The effects of positive intervention strategies on at-risk twelfth grade students

Barbara M. Castleberry

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THE EFFECTS OF POSITIVE INTERVENTION STRATEGIES ON AT-RISK TWELFTH GRADE STUDENTS

by
Barbara M. Castleberry

A Thesis
Submitted in partial fulfillment of the requirements of the Master of Arts Degree of
The Graduate School at Rowan University
May, 1999

Approved by
Professor

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ABSTRACT

Barbara M Castleberry  The Effects of Positive Intervention Strategies
On At-risk Twelfth Grade Students
1999
Dr. Theodore Johnson
Educational Leadership

The purpose of this study was to investigate the effects of positive intervention strategies on the attendance rate and academic progress of fifteen identified at-risk twelfth grade students using an action research design. Additional purposes of this study included demonstration of the intern's leadership skills in problem analysis, organizational ability, decision-making techniques and motivational ability. Mathematical analysis was used to determine if the attendance rate and grade point averages of the identified at-risk twelfth grade students increased or decreased over their attendance rate and grade point averages in the eleventh grade as a result of positive intervention strategies. Also analyzed was the relationship between the number of at-risk factors of the participants and increased or decreased attendant rate and grade point averages. Results of the study indicated intervention strategies were more effective for at-risk twelfth grade students during quarter one than quarter two and the number of at-risk characteristics of the participants did not affect the findings. The study identified the complex needs of at-risk students and provided suggestions for program improvements.
MINI-ABSTRACT

Barbara Castleberry

The Effects of Positive Intervention Strategies
On At-risk Twelfth Grade Students
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Dr. Theodore Johnson
Educational Leadership

Using an action research design, this study investigated the effects of positive intervention strategies on the attendance rate and academic progress of at-risk twelfth grade students. Results of the study indicated intervention strategies were more effective during quarter 1 than quarter 2 and the number of at-risk characteristics of the participants did not affect the findings.
Acknowledgements

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Chapter 1

Introduction Focus of the Study

Purpose of the Study

The focus of this study is to examine the problem of student absenteeism/truancy at a small urban high school in New Jersey. Each year seniors do not graduate due to attendance and/or academic failure. This intern deals with the impact of non-graduation with the student, family, faculty and community each year. This study seeks to determine if early identification of at-risk twelfth grade students and the use of positive intervention strategies will affect the attendance rate of these children. Because attendance is closely related to academic success, this study will also track the grades of the identified students. The primary desired behavior is increased daily attendance. Other outcome behaviors are passing grades, graduation, and a decreased drop out rate.

The purpose of this study is to investigate the effects of positive intervention strategies on the attendance and academic progress of identified at-risk twelfth grade students using an action research design. The study will result in a report that compares the eleventh grade and twelfth grade attendance and academic progress records of identified at-risk twelfth graders that received positive interventions. This researcher wants to learn more about the effects of positive intervention strategies on the attendance rate and academic progress of identified at-risk twelfth grade students at ABC High School in order to determine if the district should use positive intervention strategies at all grade levels.
Other purposes of this study are to demonstrate this intern's leadership skills to:

"listen actively and respond appropriately to the ideas and opinions of others... apply behavior management strategies that will enhance the overall performance of the school... identify existing and potential support services to enhance staff and student performance... create a school climate which encourages optimum performance of students and adults... develop procedures, which comply with local policies, state and federal rules and regulations, and contractual agreements... utilize administrative practices, which meet unique needs of students... identify recruit, select and assign qualified personnel to assure accomplishment of the school's mission... facilitate coordination of community service agencies to assure the appropriate resources are provided for special needs children... identify alternative resources that support the school's program" (Capasso, 1998, p. 41-43).

Definitions

For the purposes of this study, the following definitions of terms will apply.

Positive intervention strategies are defined generally as early identification of at-risk students, clear explanation of attendance policies, parent involvement and support, concerned staff intervention, personal contact and counseling of each identified student and follow-up with each identified student, their parents and staff.

Early identification is defined as identification of twelfth grade students during the first two weeks of the school year or earlier as a result of reviewing the student's attendance, academic, discipline and personal records and teacher referrals. Students enrolled in grade 12 and meeting one or more of the following characteristics are described as at-risk: poor attendance, tardiness, academic course failure, poor academic
record, single parent, little parental involvement, minimal credits for graduation, needs extended school day, little or no participation in extracurricular activities and other problems including emotional instability and drug dependency/rehabilitation.

For the purposes of this study, poor attendance is specified as missing 15 or more days during eleventh grade. Arriving late for school more than 12 times during the eleventh grade is defined as tardiness. Academic course failure is stipulated as failing one or more graduation requirements during eleventh grade. Poor academic record is defined as a grade point average of less than 65. A twelfth grade student that has the responsibility of caring for his/her own child is considered a single parent. Little parent involvement is specified as parents that are unconcerned or absent from the student's life. Students needing every credit for graduation are identified as having minimal credits for graduation. Extended school day is signified as the student needing to attend after school classes or adult high school classes for additional credits for graduation. Little or no participation in school extracurricular activities is defined as the student joining one or less extracurricular activity. Students exhibiting signs of depression, anger, or suicidal tendencies during eleventh grade are broadly denoted as emotionally unstable. Drug dependency/rehabilitation is described as the student experiencing difficulty in school due to alcohol and/or drug abuse or having participated in a drug rehabilitation program during the eleventh grade.

