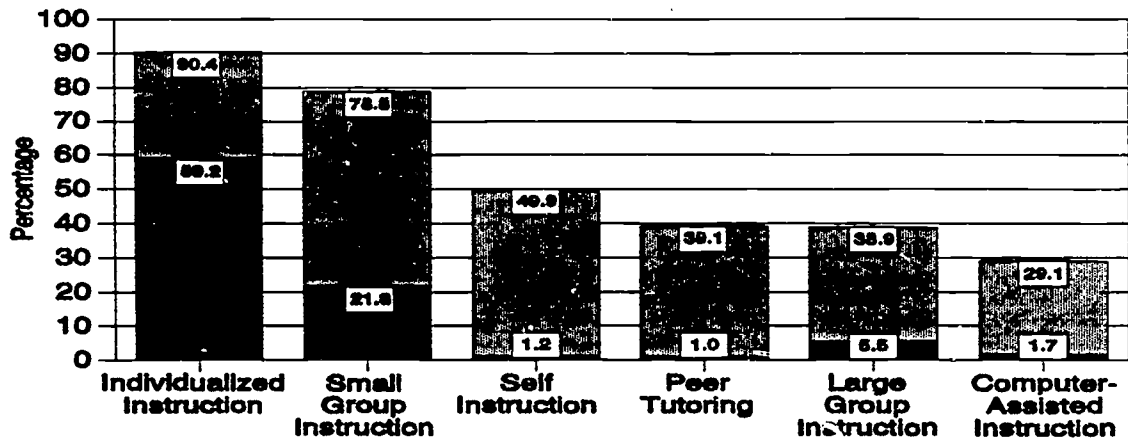
At most AEH service delivery sites, a broad range of instructional approaches and strategies is employed, and, therefore, instructors at these sites are in a unique position to evaluate the effectiveness of one approach or strategy vis-a-vis that of another. For this study, principal instructors at each site were asked to specify which of the various approaches and strategies employed at their site had proven most effective. Because the effectiveness of various practices is likely to vary according to the characteristics of clients served, these data are analyzed in two ways — first, for all sites combined and, then, separately, for sites targeting one of three principal subpopulations.

Instructional Approaches

Figure VI-4 displays the percentage of sites employing various instructional approaches and the percentage of sites at which each approach is judged to be “most effective.” Overall, individualized instruction is the most widely utilized approach (90.4% of sites) and, according to principal instructors’ ratings, also the most effective (59.2%). Small group instruction is employed by nearly as many sites (78.8%), but less highly rated in terms of effectiveness (21.8%). Other instructional approaches — self-instruction, peer tutoring, large group instruction, and computer-assisted instruction — although employed by one-third to one-half of all sites, rank consistently lower in terms of perceived effectiveness.

FIGURE VI-4

Percentage of Sites Offering Various Instructional Approaches and Percentage at Which Approach Has Proven Most Effective



- Percentage of sites offering designated instructional approach.
 - Percentage of sites offering designated instructional approach at which that approach has proven most effective.

Data Source: Local Program Survey: Site Data (Questions 30 and 31)

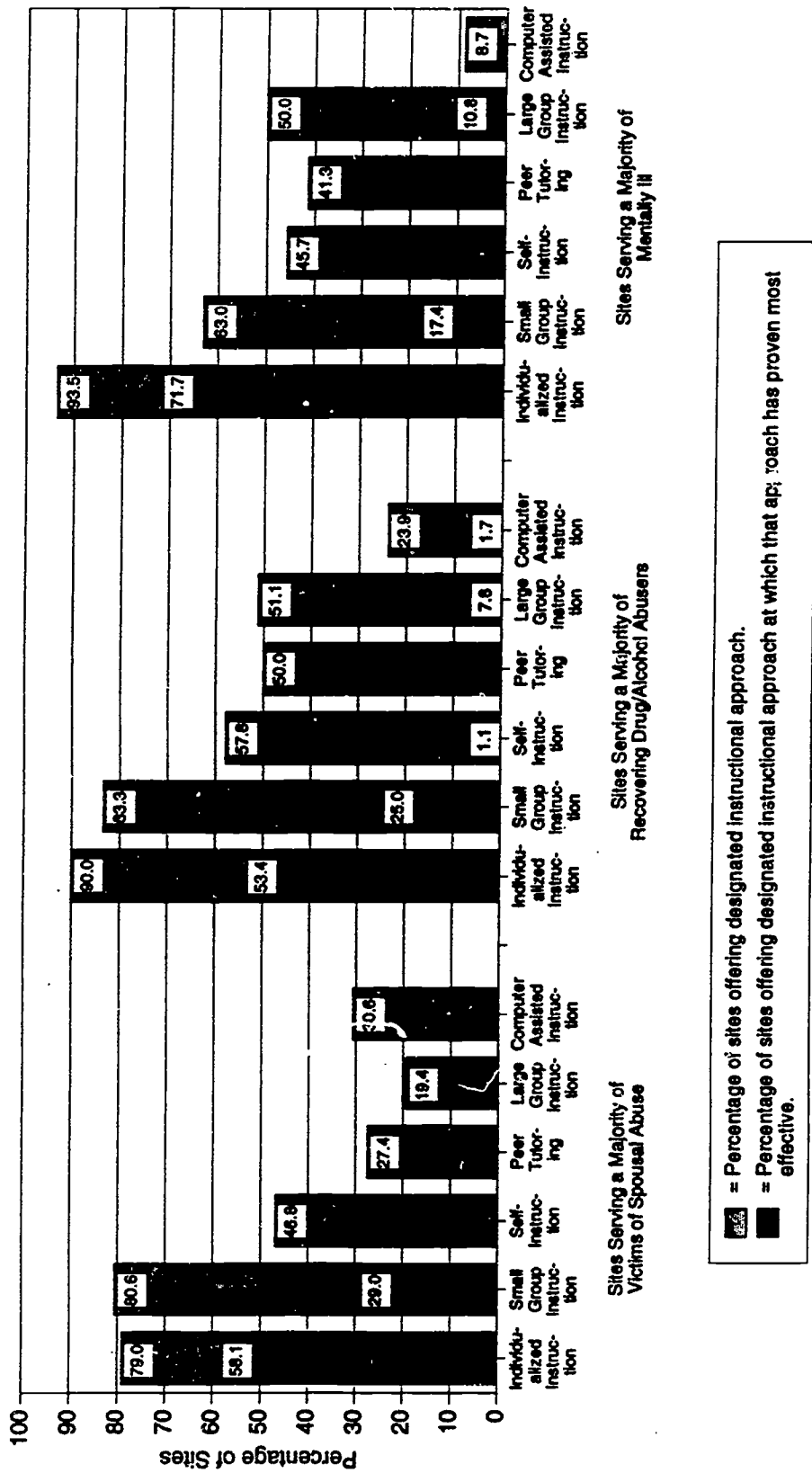
Number of Cases: 581 valid cases; 7 missing cases; computation of percentage of sites at which approach has proven most effective is restricted to cases that offer the designated approach.

Note: Approximately three percent of sites offer instructional approaches other than those shown, including audio-visual instruction, workshops, and open discussions.

Figure VI-5 presents data pertaining to the distribution and perceived effectiveness of various instructional approaches, separately, for sites targeting each of three subpopulations — victims of spousal abuse, recovering substance abusers, and the mentally ill. One noteworthy finding presented here pertains to those sites targeting the mentally ill. Individualized instruction is more widely employed at these locations (93.5%) and more often judged most effective (71.7%). In comparison, large group instruction is utilized at one-half of these sites, but identified as the most effective instructional approach at only 1 in 10 (10.8%). Deficiencies in interpersonal skills — a common characteristic of mentally ill clients — may render instructional approaches that require group interaction more threatening and, hence, less effective. Moreover, because individualized instruction is designed to proceed at the pace of the individual learner and to

FIGURE VI-5

Percentage of Sites Offering Various Instructional Approaches and Percentage at Which Approach Has Proven Most Effective By Type of Clients Served



= Percentage of sites offering designated instructional approach.
 = Percentage of sites offering designated instructional approach at which that approach has proven most effective.

Data Source: Local Program Survey: Site Data (Questions 30, 31, 47, and 48).

Number of Cases: Sites Serving Victims of Spousal Abuse — 62 valid cases; 1 missing case/Sites Serving Recovering Drug and Alcohol Abusers — 180 valid cases/Sites Serving Mentally Ill — 46 valid cases; 1 missing case/298 cases not serving a majority of any of the three subpopulations excluded.

Note: Computation of the percentage of sites at which each approach has proven most effective is restricted to cases that offer the designated approach.

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provide immediate feedback and encouragement, this approach may be better suited for mentally ill clients.

Instructional Strategies

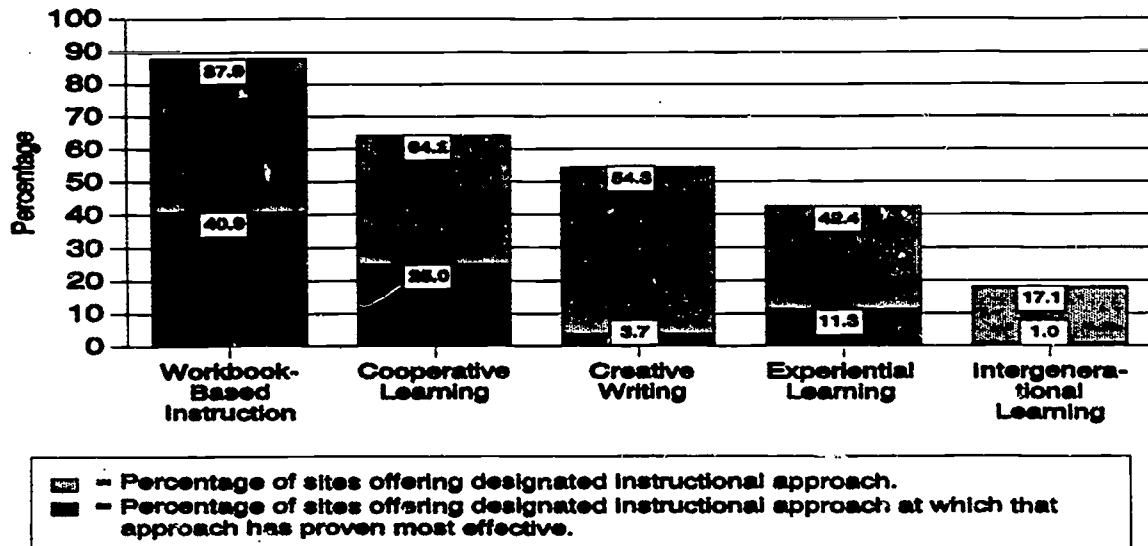
Service delivery sites also employ a wide range of instructional strategies designed to enhance the effectiveness of educational services. Figure VI-6 displays the percentage of sites employing various strategies and the percentage of sites at which each strategy is judged to be most effective. Overall, workbook-based instruction is the most widely utilized strategy (87.9% of sites) and, based on the ratings of principal instructors, also the most effective (40.9%).³ Cooperative learning, a relatively new instructional strategy, ranks second in both prevalence (64.2%) and perceived effectiveness (25.0%). Other strategies — creative writing, experiential learning, and intergenerational learning — are less widely utilized and, with the exception of experiential learning, rank substantially lower in terms of perceived effectiveness.

Figure VI-7 displays data pertaining to the distribution and perceived effectiveness of various instructional strategies, separately, for sites targeting each of the three subpopulations examined above. Two findings are particularly noteworthy. First, at sites targeting victims of abuse, cooperative learning is judged to be highly effective, while intergenerational learning, though widely utilized at these sites, ranks relatively low in perceived effectiveness. Second, at sites targeting the mentally ill, experiential learning is rated among the most effective instructional strategies, second only to workbook-based instruction. For the most part, these findings are not surprising. It seems reasonable that women suffering from abuse would find comfort in a cooperative learning format in which life experiences may be shared. Nor is it surprising that a strategy that emphasizes real-life experiences would be particularly effective in providing educational services to mentally ill clients. However, it is less clear why intergenerational

³ Workbook-based instruction may employ commercially developed materials or materials developed by teachers and/or students that are presented in a workbook format.

FIGURE VI-6

Percentage of Sites Employing Various Instructional Strategies and Percentage at Which Strategy Has Proven Most Effective



Data Source: Local Program Survey: Site Data (Questions 32 and 33)

Number of Cases: 578 valid cases; 10 missing cases; computation of percentage of sites at which strategy has proven most effective is restricted to cases that employ the designated strategy.

Note: Approximately 23 percent of sites employ instructional strategies other than those shown, including role playing, simulations, and oral fluency work.

learning is so seldom rated among the most effective strategies at sites serving abused women.

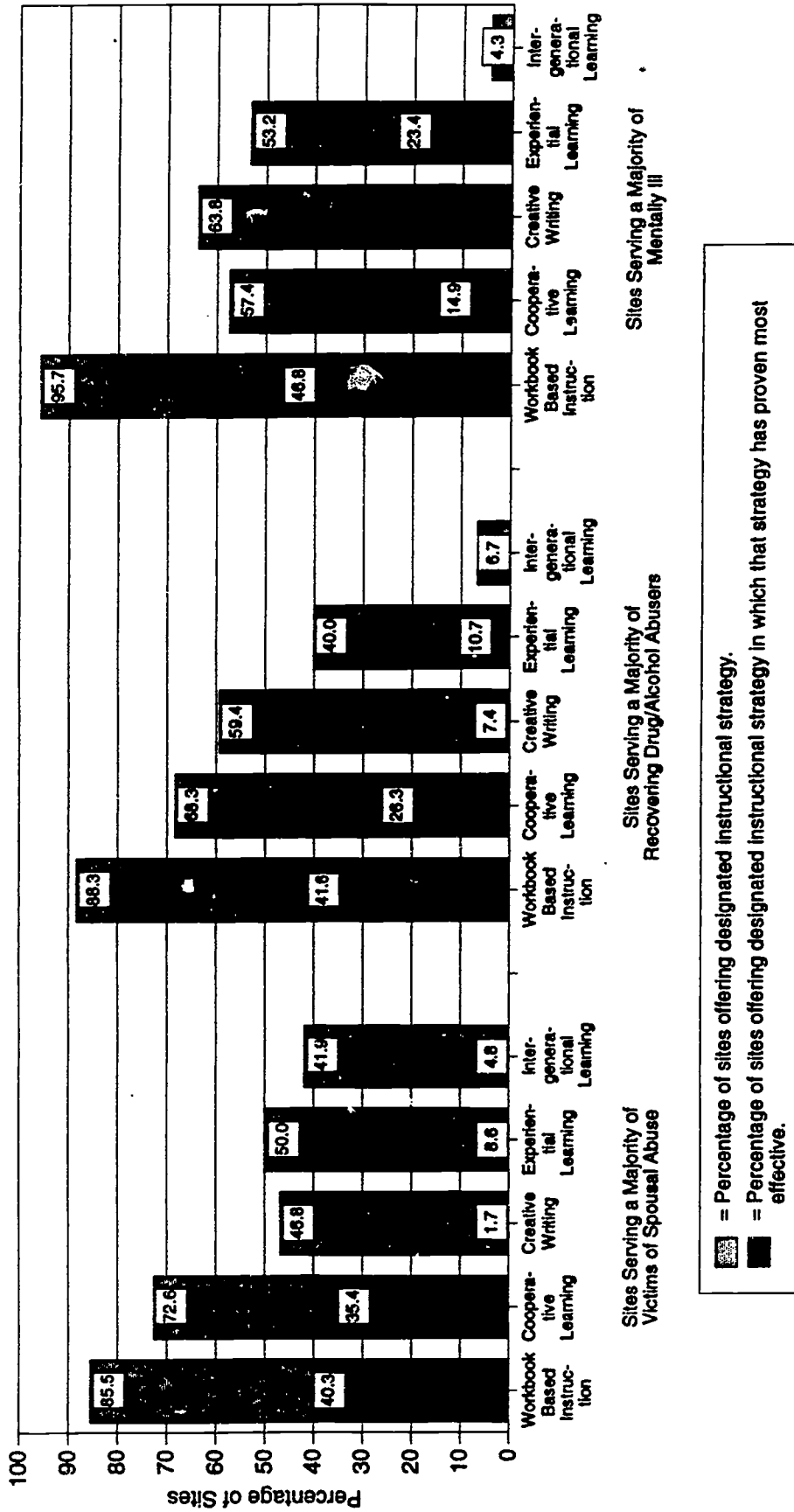
Despite several anecdotal accounts which suggest the effectiveness of this strategy at these sites, it is rarely rated among the most effective instructional practices.

Curricula

Because of the AEH program's emphasis on individualized and small group instruction, instructional materials are often customized to meet the needs of individual learners or groups of learners. Although most sites supplement customized instructional materials with commercially prepared materials (84.4%), only 1 in 10 sites (10.7%) relies exclusively upon commercially developed curricula.

Given the limited resources allocated to curriculum development, the widespread use of customized instructional materials is remarkable. On average, states allocate less than 1 percent

FIGURE VI-7
Percentage of Sites Employing Various Instructional Strategies and Percentage in Which Strategy Has Proven Most Effective By Type of Clients Served



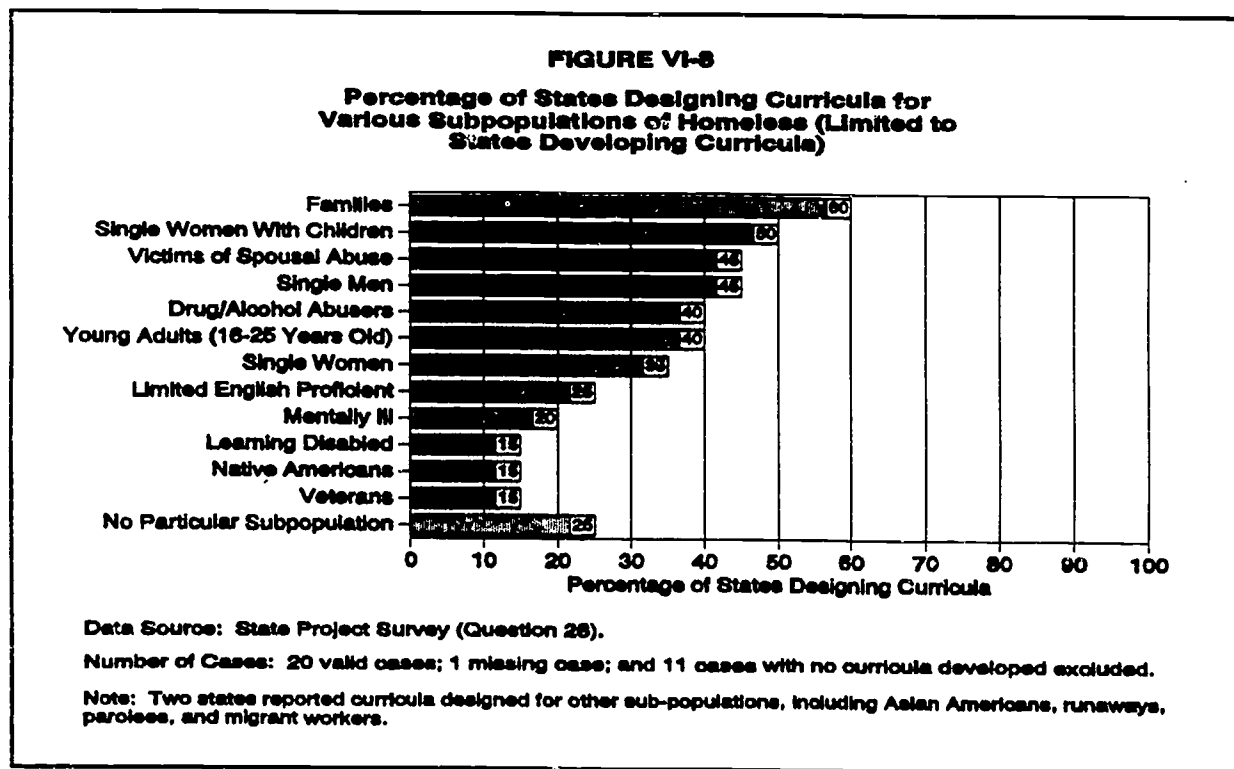
Data Source: Local Program Survey: Site Data (Questions 32, 33, 47, and 48).

Number of Cases: Sites Serving Victims of Spousal Abuse — 62 valid cases; 1 missing case/Sites Serving Recovering Drug and Alcohol Abusers — 180 valid cases/Sites Serving Mentally Ill — 47 valid cases/298 cases not serving a majority of any of the three subpopulations excluded.

Note: Computation of the percentage of sites in which each strategy has proven most effective is restricted to cases that offer the designated approach.

(0.6%) of budget to curriculum development costs, and local programs spend even less (0.4%). Yet, two-thirds of AEH state projects report that curricula designed for use with homeless adults have been developed in their state. These include: (1) existing curricula that have been substantially modified; (2) curricula developed as part of a regional consortium; and (3) curricula developed at the local program level (with or without state support).

Typically, these curricula are designed to meet the needs of smaller groups of individuals within the greater homeless population. Figure VI-8 displays the percentage of states in which curricula designed for various subpopulations have been developed. Most states have focused attention on the development of instructional materials for families (60%) and single women with children (50%), while fewer have developed curricula for victims of spousal abuse (45%), single men (45%), substance abusers (40%), and young adults (40%), and fewer still have developed materials designed for single women (35%), limited English proficient clients (25%), the mentally ill (20%), learning disabled clients (15%), Native Americans (15%), and veterans (15%).



The fact that the greatest emphasis has been placed on the development of instructional materials for families and single women with children is somewhat surprising, considering that these two groups comprise just one-third (35.7%) of the homeless adults served by the AEH program.

CHAPTER VII

PROGRAM OUTCOMES

Overview

A program's educational effectiveness is best determined by means of a careful evaluation of outcomes associated with its implementation. Unfortunately, the vast majority of evaluations of adult literacy programs fail to consider the full range of potential outcomes and seize quickly upon what is measurable in a reliable, objective, and efficient manner (Valentine, 1992). In more meaningful evaluations, a thorough understanding of a program's objectives precedes and guides the evaluation of program effectiveness, and the choice of outcomes is based on the goals that a program sets for itself.

Even when outcomes accurately reflect program objectives, in the absence of a carefully designed experiment, it is virtually impossible to assert with confidence that observed changes are attributable to program participation. In non-experimental evaluation designs, various threats to internal validity — selection, maturation, and historical effects, in particular — must always be considered in interpreting outcomes (Campbell and Stanley, 1963). In the case of programs in which participation is primarily voluntary, it is especially important to recognize that participants and non-participants may differ substantially in terms of motivation. Those who enroll in adult literacy programs may exhibit the propensity to grow and change even in the absence of program involvement. Maturation effects — intra-individual processes that vary systematically with the passage of time — represent another potential threat to validity. Although often disregarded, decades of research on adult development has established that adulthood is not a static state but, rather, involves social priorities and “developmental tasks” that evolve as one moves through various phases of adulthood (Cross, 1981). Finally, historical effects related to macro-level

changes — such as an upturn in the economy or a drop in unemployment — must also be considered in interpreting outcomes, especially those that involve the application of newly acquired skills.

Threats to internal validity, such as those described here, are less critical in what Stake (1967) refers to as “relative evaluation designs,” in which a program is compared, not with a control group or with a set of absolute standards but, instead, with other programs serving similar populations in similar temporal and social contexts. Moreover, the results of such evaluations are likely to prove more valuable to program administrators by highlighting those processes that are associated with the relative effectiveness of programs in achieving specific outcomes.

Guided by these considerations, the present chapter examines various outcomes associated with the Adult Education for the Homeless Program. The chapter consists of three related sections. First, employing a conceptual framework suggested by Valentine (1992), the underlying objectives of the AEH program are described. Second, based on measures that reflect these goals, program outcomes are evaluated. Finally, adopting a relative evaluation perspective, outcomes are examined in relation to various program structures, instructional practices, and client characteristics.

Program Objectives

Outcome Levels

Valentine (1992) has proposed a model of the outcomes of adult literacy education that is designed to facilitate evaluations of program effectiveness. According to this approach, outcomes fall into one of three categories, or “levels.” Level one outcomes occur within the individual program participant and include skill acquisition, information acquisition, and affective changes. Level two outcomes — resulting from the application of level one outcomes — represent changes

in behavior outside of the educational setting and manifest themselves in actions associated with various adult social roles, including that of citizen, community member, household decision-maker, parent, spouse, and worker. Finally, level three outcomes represent the cumulative impact on society of the actions comprising level two outcomes.

AEH Program Objectives

This conceptual model provides a useful framework for examining a program's objectives and offers a rational basis for selecting appropriate outcome measures. It is employed here to describe the objectives of the Adult Education for the Homeless Program — at the Federal, state, and local levels.

Federal Objectives

Although, collectively, the McKinney Act programs are designed to reduce homelessness on a societal scale (level three outcome), authorizing legislation does not posit this as an explicit objective of the AEH program.

Although level one outcomes are implicit in Federal authorizing legislation, the program's goals are described largely in terms of level two outcomes, especially those pertaining to employment and self-sufficiency among homeless adults. Thus, the McKinney Act defines "literacy training" as:

... adult education for homeless adults whose inability to speak, read, or write the English language constitutes a substantial impairment of their ability to get or retain employment commensurate with their real ability, that is designed to help eliminate this inability and raise the level of education of those individuals with a view to making them less likely to become dependent on others, to improving their ability to benefit from occupational training and otherwise increasing their opportunities for more productive and profitable employment, and to making them better able to meet their adult responsibilities. (*Federal Register*, 1989)

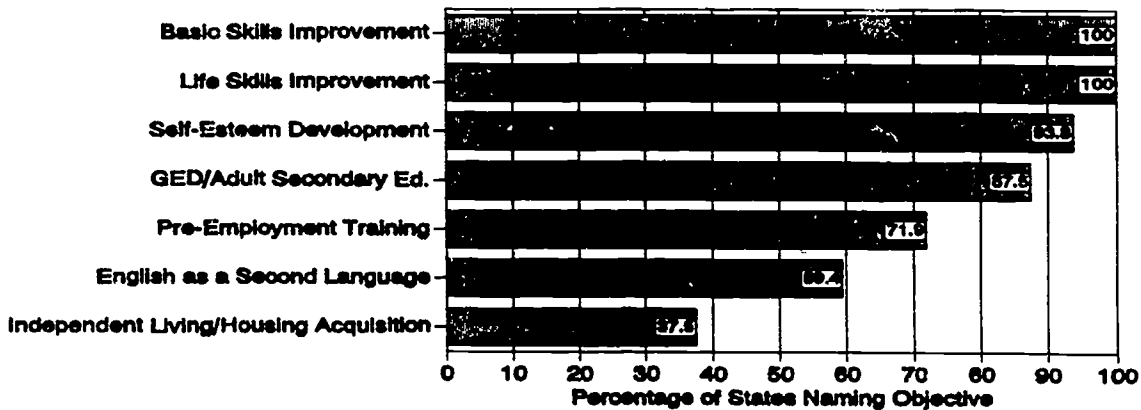
And, in the more recently enacted National Literacy Act of 1991, "literacy" is defined as:

... an individual's ability to read, write, and speak in English, to compute and solve problems at levels of proficiency necessary to function on the job and in society, to achieve one's goals, and to develop one's knowledge and potential.