The high school attendance policy as printed in the student handbook, the total number of absences and tardiness of the student; the terms excused and unexcused absences, the Saturday school option and the appeal process available through the attendance committee at the end of the year is defined as a clear explanation of
attendance policies for the identified student. Parent involvement and support are denoted as initial contact with each student's parent(s) and request for their support after original identification of the student and monthly contact, thereafter, regarding progress of their child in school. Staff members making an effort to encourage identified students and observe and notify if the students stop working in their classes are identified as concerned staff members. This also includes those staff members mentoring identified students. Personal contact is delineated as individual, verbal contact with each identified student by concerned staff members. Follow-up is described as concerned staff members responding to the needs expressed by the student, finding resources for help and notifying the student’s parents if necessary.

Limitations of the Study

The researcher identified at-risk students during the summer months prior to the beginning of the 1998-99 school year and used characteristics gleaned from the literature and universal in nature. After the start of the school year, teachers and administrators unavailable during the summer months, identified at-risk characteristics more specific to the students in this setting that became part of identification process.

This study follows the absentee rate and academic progress of the at-risk twelfth grade students through the end of the second marking period because the study will end prior to the end of the academic school year. This researcher can measure the attendance rate and academic progress between the first and second marking periods of the at risk student’s eleventh and twelfth grades. This researcher can only predict graduation rate because of the time line of the study.
The identified at-risk students received interventions from five different mentors throughout the course of the study. The researcher directed the mentors to record the date of each contact, source of information, type of intervention and follow-up with each identified student. Consequently, the researcher is unable to measure the intensity or quality of the intervention. The length of time and type of each intervention varies and is based on the amount of time spent with each student.

Time limitations during the first few days of the school year did not allow for immediate attention to the identified at-risk students. The researcher added students identified by staff members as at-risk after the beginning of school year. If the student was enrolled in September 1997 as an eleventh grader, the student became part of the study even though the length of time in the study differed from the original identified group.

Students that enter the twelfth grade from other districts after September can receive intervention if needed; however, it is the intention of the study to compare the attendance rate and academic progress of at-risk twelfth grade students enrolled in the district as of September 1997 as eleventh graders. New twelfth grade students will not be part of study due to inconsistency of records.

Setting of the Study

The setting for the study is a comprehensive junior-senior high school (Grades 6 through 12) in a small urban school system located in ABC, New Jersey. ABC, the county seat of XYZ County, is a community of slightly more than 11,000 people, approximately 1,700 of whom attend the ABC Public Schools. Although only 2.08 square miles, the community is home to a highly varied population ranging from middle
income professionals to single families existing on government assistance. All levels of
socio-economic classes are represented. Thirty-five percent of the families are minority;
of those, 2% are Latino, 33% are Afro-American, and 2% are Asian. A large segment of
the population is highly transient, greatly influenced by their financial circumstances to
afford suitable housing. Thirty-eight percent of the student body is determined to be in
low-income families. Sixty percent of the students are enrolled in either IASA Title I,
eligible for Free Meals and/or Milk or Reduced Price Meals. More than 19% of the
students are classified as eligible for special education services and another 20% for
Basic Skills support.

Though considered an “urban” district, ABC is one of the “urbans” negatively
impacted by decreases in state aid under the state formula. ABC is considered to be
“economically disadvantaged” by the state. Twenty-six percent of the population are on
public assistance and are at or below poverty levels. Thirty-eight percent of the housing
units are renters occupied. While the community supported the current school budget,
two bond proposals were rejected. As a result, the district has had to finance through
lease/purchase agreements 2.75 million dollars to address facility repairs required by state
monitoring and 8.9 million dollars for modernizing the present facilities and constructing
additional instructional space, computer labs, science areas and music/art rooms. The
state diminished the allocation by over $100,000 for the 1998-99 school year that caused
an increase in taxes for the community.

The administration, staff and parents agree that there is much that can be done to
increase the efficacy of existing programs and desire to build upon the foundations that
are now in place. The high school staff expresses a strong need for the introduction of
programs that target prevention of violence and serve to reduce the rising rate of offenses related to substance abuse (Eighteen percent affected by substance abuse issues; source Student Assistance Counselor. Eighteen percent increase in acts of violence; source annual district report). Incidents requiring out of school and in school suspensions numbered 1,275. District retention rates at the junior-senior high school are 11%.

At the time of this study the pupil enrollment in the Junior/Senior High School is 863 students. The senior class has 102 members consisting of 54 females and 49 males. Two females and two males transferred into the district as twelfth grade students in September, 1998. Each of the transfer students possesses one or more characteristics of an at-risk student.

**Significance of the Study**

As a result of the positive findings reported by Taft et al. (1997), Hess et al. (1990), Licht et al. (1991) and Brown (1990), this researcher predicts that positive intervention strategies will increase the attendance rate and grades and decrease the dropout rate of the identified at-risk twelfth grade student. If the hypothesis were proven, the results of this study would suggest that certain intervention strategies are beneficial for the student exhibiting high rates of absenteeism. Without intervention, at-risk students do not have the opportunity to find alternatives or the resources to resolve attendance problems. This study did not attempt to alter school climate, change home environments, train school personnel, change class size or encourage student involvement in extracurricular activities, all of which could also alter attendance and dropout rates. The results of relatively simple interventions alone could be beneficial. If daily attendance increases, the student's chances of graduating will increase, as will future
educational and occupational opportunities. Through a systematic intervention strategy consisting of early identification of at-risk students, clear explanation of attendance policies, parent involvement and support, concerned staff intervention, personal counseling and follow-up, it is possible to increase the attendance rate and reduce the dropout rate for all students at ABC High School.

Organization of the Study

Chapter 2 includes the review of the literature that contains important information about the research context of the study and support rationale for the importance of the study. Chapter 3 is the design of the study. This section addresses five areas related to the research design used for the study: a general description of the research design; a description of the development and design of the research instruments actually used in the study; a description of the sample and sampling techniques used in the study; a description of the data collection approach; and a description of the data analysis plan. Chapter 4 is the presentation of the research findings. The last chapter of the thesis describes the study’s major conclusions and their corresponding implications, highlights the conclusions and implications of the study on the intern’s leadership development and addresses how the organization changed as a result of the study and the need for further study.
Chapter 2

Review of the Literature

Truancy has been a concern for school officials as early as 1872 and continues to be one of the most serious problems facing school administrators today (Rohrman, 1993). Truancy is defined as chronic absenteeism from school primarily in the form of unexcused absences. Truancy has great consequences for the community and the student.

"Truancy is the first sign of trouble; the first indicator that a young person is giving up and losing his or her way. When young people start skipping school, they are telling their parents, school officials and the community at large that they are in trouble and need our help if they are to keep moving forward in life" (U.S. Department of Education, 1996, p. 1).

Truancy can impact a community in many ways. According to evidence compiled by the United States Department of Education (1996) high rates of truancy are linked to high daytime burglary, vandalism, juvenile delinquent behavior, violence, alcohol and drug abuse and gang activity. In Miami, during a recent period, more than 71% of 13 to 16 year-olds prosecuted for criminal violations had been truant. In San Diego, 44% of violent juvenile crime occurs between 8:30 a.m. and 1:30 p.m., the time when juveniles are normally in school. When Philadelphia city and transit police began picking up suspected truants on the streets, incidents of robbery, aggravated assault, burglary, and theft dropped by 20% in a six month period (Bradley, 1994). According to Rohrman (1993) high absenteeism rates can reduce state and federal funding for public
schools and increase the burden of taxpayers. In California, public schools lose $9 of federal funding per day for each absent child (Rohrman, 1993).

The impact of truancy/absenteeism appears even greater for the student. Hess, Rosenberg and Levy (1990) report absenteeism/truancy interferes with learning and can result in failure to acquire skills for employment, higher education and success in life. They also note students with high rates of absences fail to complete high school and dropout at a rate of three to four times higher than that of regular attending students. According to the National Center for Education Statistics approximately “381,000 students left school without graduating in 1993... two-thirds of the drop-outs leave before the tenth grade, 20 percent drop out by the eighth grade and 3 percent do not even complete the fourth grade... In 1992 dropouts earned slightly under $13,000 on average... the 1993 dropout pool will earn about $212,000 less than high school graduates, and about $812,000 less than college graduates”(Schwartz, 1995, p. 1). Walsh (1993) notes high school dropouts are 6.5 times more likely to be unwed parents, 7.5 times more likely than graduates to be welfare recipients and are 3.5 times as likely as high school graduates to be convicted of crime. “The progression from truancy to juvenile crime to adult crime is so likely that in Georgia more than 82 percent of all adult prison inmates are high school dropouts” (Walsh, 1993, p. 128).

Kleine (1994) contends the causes of absenteeism/truancy are poor parenting, school phobia, inappropriate school curricula, low self-esteem, marital discord, age of the child, low level of education and personal/social problems. Rohrman (1993) traces the causes of absenteeism/truancy to unsupportive school environment, lack of community support, chaotic family life, and personal deficits.
Absenteeism/truancy is not the only warning sign that a student is at-risk for failing and/or dropping out of school. Researchers identified the characteristics of at-risk students by summarizing literature conducted on at-risk students. Cuellar and Cuellar (1990), funded by a grant from the Cowell Foundation, find students at-risk have the following characteristics: “1) frustration with school, 2) poor academic records, 3) discipline and attendance problems, 4) disadvantaged social and economic level, 5) low aspirations with an even poorer self-concept ... 6) they are disproportionately represented by minority groups” (Cuellar and Cuellar, 1990, p. 2). The same study indicates the causes of dropping out are rooted in internal (school-related) and external (family-related) factors. “External factors include 1) having parents with little or no education, 2) having siblings who have dropped out, 3) a dearth of family support, 4) limited proficiency in English, and 5) an early marriage or pregnancy. School-related (internal) factors include 1) having poor academic performance, 2) having a low level of reading and writing skills, 3) finding a culturally hostile environment and 4) an inability to identify cohesively with teachers and peers” (Cuellar and Cuellar, 1990, p. 2).