State Objectives

At the state project level, relatively more emphasis is placed on level one outcomes, although level two outcomes are also recognized as relevant to the program's underlying purpose. Figure VII-1 displays the principal objectives of AEH state projects, based on the responses of project administrators. All state administrators recognize improvement in basic skills and life skills as principal program objectives. In addition, most name self-esteem development (93.8%), GED/adult secondary education (87.5%), pre-employment training (71.9%), and English as a second language (59.4%) as important program goals. Independent living/housing acquisition — the only explicitly level two outcome cited by these administrators — ranks last (37.5%). However, several other outcomes cited — i.e., life skills improvement, GED/Adult Secondary Education, and pre-employment training — are obviously intended to further level two objectives.

FIGURE VII-1
Principal Objectives of AEH State Projects



Data Source: State Project Survey (Question 1).

Number of Cases: 32 valid cases.

Note: Four states indicated additional program objectives, including: (1) family literacy and parent education programming; (2) job readiness services, such as career counseling and job referral; and (3) thinking and affective skills development.

Local Objectives

Local programs also define program objectives largely in terms of level one outcomes, especially those pertaining to personal goal achievement and intra-individual affective changes. This is revealed in Figure VII-2, which presents the percentage of sites at which various outcomes are named among the three leading measures of program success. At a majority of sites, the achievement of personal goals and social/psychological gains rank among the three leading indicators of success (58% and 50.3%, respectively). In addition, obtaining or making progress toward the GED is named by two in five sites (41.8%), and completing or making progress in Level I is named by nearly one-third of all sites (31.2%). However, only three level two outcomes — obtaining or improving employment, obtaining housing, and getting off welfare — are identified as leading measures of success and, in each case, by fewer than one in five sites.

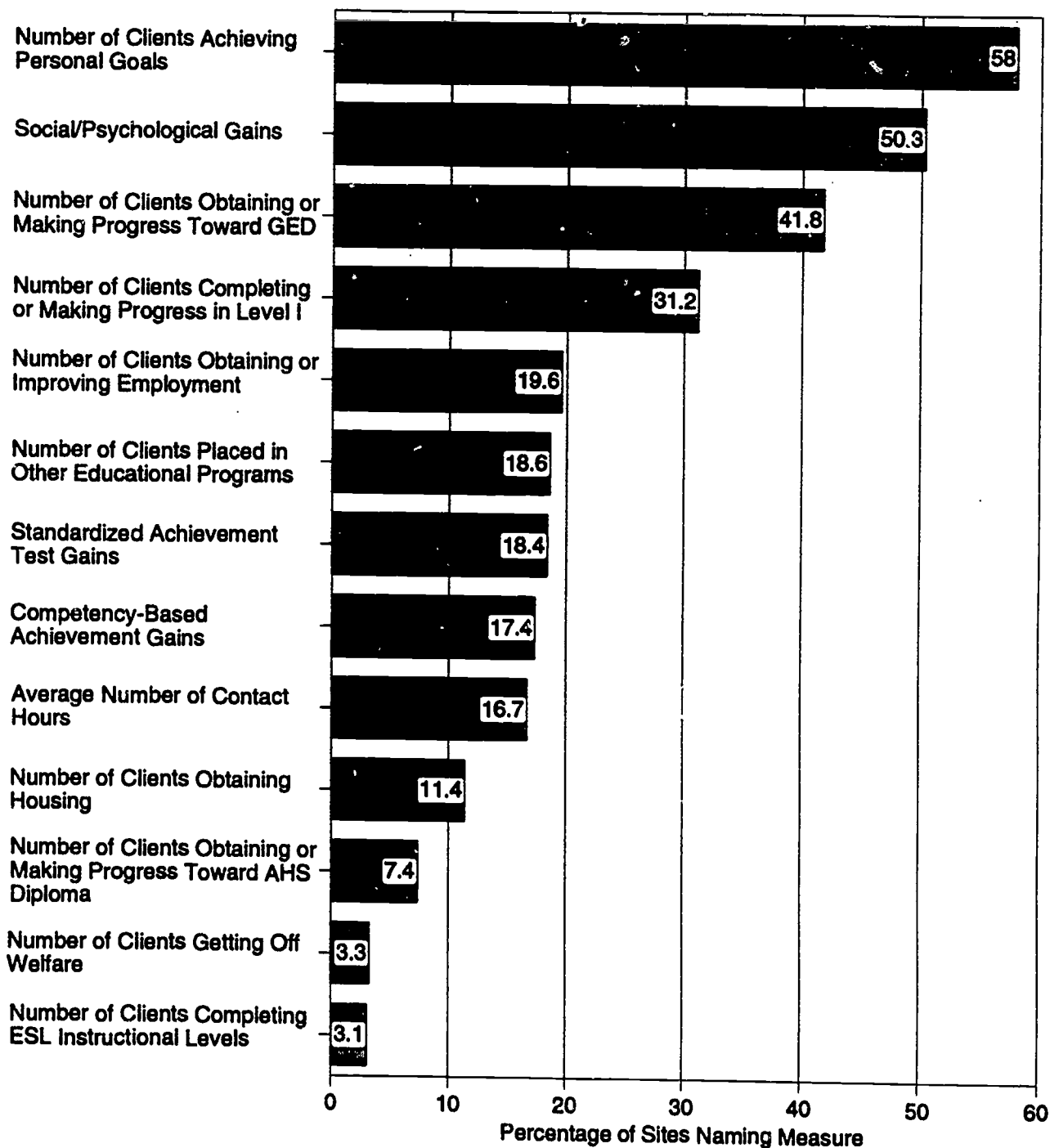
Description of Program Outcomes

The preceding analysis demonstrates that Federal, state, and local authorities place different emphases on the various objectives of the AEH program. While Federal guidelines focus more on goals related to the application of skills outside the classroom, state projects tend to emphasize skill acquisition, and local programs underscore the importance of personal goal accomplishment and intra-individual affective changes. No single perspective is right or wrong. Rather, in combination, the various goals and objectives expressed at each administrative level comprise the program's overall purpose.

Viewed in the context of Valentine's conceptual framework, these findings indicate that, overall, the objectives of the Adult Education for the Homeless Program are most accurately reflected in a combination of level one and level two outcomes. Below, following a brief discussion of methodological issues, outcomes at each level are examined.

FIGURE VII-2

Percentage of Sites Naming Various Measures of Success Among the Top Three



Data Source: Local Program Survey: Site Data (Question 43)

Number of Cases: 581 valid cases; 7 missing cases.

Note: Approximately four percent of sites named measures of success other than those shown here, including self-assessments, staying clean and sober, and daily incident reports.

Methodological Considerations

In this study, outcome data are derived from program records for all clients who enrolled in the AEH program in June 1992 and pertain to the three-month period following each client's enrollment. While approximately two-thirds of program participants leave the program within three months, any program effects accruing to the remaining one-third after that period are not reflected in these data. The findings presented in this section thus represent conservative estimates of the various outcomes associated with program participation.

To some degree, operationalizing outcomes in this way offsets the potentially inflationary effects of the various threats to validity reviewed earlier. Moreover, maturation and historical effects may be somewhat less critical, given the limited time-span over which data are collected. Finally, because about one-third of program participants are required to enroll in the AEH program as a condition of residence, the potential for selection bias is proportionately reduced.

Acquisition of Skills (Level One Outcomes)

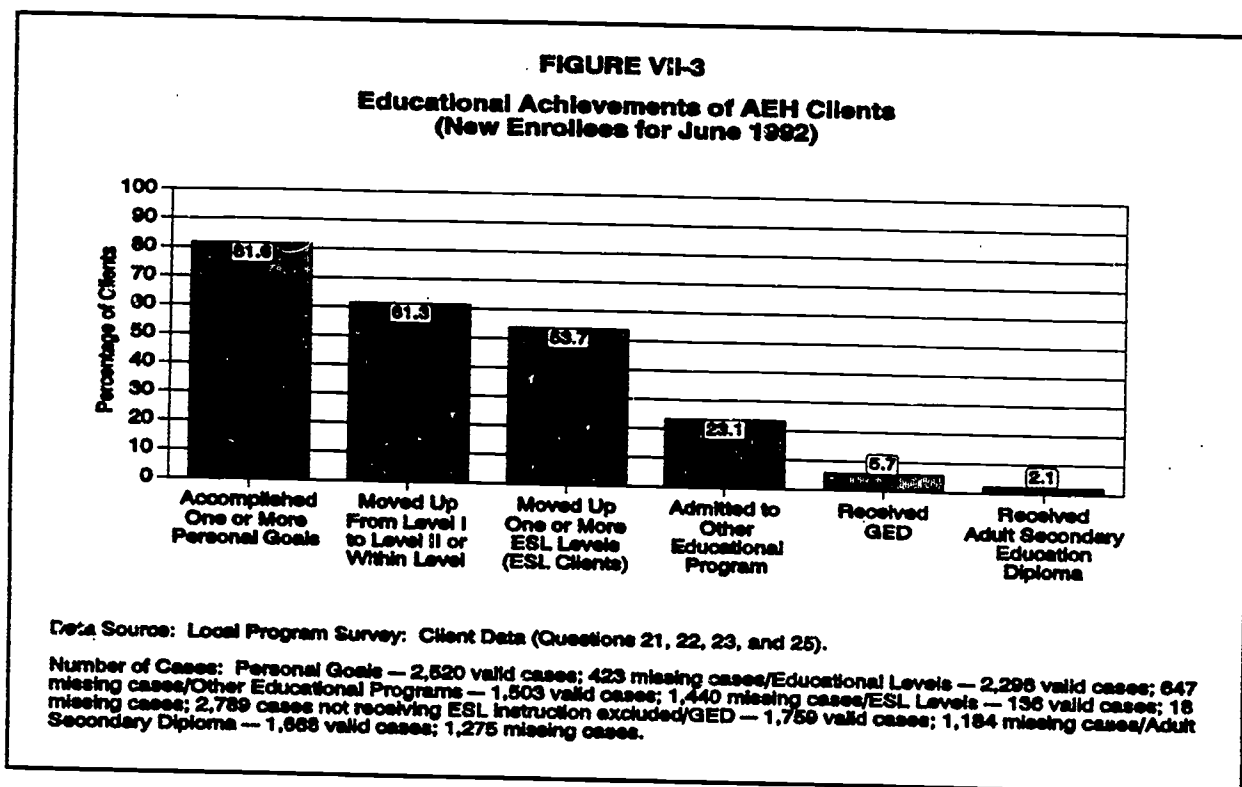
Level one outcomes — i.e., those that occur within the individual program participant — are emphasized at the state and local levels. According to Valentine (1992), outcomes at this level include skills/information acquisition and affective changes. However, because local AEH programs have experienced difficulty collecting data pertaining to affective outcomes, in the present context, level one outcomes refer only to educational accomplishments.

Summary Measures

Figure VII-3 presents summary data describing various educational accomplishments of AEH program participants. An overwhelming majority of participants accomplished one or more personal goals (81.6%), 3 in 5 moved up from Level I to Level II or within level¹ (61.3%), 1 in 5

¹ Adult educators often measure educational gains in terms of movement from Level I to Level II (see Chapter V for a description of the two levels). In this study, this measure has been extended to include intra-level gains, thus providing a more discriminating measure of achievement.

was admitted to another educational program (23.1%), 1 in 20 received a GED (5.7%), and approximately 1 in 50 received an adult secondary education diploma (2.1%). Furthermore, among clients enrolling in English as a second language (ESL) programs, a majority (53.7%) moved up one or more ESL levels.



GED Test Score Gains

In several cases, client records contained GED test score data for two or more administrations of the GED or GED practice tests. For these clients, it is possible to assess actual changes in GED scores in relation to program participation. Table VII-1 displays the mean change in GED test scores for these individuals and the mean number of instructional hours between test administrations. Although the average client received less than 20 hours of instruction between test administrations, average scores increased significantly — by about five

points — in each of the five GED subject areas. While these findings are encouraging, one is unable to conclude from these data alone that such gains represent program effects. Indeed, the fact that the number of instructional hours received between test administrations is unrelated to test score changes in each of the five GED subject areas (not presented here) suggests that the observed gains may be attributable to the effects of testing.

TABLE VII-1

**Mean Change in GED Test Scores for Clients Taking
the GED/GED Practice Test on More Than One Occasion
(New Enrollees for June 1992)**

GED Test Area	Mean Test Score		Mean Change in Score	Mean Number of Hours Instruction Between Test Administrations
	First Administration	Second Administration		
Math	40.0 (57)	45.2 (57)	5.1** (57)	18.6 (57)
Science	44.0 (49)	48.2 (49)	4.2** (49)	16.6 (41)
Writing	42.0 (41)	47.2 (41)	5.2** (41)	18.7 (34)
Social Studies	44.3 (52)	49.8 (52)	5.5** (52)	17.9 (41)
Literary Arts	44.1 (57)	49.1 (57)	5.0** (57)	16.6 (49)

Data Source: Local Program Survey: Client Data (Question 20).

Number of Cases: The number of valid cases for each cell of the table are presented in parentheses.

** Paired-sample t-test significant at the .01 level (one-tailed test).

Life Skills

For this study, a uniform reporting instrument based on an adaptation of the CASAS core competencies was developed to collect data pertaining to life skills achievement. Seven life skill areas were identified — community resources, social skills, consumer economics, occupational knowledge, health and government/law — and data pertaining to clients' accomplishments in as many as four skills within each area were collected.

Accomplishments in each of 21 life skills were rated by instructors at each site — 0 = no progress, 1 = some progress, 2 = much progress, and 3 = successfully completed — and a summary measure of life skills achievement was computed by summing these ratings and dividing by the number of skills in which instruction was received. On average, clients received training in 8.6 life skills and exhibited a mean life skills achievement score of 1.5 (approximately half-way between “some” and “much” progress).

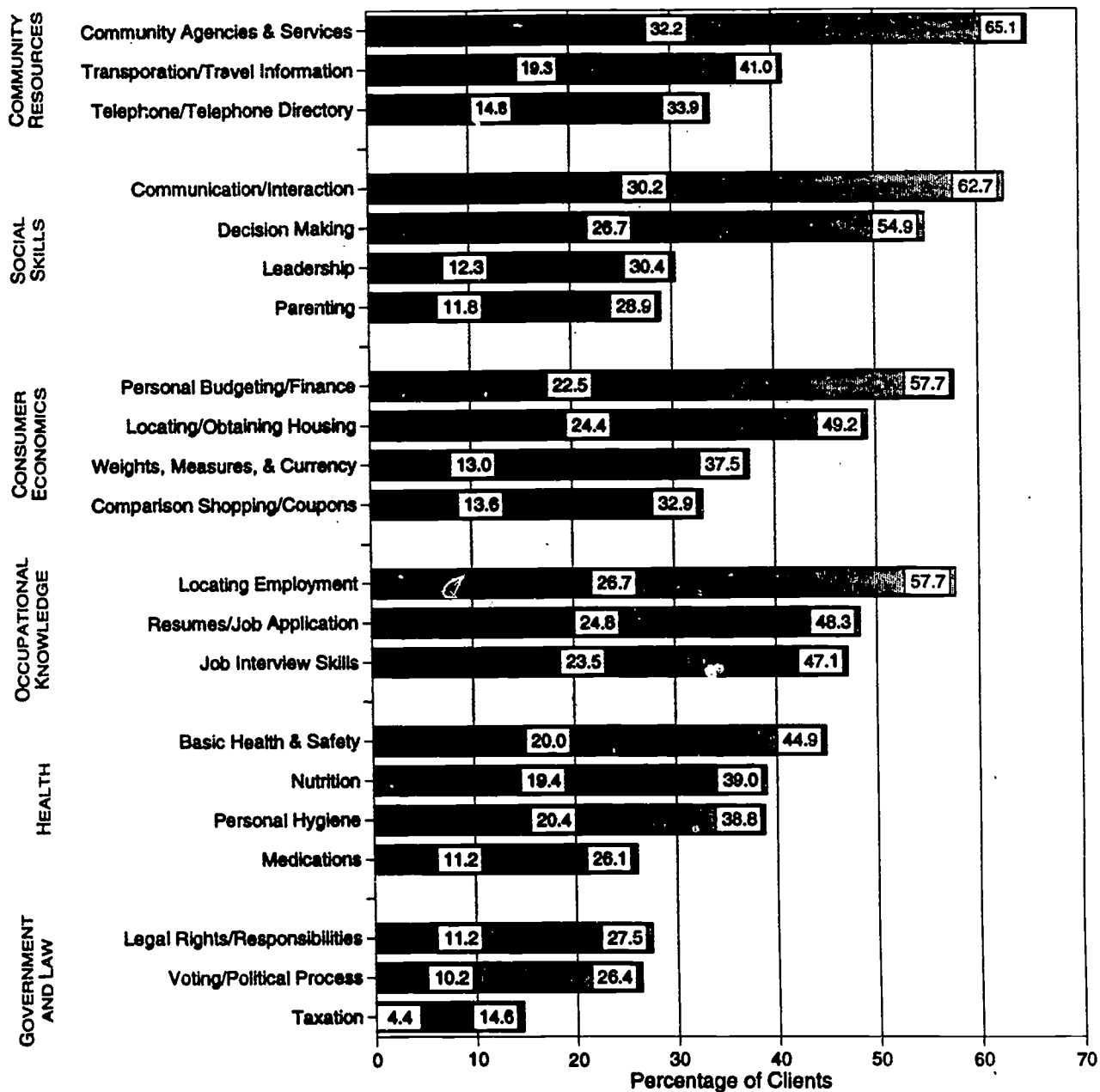
Figure VII-4 presents the percentage of clients receiving instruction in each of the 21 life skills and the percentage that either “successfully completed” instruction or made “much progress” in each area. Those life skills in which a majority of participants received instruction include community agencies and services (65.1%), communication/interaction (62.7%), personal budgeting/finance (57.7%), locating employment (57.7%), and decision making (54.9%). Fewer participants received instruction in skills pertaining to leadership (30.4%), parenting (28.9%), legal rights/responsibilities (27.5%), voting/political process (26.4%), medications (26.1%), and taxation (14.6%). For the most part, accomplishments were comparable across the various skills for which data were collected. Between one-third and one-half of those receiving instruction in each of the 21 life skills either successfully completed instruction or made substantial progress.



Application of Skills (Level Two Outcomes)

Although level one outcomes are implicitly included within the framework of Federal authorizing legislation, level two outcomes, in particular, are emphasized by Federal program authorities. On the other hand, state projects and local programs tend to focus somewhat less on

FIGURE VII-4

Percentage of Clients Receiving and Making Progress in Life Skills Instruction
(New Enrollees for June 1992)



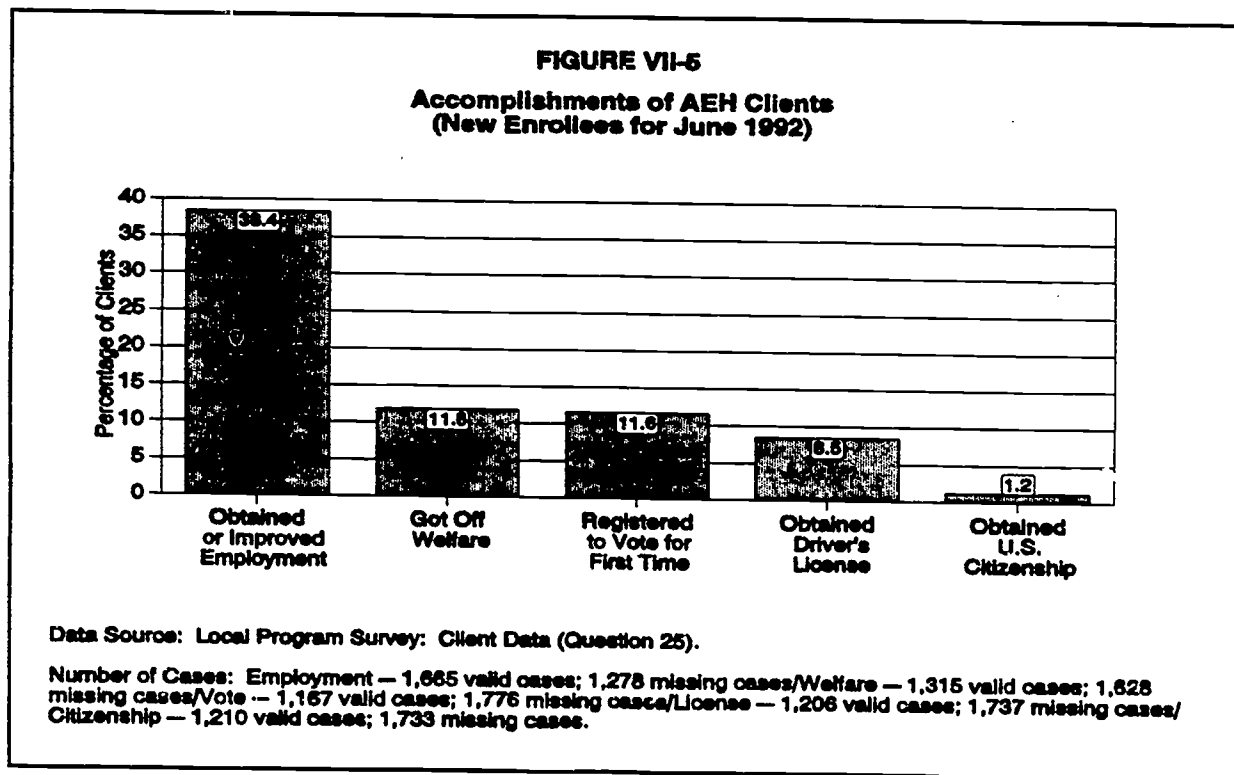
 = Percentage of clients receiving instruction in life skill area.
 = Percentage of clients successfully completing or making much progress in life skill area.

Data Source: Local Program Survey: Client Data (Question 24).

Number of Cases: 2,454 valid cases; 489 missing cases.

the actual application of skills to real-world contexts than on the acquisition of these skills.² In part, this may be due to the fact that data pertaining to such outcomes are difficult to obtain, particularly in the case of homeless adults. Whatever the reason, any evaluation of AEH program outcomes would be incomplete without examining the program's success in transforming the homeless men and women it serves into independent, productive, and responsible members of society.

Data pertaining to various level two outcomes are presented in Figure VII-5. In most cases, because records are often incomplete in this area, findings are based on less than one-half of the full participant sample. Consequently, these data should be interpreted cautiously. Nearly 2 in 5 clients (with complete records) obtained or improved their employment (38.4%), and about 1 in 10 got off welfare (11.8%), registered to vote for the first time (11.6%), and/or obtained a driver's license (8.5%). In addition, 1 percent of clients (1.2%) obtained U.S. citizenship.



² However, in many instances, instruction is provided in real-world contexts.

CHAPTER VIII

WHAT WORKS

While the foregoing chapter examines the *overall* impact of the AEH program in terms of various outcomes, this chapter focuses on the relationships among outcomes and a variety of instructional practices, program structures, and learner characteristics. The goal of this analysis is to identify those contexts and practices that make programs more or less effective in achieving various outcomes. As Hayes (1992) observes, "through such comparisons we can begin to determine what instructional practices seem to be most effective in achieving certain outcomes given certain contexts and certain learners."

Identification of effective instructional practices requires multivariate analysis. Many aspects of instruction tend to occur together (for example, most learners receiving small group instruction also receive individual instruction). Thus, the effects of one practice may confound estimates of the effects of other practices. Similarly, some instructional practices are more common at some types of sites, or sites serving some types of clients, than are other practices. Analyses that ignore these interrelationships risk overlooking effective practices or overstating the impact of less effective practices. Therefore, our assessment of the efficacy of instructional approaches considers all of these factors simultaneously.

The analyses presented in this chapter focus on the factors influencing two types of outcomes: student persistence (as measured by the number of hours of instruction that they receive) and academic achievement. We target two measures of academic achievement: whether clients are reported to advance academically, and whether students enrolled in GED programs receive a GED certificate.

Of course, an almost infinite list of client and site traits may influence learner success in the AEH program. These analyses concentrate on several characteristics and instructional approaches that instructors identified as particularly effective (see Chapter VI). In addition, we control for client characteristics and other program features that are likely to influence student success. These factors can be grouped into three general categories:

- **Site characteristics.** This includes the context of instruction (whether a site is non-residential or residential, and if it is residential, whether or not AEH participation is required for residence); urbanicity of the site; the primary population served at the site; and the student/teacher ratio.
- **Student participation.** This includes the type of educational programs in which learners enroll (e.g., ABE, GED, etc.) and the types and amount of instruction that they receive;
- **Student characteristics.** This includes the students' age; gender; amount of time homeless; prior education; academic level at entry; employment status; and duration of unemployment if they are unemployed.

From a policy perspective, some of the site characteristics and student participation indicators may prove most interesting. Specifically, the provision of shelter is a key issue in delivering any service to people who do not have homes. Many instructors who responded to our survey believed that educational services could be delivered more effectively at residential sites. While they expected that requiring program participation increased attendance, they also believed that clients who were compelled to attend were less motivated, implying that it might be more difficult to educate them. Are residential sites better? Do residential sites that require AEH participation as a condition of residence see lower academic achievement? These are some of the policy questions addressed in this chapter.

Other questions center on student participation. The impact of AEH programs is limited by the amount of instruction that learners receive. Programs that more effectively encourage participation and persistence stand a better chance of improved outcomes. Beyond this, some modes of instruction may prove more effective than others. Our survey of principal instructors at

each site revealed a widespread belief that individual and small group instruction were the most effective modes of instruction. However, while respondents at nearly three in five sites judged individual instruction to be the most effective (59.2 percent), only about one in five respondents judged small group instruction to be the single most effective strategy (21.8 percent). The multivariate analyses presented in this chapter provide an opportunity to assess the relative efficacy of these various modes of instruction.

This chapter proceeds in four sections. The first section below catalogues some of the differences in the client and site characteristics across different types of sites. The second section, *Student Participation*, estimates the amount of instruction that students receive in AEH programs using multivariate methods to identify student and site characteristics that influence the amount of instruction received. The third section, *Academic Achievement*, again draws upon multivariate statistics, this time to identify factors (including the type and amount of instruction received) influencing learning. The final section briefly summarizes the key findings from this chapter.

Differences Across Types of Sites

Sites with different characteristics often serve clients with different characteristics. As a prelude to the multivariate analyses of the subsequent sections, this section begins to develop portraits of different types of sites in terms of the clients that they serve, the modes of instruction they offer, and other characteristics that distinguish one site from another.

We begin this description by grouping AEH sites into three mutually exclusive categories that address an issue of key policy concern: whether the sites provide residence and whether this shelter is conditional on program participation. Thus, the three types of sites are:

- non-residential sites;
- residential sites in which AEH participation is not required as a condition of residence (residential-voluntary); and

- residential sites in which AEH participation is required as a condition of residence (residential-compulsory).

The characteristics of clients attending the different programs are, indeed, different. For example, clients at compulsory sites tend to have more years of prior education, are less likely to be women, have been unemployed for less time, and are more likely to participate in lifeskills and Adult Basic Education (ABE) programs. Other characteristics of the sites also differ. Student/teacher ratios tend to be highest at compulsory sites, clients at non-residential sites are likely to be instructed by staff with less postsecondary education, and clients at compulsory sites are more likely to find themselves at programs serving primarily recovering drug addicts and alcoholics. These differences are described in detail below.

Site Characteristics

Table VIII-1 presents the percent of clients enrolled in sites with various site characteristics. Perhaps the most striking set of figures in this table concern the student/teacher ratios at the different types of sites.¹ Clients at compulsory sites were far more likely to be enrolled at sites with high student/staff ratios — almost 60 percent were in sites in which more than 10 students enrolled (during the month of June) for each staff member on site. The corresponding figure is only 12 percent for voluntary-residential sites, and 16 percent for non-residential sites. Student teacher ratios were most favorable at non-residential sites, where over half of the students were enrolled in sites with three or fewer students per staff member.

The geographic distribution of sites also varies. Residential sites are not typically located in rural areas. Rural, residential-compulsory sites are particularly rare.

¹ These figures represent the number of new entrants during the month of June, divided by the number of staff members. The actual student/teacher ratios are affected by many other factors, including the regularity of attendance, the persistence of clients, etc. However, this is the best indicator available, and it is reasonable to expect this indicator to be highly correlated with better measures of the student/teacher ratio.

Table VIII-1

Percent of Clients in Sites with Various Characteristics

Site Features	Residential		Non-Residential (percent of clients)
	Compulsory (percent of clients)	Voluntary (percent of clients)	
	(n =)	(n =)	
Student/Staff ratio — clients entering during June per staff member	(n = 1072)	(n = 1264)	(n = 529)
	< 3	28.3	54.6
	Between 3 and 10	59.8	29.5
	More than 10	11.9	15.8
Location	(n = 1078)	(n = 1276)	(n = 529)
	Urban	36.9	23.4
	Rural	7.8	14.8
	Town or Suburb	55.2	60.5
Support Services			
	Transportation vouchers	41.8	44.8
Child Care	36.6	43.6	29.0
Staff Credentials:	(n = 1016)	(n = 1080)	(n = 502)
	Average years of post- secondary education		
	0-2	10.0	10.4
	3-4	46.3	35.7
≥ 4	43.8	54.0	
Average Years of Adult Ed Teaching	(n = 1078)	(n = 1276)	(n = 529)
	0-1	15.0	16.6
	1.1-4	42.0	39.7
	≥ 4	43.0	43.7

Table VIII-1

**Percent of Clients in Sites with Various Characteristics
(Continued)**

Site Features	Residential		Non-Residential
	Compulsory	Voluntary	
	(percent of clients)	(percent of clients)	(percent of clients)
	(n = 1078)	(n = 1276)	(n = 529)
Instructional Strategies			
Coop. learning	64.8	66.9	70.1
Intergenerational	17.7	18.4	21.0
Experiential	45.4	44.4	52.2
Workbook	80.2	84.3	87.9
Creative writing	58.4	51.6	59.0
Other	20.7	28.6	23.1
	(n = 1077)	(n = 1262)	(n = 512)
Primary Subpopulation Served			
Victim of spouse abuse	10.6	9.4	.8
Recovering drug/alcohol abuse	61.3	28.3	19.4
Limited English	.2	2.6	3.9
Other	27.9	61.9	75.9

The educational levels of staff varied across instructional settings as well. Clients in non-residential sites were more likely to enroll in sites where the average educational level of the staff was higher — 54 percent were in sites where the average staff member had at least 4 years of postsecondary education. Across all three settings, only about 10 percent of clients enrolled in sites in which the average staff member had two years or less postsecondary education.

Staff members were asked to identify the primary population that was served at that site. At compulsory sites, a greater proportion of clients were enrolled in sites that identified their

primary clientele as recovering from drug/alcohol abuse (61.3 percent) than either voluntary (28.3 percent) or non-residential sites (19.4 percent). In addition, clients at compulsory and voluntary sites were more likely to be enrolled in sites serving victims of spousal abuse (10.6 and 9.4 percent, respectively) than clients at non-residential sites (0.8 percent).

Client Characteristics and Participation

In addition to differences in site characteristics across types of sites, the characteristics of clients served in the three settings also varied. Table VIII-2 summarizes these differences.

Generally, education level at enrollment and level of prior education were similar across the three sites, with the exception of individuals with 11-12 years of prior education. A higher percentage of individuals with 11-12 years of prior education enrolled at compulsory sites (44.3 percent) than voluntary (38.7 percent) or non-residential sites (37.2 percent).

Table VIII-2

Percent of Clients with Various Characteristics by Compulsory, Voluntary, and Non-Residential Sites

Client Characteristics	Residential		Non-Residential (percent of clients)
	Compulsory	Voluntary	
	(percent of clients)	(percent of clients)	
	(n = 1078)	(n = 1276)	(n = 529)
Prior Education			
Fewer than 6 years	1.9	3.4	4.3
6-8 years	11.4	12.1	14.2
9-10 years	25.3	26.1	28.2
11-12 years	44.3	38.7	37.2
12 or more	17.1	19.7	16.1
	(n = 1078)	(n = 1276)	(n = 529)
Education Level at Enrollment			
Level I	43.6	44.2	46.8
Level II	56.4	55.8	53.2
	(n = 1078)	(n = 1276)	(n = 529)
Employment Status at Enrollment			
Employed full-time	4.6	6.7	5.3
Employed PT	8.8	7.2	10.3
Unemployed	86.6	86.2	84.4
	(n = 1070)	(n = 1273)	(n = 528)
Sex			
Male	59.8	50.4	57.2
Female	40.2	49.6	42.8

Table VIII-2

Percent of Clients with Various Characteristics by Compulsory, Voluntary, and Non-Residential Sites
(Continued)

Client Characteristics	Residential		Non-Residential (percent of clients)
	Compulsory	Voluntary	
	(percent of clients)	(percent of clients)	
	(n = 1077)	(n = 1276)	(n = 529)
Participation in Educational Programs			
GED	21.8	29.9	31.0
Adult Secondary Education	3.2	8.4	9.4
Adult Basic Education	51.1	35.6	36.5
ESL	3.5	4.7	10.0
Employability	38.8	31.0	26.8
Life Skills	87.3	80.9	82.0
Self-esteem	53.1	37.2	41.6
Other	9.7	11.3	13.4
	(n = 1057)	(n = 1190)	(n = 499)
Age			
16-24	22.9	28.5	33.3
25-44	65.4	61.3	56.3
45-59	10.8	8.9	9.2
60+	.9	1.3	1.2
	(n = 342)	(n = 562)	(n = 222)
Number of Months Unemployed			
≤ 3	39.2	27.9	26.6
> 3	60.9	72.1	73.5
	(n = 513)	(n = 787)	(n = 290)
Number of Months Homeless			
≤ 1	49.5	39.5	24.1
2-5	21.8	32.3	37.6
≥ 6	28.7	28.3	38.3

A higher percentage of women enrolled at voluntary residential sites (49.5 percent) than compulsory residential sites (40.2 percent). The sample size is not large enough to distinguish the apparent differences between the non-residential sites and the other two types of sites from chance fluctuation.

The number of months clients were unemployed varied across sites. The percentage of clients unemployed for 3 months or less was significantly higher at compulsory sites (39.2 percent) than either voluntary (27.9 percent) or non-residential sites (26.6 percent). Similarly, the number of months that clients were homeless varied across the three instructional settings. The percent of clients who were homeless for less than one month was higher in both types of residential sites than in non-residential sites. However, individuals who were homeless for one month or less were significantly more likely to enroll in a residential-compulsory site (38 percent) than voluntary-residential sites (27.9 percent); and least likely to enroll in non-residential sites (18.6 percent). These findings suggest that the clientele served by compulsory residential sites have been removed from the mainstream of society for less time than clients served at other types of sites.

Participation in educational programs differed across the three sites. First, a higher percentage of clients enrolled in non-residential sites (31 percent) participated in GED programs compared to compulsory sites (21.8 percent). Few differences existed between non-residential and voluntary sites in terms of GED participation. Second, the compulsory sites had a higher percentage of clients enrolled in life skills (87.3 percent) than either voluntary (80.9 percent) or non-residential sites (82 percent). Third, a significantly higher percentage of clients in compulsory sites (51.1 percent) enrolled in Adult Basic Education than individuals enrolled at voluntary (35.6 percent) or non-resident sites (36.5 percent).

These findings suggest distinct differences across types of programs, including differences in the types of clients served, the settings in which they are served, and the services available to them. These sorts of differences across types of sites must be statistically controlled if the final analysis is to yield a fair comparison of the types of sites and modes of instruction.

Client Participation

Clients must participate in AEH instruction if the program is to effect them. Clients who do not receive enough instruction will not learn from the program. This section begins by addressing the question: how much instruction to AEH participants receive. Once this descriptive baseline is established, we proceed to investigate the factors influencing the amount of instruction that clients receive.

How Much Instruction Do Clients Receive?

On first glance it appears that clients receive an average of between 33 and 45 hours of instruction (See Table VIII-3). Individuals enrolled in compulsory sites received the fewest hours of instruction while individuals at non-residential sites had the most. The differences in the amount of individual instruction between compulsory and non-residential sites is especially large — clients at compulsory sites received an average of 12.1 hours, compared to 19.8 hours at non-residential sites. On average, individuals enrolled at non-residential sites (44.5 hours) received nearly 9 hours more total instruction than individuals at either voluntary (35.1 hours) or compulsory (33.0 hours) sites.

Table VIII-3

Unadjusted Average Number of Hours of Instruction by Site

Unadjusted	Residential		Non-Residential
	Compulsory	Voluntary	
Individualized	12.1 (624)	15.1 (775)	19.8 (372)
Small Group	20.5 (648)	24.1 (648)	24.5 (269)
Total Hours	33.0 (903)	35.1 (1118)	44.5 (487)

NOTE: Number of valid cases for each sample is presented in parentheses. Only those cases with hours of instruction per day less than 10 were included in the analyses. Only those individuals receiving some instruction were included in the analysis.

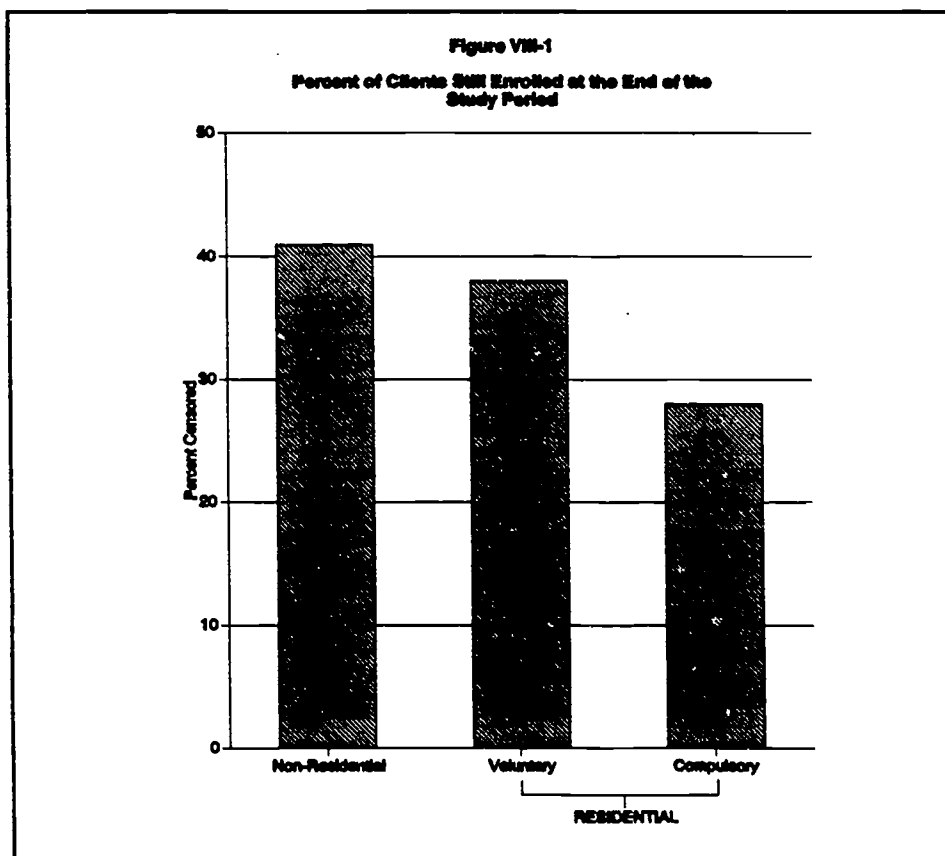
These raw figures, however, tell only part of the story. Our study covered only a three month period. Individuals enrolled beyond the end of the three month study period received more hours of instruction than we observed. We know only that they received *at least* as many hours of instruction as reported on our survey. This fact could have a substantial effect, because nearly one-third of the clients remained enrolled at the end of the study.

Figure VIII-1 presents the percent of clients still enrolled at the end of the study period. Over one-quarter of the clients were still enrolled at the end of the study period at each type of site, with nearly two in five clients still enrolled in non-residential sites (41 percent) and voluntary sites (38 percent). Compulsory sites had the fewest number of clients continue their enrollment (28 percent).

These figures suggest that the raw data understate the disparity in the hours of instruction received at compulsory sites and other types of sites. Clients at compulsory sites not only received the fewest hours of instruction during the study period, they were also the least likely to continue enrollment beyond it. However, compulsory sites may identify clients severance from

the program more reliably than non-compulsory sites. The compulsory sites had probably implemented mechanisms to track attendance and enrollment before this study began — they need it to compel students to attend. Non-compulsory sites had no such requirements. Under the best of circumstances, it is difficult to identify dropouts. In programs for the homeless where attendance is voluntary, identifying the point at which clients terminate their participation is virtually impossible.

With this caution, we present adjusted estimates of the number of hours of instruction that clients receive, adjusting for those clients still enrolled. Statistical methods are available to make these estimates when the data are *censored*, that is, when some students are still enrolled at the



end of the study period. By specifying a sufficiently flexible distribution function (e.g., a Weibull distribution), we can fit it to the data using maximum likelihood estimation even in the presence

of censored data. Thus, we can compare estimated averages of hours and days of instruction that are not biased by censoring. See Appendix D for details of the statistical framework.

Table VIII-4 presents the results of this analysis. Overall, the gap between the total hours of instruction received at residential and non-residential sites widens when adjustments are made for students still enrolled at the end of the study period. Students at non-residential sites receive an average of about 54 hours of instruction, while students at both types of residential sites receive just under 40 hours of instruction. Among those clients receiving individual instruction, clients at compulsory residential sites received far fewer hours than clients at non-residential sites.

Clients at compulsory residential sites receive not only fewer hours of instruction, they receive fewer hours of individual instruction. The actual differences in hours received are greater than apparent in the descriptive analysis when one takes into account clients still enrolled at the end of the study period.

Table VIII-4
Adjusted Average Number of Hours of Instruction by Site

Adjusted	Residential		Non-Residential
	Compulsory	Voluntary	
Individualized	14.6 (623)	23.1 (775)	25.7 (372)
Small Group	23.8 (647)	33.7 (648)	36.8 (269)
Total Hours	37.1 (902)	39.9 (1118)	54.2 (487)

NOTE: Number of valid cases for each sample is presented in parentheses. Only those cases with some instruction, but reporting fewer than 10 hours of instruction per day were included in the analyses.

At all types of sites, most students who receive small group also receive individual instruction. However, the mix of different types of instruction received by individual students is

not identical across sites. The amount of each type of instruction received was correlated in each type of site, though the strength of these correlations varied across types of sites. Table VIII-5 presents these figures.

Table VIII-5
Relationship Between Individual and Small Group Instruction

	Residential sites		Non-Residential
	Compulsory	Voluntary	
Percent of clients receiving small group instruction who also receive individual instruction	72.2%	76.9	78.4
Correlation between hours of individual instruction and hours of small group instruction	.47	.27	.16

The correlations indicate that the clients who receive the most small group instruction also receive the most individual instruction. This relationship is strongest at the compulsory sites. At the other sites, and the non-residential sites in particular, this relationship is much more tentative. This suggests that the mix of small group and individual instruction is more variable at both non-residential and voluntary residential sites.

In summary non-residential sites provide a greater number of total hours of instruction and a greater number of both individualized and small group instruction. This finding occurs when the data are both adjusted and unadjusted for censoring. Clients who receive individual instruction also tend to receive small group instruction. The relationship between the amount of individual and small group instruction received varies across different types of sites.

These findings challenge the accepted wisdom in the field. Principal instructors responding to our survey thought that clients at residential sites would receive more instruction, and that clients at compulsory-residential sites would participate even more. A simple comparison of absolute levels of participation, however suggests that this is not the case. On the contrary, participation is highest at non-residential sites and lowest at compulsory residential sites.

It is possible that the different amounts of intervention that clients receive at different types of sites is only spuriously related to the residential or compulsory nature of the sites. As is clear from the comparison of differences across types of sites in the preceding section, differences in the types of sites (residential-voluntary, residential-compulsory, or non-residential) are associated with other site characteristics and tend to be attended by clients with somewhat different characteristics. The following section uses multivariate methods to sort out the effects of the various characteristics.

Factors Influencing Client Participation

When multivariate statistics hold cross-site differences constant, they tell a somewhat different story than the descriptive statistics. The instructional setting (residential-compulsory, residential voluntary, and non-residential) is shown to be unrelated to client persistence. The differences apparent in the bivariate tables are largely attributable to the differences in the student/staff ratios across instructional settings.

These results emerge from a survival analysis of the number of hours of instruction received by AEH clients. *Survival analysis* refers to regression methods used to analyze the amount of time people (or whatever unit of analysis) spend in a particular state (in this case, attending AEH programs). These models prove particularly useful for censored data, that is, data which measure only part of the total amount of instruction. In this case, about one third of all clients for whom we have data were still enrolled when our study period ended. Therefore, we do

not actually know the total number of hours that they would ultimately receive, except that they had already received *at least* as many hours as observed.

For this analysis, we treated the measured hours of instruction as incomplete (censored) under three conditions:

- The client was still enrolled at the end of the study period;
- The client left the program because they found employment or because they met their educational objective (in this case it is not clear that further persistence is a desirable outcome and we don't know how long they would have participated had they not found employment); or
- The client was forced to leave the program (in this case we do not know how long the client would have chosen to stay had he or she not been forced from the program).

The multivariate model, described in details in Appendix D, controlled for:

- Individual characteristics including gender, age, previous educational level, employment status, and duration of homelessness;
- Site characteristics in addition to the residential or compulsory nature of the program including urbanicity, the proportion of staff with a college degree, and the primary population served; and
- Client program participation, including whether they took part in academic (ABE, ASE, or GED program), lifeskills programs, or ESL programs.

Table VIII-6 presents key results from this analysis (Appendix D contains complete regression results). The figures in Table VIII-6 are *elasticities*, that is, they represent the percent change in the expected hours of instruction associated with a percent change in the explanatory variable. The reason for preferring a model of this type (rather than a linear model in which, for example, a year change in age is associated with x hours more instruction) is the wide range in hours of instruction received. For example, suppose we opt for a linear model and an extra year of age is associated with an extra 0.4 hours of instruction. Now, suppose we have two students, one whose characteristics (other than age) suggest that he will remain enrolled for 10 hours of instruction, and one whose characteristics suggest that she will remain enrolled for 80 hours. A

10 year age difference would suggest a four hour change in the amount of instruction received — this is a substantial effect for the first student, and a trivial effect for the second. However, some factors have a “big” effect on people whose characteristics put them at both ends of the spectrum. Therefore, a model which yields elasticities is preferable.

As an example of how to read the table, consider the client’s age. Table VIII-6 presents an elasticity of 0.40, implying that a one percent change in a client’s age is associated with 0.4 percent change in the number of hours of instruction, other things being equal. Of course some variables represent categories (such as residential versus non-residential). In these cases, the elasticity represents the percent change in the expected hours of instruction associated with membership in that category. Consider the client’s prior educational level as an example of a categorical variable (the variable indicates whether the client entered the program at Level II). The estimate presented in Table VIII-6 is 0.49, suggesting that clients entering at Level II receive 49 percent more hours of instruction than similar clients who had attained only Level I skills by the time they enrolled.

When student characteristics, participation in instructional programs, and other site characteristics are held constant, students persistence is similar across all three types of sites. That is, residential and compulsory settings have no bearing on hours of instruction received by clients. Other site characteristics, however, exercise a substantial influence.

Sites with higher student/staff ratios retain students for fewer hours of instruction. Other things held equal, a ten percent increase in the number of students per staff member is associated with about a 2.9 percent drop in the expected hours of instruction that students receive. Sites in which a higher percentage of staff members have college degrees increase student retention about 1.7 percent for every 10 percent increase in the proportion of college degrees.²

² The elasticity represents the instantaneous change, so the percent changes actually compound. The compounding leads to an estimate somewhat more than 1.7 percent.

Table VIII-6

Percentage Change in the Expected Hours of Instruction Associated With Selected Characteristic of the Instructional Setting

Characteristics of Instructional Setting	Elasticity	t
<i>Site Characteristics</i>		
Residential (versus non-residential)	NS	-.386
Compulsory (versus non-compulsory)	NS	.464
Student/instructor ratio	-.29	-5.31
Proportion of staff with a college degree	.17	2.02
Primarily serving people with drug or alcohol abuse problems (versus all other primary clientele)	.76	4.72
Primarily serving victims of spouse abuse (versus all other primary clientele)	-.29	-2.20
Rural site (versus suburban)	1.00	3.70
Urban (versus suburban site)	.38	3.00
<i>Client Participation</i>		
Percent of time spent in small group instruction (if available)	-.35	-4.28
Percent of time spent in individual instruction (if available)	-.51	-8.02
Distribution of instructional time unavailable	1.36	6.33
Enrolled in GED, ABE or ASE program (versus not)	1.83	9.40
Enrolled in lifeskills program (versus not)	1.89	8.64
Enrolled in ESL program (versus not)	1.63	3.92
<i>Client Characteristics</i>		
Client's age	.40	2.53
Entered at Level II (versus Level I)	.49	4.00
Duration of homelessness (if available)	.12	2.15
Duration of homelessness unavailable	-.45	-3.96

- NOTES:**
1. *n*=1808, including only those clients who received at least one hour of instruction
 2. dependent variable: total hours of instruction (client questionnaire item 14)
 3. Except for residential and compulsory status, only variables associated with significant parameters are listed in the table.
 4. NS = not statistically significant at $p < .05$.

Recall from the initial analysis of differences across types of sites that compulsory sites tended to have much higher student/staff ratios. This fact goes a long way in explaining why the initial tables comparing the hours of instruction received across sites showed clients at compulsory sites receiving fewer hours of instruction: Clients in sites with high student/staff ratios tend to receive less instruction.

A second factor that contributes to the observed difference in the amount of instruction received across site types is their geographic distribution. Rural sites have the longest retention, followed by urban sites. Sites in smaller cities or towns, or in suburbs categories have the shortest retention. Compulsory sites are the least likely to be located in rural areas.

The effects of geographic location and student/staff ratio at compulsory sites are somewhat offset because people recovering from drug and alcohol abuse, often the primary clientele at compulsory sites, tend to receive more hours of instruction. On the other hand, clients at sites serving victims of spouse abuse (which are a larger proportion of the clients at residential-voluntary and residential-compulsory sites than non-residential sites) tend to leave sooner, receiving almost 30 percent fewer hours of instruction.

This analysis found no difference in persistence between residential and non-residential sites. Clients at residential and non-residential sites received about the same amount of instruction as would be expected, given their characteristics and the other characteristics of the site that they were attending. This contradicts the beliefs of instructors at the sites, who thought that clients received more instruction at residential sites. One possible explanation for this, though our data cannot address the issue, could be differing levels of client motivation. Clients who do not attend residential sites face greater barriers to enrollment and attendance than do clients at residential sites. These additional barriers may weed out the less motivated clients at non-residential sites, leaving a pool of more motivated individuals than is found at residential sites. This greater

motivation may lead to better attendance and longer persistence than is found among the (presumably) less motivated clients at residential sites.

Turning our attention to the student's program participation, we find a few substantial results. Students enrolled in academic-oriented programs tend to persist substantially longer than those who are not. In fact, their average tenure is 183 percent longer. Similar retention improvements are apparent among those who are enrolled in ESL and life-skills programs.

For those students for whom we know some of the details of how they spent their time, we find that those who spent a greater proportion of time in individual instruction or in small group instruction tended to receive fewer hours of instruction. These findings suggest that some other form of instruction may be more conducive to persistence. However, our survey did not collect detailed information about the amount of time that students spent in all types of instruction. Other analyses (not reported here) suggest that clients at sites that offer peer instruction tend to receive more hours of instruction. However, the survey reports only that the site offers such instruction, and does not provide information about the extent to which individual students participated in such instruction. Thus, subsequent studies will be needed to determine the types of instruction that are the most conducive to student retention.²

Students' individual characteristics also influence their tenure in these programs. Older clients tend to stay longer and receive more hours of instruction. Those entering with Level II skills remain longer than those without them, and those who have been homeless longer also tend to stay longest. Those for whom the duration of homelessness was not available were likely to leave much sooner.

² We note that students for whom information about small group or individual instruction is not available tended to persist longer.

Academic Improvement

The bottom line in any educational program is whether students learn. The scope of this study limits the amount of information available upon which to base this judgement, but some indicators are available. The two most direct indicators are 1) a general judgement of academic improvement rendered by program staff for all clients; and 2) staff reports regarding whether clients received a GED certificate, which is applicable only to clients pursuing the GED. Below, we examine factors influencing each outcome measure. Because the reported improvement measure is applicable to a much larger number of clients, estimated influences on this outcome are much more precise.

Reported Improvement

Staff at participating sites were asked to identify the academic skill level of clients upon entering and leaving the program, or at the end of the study (for those still enrolled). At the end of the study staff members recoded whether clients moved from Level I to Level II, or moved up within these levels. All of these outcomes were considered "academic improvement" for the purpose of this analysis.

Readers should be aware that this measure of improvement is subject to substantial measurement error, and perhaps bias. Makers of standardized tests for adult education students concede that their tests are not sensitive enough to measure improvement in students who have received fewer than 70 hours of instruction. However, few of the students in these classes have received that level of instruction. Nonetheless, respondents indicated that over half of the clients had improved. Therefore, this measure rests on the assumption that site personnel are more sensitive to student improvement than are standardized tests.

Estimates from a multivariate analysis suggest that individual instruction is vastly superior to small group instruction, though small group instruction appears quite effective in compulsory,

residential sites. We speculate that this may follow from more regular attendance at these sites — it is easier to teach a group when the group is comprised of a similar set of students in each class. Another finding that confirms beliefs within the field is that high student/teacher ratios impede learning. This finding is particularly interesting because it holds true even when we control for the number of hours of individual instruction received.

The statistical model underlying these findings included all of the information included in the model of hours of instruction received, along with measures of the amount of individual and small group instruction received by each student for whom that information is available. Finally, the model included terms to capture the differential effect of hours of individual and small group instruction at compulsory sites. Interested readers can refer to Appendix E for the technical details of this analysis.

The significant findings from this analysis are summarized in Table VIII-7. The statistical technique used is called probit, and is not a simple linear model. The estimated effect of each factor varies with the levels of the other variables in the model. In order to provide an intuitive feel for the magnitude of the estimated effect of each factor, Table VIII-7 reports the predicted probability of improvement for an average student at an average site, with the exception of the trait listed in the row heading, which takes on the value identified there. This lets us observe the effect of varying one factor while holding all other factors constant.

Here, we find that client performance at residential sites is no better than at non-residential sites. Similarly, clients at compulsory sites are no more or less likely to improve when other factors are statistically controlled.