Based on their study for the Metropolitan Educational Research Consortium, McMillan, Reed and Bishop (1992), find at-risk students possess common characteristics brought on by a combination of home, school and societal factors that result in the student’s failure to graduate from high school, attain work skills and become productive members of society.

Three groups of common at-risk characteristics emerge from their research:

Social/Family Background

- Sibling or parent dropout
- Low socioeconomic status—inadequate nutrition, damage to dignity, inadequate home facilities
- Membership in an ethnic or racial minority group—especially if English is a second language
- Dysfunctional family—lack of structure and stability, substance abuse, physical/sexual abuse, single-parent families, lack of family commitment to school
- Lack of parent education
- Inner city, urban area
- Poor communication between home and school

Personal Problems
- Trouble with the law
- Learning disabilities
- Lack of life goals, inability to see options
- Lack of hope for future
- Significant lack of coping skills
- Works many hours per week
- Has responsibility of raising one or more children

School Factors
- Behavior problems: in trouble in school or community, acting out behavior, disruptive in learning environment
- Absenteeism
- Lack of respect for authority, feelings of alienation from school authorities
- Grade retention—especially in the early grades
- Suspensions/expulsion
- Course failure, poor academic record
- Tracking/ability grouping
- Dissatisfaction and frustration with school
- Lack of available and adequate counseling possibilities
- Inadequate school services—mental health, social services and health services

(McMillan et al. 1992, p. 10).

Similarly, Bruckner (1995) reports researchers found multiple characteristics of dropouts including: “behind in grade level and older than classmates; poor academic performance; dislike of school; detention and suspension; pregnancy; welfare recipients and members of single-parent households; attraction to income-producing work; attraction to military service; undiagnosed learning disabilities and emotional problems; language difficulties” (Bruckner, 1995, p. 12). Woods (1995) finds the same predictors of dropping out including absenteeism/truancy, poor academic performance, personal/social problems, a stressful/unstable home life, unsupportive parents and poverty.

Frymier (1992) analyzed the descriptive data on 45 risk factors collected by teachers and counselors on more than 21,000 students in grades 4, 7, and 10 in 275 schools in more than 80 communities. “Five factors emerged: personal pain, academic failure, socioeconomic situation of the family, family instability, and family tragedy” (Frymier, 1992. p. 257). The author hypothesized that more students at risk on one item would be at risk on other items and found twice as many students at risk on one item were at risk on each of the other items. He concludes, “Children who hurt, hurt all over.
Children, who fail, fail in everything they do. Risk is pervasive. If a student is at risk in one area, that student is very likely to be at risk in every other area.” (Frymier, 1992, p. 258).

According to Griffin (1995), results from the Phi Delta Kappa Study of Students At-Risk (Frymier, 1992) note four of the five Kappan categories of at-riskness are family-related. Griffin warns students can be considered at-risk for failing based on predisposing factors in their family histories and lifestyle situations and the process of dropping out can begin as early as the elementary years. Predisposing factors found in his research review include: “parent alcoholic, family used drugs, family illness/death in last year, low socioeconomic level, low parental education level, sibling dropped out of school, disrupted home life, changed schools frequently, student employed outside of school, student pregnant or parenting” (Griffin, 1995, p. 26).

As a researcher with the ERIC Clearinghouse on Urban Education in New York City, Schwartz (1995) summarized the results of the Educational Testing Service report, Dreams Deferred: High School Dropouts in the United States which used data from surveys covering four years in the lives of students who began high school in 1988, the National Educational Longitudinal Study, NELS: 88, Second Follow-Up. Schwartz reports characteristics common to the dropouts based on the youth’s responses:

Nearly one-third of the females who dropped out cited pregnancy as the reason…
Almost one-fifth were held back a grade, and almost half failed a course… during the last two years in school… one-half missed at least 10 days of school… One-third cut class at least 10 times… A large majority of dropouts were enrolled in a general… special education or alternative programs… one-third were put in
in-school suspension, suspended, or put on probation...Dropouts tended to believe that they don’t have control over their lives, that chance and luck are important, and that something always seemed to stop them from getting ahead. Conversely, graduates felt that they had a great deal of control over their lives, a belief known to promote educational achievement” (Schwartz, 1995, p. 2).

A variety of strategies and programs exist which attempt to solve the problems of absenteeism/truancy and dropouts. Eastwold (1989) reports many schools across the nation use punishments to combat absenteeism/truancy. Common punishments are in-school and out-of-school suspensions and loss of privileges. “Youngsters who drop out tend to be habitually tardy, and they cut classes or skip school entirely. And when they do show up, they’re often suspended or expelled for breaking school rules”(Black, 1998, p. 45). Other schools are using an even tougher approach such as loss of credit, court ordered community service, fines and imprisonment. In Holton, Michigan student grades drop one letter grade for each day after three during a six-week marking period (Zirkel and Gluckman, 1993). Twelve Boston high schools lock out late students if they are more than 25 minutes late. During the first month of school late students dropped from 145 to 45; however, the police department does not want additional students on the street committing day crimes in the community (Portner, 1998). Sommerfeld (1992) finds that under current New Jersey State law, once students accumulate more than 20 days of absences, parents can be fined $25 for the first offense and $100 for a second offense. For a third offense, parents can be jailed. In Paterson, New Jersey, parents of truant students too poor to pay fines receive 30-day or 60-day sentences from a municipal court judge depending on the severity of the case. In school, parents attend classes with their
children for two periods before being assigned to kitchen duty, hall or bathroom supervision or clerical work (Sommerfeld, 1992). Using a more innovative approach, school officials in Eugene, Oregon, pay designated bounty hunters $1,000 for each student they bring back to the classroom (Portner, 1997).