Two findings stand out in Table VIII-7: the large effect of individual instruction regardless of instructional setting and the striking impact of small group instruction at compulsory sites. An average student at a non-compulsory site receiving 10 hours of individualized

Table VIII-7

Estimated Probability of Improvement for an Average Student at an Average Site, Varying One Trait at a Time

Hypothetical student characteristics (average except for trait identified)	Probability of improvement in skill level
Average	.56
<i>Site Characteristics</i>	
Compulsory	NS
Residential (versus non-residential)	NS
Voluntary residential	NS
Urban	.62
Rural	.46
Suburban/small city	.54
Serving primarily people with alcohol problems	.52
Serving other populations	.59
<i>Student Participation</i>	
0 hours individual instruction at non-compulsory site	.44
10 hours individual instruction at non-compulsory site	.55
25 hours individual instruction at non-compulsory site	.71
50 hours individual instruction at non-compulsory site	.89
0 hours individual instruction at compulsory site**	.45
10 hours individual instruction at compulsory site**	.63
25 hours individual instruction at compulsory site**	.85
50 hours individual instruction at compulsory site**	.98
0 hours small group instruction at non-compulsory site	.57
10 hours small group instruction at non-compulsory site	.57
25 hours small group instruction at non-compulsory site	.57
50 hours small group instruction at non-compulsory site	.57
0 hours small group instruction at compulsory site	.59

Table VIII-7

Estimated Probability of Improvement for an Average Student at an Average Site, Varying One Trait at a Time
(Continued)

Hypothetical student characteristics (average except for trait identified)	Probability of improvement in skill level
10 hours small group instruction at compulsory site	.64
25 hours small group instruction at compulsory site	.71
50 hours small group instruction at compulsory site	.80
Not enrolled in ABE, ASE, or GED program	.27
Enrolled in ABE, ASE, or GED program	.73
Not enrolled in life skills program	.33
Enrolled in life skills program	.61
Not enrolled in ESL program	.55
Enrolled in ESL program	.74
<i>Student Characteristics</i>	
Entered with Level 1 skills	.48
Entered with Level 2 skills	.63
Entered with 12 years of education	.60
Entered with fewer than 12 years of education	.49

NOTES: *n*=1533. See Appendix E for details
NS = no significant difference at $p < .05$
 ** not significantly different than non-compulsory sites

instruction has about a 55 percent chance of improving. With 50 hours of individual instruction this same student has an 89 percent chance of improvement. This impact is substantial, though not unexpected.

The estimated effects of small group instruction call for more attention. The effect is virtually zero at non-compulsory sites once the individual instruction and other types of instruction

are taken into account. However, at compulsory sites small group instruction is strongly related to learning. At compulsory sites, an average student receiving an average amount of other types instruction and no small group instruction has a 59 percent chance of improvement. The same student receiving 25 hours of small group instruction increases his or her odds of improvement to 71 percent. When the amount of small group instruction reaches 50 hours, the odds of improvement reach 80 percent. While this effect remains somewhat smaller than the estimated effect of individual instruction, it is much higher than is apparent at non-compulsory sites. It is possible that the better attendance mandated by the compulsory sites makes group instruction a more realistic option. Instructors can better plan and implement lessons when the same students show up for class each week.

A few other findings warrant mention. Students at sites serving primarily recovering alcoholics and drug abusers tend to perform slightly worse than clients at other types of sites. Students in rural sites also have a slightly lower probability of improvement. Students who enter with Level II skills are more likely to improve than students entering with Level I skills. Somewhat surprisingly, clients who have completed at least 12 years of school prior to enrollment have a lower probability of improvement.

Finally, students enrolled in academic (i.e., ABE, ASE, or GED), lifeskills, and ESL programs tended to outperform their peers who were not enrolled in these programs. The relationship of improvement with enrollment in academic programs seems quite reasonable. After all, the "improvement" measure seeks to measure improvement in basic academic skills. The apparent effect of lifeskills programs poses somewhat more of a mystery. While these programs may help clients adjust to the demands of an educational environment, it is also possible that the students enrolled in lifeskills programs differ from those who are not. Given that the vast majority of AEH clients study lifeskills, investigation into this issue should begin by examining

differences between this majority and the minority that does not study lifeskills. Finally, ESL clients are more likely to improve than non-ESL clients, other things being equal.

GED Certificates

The survey provides another measure of academic improvement that is relevant to a small subset of the clients served: whether or not the sampled clients received their GED certificate. Of course, in this population few clients pursue the GED certificate within three months of entering the program. In this sample, 27 percent (804 clients) were enrolled in GED programs. Of these information about GED completion was unavailable on 254 clients. Of the remaining 550 clients, 93 (17 percent) received a GED certificate.

Readers should be aware that the large amount of missing data for this outcome raises the possibility that the reported information is not a representative sample of all GED attempts. In addition, results from the small sample are less precise than results based upon the full sample of clients.

For these reasons, the results of this analysis should be taken tentatively. Still, the findings from this analysis suggest some interesting relationships. Predictably, more hours of instruction are associated with a greater probability of receiving a GED, as is a higher educational level at entry. Women are less likely to receive a GED than men, though victims of spouse abuse (primarily women) are more to do so. Finally, the results inconclusively suggest that students at residential programs are less likely to receive a GED than students at non-residential sites, though this finding is not statistically significant at the customary (0.05) level.

Table VIII-8 presents the results from this analysis. Once again, the probit model provided these results. Following the format set forth in Table VIII-7, the table presents the estimated probability of completing the GED certificate for a student who is average in all ways

Table VIII-8

Estimated Probability of Attaining a GED Certificate of a Student Who is Average in All Traits Except the One Listed in the Row Heading

Characteristic	Probability of attaining a GED certificate
<i>Site Characteristics</i>	
Residential*	.09
Non-residential*	.18
Serving primarily victims of spouse abuse	.28
Serving other populations	.12
<i>Student Participation</i>	
0 total hours of instruction	.09
10 total hours of instruction	.10
25 total hours of instruction	.11
50 total hours of instruction	.22
<i>Client Characteristics</i>	
Male	.18
Female	.08
Level 1	.03
Level 2	.22

NOTE: * The difference between residential and non-residential sites is not statistically significant at the traditional .05 level ($p=.06$).

except the trait identified in the row heading. For this presentation, "average" was taken to be the average for all students enrolled in a GED course.

Clients at compulsory sites were no more likely to receive a GED than clients at other sites when other factors were statistically controlled. The results are inconclusive regarding the

relationship between attaining a GED and attending a residential site. Clients at non-residential sites may be more likely to earn a GED certificate than clients at non-residential sites. The probability that this is due to chance rather than a systematic relationship is higher than is typically accepted. Thus, this finding must remain inconclusive.

The sample was not large enough to detect differences in the effect of the various modes of instruction, but we can safely reject the null hypothesis that hours of instruction are unrelated to the probability of receiving a GED certificate.³ An average student enrolled in a GED program has an estimated nine percent chance of receiving the certificate within three months. With 50 hours of instruction this probability grows substantially, to 22 percent.

A few client characteristics were also related to the probability that clients would receive their GED. Men are more likely to receive the GED certificate than women, other things being equal. Predictably, students entering with Level I skills have only a three percent chance of receiving their GED in three months, while those entering with Level II skills have a 22 percent chance of success.

Summary

A few findings spring clearly from this analysis. First, the student/staff ratio in AEH programs matters — students in programs with high ratios take fewer hours of instruction, and are less likely to show academic improvement. Second, individual instruction is a powerful instructional strategy, and shows consistent, strong relationships with academic improvement. Other instructional strategies which we did not study in detail (e.g., peer instruction) however, may be more conducive to client persistence.

³ The sum of the effects of the different hours of instruction is significantly above zero ($\chi^2(1) = 4.24, p = .039$), and is not statistically different than the total hours for those for whom the breakdown was unavailable ($\chi^2(1) = 2.68, p = .10$). The figure reported in the table is for total hours for those for whom a breakdown into individual and group instruction is not available.

Third, small group instruction is most effective in compulsory-residential sites. We speculate that compulsory sites have more regular attendance, enabling teachers to develop and implement lesson plans appropriate for group instruction. Finally, clients enrolled in more academically oriented programs (ABE, ASE, or GED) tend to receive more hours of instruction and have a greater probability of showing improvement.

These analyses did not provide any evidence of two effects that AEH instructors believed to exist:

- Contrary to instructors' expectations, clients at residential sites performed no better than clients at non-residential sites; and,
- Contrary to instructors' expectations, clients at compulsory sites received no more hours of instruction than clients at non-compulsory sites, and fared no worse academically.

None of our analyses suggested that clients at residential sites performed any better than clients at non-residential sites. Instructors believed, however, that by providing shelter the residential sites removed some considerable barriers to learning that clients might otherwise face. This reasoning neglects the possibility that clients at non-residential sites may be more motivated than clients at residential sites. Homeless people who attend a non-residential education center often overcome substantial barriers to enroll in these programs. They must locate the programs, arrange transportation, and make their way to the site to enroll. Less motivated individuals are less likely to make this effort. Clients at residential sites face none of these barriers. They simply wake up on site. Indeed, their participation may be a side-effect of seeking shelter. Therefore, the pool of individuals attending non-residential sites may be more motivated than those attending residential sites. Of course, collecting data that would bear upon the motivation of individual clients was well beyond the scope of this study. However, such an inquiry may prove valuable.

Clients at residential-compulsory sites received no more instruction than clients at non-compulsory sites, again defying the expectations of instructors. Indeed, simple bivariate analysis suggested that clients at compulsory sites received less instruction than others. However, multivariate analysis showed that this relationship was spurious, driven largely by the fact that compulsory sites were more likely to have high ratios of students to staff. High student/teacher ratios are not conducive to persistence.

On the other hand, clients at compulsory sites were no less likely to show academic improvement than clients at non-compulsory sites. This was partly attributable to the fact that small group instruction proved much more effective in compulsory settings than where attendance was voluntary. We speculate that more consistent attendance allows teachers to better plan and implement lessons.

CHAPTER IX

CONCLUSIONS AND EVALUATION GUIDELINES

Overview

Over the past decade, homelessness has emerged as a persistent and pernicious social problem in the United States, and, according to the reports of most observers, its dimensions continue to grow. Initially, homelessness was perceived to be a short-term emergency requiring short-term solutions, and early efforts to address the problem focused on the provision of food, clothing, and temporary shelter to those in need. More recently, policymakers have begun to recognize that homelessness is, in fact, a deep-rooted socioeconomic problem that must be combated through policies that deal with its underlying causes as well as its more visible effects.

The Stewart B. McKinney Homeless Assistance Act of 1987 represents the first piece of Federal legislation to acknowledge the multi-faceted nature of homelessness and to address the issue in a more comprehensive manner. The Adult Education for the Homeless (AEH) Program, the first Federal initiative aimed specifically at the educational needs of the homeless, represents one of the many programs authorized by the McKinney Act. Administered by the U.S. Department of Education, the AEH program provides literacy training and basic skills remediation to thousands of homeless men and women across the United States each year.

This study offers the first comprehensive review of the AEH program, reporting on its organizational structure, the clients that it serves, and the educational programs that it provides. A complete review of the study's principal findings is presented in the Executive Summary of this report. Here our goal is: (1) to provide an integrated summary of selected findings as they relate to several broad areas of concern to program administrators, policymakers, and adult educators, and (2) to provide guidelines that states may use in evaluating the AEH program in the future.

Integrated Review of Findings

In this initial section, various findings of this report are summarized in the context of three broad areas: (1) the capacity of the AEH program to fulfill its mission of providing literacy training and adult basic education to the homeless; (2) the context in which educational services are provided; and (3) the practices employed in the delivery of educational services.

Program Capacity

Since its inception, in 1987, the AEH program has provided adult literacy training and basic skills remediation to more than 150,000 clients, including nearly 50,000 in 1992 alone. The program funded projects in 35 states in 1992 which, in turn, provided support to nearly 300 local programs. In its first five years, the program has nearly tripled its services to homeless adults, while Federal appropriations have increased only marginally. This has placed significant strain on the capacity of the program to meet the needs of the growing number of homeless individuals it serves.

Not surprisingly, the vast majority of project administrators cite problems related to funding as the principal challenge that they face. In some states, this challenge has been at least partially overcome by supplementing Federal grant money with funds from other sources. About 1 in 3 AEH projects receives supplementary Adult Education Act funds and 1 in 10 receives supplementary state and/or JOBS funds. Approximately two in five local programs also receive external support from various sources. Finally, all states rely heavily upon volunteers who help to meet the ever-rising demand for services. More than 1 in 10 teachers and counselors and about 7 in 10 instructional aides volunteer their services to the program on a regular basis.

Despite the AEH program's limited resources, the qualifications of program administrators and instructional staff are remarkably high. On average, state administrators have more than 15 years of adult education experience and about 5 years of experience working with the homeless.

Nearly all teachers and counselors, and more than half of all instructional aides and tutors, are college graduates. Three-fifths of teachers are certified in elementary/secondary education, one-third are certified in adult education, and more than a third of counselors hold state certification. Furthermore, all local program staff have several years of experience working with homeless adults — about three years, in the case of teachers.

While staff qualifications are high, the present level of funding has placed considerable strain on the program's capacity to maintain its current level of services. This is perhaps most evident in the area of curriculum development. On average, states allocate about one-half of one percent of budget to curriculum development, and local programs spend even less. State administrators recognize this deficiency and have requested technical assistance from the Federal Government in developing and disseminating curricula that meet the unique needs of the homeless.

Thus far, the AEH program has met the growing demand for services each year, with no apparent decline in the quality of services provided. But, as these figures suggest, any further expansion of services may be impractical, if not impossible, given current funding levels.

Context of Instruction

Two issues concerning the most appropriate context for the delivery of educational services to homeless adults have been highlighted throughout this report. The first pertains to the relative effectiveness of residential and non-residential sites, and the second concerns the relative effectiveness of compulsory and non-compulsory program structures.

Residential vs. Non-Residential Sites

Each local program provides educational services at one or more service delivery sites. While more than a quarter of these sites are non-residential — e.g., adult learning centers, community centers, school classrooms, libraries, and churches — the vast majority are residential

locations where homeless men and women seek temporary shelter. For the most part, these locations consist of emergency shelters and transitional housing — about 42 and 26 percent of all sites, respectively.

Although more than one-third of residential sites impose no specific maximum stay limitations, roughly half restrict stays to three months or less. About two in five sites permit longer than normal stays for residents participating in the AEH program, and, at a majority of these locations, program participants may reside on-site for an additional three months or more. Finally, while the vast majority of residential sites allow clients to continue in the AEH program after discontinuing residence, about half of these sites report that less than 10 percent of clients avail themselves of this opportunity.

Administrators of local programs that provide services at both residential and non-residential sites suggest that each approach has its advantages. According to their experience, residential sites offer a more comprehensive system of support, better accessibility, and greater client participation, while non-residential settings permit greater focus on education, carry less of the stigma that is sometimes associated with programs identified with the homeless, and provide better instructional facilities. On balance, however, these administrators rate residential settings more effective than non-residential settings by nearly a two-to-one margin.

Multivariate analyses of factors influencing the hours of instruction clients receive and educational outcomes provide another mechanism for comparing the impact of residential and non-residential sites. These analyses revealed no differences between sites which provided residence and those which do not, even while controlling for measured client characteristics and other differences across sites. However, our study was not designed to measure levels of client motivation, which is likely to differ between residential and non-residential sites. Clients attending non-residential sites must overcome many barriers to enroll: they must locate the site,

arrange transportation, and actually get there. This requires substantial effort (and hence, motivation) compared to clients at residential sites who may incidentally locate the program in their search for shelter. Therefore, the clients served at residential sites may pose a greater challenge than clients at non-residential sites because of reasons for which we were unable to control.

Compulsory vs. Voluntary Program Structures

Traditionally, participation in adult education programs has been voluntary. However, in the case of the Adult Education for the Homeless Program, about one-third of residential sites link the provision of shelter to participation in the AEH program, and, overall, about one-third of clients participate on a compulsory basis. Some contend that such measures are necessary to overcome the inhibitions and self-doubts of homeless individuals, while others question the educational effectiveness of this approach.

Administrators of local programs that provide services at sites where participation is compulsory and others where it is not would seem to be uniquely qualified to judge the relative merits of compulsory and voluntary program structures. The vast majority of administrators with such direct comparative experience express the view that mandatory programs result in greater duration and intensity of instruction. Yet, more than one-third of these same administrators (37.7 percent) perceive clients enrolled on a compulsory basis to be less motivated than those who participate voluntarily, and only one in four (26.1 percent) associate compulsory participation with *greater* client motivation.

When program structures are compared in terms of hours of instruction and various program outcomes while other factors are statistically held constant, a slightly different picture emerges. We find that the compulsory nature of sites does not contribute to the amount of instruction that clients receive. One educationally significant difference does emerge: hour for

hour, small group instruction is more effective at compulsory sites than at other types of sites. We posit that this benefit accrues because instructors can better plan lessons when they can expect reliable attendance from a consistent set of students.

To our knowledge, only two other programs of adult literacy training involve compulsory participation — the JOBS program and the Federal Bureau of Prisons' Mandatory Literacy Program. According to McCollum (1993), the results of the latter program have been remarkable. Prisoners entering the Federal prison system without a high school diploma or a GED are required to participate in a 120-day educational program designed to prepare them for the GED. Among those enrolling in the program, approximately 6,000 take the GED examination each year, and about 70 percent pass.¹ Thus, despite the widely held belief that adult education must be voluntary in order to be effective, these two studies offer provocative evidence to the contrary. Further research in this area is clearly warranted.

Instructional Practices

Within the AEH program, a broad range of instructional practices are employed in the delivery of educational services. At most AEH delivery sites, several instructional approaches and strategies are utilized, and, therefore, instructors at these sites are in a unique position to evaluate the effectiveness of one approach or strategy vis-a-vis that of another. For this study, principal instructors at each site were asked to specify which of the various practices utilized at their site had proven most effective. Their aggregated responses provide a basis for comparing the relative effectiveness of the various practices employed. In addition, most sites record the number of hours of individualized and small group instruction that each client receives. A comparison of the relationships between various outcomes and clients' exposure to each type of instruction provides

¹ Of course, compulsory education of children has a respectable track record as well.

another means of assessing the relative effectiveness of these two approaches. Findings from this investigation are summarized below.

Instructional Approach

By a wide margin, individualized instruction is the most widely utilized approach and, according to the ratings of principal instructors, also the most effective. Indeed, multivariate analysis supported the instructors in this belief. Individual instruction proved a reliably powerful instructional tool. However, we also found that within compulsory-residential sites, small group instruction proved almost as effective as individual instruction. As mentioned above, compulsory sites may provide instructors with a more consistent set of students in each class.

Instructional Strategies

Johnson (1985) cites the "lack of strategies, inadequate strategies, and inappropriate generalized strategies" as a major problem in literacy education. Unfortunately, little empirical support exists for the effectiveness of any instructional strategy (Hayes, 1992). Client records rarely contain sufficient information to permit an objective evaluation of the relative effectiveness of various instructional strategies in relation to outcomes, but this study does provide some insights into the *perceived* effectiveness of various strategies. Workbook-based instruction is both the most widely utilized strategy and, according to the judgment of principal instructors, the most effective, while cooperative learning ranks second in both prevalence and perceived effectiveness. Other strategies — including creative writing, experiential learning, and intergenerational learning — are less widely utilized and generally judged to be less effective.

Evaluation Guidelines

Absolute and Relative Evaluations

Three reasons for conducting formal evaluations of educational programs have been identified by Spanard (1990):

- To satisfy the requirements of the funding agency that supports the program;
- To justify what is being done; and
- To improve or change a program.

The first two of these objectives are generally best satisfied by conducting an absolute evaluation in which a program's outcomes are compared with those of a randomly selected control group or with a set of absolute standards. However, this approach involves several complicating factors which may render it infeasible. First, if local programs vary substantially among themselves and in terms of the populations that they serve, it is unlikely that a single set of absolute standards can be identified. Second, assigning eligible applicants to "treatment" and "no treatment" control groups may meet with resistance from local administrators because of their desire to provide services to all eligible applicants. Finally, even if these obstacles could be overcome, any evaluation conducted with the goal of program justification is likely to involve a high degree of response bias. There is, after all, very little incentive to provide objective, unbiased information when a program's very survival hangs in the balance.

The third objective of program evaluations identified by Spanard is best satisfied by conducting a relative evaluation, such as that suggested by Stake (1967), in which the goal is to highlight those practices and processes that are associated with the relative effectiveness of programs in achieving specific outcomes. This approach does not require consensus concerning a set of absolute standards, nor does it require the random assignment of eligible program applicants to experimental and control groups. Furthermore, because relative evaluations are designed to

improve programs, rather than to justify them, there is greater incentive for program administrators to cooperate and to provide unbiased information regarding program outcomes.

For the reasons outlined above, the guidelines suggested in this section pertain to relative, rather than absolute, evaluations. Our recommendations address three underlying issues: (1) the kinds of data that are likely to prove useful in conducting program evaluations; (2) how this information might best be collected; and (3) the most appropriate means of analyzing these data to provide useful information for program change and improvement.

Data Requirements

In some respects, relative evaluations require more effort and planning than absolute evaluations. When an evaluation is conducted for the purpose of program improvement, as much attention must be given to the various processes and practices that differentiate programs as to the measurement of outcomes. Furthermore, because program effectiveness is likely to vary according to the characteristics of clients served, it is equally important to collect data which provide a comprehensive description of program participants. Suggestions for the kinds of program, client, and outcome data that are likely to prove most useful to program administrators in evaluating local programs are presented below.

Program Data

- ***Context Data*** — site characteristics (e.g., residential or non-residential), program structures (e.g., voluntary or required), program-community integration, political support, diversity among learners, and broader economic forces.
- ***Administrative/Organizational Data*** — individual program goals, funding sources, service provider, resources (e.g., per client expenditures), number of sites to which services are provided, availability of on-site support services, and leadership style.
- ***Staffing Data*** — staff qualifications, client/teacher ratios, available support personnel, ratings of staff instructional ability, differentiation of instructional roles according to staff category, and staff beliefs concerning education.

- **Instructional Data** — availability/utilization of instructional programs, instructional practices, placement/assessment procedures, curricula, flexibility of scheduling, and relative emphasis on academic versus functional literacy.

Client Data

- **Demographic Data** — sex, race/ethnicity, age, and family status.
- **Employment Data** — employment status at enrollment, number of months unemployed at enrollment (unemployed clients), description of last full-time position held, and employment goals.
- **Educational Data** — number of years of education, standardized test scores, level of educational achievement (i.e., Level I vs. Level II), ESL level (LEP clients), and educational goals.
- **Personal Problems** — mental illness, history of drug abuse, domestic violence, learning disabilities, and depression.
- **Support Services** — services required and received, including case management, food, shelter, clothing, substance abuse counseling, mental health counseling, health care, job skills training, job counseling, job referral, child care, transportation, and legal counseling.
- **Educational Services** — instructional programs, number of instructional hours (broken down by instructional strategy and approach), and identification of instructor(s).

Outcome Data

- **Life Skills** — life skills instructional areas and evaluation of accomplishments in those areas.
- **Basic Skills** — basic skills instructional areas and accomplishments in those areas (e.g., standardized test score changes, movement from Level I to Level II, etc.).
- **Affective Changes** — changes in self-esteem, self-confidence, internalization of control, and depression.
- **GED** — GED and GED practice exam scores (broken down by the five GED test areas), number of hours of instruction between test administrations, and whether or not GED is obtained.
- **ESL** — changes in ESL levels.
- **Adult Secondary Education** — course credits received and whether or not adult high school diploma is obtained.

- *Application of Skills* — obtaining or improving employment, obtaining permanent housing, welfare status changes, changes in domestic relations, obtaining driver's license, U.S. citizenship, etc.

Data Collection

If evaluation data are to provide useful information for program improvement and change, they should be collected: (1) through uniform procedures that permit comparisons across program types and (2) at the level or levels — i.e., program, site, or client — which is/are most appropriate for their intended use.

Uniform Procedures

Data may be collected from a variety of sources, including local program administrators, principal instructors at each site, or client records/surveys. In each case, however, it is important that the information collected be uniform and, therefore, comparable across programs, sites, or clients of varying characteristics. Standardized reporting forms, such as those employed in this study, should be developed and utilized in collecting evaluation data. In addition, several further enhancements are recommended:

- Project administrators should, as part of their regular monitoring visits, collect data on instructional programs and instructional quality;
- In areas such as life skills instruction, curricula should be developed which integrate instruction and assessment, thus providing a uniform means of assessing progress in these areas;
- Local programs should be encouraged to record standardized achievement test scores when available (in particular, GED practice test scores should be recorded at each test administration);
- Employing various standardized measures, clients' affective states (e.g., self-esteem, self-confidence, locus of control, depression, etc.) should be assessed at enrollment and at appropriate intervals thereafter; and
- Statewide tracking systems should be implemented to provide more complete and accurate data pertaining to clients' success in applying newly acquired skills (only one in ten sites currently employ such systems).

Levels of Data

It is critical that data be collected at the level which is most appropriate for their intended use. For example, if the goal of an evaluation is to determine which instructional approach is most effective, data should be collected from the records of individual clients. In this way, clients' actual exposure to various approaches may be related to outcomes to determine the relative effectiveness of each approach.

Analyzing Evaluation Data

The data collected for relative evaluations may be analyzed, first, to provide an overall description of local programs and the availability/utilization of services and, second, to determine which program characteristics and processes are most effective in producing positive outcomes for clients of varying characteristics. The former mode of analysis is more typical of current program evaluations, while the latter — although less typical — is potentially more valuable for the purpose of program improvement. Several guidelines for conducting analyses of evaluation data follow:

- Analytic comparisons should focus on program processes and practices, not programs per se. Each local program operates within a unique context and serves a population with unique characteristics. Given the limited number of local programs in each state, it is unlikely that multivariate statistical techniques could be applied in such a way to determine the overall relative effectiveness of one program versus another. Furthermore, comparisons of this nature may undermine the program improvement goals of relative evaluations by inhibiting cooperation.
- In evaluating the relative effectiveness of program processes and practices, data collected at the individual client level should be employed. Analyses based on data collected at higher levels of aggregation (i.e., site or program level) are generally inappropriate in identifying effective instructional practices and program structures because of their reliance upon cross-level inferences. For example, using program data, one may conclude that programs employing a high degree of individualized instruction produce a greater number of successful GED candidates, but, unless one knows that these successful clients actually *received* individualized instruction, it would be inappropriate to attribute their success to that approach.
- Finally, generalizations about the effectiveness of one practice or another that do not take into account individual client characteristics should be avoided. For example,

Level I learners may respond best to one approach while Level II learners may respond better to another.

Concluding Remarks

Increasingly, local, state, and Federal funding agencies are demanding more quantifiable records of student growth as a measure of program effectiveness (Cranney, 1983). Yet the relative nature of literacy and the focus on learner-centered goals combine to make this a difficult adjustment for program administrators.

The evaluation guidelines suggested here provide one means of closing the gap between what Fingeret (1984) has called the "public quantitative" and "private student-centered" goals of adult literacy education. By redefining the objective of program evaluations from one of survival to one of improvement, evaluations may begin to serve a more meaningful purpose and, ultimately, play an important role in the development of more effective programs.

APPENDIX A

**Descriptive Data:
State-by-State**

INTRODUCTION

The summary tables which comprise this appendix are based upon a review of U.S. Department of Education program files for each of the 35 AEH state projects funded for 1992 and, in a few instances, data derived from the Local Program Survey (noted in table headings). Data are presented in four extended tables which cover the following topics: (1) characteristics of the target population served; (2) organization of services; (3) educational programs; and (4) evaluation. While these tables are self-contained and self-explanatory, several caveats are in order. First, most of the information included in this appendix is derived from U.S. Department of Education program files. Where Federal reporting guidelines require specific information (e.g., budget, support services, outreach, evaluation, etc.), the data are generally complete. However, in those instances where Federal guidelines do not require the reporting of specific information (e.g., designation of single-sex sites and urban/rural location), data are provided at the discretion of state coordinators, and may, therefore, be incomplete. Second, although all data are reported at the state level, some descriptors vary only at the state program level (e.g., budgets), others differ across local programs (e.g., service providers), while still others vary site-by-site (e.g., service locations). These differences are specified in column headings to facilitate interpretation of the data. Third, while data are generally comparable across states — unless otherwise noted in the state-by-state footnotes appended to the tables — state-level counts of the homeless population employ definitions and counting mechanisms which vary so widely as to preclude cross-state comparisons. Finally, budget and cost effectiveness data should be interpreted with considerable caution. While state administrative costs range from less than two percent to nearly one-third of total budget, states vary substantially in the availability of existing mechanisms to administer the AEH program. As a result, simple cross-state comparisons of cost effectiveness which do not consider such differences are misleading. Cross-state comparisons of expenditures per client are equally misleading unless evaluated in light of the level of services provided and the specific characteristics of the population served.

TARGET POPULATION

STATE	Number of Homeless	Number of AEH Clients (Survey Data)	Proportion of Homeless Served by AEH	Programs With One or More Single-Sex Sites		Programs With One or More Sites Targeting Particular Family Status Type			Programs With One or More Sites Targeting Clients With Specific Characteristics							
				Male	Female	Single	Single Parent	Family	Urban	Rural	Sub. Abusers	Victims of Partner Abuse	Mentally Ill	LEP	Native American	Other
Alabama		2,252		X				X			X					
Arizona	14,900 ¹	1,127	7.6%				X	X		X			X		X ²	
Arkansas	10,500 ¹	2,102	20.0%					X					X		X ²	
California	145,526	2,885	2.0%					X		X			X		X ¹	
Colorado	15-20,000	683	3.4-4.6%	X	X	X							X			
Connecticut	17,000	466	2.7%			X	X				X					
Delaware	2,659 ¹	368	13.8%													X ²
Florida	17-28,000 ¹	3,830		X	X	X	X	X			X					
Hawaii	7-20,000	205	1.0-2.9%				X									
Illinois	43,593	255	0.6%			X		X ¹					X		X ²	
Indiana	30,451	1,606	5.3%	X	X	X	X	X					X		X ¹	
Kansas		1,035						X								
Maine	10,000	668	6.7%				X	X			X				X ¹	
Maryland	57,000 ¹	807	1.4%													
Massachusetts	14,000	1,164	8.3%			X	X						X		X ¹	
Michigan	90,000	1,265 ¹	1.4%		X			X					X		X ²	
Minnesota	2,505	310	12.4%					X							X ¹	
Missouri	40,000	3,754	9.4%		X			X	X				X			
Montana		387			X			X								X
Nebraska	2,500	418	16.7%	X	X	X	X	X								X ¹
Nevada	22,600 ¹	370	1.6%		X		X	X			X				X	



TARGET POPULATION
(Continued)

STATE	Number of Homeless	Number of AEH Clients (Survey Data)	Proportion of Homeless Served by AEH	Programs With One or More Single-Sex Sites		Programs With One or More Sites Targeting Particular Family Status Type			Programs With One or More Sites in Urban/Rural Locations		Programs With One or More Sites Targeting Clients With Specific Characteristics						
				Male	Female	Single	Single Parent	Family	Urban	Rural	Sub. Abusers	Victims of Partner Abuse	Mentally Ill	LEP	Native American	Other	
New Hampshire	8,684 ¹	520 ²	6.0%				X	X	X								X ³
New York	100,000	3,015	3.0%	X	X	X	X	X					X				
North Carolina		2,748		X	X		X	X					X				X ¹
North Dakota	5,560 ¹	349	6.3%				X						X				
Ohio	45,000	2,972	6.6%		X	X		X	X	X			X				X ¹
Oklahoma	9,852 ¹	853 ²	8.7%		X								X				
Rhode Island	3,658 ¹	611	16.7%		X	X		X					X				X ³
Tennessee	5-7,000 ¹	2,450 ²	35.0-49.0%	X	X	X	X	X					X				X ³
Texas	40,000	4,690	11.7%														
Utah	17,374	1,438	8.3%				X						X				X ¹
Vermont	6,000	770	12.8%		X			X		X			X				X ¹
Washington	113,099 ¹	1,857	1.46	X	X	X	X	X	X	X			X	X	X	X	X ²
West Virginia		778		X	X								X				
Wisconsin	22-41,000	624	1.5-2.8%	X	X	X		X									

* "Urban" or "Rural" was identified based on the stated intent of the program to target urban or rural adults. The actual location of a site was not considered a reliable measure of a deliberate decision to target further pr rural populations.

ORGANIZATION: PART I

STATE	Number of Local Programs (Survey Data)	Number of Sites (Survey Data)	SERVICE LOCATIONS (FOR ONE OR MORE SITES)														
			Description							Accessibility							
			Shelter	Adult Learning Center	Community Center or Y	Salvation Army	Transitional Housing	Homeless Program Day Center	Soup Kitchens	Other	On-Site	Walking Distance	Transp. Voucher Provided	Transp. Provided	Other		
Alabama	19	46	X				X						X				
Arizona	6	23															X ²
Arkansas	10	26	X										X ³	X	X		
California	12	24	X											X			
Colorado	6	10	X				X									X	
Connecticut	6	8	X	X	X	X	X	X	X ¹				X	X			
Delaware	2	7	X				X										
Florida	7	43	X		X			X		X	X		X ²	X			
Hawaii	2	2	X														
Illinois	4	9	X					X		X	X		X ³				
Indiana	8	26	X	X	X	X										X ²	
Kansas	7	33	X										X ¹				
Maine	7	38	X				X			X	X		X ²				
Maryland	8	28	X	X										X			
Massachusetts	11	24	X	X	X					X				X	X		
Michigan	11	11	X							X	X		X	X	X		
Minnesota	4	6	X					X					X ²	X			
Missouri	8	33	X	X		X	X	X					X ¹	X	X	X	
Montana	4	6	X							X	X						
Nebraska	2	9	X	X		X							X ²	X	X		
Nevada	3	13	X				X						X ²			X	

ORGANIZATION: PART I
(Continued)

STATE	Number of Local Programs (Survey Data)	Number of Sites (Survey Data)	SERVICE LOCATIONS (FOR ONE OR MORE SITES)														
			Description					Accessibility									
			Shelter	Adult Learning Center	Community Center or Y	Salvation Army	Transitional Housing	Homeless Program Day Center	Soup Kitchens	Other	On-Site	Walking Distance	Transp. Voucher Provided	Transp. Provided	Other		
New Hampshire	6	6	X			X	X				X	X ⁴	X				
New York	24	69	X	X	X						X	X ¹				X	
North Carolina	14	40	X													X ²	
North Dakota	4	10	X	X												X	
Ohio	12	50	X		X	X	X	X		X		X ²	X	X			
Oklahoma	6	9	X							X						X	
Rhode Island	5	9	X								X						
Tennessee	11	11	X	X	X			X	X			X ⁴		X			
Texas	18	62		X ¹													
Utah	3	14	X	X		X								X			
Vermont	7	8	X	X											X		X ²
Washington	8	28	X	X	X			X		X					X		
West Virginia	13	15	X														
Wisconsin	4	10	X														X

ORGANIZATION: PART II

STATE	SERVICE PROVIDERS* (FOR ONE OR MORE PROGRAMS)							OUTREACH (FOR ONE OR MORE SITES)							
	LEA	Community College	Adult Education Agency	Shelter	Local/Regional/National Lit. Org.	CBO	Other	Media	Fliers/Posters	Presentation or Workshop	Personal Contact/Word of Mouth	Inter-agency Referral/Coop Outreach	Publicize at Sites Where Homeless Gather	Toll-Free Hotline	Other
Alabama	X ¹							X	X	X	X ²	X			X ²
Arizona															X ²
Arkansas	X ¹				X ⁴	X	X ²	X	X		X	X			
California								X			X	X	X		X ²
Colorado			X	X				X	X		X				
Connecticut	X		X			X	X ²	X	X	X		X	X		
Delaware	X ²							X		X	X	X			X
Florida	X	X	X					X	X			X	X		X ²
Hawaii							X ¹								
Illinois						X ⁴					X	X			
Indiana	X						X ²	X			X		X		
Kansas	X	X		X			X ²						X		
Maine	X								X		X				X ²
Maryland	X			X		X									
Massachusetts			X ²	X ²				X	X					X	
Michigan							X ²			X					
Minnesota								X		X	X				X ²
Missouri	X	X							X				X		
Montana	X	X	X		X	X				X	X				
Nebraska	X		X					X	X		X		X ²		



ORGANIZATION: PART II
(Continued)

STATE	SERVICE PROVIDERS* (FOR ONE OR MORE PROGRAMS)							OUTREACH (FOR ONE OR MORE SITES)							
	LEA	Community College	Adult Education Agency	Shelter	Local/Regional/National Lit. Org.	CBO	Other	Media	Flyers/Posters	Presentations or Workshops	Personal Contact/Word of Mouth	Inter-agency Referral/Coop Outreach	Publicize at Sites Where Homeless Gather	Toll-Free Hotline	Other
Nevada		X						X	X		X			X	
New Hampshire	X ¹		X ³		X ³				X	X	X ⁴	X ⁷			
New York	X ²		X		X	X			X		X	X	X		
North Carolina		X									X				
North Dakota			X					X	X		X				
Ohio	X										X				X ²
Oklahoma	X ²				X			X			X				
Rhode Island				X	X	X		X			X				
Tennessee	X			X	X	X	X ²	X			X				
Texas			X ¹								X				
Utah	X							X	X		X				
Vermont			X	X							X				X ²
Washington			X	X	X	X	X ⁴	X	X		X	X	X	X	
West Virginia	X ¹														X ²
Wisconsin							X ¹	X					X		X ²

* A service provider is identified as an "LEA" if the grant application states that services will be provided or funded through a school district or through a district's adult education program. If the application states that educational services are provided by an adult education program but does not indicate whether the program is affiliated with a school district or CBO, the service provider is identified as an "Adult Education Agency."

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STATE	SUPPORT SERVICES* (AT ONE OR MORE SITES)											INCENTIVES FOR PROGRAM ENROLLMENT** (AT ONE OR MORE SITES)				
	Food/ Shelter	Alc./Drug Couna.	Mental Health	Health Care	Child Care	Case Mgmt.	Job Skills Training	Job Placement or Counseling	Clothing	Placement in Higher Ed. or Other Ed. Program	Financial Assistance	Legal Couns.	Other	Shelter Guaran- teed	Gifts or Personal Effects	Other
Alabama	R	R	R		R		R	R								
Arizona												X ³				
Arkansas	R	R	R	D,R					R							
California	R	R	R	R	R	R	R	R					X	X		
Colorado	R	R	R	D,R	R	R	R	R			R	R ¹	X	X		
Connecticut	R	R	R	R	R	R	R	R			R					
Delaware	R	R	R	R	D,R	R	R	R	R			R ⁴				
Florida	R	R	R	R	R		R	R	R		R	R ⁴	X			X ¹
Hawaii	R	R	R	R	R	R	R	R	R							
Illinois	R		R	R		R	R	R	R	R						
Indiana	R	R	D	R	D,R	D	R	R								
Kansas	R		R	R	D,R	R	R									
Maine	R	R	R	R	R	R	R	R	R		R	R ⁴				
Maryland	R			R		X	R	R								
Massachusetts	R	R	R	R	D		R	R								
Michigan		X	X	R	R		R	X	R							
Minnesota	R		R	R	D,R	R	R	R		R						
Missouri	R		X	R	X		X	R								
Montana	R	R	R	R	R	R	R	R								
Nebraska	R	R	R	R	R	R	R			R		R ⁴				
Nevada	R	R	R	R	R	R	R	R		R	R	R ²				

ORGANIZATION: PART III
(Continued)

STATE	SUPPORT SERVICES* (AT ONE OR MORE SITES)											INCENTIVES FOR PROGRAM ENROLLMENT** (AT ONE OR MORE SITES)				
	Food/ Shelter	Alc./Drug Couns.	Mental Health	Health Care	Child Care	Case Mgmt.	Job Skills Training	Job Placement or Counseling	Clothing	Placement in Higher Ed. or Other Ed. Program	Financial Assistance	Legal Counsl.	Other	Shelter Guaran- teed	Gifts or Personal Effects	Other
New Hampshire		R	R	X	X	R	R	R								
New York	R	R	R	R	D	R	R	R	R							
North Carolina	R	R	R	R	R	R	R	R		R	R					
North Dakota	X	X	X	X	X	X	X	X								
Ohio	X	X	X	X	X		X	X								
Oklahoma	R	R	R	R	R	R	R	R	R				DR'	X'		
Rhode Island	X	X	X	X	X	X	X	X	X							
Tennessee	X	X	X	X	X	X	X	X	X							X'
Texas	X		X		X		X	X	X							
Utah	R	R	R		D	R	R	R						X'		
Vermont	R	R	R	R	R	R	R	R								
Washington	X	X	R	X	X	X	X	X			X	X'				
West Virginia	R	R	R	R		R	R	R	D	R	R	R'				
Wisconsin	R	R	R	R	D	R	R	R	D'			X'				

* D = Service provided directly by adult education for homeless program using AEH funds.
 R = Education program provides referrals for service; AEH funds are not used to provide services.
 X = Insufficient information to determine how services are provided.
 ** Only those benefits which are contingent upon enrollment in the Adult Education for the Homeless Program are identified as incentives.



ORGANIZATION: PART IV

STATE	BUDGET/COST EFFECTIVENESS			Expenditure Per Client (Total Grant/Total Served)	Evaluation Cost (Survey Data)
	Total Budget (Survey Data)	State Administrative Costs Dollar Costs (Survey Data)	% of Total Budget		
Alabama	\$220,000	\$3,747	1.7%	\$97.69	\$1,725
Arizona	255,150	47,595	18.6%	226.40	0
Arkansas	375,000	55,900	14.9%	178.40	9,000
California	600,000	77,000	12.8%	207.97	0
Colorado	200,440	55,540	27.7%	293.47	3,000
Connecticut	153,100	3,100	2.0%	328.54	0
Delaware	88,742	19,586	22.1%	197.59	
Florida	500,000	118,073	23.6%	130.55	5,000
Hawaii	109,496	34,496	31.5%	534.13	0
Illinois	190,685	16,344	8.6%	747.78	9,500
Indiana	400,000	38,117	9.5%	249.07	5,000
Kansas	264,760	52,641	19.9%	255.81	1,800
Maine	200,000	24,229	12.1%	299.40	0
Maryland	248,424	28,876	11.6%	307.84	4,000
Massachusetts	425,000	36,400	8.6%	365.12	0
Michigan	407,540	117,260	28.8%	322.17	
Minnesota	195,770	31,673	16.2%	631.52	7,000
Missouri	220,000	58,421	26.6%	58.60	0
Montana	104,460	8,805	8.4%	269.92	0
Nebraska	101,239	4,339	4.3%	242.20	0
Nevada	125,000	16,562	13.2%	337.84	0
New Hampshire	195,379	12,160	6.2%	375.73	0

**ORGANIZATION: PART IV
(Continued)**

STATE	Total Budget (Survey Data)	State Administrative Costs		Expenditure Per Client (Total Grant/Total Served)	Evaluation Cost (Survey Data)
		Dollar Costs (Survey Data)	% of Total Budget		
New York	500,000	79,000	15.8%	165.84	0
North Carolina	492,107	11,552	2.3%	179.08	9,800
North Dakota	102,110	19,610	19.2%	292.58	0
Ohio	510,000	28,047	5.5%	171.43	4,000
Oklahoma	202,215	58,445	28.9%	237.06	4,000
Rhode Island	199,423	8,080	4.0%	326.39	2,000
Tennessee	196,397			80.16	
Texas	500,000	55,841	11.2%	106.61	0
Utah	217,448	5,575	2.6%	151.22	3,000
Vermont	250,000	26,190	10.5%	324.68	3,000
Washington	435,000	72,000	16.6%	234.25	4,000
West Virginia	283,421	59,041	20.8%	364.29	976
Wisconsin	350,000	46,778	13.9%	560.90	0

EDUCATIONAL PROGRAM: PART I

STATE	IEP*	INSTRUCTIONAL APPROACH** (AT ONE OR MORE SITES)				CURRICULUM (AT ONE OR MORE SITES)				CLIENT PLACEMENT (AT ONE OR MORE SITES)							
		Comp. Assisted Learning	Inter-generational***	Audio/Video Tapes	Other	ABE	GED/HIS Diploma	ESL	Life Skills	Other	Informal	CASAS	ABLE	TABE	WRAT	Unspecified Standardized Assessment	Other
Alabama	I				X ⁴												X ⁶
Arizona	I	X		X		X	X										
Arkansas	X	X		X	X ⁶	X	X		X ⁷				X			X	
California	X						X				X						X ³
Colorado	I	X	X	X	X ²	X	X										
Connecticut	I	X				X	X		X ³								X ³
Delaware	X	X			X ³	X	X		X ⁴								
Florida	I								X ⁴				X				
Hawaii	X				X ²					X							
Illinois	I	X	X		X ³	X	X			X							X ⁶
Indiana	X	X	X	X	X ⁴	X	X				X		X				X ³
Kansas	X				X ³					X							X ⁴
Maine	X	X			X ³	X	X						X				X ⁶
Maryland	X				X ³					X							X ⁴
Massachusetts	X ⁴				X ³	X	X			X	X		X	X			X ⁶
Michigan	X	X				X	X			X		X	X	X			X ⁴
Minnesota	X	X			X ⁴	X	X		X ³								
Missouri	X	X			X ³	X	X			X			X				X ³
Montana	X	X				X	X					X	X				
Nebraska	X				X ³	X	X			X	X		X	X			X ⁶
Nevada	X					X ⁴				X ⁴		X	X	X			



EDUCATIONAL PROGRAM: PART I
(Continued)

STATE	IEP*	INSTRUCTIONAL APPROACH** (AT ONE OR MORE SITES)				CURRICULUM (AT ONE OR MORE SITES)				CLIENT PLACEMENT (AT ONE OR MORE SITES)						
		Comp. Assisted Learning	Inter-generational	Audio/Video Tapes	Other	ABE	GED/HIS Diploma	Life Skills	Other	Informal	CASAS	ABLE	TABE	WRAT	Unspecified Standardized Assessment	Other
New Hampshire	X				X ³	X	X	X	X ⁹	X ¹⁰		X	X		X	X ¹⁰
New York	X				X ³	X	X	X ⁴				X	X			X ³
North Carolina		X ³				X		X ³	X ³	X	X		X			X ⁶
North Dakota	X	X				X	X	X		X						X ²
Ohio	I				X ⁴	X	X	X								
Oklahoma	X					X	X	X		X			X			X ⁶
Rhode Island	I		X		X ³	X	X	X		X ⁴			X			X ³
Tennessee						X	X	X ⁷					X			X ⁸
Texas		X				X	X	X						X		
Utah	X ⁴	X		X	X ³	X	X			X						
Vermont	X					X	X	X		X						
Washington	X ⁶		X			X	X		X ⁷	X						
West Virginia	X	X		X	X ⁴	X		X								
Wisconsin			X		X ³	X	X	X		X ⁶			X			X ⁷

- * I = Informal education plans are employed as an instructional approach.
- X = Structured individual education plans, including protocols for setting goals and assessing progress, are employed as an instructional approach.
- ** The instructional approach typically includes individualized and small group instruction.
- *** Program files do not specify the precise nature of the intergenerational approach.

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EDUCATIONAL PROGRAM: PART II

STATE	CLIENT PROGRESS ASSESSMENT (AT ONE OR MORE SITES)								STATE REQUIREMENTS FOR TEACHER CERTIFICATION	
	CALAS	TABE	ABLE	Unspecified Standardized Assessment	Interviews	Progress Towards Goals	Other	State Certification	VIAE Certification	
Alabama										
Arizona	X									
Arkansas								X		
California	X									
Colorado				X		X	X ³			
Connecticut	X					X	X ³			
Delaware						X				
Florida						X				
Hawaii	X				X		X ³			
Illinois							X ⁶			
Indiana				X		X				
Kansas										
Maine		X				X	X ⁷			
Maryland	X						X ⁴			
Massachusetts							X ⁶			
Michigan		X	X				X ⁴			
Minnesota				X ⁶						
Missouri		X					X ³			
Montana		X	X				X ¹			
Nebraska	X	X								
Nevada		X	X	X			X			

EDUCATIONAL PROGRAM: PART II
(Continued)

STATE	CLIENT PROGRESS ASSESSMENT (AT ONE OR MORE SITES)							STATE REQUIREMENTS FOR TEACHER CERTIFICATION	
	CASAS	TABE	ABLE	Unspecified Standardized Assessment	Interviews	Progress Towards Goals	Other	State Certification	VTAE Certification
New Hampshire		X	X				X ¹¹		
New York		X							
North Carolina		X		X	X ⁷				
North Dakota					X ²				
Ohio							X ³		
Oklahoma		X ⁷						X	
Rhode Island		X				X	X ⁶		
Tennessee		X	X				X ⁸	X	
Texas									
Utah					X				
Vermont									
Washington	X	X				X	X ⁸		
West Virginia						X			
Wisconsin						X			X

EVALUATION

STATE	EVALUATOR				KEY EVALUATION FACTORS									
	Independent Evaluator	SEA	Local Program	Local Program Reports	Site Visits	Demographics	Agency Coordination	Student Progress	Exit Data	Student/Staff Opinions	Teacher & Teaching Approaches	Progress Towards Local Goals	Progress Towards State Goals	
Alabama	X	X	X	X			X	X	X		X			
Arizona		X	X	X	X			X		X	X			
Arkansas	X	X		X	X		X	X			X			
California	X ¹													
Colorado			X ¹		X									
Connecticut		X	X	X	X					X			X	
Delaware		X	X	X						X				
Florida	X	X	X	X	X			X		X	X			
Hawaii	X	X	X	X	X		X	X		X				
Illinois	X				X								X	
Indiana	X	X	X	X	X		X	X		X				
Kansas	X	X	X	X	X			X		X			X	
Maine	X	X			X								X	
Maryland	X	X		X	X			X		X				
Massachusetts	X	X		X	X		X	X		X	X		X	
Michigan	X	X			X		X			X				
Minnesota	X				X									
Missouri		X	X	X	X		X			X	X			
Montana	X	X			X									
Nebraska		X	X	X	X			X		X				
Nevada		X	X					X					X	
New Hampshire		X	X		X		X	X						

EVALUATION
(Continued)

STATE	EVALUATOR				KEY EVALUATION FACTORS									
	Independent Evaluator	SEA	Local Program	Local Program Reports	Site Visits	Demographics	Agency Coordination	Student Progress	Exit Data	Student/Staff Opinions	Teacher & Teaching Approaches	Progress Towards Local Goals	Progress Towards State Goals	
New York		X	X	X				X				X	X	
North Carolina	X	X	X							X			X	
North Dakota		X	X	X	X	X		X	X					
Ohio		X	X	X	X	X	X			X	X			
Oklahoma	X		X							X				
Rhode Island	X		X			X		X	X					
Tennessee		X	X	X	X	X		X	X			X		
Texas		X	X	X	X					X				
Utah	X	X	X	X	X	X		X		X				
Vermont	X	X	X			X								
Washington	X	X	X							X				
West Virginia	X					X				X				
Wisconsin	X	X			X	X				X	X			

GENERAL NOTE

An "X" indicates that the program has one or more programs or sites fitting the identified category. For example, an "X" on the "Organization: Part II" chart under "Service Providers, LEA" indicates that at least one *program* in that state is operated by an LEA. Similarly, an "X" on the "Target Population" chart under "Family Status, Single Parent" signifies that at least one *site* in that state targets single parents for educational services. Whether the unit of analysis is programs or sites is identified in the chart headings.

ALABAMA

- 1 This program is intended to develop interagency coordination. Although local education boards will lead the effort, the service providers are primarily coordinators.
- 2 Volunteers from service agencies will form a task force to publicize the project. In addition, successful students will be organized to recruit other students.
- 3 Another outreach activity is direct mailing.
- 4 Instruction is individualized.
- 5 Curricula will be developed and tested within the course of the project.
- 6 Non-traditional testing approaches, such as the Adult Performance Level, will be developed in the project.

ARIZONA

- 1 This is the estimated number of homeless people in the four areas targeted for services.
- 2 Other targeted populations are teenagers, hispanics (especially migrant workers and refugees), and employable adults.
- 3 The SEA requires subcontractors to provide a plan for coordinating services, ensuring accessibility, and conducting outreach activities.

ARKANSAS

- 1 This is the approximate number of homeless adults; total homeless number approximately 16,096.
- 2 Homeless veterans are a targeted group.
- 3 Services have been provided in substance abuse and mental health facilities and local schools.
- 4 One project is cosponsored by a literacy council and a board of education.
- 5 Vocational technical schools will provide services.
- 6 Role playing is used as an instructional approach. Instruction is individualized or in small groups.
- 7 Interpersonal skills training is offered.

CALIFORNIA

- 1 Veterans are another targeted population.
- 2 Open houses are used for outreach.
- 3 Scores on occupational tests such as the Career Orientation and Placement Survey, Career Ability Placement, California Occupational Preference Survey, and Employability Competency System Appraisal Test are used to identify participants' initial skills levels.
- 4 The independent evaluator will use an instrument already pilot tested to identify successful and replicable strategies.

COLORADO

- 1 Another key support service is veterans benefits.
- 2 The two instructional models are the traditional, in which teachers and/or tutors teach one-on-one or in small groups, and the intensive learning model, in which competency-based classes are condensed into a one to three week period of classes three to six hours per day.
- 3 Outcomes are assessed by rates of passing the GED, obtaining employment, or continuing study.
- 4 Six projects will undergo Program Evaluation and Educational Review (PEER), which includes self-review and an on-site team review.

CONNECTICUT

- 1 Services are also provided at a CBO, an alcohol rehabilitation agency, and service agencies for former mental patients.
- 2 Other providers include a homeless program network and a shelter corporation.
- 3 The Connecticut Adult Performance Program (CAPP) is a competency-based, individualized system of assessment, instruction, and evaluation.

DELAWARE

- 1 This is the number of adults served by shelters in 1990.
- 2 Targeted populations are the newly homeless and residents in transitional housing.

- 3 Adult education agencies affiliated with the local school districts will provide services.
- 4 Referral to Even Start programs is provided.
- 6 The instructional approach will include workshops and individualized and group instruction.
- 7 The core curriculum is the Adult Basic Skills Curriculum developed by Learning Unlimited.

FLORIDA

- 1 This is the number of homeless on any given day.
- 2 Classes are also offered at elementary schools and half-way houses.
- 3 Billboards have been used for outreach.
- 4 The projects refer students for crisis intervention.
- 5 Public health care facilities have given preference to homeless students and public utilities have reduced expenses for student families moving into apartments.
- 6 Each project is developing its own curriculum.