Gabb (1995) contends the effects of academic penalties should not be seen as the preferred option to combat truancy because removing children from school, punishes children that stay away from school, which further damages their education. Pardini (1995) reports the nation’s leading experts on parental involvement in schools warn that school officials should not be encouraged when punitive measures appear to succeed because studies show the gains do not last.

Several authors conducted a review of literature about at-risk students and identified the components of programs that have been effective in preventing absenteeism/truancy and dropping out. Woods (1995) reports successful dropout prevention programs identify, target, and monitor potential dropouts early; involve parents; address student’s out-of-school problems; focus on a team approach; have a low student teacher ratio; and implement a program of personal attention. The findings of Cuellar and Cuellar (1990) indicate successful drop out prevention programs have well trained staff, program autonomy, individualized instruction, small size, team teaching, early identification and community involvement. McMillan, Reed and Bishop (1992) find successful programs include early intervention, positive school climate, effective school personnel, small class size, parent involvement, self-esteem and support building, guidance and mental counseling, social and life skills training, peer involvement and easing grade level transitions. Brooks (1995) notes successful school programs increase
early awareness of the problems associated with dropping out; inform and regularly update parents; and provide an individualized, personal, one-on-one relationship with the student. Black (1998) recommends schools intervene early, identify potential dropouts, pay attention to children's social and emotional needs, talk to parents, make the curriculum relevant to students, notice when students start slipping, make it easy for dropouts to return to school. Westfall and Pisapia (1994) report ten categories of attributes of successful programs: early intervention, positive school climate, cooperative and supportive school personnel, small class size, parent involvement, self-esteem building and support, guidance and mental health counseling, social and life skills/vocational training, peer involvement/extracurricular activity, easing grade level transitions.

The problem of absenteeism/truancy is addressed internationally as well. The School-based Dropout Prevention Model developed by the Government of Newfoundland and Labrador, Department of Education (1989) suggests systematic strategies for their schools which include: an all day meeting of school staff to discuss the issue of school dropouts; a thorough study of the dropout situation in the school to determine the precise extent and nature of the problem; development and implementation of procedures for the early and accurate identification of warning signs which indicate a student may be at risk of dropping out of school; a plan to involve parents in their children's school; a plan to deal effectively with student absenteeism; implementation of measures aimed at developing and maintaining a positive self-concept among students; and improving academic achievement.
Even though guidelines for successful intervention programs exist, 39% of the dropouts surveyed by the National Center for Education Statistics (1992) report the most frequent intervention used by school personnel was trying to talk the student into staying. Some schools allow students to return; however, 17% of the dropouts report being told that they could not return to school and 16% were expelled or suspended (Schwartz, 1995).

There are relatively few experimental studies of attendance programs for high school students (Taft, Risler, & Nackerud, 1997; Licht, Gard, & Guardino, 1991). A review of the literature did produce some studies that report success with positive interventions for students with high rates of absenteeism/truancy in high school and middle school settings. One study investigated the effects of contingency contracting combined with group counseling on rates of unexcused absences from school of students with mild handicaps in an urban comprehensive middle school, and discovered a 49% reduction in truancy rates by the end of the 10-week treatment period (Hess, Rosenberg, & Levy, 1990). Another study, conducted with 20 high-risk special education students from a semirural area in the Southeast, compared the effects of tangible rewards for good attendance and parental notification of absences to the traditional truancy treatment. It found that the students in the control group showed a significant reduction in absenteeism after twelve weeks of treatment (Licht et al. 1991). Taft et al. (1997) investigated the effectiveness of verbal (encouraging remarks), non-verbal (smiles, nods and applause) and written (positive comments recorded by teachers in a notebook) and tangible positive reinforcers on a truant high school student attending a public high school in Georgia. After two months, the researchers found that the interventions positively affected the
student’s absences, grades and classroom behavior when combined with efforts of the school and family. Brown (1990) studied the effect of intervention counseling regarding school attendance policy with 43 academically failing, truant, 9 through 12 grade students and their parents and concluded that intervention counseling helped to decrease student absences at the secondary school level after one semester.

Mahoney and Cairns (1997) studied the relation between involvement in school-based extracurricular activities and early school dropout with 392 adolescents over a five-year period of time. Their findings indicate that the dropout rate among at-risk students that participate in extra-curricular activities was markedly lower than those students that did not participate. Delaney and Corbett (1994) studied the effects of community service on at-risk students’ academic self-image and their performance in school. Every week for one school year, nine students in a high school dropout prevention program visited and assisted students at a school for children with multiple, severe disabilities. The authors recorded improved academic performance in 75% of the involved students and improved self-image in 50% of the involved students as compared with the control group.