HAWAII

- 1 The Hawaii Department of Education is responsible for the sites, although each site will have a coordinator and outreach specialists.
- 2 Instruction is one-on-one or in small or large groups, depending on the student's needs.
- 3 The Test of Applied Literacy Skills is also used.

ILLINOIS

- 1 Formerly homeless families who have been housed but are still at risk of homelessness are one target population.
- 2 Out-of-school youth, ages 16 to 21, are another target population.
- 3 Services may also be provided in a home visitation program for formerly homeless families.

- 4 A private, non-profit homeless service agency is the prime contractor; this agency manages the contracts with CBO homeless service and basic skills providers. Instruction is provided by adult basic education programs, CBO's, volunteer literacy programs, etc.
- 5 Individual tutoring and classroom instruction will be used to deliver educational services.
- 6 New assessment instruments are being developed for the project.

INDIANA

- 1 Another target population is the educationally disadvantaged.
- 2 For off-site programs, clients are referred to agencies that can provide transportation.
- 3 One service provider is a network for-employment and training.
- 4 Additional instructional approaches include: tutoring, cooperative learning, peer tutoring, and paired learning.
- 5 Other assessment instruments include: the Woodcock, Slosson Oral Reading Test, Raven, Test That Is Not a Test, and English as a Second Language Oral Assessment.

KANSAS

- 1 A mobile van also provides literacy services.
- 2 Religious organizations also provide literacy services.
- 3 The instructional approaches include one-on-one tutoring, group training, and experiential learning.
- 4 An individualized placement instrument, developed by the Wichita Public Schools, is used for placement.

MAINE

- 1 Another target population is the chronically homeless.
- 2 Instruction is also provided at locations convenient to the student, such as libraries and homes.
- 3 Teachers become more involved with the students by spending an orientation day as a homeless client, by volunteering for food distribution, or by attending shelter meetings.

- 4 Students are also referred to support services such as budgeting assistance.
- 5 Instruction is delivered individually and in focus groups.
- 6 Other placement instruments include: Reading Evaluation Adult Diagnosis (READ), Informal Reading Inventory, O'Donnell Informal Assessment, GED pre-test, Literacy Assessment Survey, Adult Placement Indicator, Self-Directed Search, and Career Decision Making System.
- 7 Other assessment instruments include READ and the GED.

MARYLAND

- 1 This represents the number of homeless adults.
- 2 Instruction is primarily individualized, with some group instruction.
- 3 The Maryland Adult Performance Program (MAPP) Life Skills curriculum is used. MAPP is a competency-based curriculum.
- 4 Clients are placed and assessed using the MAPP assessment instrument, which incorporates CASAS.

MASSACHUSETTS

- 1 Other target populations include out-of-school youth, first-time homeless adults, chronically homeless adults, seasonably homeless, and refugees.
- 2 Adult education for the homeless is provided through networks led by either a homeless shelter or an experienced adult learning center. Each network consists of eight to twelve partners including at least one adult learning center, one homeless shelter, and other homeless service providers.
- 3 Other support services provided by the network include crisis intervention and housing advocacy.
- 4 Different education plans are used for different types of students. For example, single parents use the time line model, individual adults use the daily goal assessment model, out-of-school youth separated from their children use contractual goal setting, first-time homeless families or parents set goals on three levels (immediate, family and self), and chronically homeless or mentally ill adults use "Let's Plan for Tonite!"
- 5 The program progresses from individualized to community-oriented: first the IEP, then one-to-one instruction, tutoring, groups, classroom, study buddy, peer teaching, and connections to public institutions such as libraries.

- 6 Each type of student is assessed with a distinct approach. Single parents use the life points assessment model, individual adults use a journal scrapbook, out-of-school youth separated from their children use portfolios and verbal practice GED tests, first-time homeless families or parents use standardized tests (Brigance Inventory, Stanford Diagnostic Reading, GED pretests, Ullman/ESL, or Slosson Oral Reading Test), and chronically homeless or mentally ill adults use word, symbol, number, self, and environment recognition.

MICHIGAN

- 1 Data derived from state program files.
- 2 Developmentally disabled adults are a targeted population.
- 3 Homeless Adult Literacy Programs (HALP) were established in targeted communities and staffed with a HALP coordinator and, at some sites, literacy volunteers and paid instructors. HALP is an interim program, providing educational services when appropriate, and referring clients to other educational services when appropriate. In the latter case, HALP provides educational support.
- 4 Other standardized tests include Reading Evaluation Adult Diagnosis (READ), and Adult Placement Indicator (API).

MINNESOTA

- 1 Homeless adults between the ages of 16 and 24 and extended family adults are targeted groups.
- 2 One project does not provide education services directly; formerly homeless mentors help homeless young adults connect to existing educational opportunities and other resource agencies.
- 3 Trained peer mentors locate homeless young adults and guide them towards services.
- 4 Instructional approaches include workshops, seminars, classes, and parent-child play groups.
- 5 The family self-help curriculum focuses on and was developed by homeless families of color.
- 6 Participants will track progress towards goals and attendance. One project is using individual journals for assessment.

MISSOURI

- 1 Other sites for education services are a mental health center, community based organization, high school, and medical center.
- 2 Instruction is provided individually and in groups.
- 3 The Slosson Oral Reading Test is used for assessment.

MONTANA

- 1 The grade level of materials last used serves as the posttest.

NEBRASKA

- 1 Services are targeted for handicapped adults.
- 2 Educational services are also provided in a church.
- 3 A recruitment display is set up at Social Services offices on the day checks are distributed.
- 4 Eyeglasses and services for the handicapped are provided.
- 5 Instruction is predominately individualized, with group instruction for topics relevant to the entire class.
- 6 Assessment instruments included the Test That's Not a Test (T-NAT) — an informal oral reading inventory, the Nebraska Interview — a short, oral interview for ESL students, and LABELS interest inventory.

NEVADA

- 1 This number does not include American Indians living on reservations and in urban American Indian housing colonies.
- 2 Services are provided in Indian colonies.
- 3 Housing assistance is another support service.
- 4 Basic literacy skills are taught through a curriculum centered on life skills.

NEW HAMPSHIRE

- 1 Shelters served 8,684 homeless people last year and turned away people over 3,300 times.
- 2 Data derived from state program files.
- 3 ABE and ESL instruction is targeted for people caring for race horses.
- 4 A halfway house and a race track are service delivery locations.
- 5 Volunteer tutors affiliated with the LEAs and adult education centers provide educational services.
- 6 Tutors meet with all new shelter residents.
- 7 Another outreach activity is sending program information to agencies providing services to the homeless.
- 8 Instruction occurs individually and in classes.
- 9 FUTURES is a Vermont curriculum focusing on self-esteem and self-directed learning.
- 10 Readiness to learn is determined by the individual's expressed interest, the Slosson Oral Reading Test, Reading Evaluation Adult Diagnosis (READ), Brigance, Gates, or BEST, a written essay, an interest inventory, and a personal interview.
- 11 Progress tests include READ, the Wide Range Achievement Test (WRAT), Brigance, BEST, and GED practice and final test scores.

NEW YORK

- 1 Adult education is provided at BOCES, LEAs, and CBOs.
- 2 LEAs and BOCES and a school board provide educational services.
- 3 Adults learn independently except in ESL classes.
- 4 Curricula include the Adkins Life Skills Program and the New York State Life Management Program.
- 5 Another placement measure is John; the program is field testing the NYS Place Test.

NORTH CAROLINA

- 1 Developmentally disabled adults and adults waiting for subsidized housing are targeted populations.
- 2 Although education services are provided on-site, transportation is provided if a student must go to another site for specialized training.
- 3 PLATO software is used.
- 4 "Life Skills for the Homeless," a curriculum developed in North Carolina, teaches basic skills in the context of life skills such as job hunting or budgeting.
- 5 "The Twelve Step Curriculum," also developed in North Carolina, is geared towards substance abusers. Other curricula used include the PLATO Basic Skills Curriculum and Basic Literacy for Adult Development (BLADE).
- 6 SORT is also used for placement.
- 7 Clients are assessed with entrance and exit interviews.

NORTH DAKOTA

- 1 This is the number of homeless people served by agencies in 1990.
- 2 Assessment instruments available to be used at local sites include: the California Achievement Test, the National Career Aptitude Test and the National Career Aptitude Test READ, the Wide Range Achievement Test (WRAT), Interest Inventory, the Test of Adult Basic Education, Cambridge Interpreting Literature and the Arts Test, and GED sample tests.

OHIO

- 1 Adults waiting for subsidized housing are targeted for educational services.
- 2 Long-term facilities for substance abusers are service delivery locations.
- 3 Each local project will employ a person responsible for outreach and recruitment.
- 4 Suggested approaches include: learner-centered instruction, small group instruction, peer tutoring and cooperative learning, and use of printed materials students are likely to need.
- 5 Local programs choose or develop their own assessment instruments; alternative assessment instruments are encouraged.

OKLAHOMA

- 1 This represents the number of clients receiving services from domestic violence shelters.
- 2 Data derived from state program files.
- 3 The Adult Learning Center of the LEA in which each shelter is located will provide certified adult basic education instructors.
- 4 GED test fees are paid through the grant. Referrals to housing agencies are also provided.
- 5 Participants may remain in the shelter until the end of the course.
- 6 Participants functioning at or above the eighth grade reading level use GED practice test scores for placement.
- 7 This test is administered as a pre- and posttest.

RHODE ISLAND

- 1 This total represents the number of persons admitted to shelters within a one-year period.
- 2 Street youth, unemployed (dislocated or disabled workers), or hidden homeless are targeted for services.
- 3 Instruction is provided with tutorials and classes, using methods such as the whole language approach, learner contracts, and process writing.
- 4 Clients placement is based on recommendations by shelter staff or case managers.
- 5 The LVA Read Test is also used for placement.
- 6 Learner gains are measured with portfolios, the LVA Read Test, and Scott Foresman Informal Reading Inventory.

TENNESSEE

- 1 This is an estimate of the number of homeless on any given day.
- 2 Data derived from state program files (one-half of projected number).
- 3 Displaced homemakers and former prisoners are targeted groups.
- 4 Services are provided in a halfway house.

- 5 Religious organizations also provide services.
- 6 Active education enrollment is a prerequisite for receiving support in the second phase of the homeless person's program.
- 7 *The Laubauch Way to Read*, *Steck-Vaughn Reading for Today*, or other materials are used in this program.
- 8 Adults are also assessed with the SelectAble locator test or *Blossom*.

TEXAS

- 1 Services are provided by the Adult Education Cooperative; however, the location of classes is not specified.

UTAH

- 1 Adults waiting for subsidized housing are targeted for educational services.
- 2 At one site, the homeless must be referred to the Adult Education and Job Services office before receiving a second night of lodging.
- 3 In the Emergency Work program, clients must attend classes to receive funds.
- 4 The Student Education Occupational Plan (SEOP) is used as an IEP.
- 5 Instruction is provided through peer tutoring, small group interactions, and classroom instruction.

VERMONT

- 1 Adults at risk of homelessness, parolees, and homeless without a roof are targeted populations.
- 2 Emergency fuel is provided.
- 3 Homeless service providers are trained in outreach and literacy services.

WASHINGTON

- 1 This is the number of adult homeless between July 1990 and April 1991, including 40,949 actually sheltered and 72,150 turned away.
- 2 Other targeted populations include: Hispanic, African-Americans, recently released prisoners, and cyclically homeless men.
- 3 Services are also delivered at a halfway house for released prisoners; a mobile learning van; substance abuse, mental health, and job service centers; Indian tribal centers; and powwows, fiestas, and other cultural activities.
- 4 Tribal organizations also provide services.
- 5 Assistance to learners who are developmentally disabled, parenting training, infant supplies, support groups, furniture, utilities and weatherizing are offered.
- 6 The IEP includes long and short range student goal statements; assessment of core competencies based on portfolios, interviews, observation, and standardized tests; and a learning contract.
- 7 Elements of curriculum development include: teaching affective skills, modular instruction, interactive and individualized instruction, homeless-specific materials and methods, a variety of informal and formal assessments, prior approval for formal assessment instruments, IEPs, portfolio evaluation, sensitive and compatible staff, Homeless Educational Network for Records of Instruction (HENRI), CASAS, Washington State Core Competencies Curricula, Life Quest, Within Our Reach, and Lifeskills for the Homeless.
- 8 Other standardized assessment instruments include: the Basic English Test (BEST) and the Peabody Individual Achievement Test (PIAT). Standardized instruments are used to evaluate adults in the program after a minimum of 75 hours of instruction. The IEP and Student Achievement Record (StAR) are used to assess progress of short-term students.

WEST VIRGINIA

- 1 Funding is channeled through the local school board to the projects. The State Department of Education hired a project coordinator to manage the program. The West Virginia Coalition Against Domestic Violence supervises the shelters directly.
- 2 Instructors locate former shelter residents and encourage them to return to the program for counseling and classes.
- 3 The program also refers students to agencies for testing.
- 4 Instruction is generally in small groups or individualized.

WISCONSIN

- 1 Two-year vocational, technical, and adult education colleges receive grants to operate the adult education for the homeless program at shelters.
- 2 The program will be publicized at a statewide conference.
- 3 Emphasis in this program is on transitioning students to long-term, on-campus adult education programs.
- 4 Housing counseling is also provided on-site in some shelters.
- 5 Each program is set up in a learning center design. Education begins with an individualized approach and progresses to small groups.
- 6 An intake interview and worksheets are part of the client placement process.
- 7 GED pretests are also used to place clients.

APPENDIX B

State and Local Surveys



(DO NOT WRITE IN THIS SPACE)

STATE PROJECT SURVEY

STATE PROJECT:

(Affix State Project
Identification Label here.)

INSTRUCTIONS: *This State Project Survey should be completed by the Adult Education for the Homeless (AEH) State Project Director. Leave questions blank, or respond "Don't know," if the information is unavailable or if you are not certain of the correct response.*

I. STATE PROJECT OVERVIEW

1. What are the principal objectives of the AEH project in this state? *(Circle all that apply.)*
 - 1 GED/Adult Secondary Education completion
 - 1 Basic skills improvement (literacy/ABE instruction)
 - 1 English as a Second Language (ESL)
 - 1 Life skills improvement
 - 1 Independent living/housing acquisition
 - 1 Pre-employment training
 - 1 Self-esteem development
 - 1 Other (Specify: _____)

2. Were educational services for the homeless available through a state project that specifically targeted that population prior to this state's participation in the AEH program?
 - 0 No
 - 1 Yes

3. How long — expressed in MONTHS — has this state's homeless education project existed to date? *(Please express your answer in months, even if your state's project has existed for more than a year. If this project existed prior to receiving AEH funds, include those months as well.)*

_____ months

How many MONTHS has this project received AEH funding? *(Include this and previous years of funding, including entitlement grants.)*

_____ months

4. What type of coordination of services for the homeless — both educational and non-educational — exists at the state level? *(Circle all that apply.)*

- 1 Statewide advisory group
- 1 Shared funding
- 1 Inter-agency referral agreements
- 1 Inter-agency needs assessments
- 1 State "hot line"
- 1 Other (Specify: _____)

5. With which Federal programs does this AEH state project coordinate? *(Circle all that apply.)*

- 1 Adult Education Act (AEA)
- 1 Job Training and Partnership Act (JTPA)
- 1 Job Opportunities and Basic Skills — Welfare Reform Act (JOBS)
- 1 Even Start (Family Literacy)
- 1 Homeless Children and Youth
- 1 Head Start
- 1 Other (Specify: _____)

6. What are the THREE most important challenges to the implementation or development of this AEH state project that you have faced during THIS project year? *(Circle the THREE answers that best apply.)*

- 1 Lack of support from State Educational Agency
- 1 Lack of support from other state agencies
- 1 Uncertainty of funding from year to year
- 1 Delays in the awarding of funding
- 1 Inadequate funding
- 1 Low priority of educational services among agencies working with the homeless
- 1 Lack of local program applicants
- 1 Other (Specify: _____)
- 7 No major challenges during current project year

(Continued next page)

Choose the most critical challenge to project implementation or development that you have successfully overcome and briefly describe how this was accomplished.

II. STATE PROJECT ADMINISTRATION

7. How many professional and support staff members at the state level currently commit time to the administration of this AEH project?

_____ professional(s)
_____ support staff

8. On average, how many hours per week of professional and support staff time are spent administering this project?

_____ hours/week professional(s)
_____ hours/week support staff

9. Was the position of State Project Director newly funded through the AEH grant or was this role taken on by an existing staff person?

- 1 Newly funded position [GO TO QUESTION 11]
- 2 Existing staff

10. What other position does this existing staff person hold?

- 1 State Director of Adult Education
- 2 Section 353 Coordinator
- 3 Other (Specify: _____)

11. How many years of adult education experience does the State Project Director have?

_____ years

12. How many years of experience with the homeless does the State Project Director have?
 _____ years
13. How many years of experience managing educational programs does the State Project Director have?
 _____ years
14. To whom does the State Project Director report? (*Title only.*)

15. Which of the following functions is (are) performed by the State Project Director and support staff? (*Circle all that apply.*)
- 1 Seeks additional sources of funding at state level
 - 1 Seeks additional sources of funding at local level
 - 1 Provides technical assistance to local programs
 - 1 Monitors local programs
 - 1 Evaluates local programs
 - 1 Promotes staff development activities
 - 1 Promotes curriculum development/dissemination
 - 1 Other (Specify: _____)
16. Which of the following BEST describes the current administrative relationship between the State project and local programs? (*Circle the ONE answer that best applies.*)
- 1 Educational service provider(s) receive grant from the state to deliver or coordinate the delivery of educational services at one or more sites
 - 2 Non-education agency(ies) receive grant from the state to deliver or coordinate the delivery of educational services at one or more sites
 - 3 Both 1 and 2 above
 - 4 State directly manages local programs
 - 5 Other (Specify: _____)
17. What type of technical assistance could the U.S. Department of Education provide to assist you in administering this project? (*Circle all that apply.*)
- 1 Clearer proposal guidelines
 - 1 Standardized reporting forms
 - 1 Training aimed specifically at working with the homeless
 - 1 Information about homelessness
 - 1 Information about other AEH state projects
 - 1 Curriculum models/training
 - 1 Assessment models/training
 - 1 Evaluation guidelines
 - 1 Other (Specify: _____)
 - 7 No technical assistance needed



(DO NOT WRITE IN THIS SPACE)

LOCAL PROGRAM SURVEY: SITE DATA

SITE NAME: _____

RESPONDENTS (see Instructions below): _____

Local Program Coordinator

Principal Instructor or Other Key Staff Person

LOCAL PROGRAM: _____

STATE: _____

EXPECTED NUMBER OF PARTICIPANTS (Current Program Year): _____

Enter the expected number of participants at this site only.

INSTRUCTIONS: *Please complete one "Site Data" form for each site served by this local AEH program. Sections I and II (questions 1-28) are to be completed by the local program coordinator, while Sections III and IV (questions 29-57) are to be completed by a principal instructor or other key staff person at the site named above. Leave questions blank, or respond "Don't know," if the information is unavailable or if you are not certain of the correct response.*

I. LOCATION AND ACCESSIBILITY OF EDUCATIONAL SERVICES

1. Is this a residential site? *(For the purposes of this and other questions, "residential sites" include short- and long-term shelters, transitional housing, and other facilities providing temporary shelter to homeless individuals and families.)*

0 No [GO TO QUESTION 11]

1 Yes

2. Approximately what proportion of the residents at this site currently participate in the AEH program?

_____ %

3. Approximately what proportion of AEH program participants served at this location currently reside on-site?

_____ %

4. What kind of residential site is this? (Circle the ONE answer that best applies. Please do not describe the residential site in terms of the characteristics of clients served. For example, an emergency shelter for victims of spousal abuse and a shelter for migrant workers are both regarded as "shelters." Similarly, transitional housing for the mentally ill and transitional housing for recovering drug/alcohol abusers are both regarded as "transitional housing.")

- 1 Shelter
- 2 Transitional housing
- 9 Other (Specify: _____)

5. What is the maximum number of consecutive nights that residents are normally permitted to stay at this site? (Please express your answer in number of nights—i.e., 1 week = 7 nights, 1 month = 30 nights, 1 year = 365 nights, etc. Enter "777" if there is no specifically designated maximum stay at this site.)

_____ nights

6. Are longer than normal stays permitted for residents participating in the AEH program?

- 0 No [GO TO QUESTION 8]
- 1 Yes
- 7 Not applicable [GO TO QUESTION 8]
- 8 Don't know [GO TO QUESTION 8]

7. How many additional nights may clients participating in the AEH program reside at this site? (Circle the ONE answer that best applies.)

- 1 Up to 30 additional nights
- 2 From 31 to 90 additional nights
- 3 More than 90 additional nights
- 4 Until program completion
- 7 Not applicable
- 8 Don't know

8. May clients continue to participate in the AEH program after discontinuing residence at this site?

- 0 No [GO TO QUESTION 10]
- 1 Yes

9. Approximately what proportion of clients continue to participate in the AEH program after discontinuing residence at this site?

_____ %

10. Is participation in the AEH program REQUIRED as a condition of residence at this site?

- 0 No [GO TO QUESTION 12]
- 1 Yes [GO TO QUESTION 12]

11. How would you describe this NON-RESIDENTIAL site? (Circle the ONE answer that best applies.)

- 1 Adult learning center
- 2 Community center or Y
- 3 Salvation Army
- 4 Homeless day center
- 5 Soup kitchen
- 6 Library
- 7 School or community college classroom
- 8 Church
- 9 Other (Specify: _____)

12. What is the single most common means of transportation that clients use to get to this site? If this is a residential site, what is the single most common means of transportation used by NON-RESIDENTIAL clients? (Circle the ONE answer that best applies.)

- 1 Walk
- 2 Client's personal vehicle
- 3 Van or other transportation provided by program
- 4 Mass transportation
- 5 Not applicable/all clients are residents at this site [GO TO QUESTION 14]
- 6 Other (Specify: _____)
- 8 Don't know

13. Are transportation vouchers provided to program participants at this site?

- 0 No
- 1 Yes

14. Is child care provided for the children of program participants at this site?

- 0 No
- 1 Yes

15. Please rate the adequacy of the physical setting where educational services are provided at this site.

- 1 Excellent
- 2 Good
- 3 Fair
- 4 Poor

16. What problems exist with the physical setting where educational services are provided at this site? (Circle all that apply.)

- 1 Noise
- 1 Lack of privacy
- 1 Inadequate space

(Continued next page)

- 1 Inadequate furnishings
- 1 Safety hazards
- 1 Lack of security for clients and teachers
- 1 Lack of secured room for storage
- 1 Other (Specify: _____)
- 7 No problems

II. INSTRUCTIONAL STAFF

NOTE: In this section, "Instructional Staff" is defined as all paid and volunteer teachers, tutors, and other staff members who directly provide instruction.

- 17. How many instructional staff members are there at this site?

- 18. What is the TOTAL number of hours of instruction offered each week by instructional staff members at this site? (EXAMPLE: If three instructors each offer 20 hours of instruction per week, report 60 total hours/week.)
_____ hours/week
- 19. What is the AVERAGE number of years of post-secondary education for instructional staff members at this site?
_____ years
- 20. How many instructional staff members at this site have graduated from college?

- 21. What is the AVERAGE number of years of adult education teaching experience for instructional staff members at this site?
_____ years
- 22. What is the AVERAGE number of years of experience with the homeless for instructional staff members at this site?
_____ years
- 23. How many instructional staff members at this site are certified in elementary or secondary education?

- 24. How many instructional staff members at this site are certified in adult education? (If none are certified because certification in adult education is not offered in your state, enter "77.")

25. How many instructional staff members at this site are female? How many are male?

_____ females

_____ males

26. How many instructional staff members at this site are volunteers?

27. Do volunteers at this site perform essentially the same function(s) as their paid counterparts?

0 No

1 Yes

28. How many individuals provide counseling services at this site?

III. EDUCATIONAL SERVICES

29. Please indicate the principal EDUCATIONAL SERVICE PROVIDER at this site. (*Circle the ONE answer that best applies.*)

1 Public school local education agency

2 Community college

3 Shelter/transitional housing

4 Community organization

5 Volunteer literacy organization

6 Church-affiliated organization

7 Other (Specify: _____)

30. How is instruction offered at this site? (*Circle all that apply.*)

1 Individualized instruction (one-on-one with a teacher or tutor)

1 Large group (classroom) instruction

1 Small group instruction

1 Peer tutoring

1 Self-instruction

1 Computer-assisted instruction

1 Other (Specify: _____)

31. Which instructional approach has proven most effective for the greatest number of clients served at this site? (*Circle the ONE answer that best applies.*)

1 Individualized instruction

2 Large group (classroom) instruction

(Continued next page)

- 3 Small group instruction
- 4 Peer tutoring
- 5 Self-instruction
- 6 Computer-assisted instruction
- 7 Other (Specify: _____)
- 97 No single most effective approach

To what do you attribute the effectiveness of this approach?

32. What strategies for instruction are employed at this site? (*Circle all that apply.*)

- 1 Cooperative learning
- 1 Intergenerational learning (parent and child learning together)
- 1 Experiential learning
- 1 Workbook based instruction
- 1 Creative writing
- 1 Other (Specify: _____)

33. Which strategy for instruction has proven most effective for the greatest number of clients served at this site? (*Circle the ONE answer that best applies.*)

- 1 Cooperative learning
- 2 Intergenerational learning
- 3 Experiential learning
- 4 Workbook based instruction
- 5 Creative writing
- 6 Other (Specify: _____)
- 7 None of the above

To what do you attribute the effectiveness of this strategy?

34. What type of instructional materials are used at this site?
- 1 Commercial
 - 2 Customized
 - 3 Combination of both
 - 4 Other (Specify: _____)
35. Are modular (i.e., short-term, self-contained) instructional materials used at this site?
- 0 No [GO TO QUESTION 37]
 - 1 Yes
36. How effective are modular instructional materials for the clients served at this site?
- 1 Extremely effective
 - 2 Somewhat effective
 - 3 Not very effective
 - 8 Don't know
37. Does this site publish a student-produced newsletter or other publication as part of its educational program?
- 0 No
 - 1 Yes
38. Is information regarding each student recorded in individual educational plans at this site?
- 0 No [GO TO QUESTION 40]
 - 1 Yes
39. What is included in these individual educational plans? (*Circle all that apply.*)
- 1 Narrative
 - 1 Student goals
 - 1 Sex
 - 1 Race/ethnicity
 - 1 Marital and family status
 - 1 Employment status
 - 1 Welfare status
 - 1 Disabilities (e.g., mental illness, learning disability, physical handicap, etc.)
 - 1 History of drug/alcohol abuse
 - 1 Domestic abuse
 - 1 Last year of school completed
 - 1 Enrollment literacy level
 - 1 Level of English proficiency
 - 1 Standardized placement test scores
 - 1 Standardized achievement test scores
 - 1 Competency achievement
 - 1 Referrals
 - 1 Other (Specify: _____)

40. What educational programs are offered at this site? *(Circle all that apply.)*

- 1 General Educational Development (GED)
- 1 Adult Secondary Education
- 1 Adult Basic Education (ABE)
- 1 English as a Second Language (ESL)
- 1 Employability skills
- 1 Life skills
- 1 Self-esteem
- 1 Other (Specify: _____)

41. How are students assessed for program placement at this site?

- 1 Standardized assessment
- 2 Informal placement [GO TO QUESTION 43]

42. Which standardized assessment instruments are used for PROGRAM PLACEMENT at this site? *(Circle all that apply.)*

- 1 TALS
- 2 CASAS
- 3 TABE
- 4 ABLE
- 5 WRAT
- 6 GED practice test
- 7 Other (Specify: _____)

43. What are the **THREE** most useful means of measuring the success of the AEH program at this site? *(Circle the **THREE** answers that best apply.)*

- 1 Standardized achievement test gains
- 1 Number of clients completing or making progress toward an adult secondary education diploma (Adult High School diploma)
- 1 Number of clients passing or making progress toward the GED
- 1 Number of clients completing ESL instructional level(s)
- 1 Number of clients completing or making progress in Level I (limited basic skills competent or functioning at grades 0-8 equivalent)
- 1 Average number of contact hours
- 1 Competency-based achievement gains
- 1 Social/psychological gains (e.g., enhanced self-esteem, improved social skills, etc.)
- 1 Number of clients obtaining housing
- 1 Number of clients getting off welfare
- 1 Number of clients obtaining or improving employment
- 1 Number of clients placed in other training or educational programs
- 1 Number of clients achieving personal goals (short- and long-term)
- 1 Other (Specify: _____)
- 7 None of the above
- 8 Don't know

44. If standardized assessment instruments are used as a means of MEASURING SUCCESS at this site, indicate which standardized assessment instruments are used. (Circle all that apply.)