Rather than identifying why students drop out of school, Downing, LoVette and Emerson (1994) surveyed 220 at-risk seniors from 13 high schools in a suburban Southern community to determine the reasons why students stayed in school. Their results indicate 74% of the respondents contemplated dropping out during high school and 19% thought about dropping out between grades five and nine because of poor grades (50%) or problems at home (47%). The authors identified several groups of people that helped the students stay in school: fellow students (32%), teachers (28%), counselors (15%) and principals (10%). The study cited caring behaviors such as listening, showing concern,
raising self-esteem and being patient as the most important in helping students stay in
school. Similarly, McMillan and Reed (1994) believe much can be learned from
studying students considered at-risk but are resilient. They suggest resilient at-risk
students “have a set of personality characteristics, dispositions, and beliefs that promote
their academic success... have an internal locus of control and healthy internal
attributions... have chosen to be successful... have positive expectations about their
abilities... have adults—usually a parent and someone from school—with whom they have
trusting relationships... are active in positive activities” (Mcmillan and Reed, 1994, p.
139). The authors suggest school personnel develop strategies and techniques to
courage the sense of resiliency in at-risk students by training teachers, counselors and
administrators to provide an environment that promotes academic success and self esteem
in their students.

Based on a review of the literature, it is evident that absenteeism/truancy is a
primary indicator of students at-risk for dropping out of school. Tracing the causes of
absenteeism/truancy leads one to the complex issues of at-riskness.
Absence/truancy, at-riskness and dropping out of school impact the lives of citizens
at the national, state and local levels yet research is limited on the use of positive
interventions to overcome this problem. The implications of absenteeism/truancy,
at-riskness and dropping out of school can no longer be ignored nor is it a problem only
happening in other places. The lives and futures of many children in a small urban high
school in New Jersey are greatly affected and significantly changed by the results of
absenteeism/truancy, at-riskness and dropping out of school.
Chapter 3
The Design of the Study

General Description of the Research Design

The study was designed to provide data that will be useful in determining whether or not positive intervention strategies will increase the attendance rate and grade point average of identified at-risk twelfth grade students. Participants in this study were identified as at-risk twelfth grade students enrolled in ABC High School from September, 1997 or quarter 1 through January, 1999 or quarter 2. The 1997-1998 quarter 1 and quarter 2 grade point averages and attendance rates will be compared to the 1998-1999 quarter 1 and quarter 2 grade point averages and attendance rates of students participating in this study. Student participants were adolescents whose ages range from 17 to 19 years of age. They were enrolled in various levels of academic and vocational programs including Advanced Placement, Honors, Shared Time Vocational School, School to Work and Special Education.

The investigation was designed to answer the following questions:

(1) Was there a difference between the identified at-risk student’s grade point average in quarter 1 of eleventh grade and quarter 1 of twelfth grade as a result of positive intervention strategies?

(2) Was there a difference between the identified at-risk student’s grade point average in quarter 2 of eleventh grade and quarter 2 of twelfth grade as a result of positive intervention strategies?
(3) Was there a difference between the identified at-risk student's rate of attendance in quarter 1 of eleventh grade and quarter 1 of twelfth grade as a result of positive intervention strategies?

(4) Was there a difference between the identified at-risk student's rate of attendance in quarter 2 of eleventh grade and quarter 2 of twelfth grade as a result of positive intervention strategies?

The setting for this study was a comprehensive junior-senior high school (Grades 6 through 12) in a small urban school system located in southern New Jersey. All levels of socio-economic classes were represented. Forty-seven percent of the families were minority; of those, 2% were Latino, 33% were Afro-American, and 2% were Asian. A large segment of the population was highly transient, greatly influenced by their financial circumstances to afford suitable housing. Thirty-eight percent of the student body was determined to be in low-income families. Sixty percent of the students were enrolled in either IASA Title I, eligible for Free Meals and/or Milk or Reduced Price Meals. More than 19% of the students were classified as eligible for special education services and another 20% for Basic Skills support. At the time of the study the pupil enrollment was 863 students. The senior class had 103 members consisting of 54 females and 49 males.

Development and Design of Research Instruments

This researcher selected twelfth grade students for participation in this study based upon evidence of at-risk characteristics gleaned from the literature and universal in nature: lack of attendance at school, tardiness, academic course failure, poor academic record, little or no participation in extracurricular activities, minimal credits for graduation, emotional instability and drug dependency/rehabilitation. This researcher
identified additional at-risk characteristics more specific to the students in this setting and not necessarily evident in academic or attendance records through the suggestions of key staff members recommended as At-Risk Student Committee members by the superintendent of schools. The At-Risk Student Committee consisting of the assistant principal in charge of discipline and attendance, an English teacher, the district social worker, and the student assistance counselor added the following characteristics that became part of the identification process: single parent with many responsibilities, lacked parental involvement, attended ninth period to make up credits and attended adult high school to make up credits.

The At-Risk Student Committee reviewed the positive intervention strategies listed in the literature and identified those strategies most appropriate and accomplishable in this setting. For the purposes of this study positive intervention strategies were early identification of at-risk students, clear explanation of attendance policies, parent involvement and support, concerned staff intervention, personal contact and counseling of each identified student and follow-up with each identified student, their parents and staff.

**Description of Data Collection Technique**

Since early identification of at-risk students was noted in the literature as a key intervention strategy, this researcher used the at-risk characteristics as defined in Chapter 1 to identify at-risk twelfth grade students within the first two weeks of the school year. This researcher gathered academic and attendance information needed for the comparison study from the 1997-1998 and 1998-1999 report cards and the Student Permanent Record Card.
Using the complete set of identified at-risk characteristics and the academic, attendance, and discipline records of each enrolled twelfth grade student, this researcher identified 14 male and 14 female at-risk twelfth grade students in need of positive intervention strategies within the first two weeks of the school year. Of this number, only 9 male and 6 female students were enrolled in eleventh grade as of September 1997 and therefore fit the criteria as participants in this study. Students that entered the eleventh grade after September 1997 from other districts received positive intervention if they met the criteria of at-riskness; however, it was the intention of the study to compare the attendance rate and academic progress of at-risk twelfth grade students enrolled in the district as of September 1997 as eleventh graders. New twelfth grade students, enrollees after September 1997, were not part of the study due to inconsistency of records needed for comparisons.

The At-Risk Student Committee members decided to mentor all 28 identified at-risk students and implement the positive intervention strategies even though only 15 twelfth grade students qualified as participants in the study. Each member chose either five or six at-risk students. This researcher directed the mentors to record the date of each contact, source of information, type of intervention and follow-up with each identified student on the At-Risk Student Log. This researcher sent a confidential memo to each homeroom teacher and each subject teacher of all identified at-risk students that explained the purpose of the study, listed the reasons for at-riskness and named each student's mentor. The At-Risk Student Committee agreed to meet bi-monthly during quarter 1 and quarter 2 to discuss the progress of their students and update data.
Description of the Data Collection Approach

This researcher determined information regarding 9 of the 12 at-risk characteristics gleaned from literature and identified by the At-Risk Student Committee were available on the student report cards and permanent record cards: failed an academic course(s), poor academic record, lack of attendance at school, tardiness, attended a ninth period class to make up credits, attended adult night school to make up credits, needed all credits for graduation, needed to pass graduation requirements in addition to English 12 and Physical Education/Health 12 and little or no participation in extracurricular activities. This researcher obtained the 1997-1998 and 1998-1999 quarter 1 and quarter 2 attendance rate and grade point averages from the eleventh grade and twelfth grade report cards of each identified at-risk student. After reviewing each report card and permanent record card of the identified at-risk students, this researcher recorded the number of at-risk characteristics applicable to each student. This researcher used the recommendations of the At-Risk Student Committee to identify those students with the remaining three at-risk characteristics and recorded the number of at-risk characteristics applicable to each student: single parent with many responsibilities, lacked parental involvement and other concerns which included pregnancy, drug dependency/rehabilitation and ward of the court.

This researcher interviewed each identified at-risk twelfth grade student during the third week of September and explained the program, named each student's mentor, reviewed the attendance policy, specified graduation requirements and instructed the student to contact their mentor whenever he/she needed help of any kind. Each identified
at-risk student had the opportunity to explain the reasons for lateness, absences and poor academic progress. This researcher recorded the date and results of the interview.

This researcher reviewed the daily attendance reports and quarterly progress reports and highlighted the names of each identified at-risk student. This researcher alerted the student mentors when evidence of tardiness, absences or academic regression began to appear on the reports. The mentors contacted their students, provided counseling to those students on an as needed basis and recorded the outcomes of the intervention. This researcher recorded the number of teacher and staff referrals for intervention of identified at-risk students, the reason for referral and the type of intervention.

This researcher conducted bi-monthly at-risk committee meetings at which time each member submitted the recorded date, number and type of interventions for each of their students. At-risk mentors discussed the individual situations of their students, ways to answer the needs of their students, follow up and coordination with other concerned teachers and ways to improve the intervention program. This researcher gathered and recorded all data received from the mentors on separate At-Risk Student Log forms. The at-risk student committee members notified the students’ parents or guardians by telephone whenever the at-risk student was absent or was failing to progress academically as reported by the core subject teachers.

During the study the intervention strategies had four components: (a) individual meetings with this researcher and each at-risk student, (b) individual meetings with the At-Risk Committee mentors and each assigned at-risk student, (c) individual follow-up meetings with At-Risk Committee mentors and the at-risk students, and (d) parental
contact by telephone whenever the treatment student was absent or was failing to
progress academically as reported by the core subject teachers. The primary desired
behavior was increased daily attendance. Other outcome behaviors were improved or
passing grades, graduation, and decreased dropout rate. Two dependent variables were
used to assess the effectiveness of the intervention strategies (a) attendance and (b)
academic progress.