- 1 TALS
- 1 CASAS
- 1 TABE
- 1 ABLE
- 1 WRAT
- 1 GED practice test
- 1 Student portfolio assessment
- 1 Other (Specify: _____)
- 7 Not applicable/standardized assessments not used

45. Are any incentives used to reward participation in the AEH program at this site?

- 0 No [GO TO QUESTION 47]
- 1 Yes

46. Please indicate those incentives used to reward participation at this site. (Circle all that apply.)

- 1 Longer shelter stays (residential sites only)
- 1 First in line at lunch or dinner
- 1 Gifts of clothing, personal effect, etc.
- 1 Certificates of achievement
- 1 Special trips or outings
- 1 Other (Specify: _____)

IV. PROGRAM PARTICIPANTS

47. To which of the following sub-populations does the GREATEST proportion of clients currently served at this site belong? (Circle the ONE answer that best applies.)

- 1 Victims of spousal abuse
- 2 Recovering drug/alcohol abusers
- 3 Mentally ill
- 4 Migrant workers
- 5 Veterans
- 6 Native Americans
- 7 Limited English proficient
- 8 Learning disabled
- 9 Other (Specify: _____)
- 97 No particular sub-population served [GO TO QUESTION 49]

48. Approximately what proportion of the clients currently served at this site are from this particular sub-population?

_____ %

49. To which of the following demographic groups does the GREATEST proportion of clients currently served at this site belong? (*Circle the ONE answer that best applies.*)

- 1 Men living alone
- 2 Women living alone
- 3 Single-parent men (with dependent children)
- 4 Single-parent women (with dependent children)
- 5 Men living with an adult partner (without dependent children)
- 6 Women living with an adult partner (without dependent children)
- 7 Men living with an adult partner (with dependent children)
- 8 Women living with an adult partner (with dependent children)

50. Approximately what proportion of clients currently served at this site belong to this demographic group?

_____ %

51. To which of the following age groups does the GREATEST proportion of clients currently served at this site belong? (*Circle the ONE answer that best applies.*)

- 1 16-24 years
- 2 25-44 years
- 3 45-59 years
- 4 60+ years

52. Approximately what proportion of clients currently served at this site belong to this age group?

_____ %

53. Are the majority of clients served at this site at Level I (limited basic skills competent or functioning at grades 0-8 equivalent) or Level II (competent, but not proficient, or functioning at grades 9-12 equivalent)?

- 1 Level I
- 2 Level II
- 3 About equally divided between the two levels
- 8 Don't know

54. How much variation is there in the educational levels of clients served at this site?

- 1 A great deal
- 2 Some
- 3 Very little (all at about the same level)
- 8 Don't know

55. Approximately how many TOTAL hours of instruction does the average client at this site receive?

_____ total hours

56. What proportion of AEH students at this site participate in the program for more than two weeks?

_____ %

More than one month?

_____ %

More than three months?

_____ %

57. What is the PRINCIPAL reason for client separation from the AEH program at this site?
(Circle the ONE answer that best applies.)

- 1 Met educational objectives
- 2 Program did not meet client's educational needs
- 3 Took a job
- 4 Entered another educational/training program
- 5 Forced to leave shelter/transitional housing because of stay limitation
- 6 Forced to leave shelter/transitional housing for other reasons
- 7 Left shelter/transitional housing voluntarily
- 8 Moved out of the area
- 9 Experienced difficulty obtaining child care
- 10 Experienced difficulty obtaining transportation to instructional site
- 11 Incarcerated
- 12 Institutionalized due to mental illness or drug/alcohol abuse
- 13 Clients' fear of failure regarding education
- 14 Other (Specify: _____)
- 98 Don't know

THANK YOU FOR YOUR PARTICIPATION!



(DO NOT WRITE IN THIS SPACE)

LOCAL PROGRAM SURVEY: CLIENT DATA

CLIENT'S FIRST NAME OR INITIALS: _____

STAFF MEMBER COMPLETING THIS SURVEY: _____

SITE NAME: _____

LOCAL PROGRAM: _____

STATE: _____

DATE OF ENROLLMENT

(i.e., First Day of Program Participation):

$\frac{6}{(\text{Mo.})}$ / $\frac{\quad}{(\text{Day})}$ / $\frac{92}{(\text{Year})}$

END OF THREE-MONTH REPORTING PERIOD

(i.e., Three Months After Date of Enrollment):

$\frac{9}{(\text{Mo.})}$ / $\frac{\quad}{(\text{Day})}$ / $\frac{92}{(\text{Year})}$

INSTRUCTIONS: Please ask instructional staff members at the site named above to complete one "Client Data" form for each client who enrolled for the first time at this site during the month of June, 1992. Unless otherwise directed, please report client data for the THREE-MONTH period following enrollment (defined here as the first day of program participation). Leave questions blank, or respond "Don't know," if the information is unavailable or if you are not certain of the correct response.

I. BACKGROUND INFORMATION

1. Sex:

- 1 Male
- 2 Female

2. Race/ethnicity:

- 1 White (not of Hispanic origin)
- 2 Black (not of Hispanic origin)
- 3 Hispanic
- 4 Asian or Pacific Islander
- 5 American Indian or Alaskan Native
- 8 Don't know

3. Age at enrollment:

_____ years

4. Family status at enrollment:

- 1 Living alone (single, widowed, or divorced)
- 2 Single parent (with dependent children)
- 3 Living with adult partner (without dependent children)
- 4 Living with adult partner (with dependent children)
- 8 No record exists

5. Employment status at enrollment:

- 1 Employed full-time [GO TO QUESTION 7]
- 2 Employed part-time [GO TO QUESTION 7]
- 3 Unemployed
- 8 No record exists [GO TO QUESTION 7]

6. Number of months unemployed at enrollment:

_____ months

7. Number of months homeless at enrollment:

_____ months

8. Educational level at enrollment:

- 1 Level I (limited basic skills competent or functioning at grades 0-8 equivalent)
- 2 Level II (competent, but not proficient, or functioning at grades 9-12 equivalent)
- 8 No record exists

9. Number of years of education at enrollment (*circle highest grade completed*):

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17+

10. Did this client enroll in the AEH program at a RESIDENTIAL site? (*For the purposes of this and other questions, "residential sites" include short- and long-term shelters, transitional housing, and other facilities providing temporary shelter to homeless individuals and families.*)

- 0 No [GO TO QUESTION 12]
- 1 Yes
- 8 No record exists [GO TO QUESTION 12]

11. Did he/she reside on site during all or part of the three-month period following enrollment?

- 0 No
- 1 Yes
- 8 No record exists

II. SUPPORT SERVICES

12. During the three-month period following enrollment, which, if any, of the following support services did this client RECEIVE — either directly or by referral — as a result of his/her participation in the AEH program? (Circle all that apply.)

- 1 Shelter
- 1 Food
- 1 Clothing
- 1 Substance abuse counseling
- 1 Mental health counseling
- 1 Health care
- 1 Child care
- 1 Transportation
- 1 Job skills training
- 1 Job counseling
- 1 Job referrals
- 1 Legal counseling
- 1 Other (Specify: _____)
- 7 No support services received
- 8 No record exists

13. Did this client receive case management services (i.e., comprehensive assessment and referral) at any time during the three-month period following enrollment?

- 0 No
- 1 Yes
- 8 No record exists

III. EDUCATIONAL SERVICES/OUTCOMES

14. How many TOTAL hours of instruction did this client receive during the three-month period following enrollment?

_____ hours

15. Approximately how many hours of **INDIVIDUALIZED INSTRUCTION** — that is, one-on-one instruction with a teacher or tutor — did this client receive during the three-month period following enrollment?

_____ hours

16. Approximately how many hours of **SMALL GROUP INSTRUCTION** did this client receive during the three-month period following enrollment?

_____ hours

17. Approximately how many hours of **COMPUTER-ASSISTED INSTRUCTION** did this client receive during the three-month period following enrollment?

_____ hours

18. In which of the following educational programs did this client participate during the three-month period following enrollment? (*Circle all that apply.*)

- 1 General Educational Development (GED)
- 1 Adult Secondary Education
- 1 Adult Basic Education (ABE)
- 1 English as a Second Language (ESL)
- 1 Employability skills
- 1 Life skills
- 1 Self-esteem
- 1 Other (Specify: _____)

19. Did this client take **ANY PART** of the GED or GED practice test(s) on **MORE THAN ONE OCCASION** during the three-month period following enrollment?

- 0 No [GO TO QUESTION 21]
- 1 Yes

20. Please enter this client's scores for the **FIRST** and **LAST** administration of the GED or GED practice tests during the three-month period following enrollment. (*Enter first and last scores for individual GED test areas if this client was not examined in all areas.*)

GED TEST AREA	TEST SCORES		NUMBER OF HOURS OF INSTRUCTION BETWEEN TEST ADMINISTRATIONS
	First Administration	Last Administration	
MATH			
SCIENCE			
WRITING			
SOCIAL STUDIES			
LITERARY ARTS			

21. Did this client increase his/her educational level during the three-month period following enrollment? (*Note: Level I = limited basic skills competent or functioning at grades 0-8 equivalent and Level II = competent, but not proficient, or functioning at grades 9-12 equivalent.*)

- 1 Yes, moved up within Level I
- 2 Yes, moved from Level I to Level II
- 3 Yes, moved up within Level II
- 4 No increase in educational level
- 8 No record exists

22. If this client received ESL instruction, did he/she move up one or more levels during the three-month period following enrollment?

- 0 No
- 1 Yes
- 7 Not applicable/did not receive ESL instruction
- 8 No record exists

23. Did this client accomplish one or more of his/her personal goals during the three-month period following enrollment?

- 0 No
- 1 Yes
- 8 No record exists

24. Did this client receive literacy instruction in any of the following LIFE SKILLS during the three-month period following enrollment? (*Circle the number to the left of all that apply.*) How much progress did he/she make toward the successful completion of instruction in each life skill area? (*Circle the appropriate number to the right of each life skill area for which instruction was received.*)

		No Progress	Some Progress	Much Progress	Successfully Completed	No Record Exists
<u>Consumer Economics</u>						
1	Weights, measures, coins, and currency	1	2	3	4	8
1	Comparison shopping/ coupons	1	2	3	4	8
1	Locating/obtaining housing	1	2	3	4	8
1	Personal budgeting/ financial services	1	2	3	4	8
<u>Community Resources</u>						
1	Telephone/telephone directory	1	2	3	4	8

(Continued next page)

25. Did this client accomplish any of the following during the three-month period following enrollment? (Circle the appropriate number to the right of each response.)

	<u>No</u>	<u>Yes</u>	<u>No Record Exists</u>
Received GED	0	1	8
Received Adult Secondary Education diploma	0	1	8
Obtained/improved employment	0	1	8
Got off welfare	0	1	8
Gained admission to another education/training program	0	1	8
Registered to vote for the first time	0	1	8
Obtained U.S. citizenship	0	1	8
Obtained a driver's license	0	1	8
Found a place to live	0	1	8

IV. SEPARATION FROM PROGRAM

26. Was this client still participating in the AEH program three months after enrollment?

- 0 No
- 1 Yes [STOP HERE]

27. How many days after enrollment did this client separate from the AEH program?

_____ days

28. What was the PRINCIPAL reason for this client's separation from the AEH program? (Circle the ONE answer that best applies.)

- 1 Met educational objectives
- 2 Program did not meet client's educational needs
- 3 Took a job
- 4 Entered another educational/training program
- 5 Forced to leave shelter/transitional housing because of stay limitation
- 6 Forced to leave shelter/transitional housing for other reasons
- 7 Left shelter/transitional housing voluntarily
- 8 Moved out of the area
- 9 Experienced difficulty obtaining child care
- 10 Experienced difficulty obtaining transportation to instructional site
- 11 Incarcerated
- 12 Institutionalized due to mental illness or drug/alcohol abuse
- 13 Client's fear of failure regarding education
- 14 Other (Specify: _____)
- 98 No record exists

THANK YOU FOR YOUR PARTICIPATION!

APPENDIX C

**TALS Document Literacy Test
and Supporting Materials**

INSTRUCTIONS FOR ADMINISTERING THE TALS DOCUMENT LITERACY TEST

Using the Script:

Text in **bold print** indicates instructions for you to follow as you administer the test and should not be read aloud.

Text in regular typeface indicates directions that you are to read to the examinees.

Text that is *italicized* indicates directions that are also printed in the examinees' test booklets and that you are to read aloud while the examinees read silently.

SCRIPT

Introduction to read before distributing books:

The test you are about to take will provide information about how well you can apply literacy skills so that we can help you meet your goals. You will be asked to answer questions based on the kinds of printed materials adults come into contact with on a daily basis.

The test that you will be taking will provide information about your skills in identifying and using information in materials such as tables, charts, maps, and forms.

Now I am going to hand out the test booklets and pencils. Please put your booklet face up. Do not open it until I tell you to do so.

Distribute an assessment booklet and two pencils to each examinee. Then read the following.

Open the booklet to the inside front cover. Fill in your name and the date on the lines provided.

Pause to give examinees a chance to fill in the information. Then continue reading.

Please read along silently as I read the directions aloud.

In this test you will answer the questions in several ways. For some you will write your answers on the lines provided. For others you will indicate your answers by circling or underlining a sentence or word. The directions will explain how and where you are to answer. Do not write your answers on the blanks at the bottom of the pages.

Now look at page one. (Pause.) Read the directions and answer the practice questions. When you finish, wait for an explanation of the answers.

Pause to give examinees time to complete the practice questions.

For practice question number one, you should have placed an X next to or over the rectangular box next to the words "authorized signature." For practice question number two, you should have circled the date 06/91.

Now look back at the inside front cover and follow along as I continue to read the directions.

No one is expected to be able to answer correctly all of the questions in this test; however, it is important that you try to answer each one. I am not allowed to help you with anything specifically related to completing a question, so if you cannot answer a question, go to the next one. Do not spend a lot of time on one question if you find it difficult; we would like you to try as many of them as possible.

Each booklet has two sections. The beginning of each section is indicated at the top of the first page with the section number in dark print. The end of each section is indicated by a STOP sign.

You will have 20 minutes to complete each section. I will tell you when to begin each section and when to stop. If you complete a section before time is up, you may go back to work on any questions you skipped in that section. If you finish working on Section One before time is up, leave your booklet open at the page with the STOP sign, and wait until you are told to go on to Section Two. If you finish Section Two before time is up, please close your test booklet. If you need another pencil after we begin, please raise your hand.

Do you have any questions?

Now turn the page to Section One. Please begin.

Time the section for 20 minutes. At the end of 20 minutes, read the following.

Stop, even if you have not finished Section One. Please turn to Section Two in your booklet and begin working on it.

Time the section for 20 minutes. At the end of 20 minutes, read the following.

Stop, even if you have not finished Section Two.

Collect the booklets. The session for the administration of the test is now completed.

ADMINISTERING THE TALS DOCUMENT LITERACY TEST: QUESTIONS AND ANSWERS

Q: To whom should I administer the test?

A: The test should be administered to all persons who enroll (i.e., participate for the first time) in your local AEH program between October 15, 1992 and November 14, 1992, with the exception of those who are limited English proficient. In the case of limited English proficient enrollees, complete and return the Enrollee Information Form, but do not administer the test.

Q: When should I administer the test?

A: The test should be administered to new enrollees within *one week* of their enrollment.

Q: May I administer the test to more than one student at a time?

A: Yes. (Group size should not exceed 25.)

Q: Where should I administer the test?

A: The test should be administered in a room large enough to comfortably accommodate the expected number of examinees. If possible, the location should be free of interruptions, outside noise, and other distractions.

Q: What materials will I need?

A: You will need one test booklet and two pencils (with erasers) per examinee, the attached test administration instructions, and a clock or watch.

Q: How long are examinees permitted to work on the test?

A: The total time for the test is 40 minutes — 20 minutes for each section. You should continue from one section to the next *without* a break.

Q: Must examinees take the entire test at one sitting?

A: Yes. The test was validated for a single session of 40 minutes, timed in two 20-minute sessions.

Q: Should I encourage examinees to try to answer each question?

A: Yes.

Q: May I provide help once the test has started?

A: No.

Q: Whom should I contact if I have any further questions?

A: You may contact Dr. Darrel Drury, of Pelavin Associates, for assistance. He can be reached at (202) 785-3308 between 9:00 a.m. and 5:30 p.m. (Eastern time), Monday through Friday. You also may direct your questions to the director of your state's Adult Education for the Homeless Program, who has received training in the administration of the TALS Document Literacy Test.

Q: How and when should I return the completed test booklets and Enrollee Information Forms?

A: Please return the completed test booklets and Enrollee Information Forms to Pelavin Associates no later than November 21, 1992. (Remember to write a unique two-digit ID # on the cover of each test booklet and on the corresponding Enrollee Information Forms.)

Mail (1st Class) to:

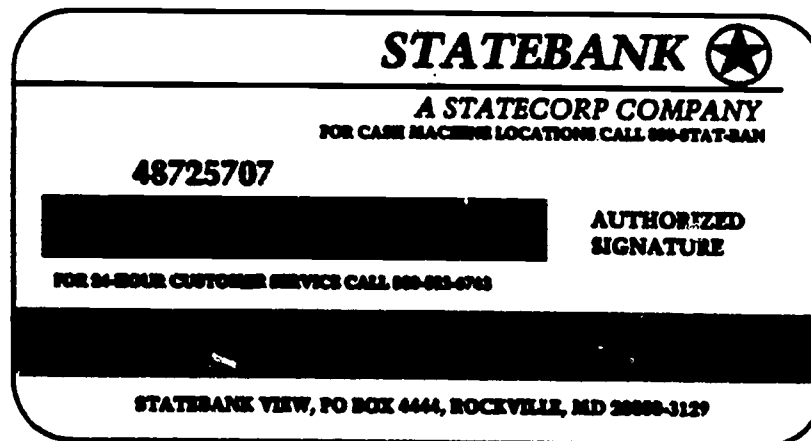
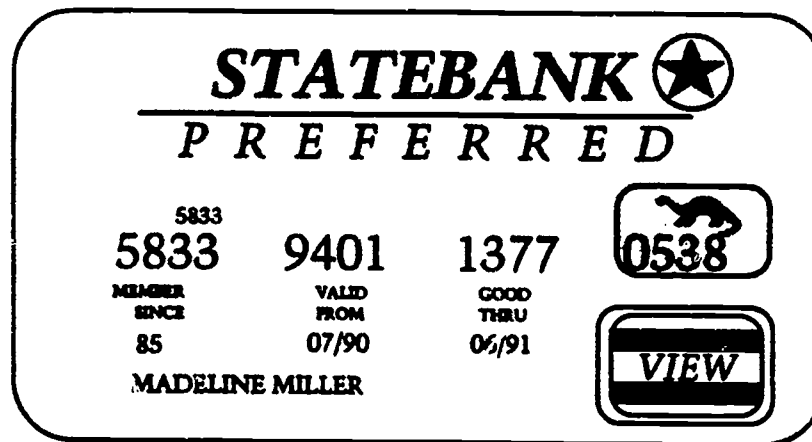
Dr. Darrel W. Drury
Pelavin Associates, Inc.
2030 M Street, N.W., Suite 800
Washington, DC 20036

Practice Questions

Read the directions and answer the practice questions. When you finish, wait for an explanation of the answers.

Refer to both sides of the credit card below to answer the following questions.

1. Place an X in the space where you would sign your name on the credit card.
2. Circle the month and year through which the credit card is good.



Section 1

This section has 13 questions. You will have 20 minutes to complete them.

Refer to the chart on the next page to answer the following questions.

1. Which states have the youngest minimum driving age for a regular license?

2. Between what dates is it permissible to use studded tires in California?

3. Which states specify mandatory use of child restraints for children under the age of 4?

4. Suppose you are planning to drive in both Georgia and Florida in one day. When you compare the driving regulations of the two states, which regulations are different?

1. _____

2. _____

3. _____

4. _____

Driving Regulations

UNITED STATES

State	Min. Driving Age- regular license (conditions)	Speed Limits- max. on open hwy.	55 MPH Speed Limit (where posted)	Studded Tires- permissible dates	Right Turn on Red permitted	Child Restraints- mandatory use	Seat Belts- mandatory use
Alabama	16	55	Yes	All yr: rubber only.	Yes	Under age 4	No
Alaska	18 (14)	55: unsurfaced. 50.	No	Sept. 15-May 1; Sept. 30-Apr. 15 s. of 60° N.	Yes	Under age 7	No
Arizona	18 (16)	55	Yes	Oct. 1-May 1.	Yes	Under age 5	No
Arkansas	18 (14)	55	Yes	Nov. 15-Apr. 15.	Yes	Under age 6.	No
California	18 (16)	55	Yes	Nov. 1-Apr. 1.	Yes	Under age 4, or less than 40 lbs.	Yes
Colorado	21 (16)	55	Yes	No restrictions.	Yes	Under age 5, or less than 40 lbs.	Yes
Connecticut	18 (16)	55	No	Nov. 15-Apr. 30.	Yes	Under age 5.	Yes
Delaware	18 (16)	55 on 4-lane; 50 on 2-lane.	No	Oct. 15-Apr. 15.	Yes	Under age 5.	No
D.C.	18 (16)	25, except otherwise posted.	No	Oct. 15-Apr. 15.	Yes	Under age 4.	Yes
Florida	18 (16)	55	Yes	All yr: types that do not damage hwy.	Yes	Under age 6.	Yes
Georgia	18 (16)	55	No	Only during snow or ice conditions.	Yes	Under age 5.	No
Hawaii	18 (15)	55	No	Prohibited.	Yes	Under age 4.	Yes
Idaho	16 (14)	55	Yes	Oct. 1-Apr. 15.	Yes	Under age 4.	Yes

88-3

884

254

Refer to the map on the next page to answer the following questions.

5. The largest part of the Navajo Indian Reservation is in what state?

6. On what river is Bluff, Utah, located?

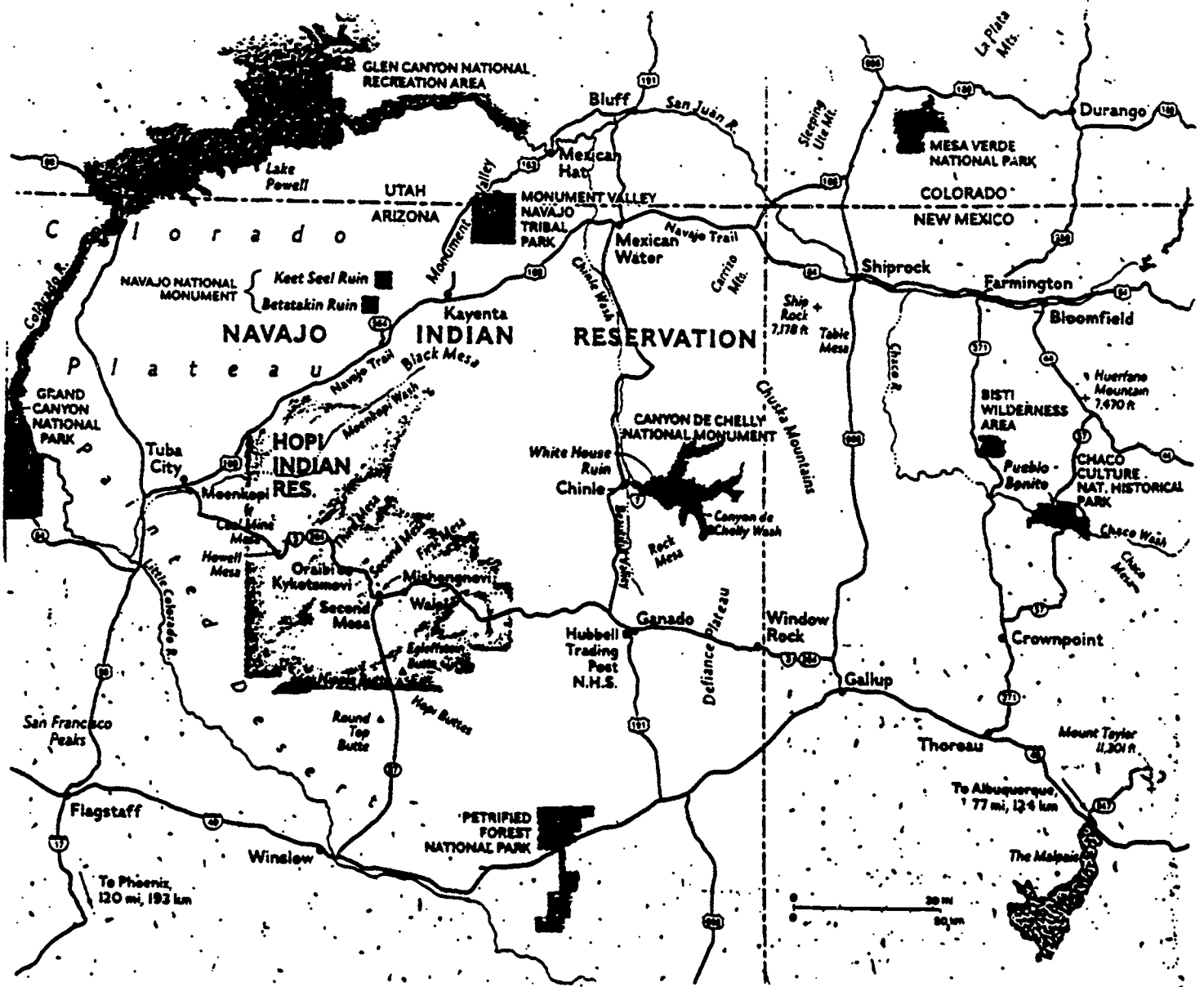
7. In which state is Mesa Verde National Park?

8. Name the national monuments located in the Navajo Indian Reservation.

9. About how many miles is it from Gallup, New Mexico, to Thoreau, New Mexico?.

10. What is the highway number of the most direct route from Flagstaff, Arizona, to the Petrified Forest National Park?

5. _____ 6. _____ 7. _____ 8. _____ 9. _____ 10. _____



BEST COPY AVAILABLE

Refer to the chart on the next page to answer the following questions.

11. If you ate a McDonald's Biscuit w/sausage and egg, you would eat _____ grams of fat, _____ calories, and _____ milligrams of sodium.

12. Which breakfast food is the lowest in both fat and calories?

13. Name two breakfasts that contain the same number of calories.

11. _____

12. _____

13. _____

Breakfast in the slow lane

▼ Begin the day with a typical fast-food breakfast and you fill up on nutritional undesirables. Cold cereal and toast, on the other hand, wreak little nutritional damage. A 1-ounce serving of an unsweetened cereal like cornflakes, with low-fat milk, banana slices, toast and a dollop of jelly, usually totals out to less than 3 grams of fat, 544 milligrams of salt and 390 calories.

Compiled by Jo Ann Tooley with Lynn Anderson Carle and Marianna I. Knight

A CASE FOR CORNFLAKES

Most fast-food breakfasts are loaded with fat, calories and salt. Here's how a few favorites measure up.

	Fat (grams)	Calories	Sodium (milligrams)
Burger King Croissan'wich w/sausage	41	538	1,042
McDonald's Biscuit w/sausage and egg	35	529	1,250
Hardee's Sausage and Egg Biscuit	35	503	885
Burger King French Toast Sticks	28	499	498
Roy Rogers Crescent w/Sausage	29	499	1,289
Jack in the Box Pancake Platter	22	612	888
McDonald's Egg McMuffin	12	293	740
Roy Rogers Apple Danish	12	249	255
McDonald's Hotcakes w/butter and syrup	9	413	640
McDonald's English Muffin w/butter	5	169	270

USN&WR—Basic data: *Mayo Clinic Nutrition Letter* reprinted with permission from Mayo Foundation for Medical Education and Research



Section 2

This section has 9 questions. You will have 20 minutes to complete them.

Refer to the list on the next page to answer the following questions.

1. Which city ranked fourteenth (14th) in 1989?

2. Which city was ranked 118th in 1988?

3. How many of the cities listed were not ranked in 1988?

4. Which city was ranked the same in 1988 and 1989?

5. Which state had the most cities ranked in the top 50 for 1989?

1. _____

2. _____

3. _____

4. _____

5. _____

HOT SPOTS

In this year's ranking of metropolitan economies, growth is in the 'edge cities'

METRO RANKING 1989 Rank Area 1998 Rank

1. Manchester-Nashua, NH (2)	26. Dallas-Ft. Worth, TX (9)
2. Orlando, FL (3)	27. Ventura, CA (NR)
3. West Palm Beach, FL (NR)	28. Burlington-Montpelier, VT (NR)
4. Raleigh-Durham, NC (6)	29. Charlotte, NC (32)
5. Washington, DC (8)	30. Richmond, VA (25)
6. Las Vegas, NV (27)	31. Reno, NV (73)
7. Atlanta, GA (5)	32. Indianapolis, IN (35)
8. Anaheim, CA (NR)	33. Tampa-St. Petersburg, FL (15)
9. Portsmouth, NH (13)	34. Sarasota, FL (29)
10. Phoenix, AZ (4)	35. Baltimore, MD (24)
11. San Diego, CA (10)	36. Wilmington-Jacksonville, NC (NR)
12. Riverside-San Bernardino, CA (NR)	37. Columbus, OH (31)
13. San Jose, CA (NR)	38. Gainesville, FL (NR)
14. Ft. Myers, FL (17)	39. Portland, ME (37)
15. Nashville, TN (11)	40. El Paso, TX (26)
16. Jacksonville, FL (22)	41. Greensboro-Winston Salem, NC (28)
17. Austin, TX (1)	42. Wilmington, DE (36)
18. Norfolk-Portsmouth, VA (20)	43. Seattle, WA (40)
19. Charleston, SC (19)	44. South Bend, IN (18)
20. Columbia, SC (45)	45. Ft. Wayne, IN (38)
21. Ft. Pierce, FL (NR)	46. Atlantic City, NJ (116)
22. Huntsville, AL (7)	47. Montgomery, AL (81)
23. Panama City-Ft. Walton Beach, FL (NR)	48. Pensacola, FL (16)
24. Lexington, KY (47)	49. Sacramento, CA (46)
25. Tucson, AZ (12)	50. Minneapolis-St. Paul, MN (34)

BEST COPY AVAILABLE

Use the form on the next page to answer the following question.

6. Complete the application for the nondriver ID card on the next page. In doing so assume the following:

- Luke M. Girard is applying
- mailing/legal address is 3725 Poplar Street, Rochester, New York 14620, county of Monroe
- never possessed a New York State license or ID card
- born January 26, 1972
- 5 feet, 9 inches tall
- brown eyes

You do not have to sign name.

6a. _____ b. _____ c. _____ d. _____ e. _____

State of New York - Department of Motor Vehicles
APPLICATION FOR THE NONDRIVER ID CARD

PLEASE PRINT WITH BLUE OR BLACK INK IN BLANK SPACES NEXT TO ARROWS.

DO NOT PRINT IN SHADED AREAS

SHADED AREAS FOR OFFICE USE ONLY	
Batch File No.	
AMENDMENT	LAM
RENEWAL	LAW
DUPLICATE	LDP
ORIGINAL	LIS
DOCUMENT TYPE	
NON-DRIVER ID	ID
SPECIAL CONDITIONS	
NO-FEE	NF
RENEWAL UPDATE	UP
LICENSE SUR	LS
Fee	Expiration Date
\$	
Approved by	
Issuing Office	
Date	
Stop Reason	
Cashier Signature	

LAST NAME FIRST NAME MIDDLE INITIAL

Name

DATE OF BIRTH
 Month Day Year SEX M F

Birth Sex
 License Surrendered

Do you currently have a New York State license or ID card? LICENSE ID CARD
 If so, enter the identification number exactly as it appears on the license or ID card.

NUMBER AND STREET (Mailing Address including Rural Delivery, Box No. and/or Apt. No.)

NUMBER AND STREET (Mailing Address including Rural Delivery, Box No. and/or Apt. No.)

Street

CITY OR TOWN STATE

City/State

ZIP CODE COUNTY OF RESIDENCE

Zip County

Has your address changed since your last ID card was issued? Yes No

Legal Address if different from Mailing Address

HEIGHT EYE COLOR
 Height Eye Color

AMENDMENT — To change your present ID card, fill in this section

a. For a change of name, print your former name exactly as it appears on your present ID card.

Last Name First Middle Initial

b. If other than above, give change and reason

I, the undersigned, state that the information I have given on the foregoing application is true to the best of my knowledge and belief. If a valid New York State driver's license is assigned to me, I certify that I have surrendered it with this application. If a duplicate ID card is being applied for, I certify that I am the holder of a currently valid or renewable New York State ID card that is not presently under suspension or revocation, and that this ID card has been lost, mutilated or destroyed. If the lost ID card is found after the duplicate ID card has been issued, I will surrender the found ID card to the Department of Motor Vehicles and advise that a duplicate has been issued.

SIGN HERE X
 Sign name in Full — A married woman must use her own first name.



Refer to the graph on the next page to answer the following questions.

7. Which television show on the chart is broadcast by ABC?

8. Which program attracts more than 20 percent of women viewers?

9. What percentage of the female audience watches "A Different World"?

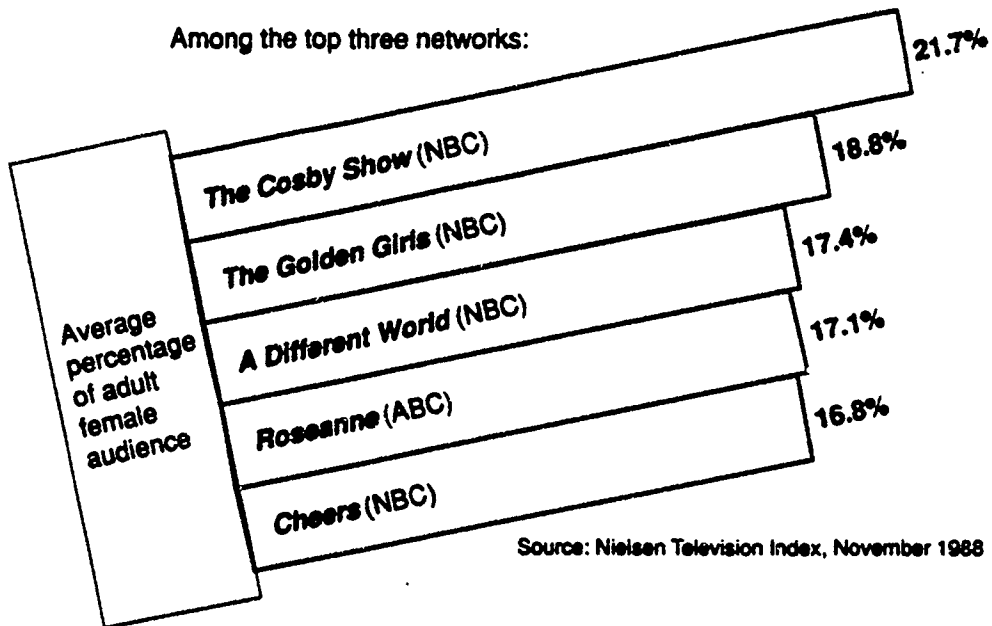
7. _____

8. _____

9. _____

Women's most-watched TV shows

Among the top three networks:



Source: Nielsen Television Index, November 1988



ENROLLEE INFORMATION FORM

ENROLLEE ID NUMER: _____

Enter a unique two-digit ID # here and on the cover the examinee's test booklet. For the first new enrollee, enter "01." For subsequent enrollees, enter "02," "03," etc.

SITE NAME: _____

LOCAL PROGRAM:

INSTRUCTIONS: Please complete this form for each person who enrolls (i.e., participates for the first time) in the AEH program between October 15, 1992 and November 14, 1992. Leave questions blank, or circle "Don't know," if the information is unavailable or if you are not certain of the correct response. After administering the TALS Document Literacy Test to each new enrollee (see exception below), write the enrollee's two-digit ID# on his/her test booklet and return both forms. In the case of limited English proficient enrollees, complete and return the Enrollee Information Form, but do not administer the test.

1. Is this enrollee limited English proficient?
0 No [COMPLETE THIS FORM AND ADMINISTER TEST]
1 Yes [COMPLETE THIS FORM, BUT DO NOT ADMINISTER TEST]

2. Sex:
1 Male
2 Female

3. Race/ethnicity:
1 White (not of Hispanic origin)
2 Black (not of Hispanic origin)
3 Hispanic
4 Asian or Pacific Islander
5 American Indian or Alaskan Native
6 Other (Specify: _____)
8 Don't know

4. Age at enrollment:

_____ years

5. Family status at enrollment:

- 1 Single/widowed/divorced (no dependent children)
- 2 Single/widowed/divorced (dependent children)
- 3 Married (no dependent children)
- 4 Married (dependent children)
- 8 Don't know

6. Employment status at enrollment:

- 1 Employed full-time [GO TO QUESTION 8]
- 2 Employed part-time [GO TO QUESTION 8]
- 3 Unemployed
- 8 Don't know [GO TO QUESTION 8]

7. Number of months unemployed at enrollment:

_____ months

8. Number of months homeless at enrollment:

_____ months

9. Educational level at enrollment:

- 1 Level I (limited basic skills competent or functioning at grades 0-8 equivalent)
- 2 Level II (competent, but not proficient, or functioning at grades 9-12 equivalent)
- 8 Don't know

10. Number of years of education at enrollment (*circle highest grade completed*):

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17+

**PLEASE REMEMBER TO WRITE THE EXAMINEE'S
ID NUMBER ON THE COVER OF THE TEST BOOKLET.**

THANK YOU!

APPENDIX D

**Statistical Methods and
Detailed Results for Analysis of
Client Participation**

Statistical Methods and Detailed Results for Analysis of Client Participation

We used related methods to obtain adjusted estimates of the average amount of instruction clients receive and to assess the impact of various traits on the amount of instruction received. Both methods assume that the hours of instruction received assumes a Weibull distribution. The Weibull distribution is a fairly flexible, two-parameter distribution commonly used to model duration data (Lancaster, 1990).¹ The methods are outlined below.

Adjusted Hours of Instruction Received

The method of maximum likelihood was used to estimate the parameters of the Weibull distribution. The likelihood function is constructed in two parts: the first part represents the contribution to the likelihood function from completed spells, and the second part represents the contribution from incomplete spells. Letting t_i represent the total time in the program for individual i , have,

$$L_i = P(t=t_i|\beta,\sigma)$$

for the completers, and,

$$L_i = P(t \geq t_i|\beta,\sigma)$$

for incomplete spells. The probability is given by the Weibull density function in the first case, and by the survivor function in the second case. The product over all individuals gives the overall likelihood function. Maximization with respect to the parameters β and σ yields the maximum likelihood estimates. The mean is derived from these parameters. Estimation employed the Weibull procedure in the statistical software Stata.

Impact of Various Traits on Instruction

Survival models provide an appropriate framework for analyzing duration data (such as the hours of instruction). These models are commonly developed in terms of the hazard rate, which can be interpreted as the probability of leaving during a given (small) time interval given survival until that interval. One form of survival model is a proportional hazards model, which breaks the hazard rate into two components: the baseline hazard shared across individuals, and the individual specific factors that influence the overall hazard rate. Typically, these factors enter the equation by making proportional changes in the hazard rate. Letting the $\theta_i(t)$ represent the hazard rate for individual i at time t , the model takes the form:

¹ Lancaster, T. (1990), *Econometric Analysis of Transition Data*, Cambridge: Cambridge University Press. We also estimated the multivariate model using a semi-parametric method that does not require the distributional assumption and we found no substantive differences with the results reported here.

$$\theta_i(t) = \theta_0 \exp[\beta'x_i]$$

where β represents a vector of parameters to be estimated and x_i is a vector of characteristics of individual i , or the program in which he or she is enrolled. The exponential functional form ensures that the proportional effect on the baseline hazard remains positive (a constraint inherent in the nature of a probability).^{2,3}

This form of the basic survival model is completed by specifying the functional form of the distribution of the hours of instruction. As discussed above, we assumed a Weibull distribution.

The final modeling issue is the issue of censored data and the meaning of leaving the program. Some clients had not completed their spell of education at the time the study ended. The survival model outlined above can easily accommodate multiple destinations (completing or leaving otherwise) and censoring. We simply break the hazard function out into two separate "transition intensities,"

$$\theta_i(t) = \theta_{1i}(t) + \theta_{2i}(t)$$

so the probability of leaving at time t (given survival until time t) is the sum of the probability of leaving for destination one or destination two (also conditional on survival). The density function, which gives us the observation's contribution to the likelihood function in a maximum likelihood analysis is given by,

$$L_i = \theta_{ki}(t_i) \exp \left[- \sum_{k=1}^2 \int_0^{t_i} \theta_{ki}(s) ds \right]$$

for clients who leave for state k (either completing or otherwise leaving). What we know about the censored observations is that they have "survived" for at least as long as their observed

² Note that this does not imply that characteristics cannot reduce the hazard: when the proportional effect is less than one, the hazard is reduced.

³ The survivor function, the probability of not leaving before time t , is related to the hazard function as follows: $\bar{F}(t) = \exp \left[- \int_0^t \theta(s) ds \right]$. By definition, the hazard function is given by the density function over the survivor function. Therefore, the distribution function is given by,

$F(t) = \theta(t) \exp \left[- \int_0^t \theta(s) ds \right]$. Thus, the likelihood function is the product over these terms, and the log likelihood follows immediately as the sum of the log of these terms. Lancaster (1990) provides an excellent introduction to these models.

duration. These observations contribute to the likelihood function the probability of surviving at least until t :

$$L_i = \exp \left[- \sum_{k=1}^2 \int_0^{t_k} \theta_{Hk}(s) d(s) \right]$$

We thus exploit the information that we have about the censored observations without resorting to counterfactual assumption that the spells are complete.

Replacing the θ with the specific functional form of the Weibull model yields an easily estimable model.

We transformed continuous variables into their natural logarithms when they entered the model, and reparameterized the model to estimate "time ratios," that is, the proportional effect of the explanatory variables on the expected hours of instruction. With these changes, the coefficients represent elasticities of expected hours of instruction with respect to the continuous variable associated with the coefficient. The coefficients associated with dummy variables must be exponentiated and one subtracted to be interpreted as elasticities. The table in the text has already taken this step. Table D-1 presents the coefficient estimates, and Table D-2 provides a more complete description of the variables included in the analysis. The analysis included cases all cases with complete data that met two conditions: the client received some instruction and the data indicated an average of fewer than 10 hours per day of instruction. The latter condition excluded a few cases in which the data were clearly in error.

TABLE D-1

ESTIMATES FROM WEIBULL REGRESSION MODEL

Weibull regression (log expected time form)		Number of obs	=	1808
Sigma	=	1.189		
Std Err(Sigma)	=	0.031		
Log Likelihood	=	-1950.123		
		Model chi2(23)	=	578.102
		Prob > chi2	=	0.0000
		Pseudo R2	=	0.2388

clq14	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
hsgrad	-.145319	.1061669	-1.369	0.171	-.3535435	.0629055
level	.3988479	.0996312	4.003	0.000	.203418	.594254
female	.1827508	.098254	1.860	0.063	-.0099542	.3754559
lnAge	.3959344	.1564883	2.530	0.011	.0890148	.702854
lnNoJb	-.0059918	.066206	-0.091	0.928	-.1358413	.1238578
nojob2	-.2459064	.2013592	-1.221	0.222	-.6408311	.1490182
employ	-.0962897	.2064726	-0.466	0.641	-.5012434	.3086639
nohome	-.5918883	.1493739	-3.962	0.000	-.8848545	-.2989221
lnNoHm	.1284692	.059719	2.151	0.032	.0113426	.2455957
resident	-.0510926	.1324678	-0.386	0.700	-.310901	.2087158
compuls	.0537129	.1158015	0.464	0.643	-.173408	.2808338
lnFacRat	-.2916041	.0549507	-5.307	0.000	-.3993786	-.1838296
lnPctSml	-.3487878	.0815927	-4.275	0.000	-.5088151	-.1887604
lnPctInd	-.5132652	.0639996	-8.020	0.000	-.6387873	-.3877431
pctMis	.8572763	.1354036	6.331	0.000	.59171	1.122843
lnDegree	.1650377	.0817958	2.018	0.044	.0046122	.3254633
drgabuse	.567891	.1203938	4.717	0.000	.3317633	.8040187
spsabuse	-.3382935	.153787	-2.200	0.028	-.6399151	-.0366719
rural	.6951709	.1880484	3.697	0.000	.3263527	1.063989
city	.3233972	.1079857	2.995	0.003	.1116054	.535189
academic	1.041383	.1100328	9.396	0.000	.8240074	1.258759
clq18f	1.064733	.1232513	8.639	0.000	.8230008	1.306465
clq18d	.9679661	.2471922	3.916	0.000	.4831492	1.452783
_cons	.906036	.5827497	1.555	0.120	-.2369078	2.04898

(standard errors conditional on sigma)

TABLE D-2

VARIABLE DEFINITIONS

hsgrad	1 if client entered with at least 12 years of prior instruction, zero otherwise
level	1 if client entered with Level I skills, 0 otherwise
female	1 if client was female, 0 otherwise
lnAge	logarithm of reported age
lnNoJb	logarithm of reported length of time unemployed if unemployed and data available, 0 otherwise
nojob2	1 if client was unemployed but length of unemployed was unavailable, 0 otherwise
employ	1 if client was employed, 0 otherwise
nohome	1 if duration unemployment was unavailable, zero otherwise
lnNoHm	logarithm of months of unemployment if available, 0 otherwise
resident	1 if site was residential, 0 otherwise
compuls	1 if site required participation for residence, 0 otherwise
lnFacRat	logarithm of ratio of new entrants in June to reported number of faculty
lnPctSml	logarithm of the proportion of all hours received provided in small group instruction if available, 0 otherwise
lnPctInd	logarithm of the proportion of all hours received that were provided in individual instruction if available, 0 otherwise
pctMis	1 if proportion of instruction received in different settings was unavailable
lnDegree	logarithm of the proportion of staff members with a college degree
drabus	1 if site serves primarily people recovering from drug or alcohol abuse, zero otherwise
spsabuse	1 if site serves primarily victims of spousal abuse, 0 otherwise
rural	1 if site is in rural location, 0 otherwise
city	1 if site is in urban location, 0 otherwise
academic	1 if client is enrolled in ABE, ASE, or GED program, 0 otherwise
clq18f	1 if client is enrolled in life skills program, 0 otherwise
clq18d	1 if client is enrolled in ESL program, 0 otherwise

APPENDIX E

Detailed Results from Multivariate Analysis of Academic Improvement

Detailed Results from Multivariate Analysis of Academic Improvement

This appendix presents the detailed results from the two probit analyses presented in the text. Table E-1 presents the complete estimates from the model of predictors of reported improvement. Table E-2 presents complete results from the model of predictors of achieving a GED. Table E-3 defines the variables included in the analyses.

One compulsory site reported that every one of their 86 clients had improved (increased within level or moved from Level I to Level II). Some of these clients had as few as four hours of instruction. Clearly, this site is an outlier, and probably reflects an overly-generous instructor's assessment. Therefore, clients from this site were excluded from this analysis.

TABLE E-1

PROBIT MODEL OF FACTORS INFLUENCING ACADEMIC IMPROVEMENT

Probit Estimates

Log Likelihood = -765.24133

Number of obs = 1533
chi2(27) = 529.52
Prob > chi2 = 0.0000
Pseudo R2 = 0.2570

improve	Coef.	Std. Err.	z	P> z
hsgrad	-.2606577	.0869741	-2.997	0.003
level	.3757731	.0833453	4.509	0.000
female	-.0730457	.0847496	-0.862	0.389
dage	.0009424	.0039187	0.240	0.810
nojob1	-.0046902	.0026183	-1.791	0.073
nojob2	-.0878691	.1286933	-0.683	0.495
employ	.162664	.1230424	1.322	0.186
nohome	.0599505	.1204012	0.498	0.619
nohome1	.000213	.0034057	0.063	0.950
resident	-.05731	.1046153	-0.548	0.584
compuls	-.1778842	.1143489	-1.556	0.120
indInst	.0278939	.0039706	7.025	0.000
grpInst	-.0001363	.0014329	-0.095	0.924
caInst	.0067282	.0062433	1.078	0.281
otherhrs	.0058279	.0028889	2.017	0.044
tothrs	.0036033	.0011886	3.032	0.002
comind	.0185415	.0120157	1.543	0.123
comgrp	.0125255	.0050742	2.468	0.014
jsratio	-.0089129	.0043374	-2.055	0.040
degrees	.0279422	.1397482	0.200	0.842
drgabus	-.1910565	.0912518	-2.094	0.036
spsabuse	.0132706	.1357029	0.098	0.922
rural	-.1965689	.1297703	-1.515	0.130
city	.2051184	.0894691	2.293	0.022
academic	1.215584	.0979738	12.407	0.000
clq18f	.7171981	.1096008	6.544	0.000
clq18d	.5322497	.1805181	2.948	0.003
_cons	-1.53452	.216191	-7.098	0.000

TABLE E-2
PROBIT MODEL OF FACTORS INFLUENCING
GED CERTIFICATE ATTAINMENT

Probit Estimates

Number of obs = 451
 chi2(21) = 77.28
 Prob > chi2 = 0.0000
 Pseudo R2 = 0.1846

Log Likelihood = -170.61795

Dependent variable= 1 if GED received, 0 otherwise

Only clients enrolled in GED or ASE included in the analysis

clq25a	Coef.	Std. Err.	z	P> z
level	1.124014	.2084419	5.392	0.000
female	-.5284883	.187974	-2.811	0.005
dage	.0062377	.0086842	0.718	0.473
nojob1	.004688	.00902	0.520	0.603
nojob2	.0972977	.2596026	0.375	0.708
employ	-.1769837	.2819755	-0.628	0.530
nohome	-.3997637	.2494086	-1.603	0.109
nohomel	-.0232601	.0171933	-1.353	0.176
resident	-.4201995	.2233625	-1.881	0.060
compuls	.2341306	.2103092	1.113	0.266
indInst	-.0009036	.0025004	-0.361	0.718
grpInst	.0047461	.0026362	1.800	0.072
caInst	.0200009	.0139863	1.430	0.153
otherhrs	.0042611	.0032425	1.314	0.189
tothrs	.0057781	.0018045	3.202	0.001
jsratio	-.0048046	.0131323	-0.366	0.714
degrees	-.3310117	.336443	-0.984	0.325
drgabuse	-.2578589	.2117604	-1.218	0.223
spsabuse	.5858627	.2795832	2.095	0.036
rural	-.0425706	.3245287	-0.131	0.896
city	-.2433138	.1830953	-1.329	0.184
_cons	-.8985449	.4249462	-2.114	0.034

Test of hypothesis that coefficients for all types of instruction are zero (that is, that gross amount of instruction does not matter for those students for whom breakdown is available. This hypothesis can be safely rejected (therefore, we infer that amount of instruction does matter).

test grpInst+caInst+indInst+otherhrs=0 ;

(1) indInst + grpInst + caInst + otherhrs = 0.0

chi2(1) = 4.24
 Prob > chi2 = 0.0394

Test of hypothesis that the impact of an hour of instruction is the same for the group for whom breakdown is available and the group for whom it is not. We cannot reject this hypothesis. Therefore, we infer that the impact of gross instruction is consistent across groups.

test grpInst+caInst+indInst+otherhrs=tothrs ;

(1) indInst + grpInst + caInst + otherhrs - tothrs = 0.0

chi2(1) = 2.68
 Prob > chi2 = 0.1017

TABLE E-3

VARIABLE DEFINITIONS

hsgrad	1 if client entered with at least 12 years of prior instruction, zero otherwise
level	1 if client entered with Level I skills, 0 otherwise
female	1 if client was female, 0 otherwise
dage	Reported age, recentered
noJob1	reported length of time unemployed if unemployed and data available, 0 otherwise
nojob2	1 if client was unemployed but length of unemployed was unavailable, 0 otherwise
employ	1 if client was employed, 0 otherwise
nohome	1 if duration unemployment was unavailable, zero otherwise
lnNoHm	logarithm of months of unemployment if available, 0 otherwise
resident	1 if site was residential, 0 otherwise
compuls	1 if site required participation for residence, 0 otherwise
indInst	Hours of individual instruction received if available, 0 otherwise
grpInst	Hours of small group instruction if available, 0 otherwise
othHrs	Other hours of instruction if small group and individual are available, 0 otherwise
tothrs	Total hours of instruction if breakdown into individual and small group instruction are NOT available, 0 otherwise
comind	compuls*indInst if hours of individual instruction are available, 0 otherwise
comgrp	compuls*grpInst if hours of small group instruction are available, 0 otherwise
jsratio	ratio of new June enrollees to total number of staff members
degrees	proportion of staff members with a college degree
drgabus	1 if site serves primarily people recovering from drug or alcohol abuse, zero otherwise
spsabuse	1 if site serves primarily victims of spousal abuse, 0 otherwise
rural	1 if site is in rural location, 0 otherwise
city	1 if site is in urban location, 0 otherwise
academic	1 if client is enrolled in ABE, ASE, or GED program, 0 otherwise
clq18f	1 if client is enrolled in life skills program, 0 otherwise
clq18d	1 if client is enrolled in ESL program, 0 otherwise

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