Description of the Data Analysis

This researcher determined through mathematical analysis if the attendance and
grade point averages of the identified at-risk twelfth grade students increased or
decreased over their attendance and grade point averages in the eleventh grade as a result
of positive intervention strategies. At the end of quarter 1 and quarter 2, this researcher
compared the number of student absences of the identified at-risk students for eleventh
grade and twelfth grade and the grade point average for the eleventh grade and twelfth
grade. This researcher analyzed the difference and percent of increase or decrease in the
number of absences between 1997-1998 quarter 1 and 1998-1999 quarter 1 and 1997-
1998 quarter 2 and 1998-1999 quarter 2. This researcher analyzed the difference and
percent of increase or decrease in the grade point average between 1997-1998 quarter 1
researcher analyzed the number of at-risk factors for each identified at-risk student and
the number of interventions provided to each at-risk student by the At-Risk Committee
mentors to determine if any relationship exits between increased attendance rate and
improved academic progress and the number of interventions.
This researcher analyzed the results of the study to determine if the use of positive intervention strategies improved the attendance rate and academic progress of at-risk twelfth grade students and compared these results to those found in the literature. This researcher reported the findings of the study to the superintendent, administration and faculty.
Chapter 4
Presentation of the Research Findings

Several researchers found at-risk students possessed common characteristics brought on by a combination of home, school and societal factors that resulted in the student’s failure to graduate from high school, attain work skills and become productive citizens (Bruckner, 1995; Woods, 1995; Griffin, 1995; Schwartz, 1995; Frymier, 1992; McMillan et al., 1992; Cuellar and Cuellar, 1990). Other authors identified the components of programs that were effective in preventing absenteeism/truancy and dropping out (Black, 1998; Brooks, 1995; Woods, 1995; Westfall and Pisapia, 1994). Since there were relatively few experimental studies of attendance and at-risk programs for high school students (Taft et al., 1997; Licht et al., 1991) it seemed reasonable that further research was necessary to determine the effect of positive intervention strategies on identified at-risk students.

Fifteen identified at-risk twelfth grade students enrolled in ABC High School from September 1997 through January 1999 participated in the current investigation to study the effects of positive intervention strategies on at-risk students. The purpose of this study was to determine if early identification of at-risk twelfth grade students and the use of positive intervention strategies affected the attendance rate and grade point averages of the identified at-risk students. This researcher determined through mathematical analysis if positive intervention strategies affected the attendance rate and grade point averages of the identified at-risk twelfth grade students as compared to their
eleventh grade. This researcher analyzed the results to provide the answers to four research questions:

(1) Was there a difference between the identified at-risk student’s grade point average in quarter 1 of eleventh grade and quarter 1 of twelfth grade as a result of positive intervention strategies?

(2) Was there a difference between the identified at-risk student’s grade point average in quarter 2 of eleventh grade and quarter 2 of twelfth grade as a result of positive intervention strategies?

(3) Was there a difference between the identified at-risk student’s rate of attendance in quarter 1 of eleventh grade and quarter 1 of twelfth grade as a result of positive intervention strategies?

(4) Was there a difference between the identified at-risk student’s rate of attendance in quarter 2 of eleventh grade and quarter 2 of twelfth grade as a result of positive intervention strategies?

The report of the research findings was organized around the research questions asked. For questions one and two, the researcher compared the individual and overall mean change in grade point average and the mean percent change in grade point average between quarter 1 eleventh and twelfth grade and quarter 2 eleventh and twelfth grade. The researcher also reported the individual and overall comparison of mean grade point average and mean percent grade point average between quarter 1 eleventh and twelfth grade and quarter 2 eleventh and twelfth grade based on the number of at-risk characteristics of the participants and number of interventions received by the participants. For questions three and four, the researcher compared the individual and
overall mean change in attendance rate between quarter 1 eleventh and twelfth grade and quarter 2 eleventh and twelfth grade. The researcher also reported the individual and overall comparison of mean attendance rate between quarter 1 eleventh and twelfth grade and quarter 2 eleventh and twelfth grade based on the number of at-risk characteristics of the participants and number of interventions received by the participants.

The researcher renamed each of the 15 participants as Participant One, Participant Two and so on and described each according to number and type of at-risk factors, gender, race, number of interventions, and level of academic or vocational program.

Participant One, an African-American male, had one at-risk factor identified. He needed to pass three graduation requirements in addition to English 12 and Physical Education/Health 12. He was a classified student and mainstreamed for all classes except English 12 and United States History. He received eight recorded interventions from September 1998 to January 1999.

Participant Two, an African-American female, had five at-risk factors identified. She failed academic courses, had a poor academic record, attended a ninth period class to make up credits, attended adult high school to make up credits, needed all credits to graduate and needed to pass two graduation requirements in addition to English 12 and Physical Education/Health 12. She was enrolled in regular level courses. She received 25 recorded interventions and bi-weekly academic tutoring from September 1998 to January 1999.

Participant Three, a Caucasian male, had two at-risk factors identified. He failed an academic course and needed to pass three graduation requirements in addition to
English 12 and Physical Education/Health 12. He was enrolled in regular level courses. He received six recorded interventions from September 1998 to January 1999.

Participant Four, a Caucasian female, had two at-risk factors identified. She failed an academic course and needed to pass one graduation requirement in addition to English 12 and Physical Education/Health 12. She was enrolled in regular level courses. She received six recorded interventions and daily academic tutoring from September 1998 to January 1999.

Participant Five, an African-American male, had two at-risk factors identified. He lacked attendance at school and was diagnosed with severe asthma. His parent failed to follow through with medical verification of his condition. He was enrolled in regular level courses. He received 26 recorded interventions from September 1998 to January 1999.

Participant Six, a Caucasian male, had six at-risk factors identified. He failed academic courses, had a poor academic record, lacked attendance at school, needed all credits to graduate, needed to pass three graduation requirements in addition to English 12 and Physical Education/Health 12, and had little or no participation in extracurricular activities. The student scored 1460 on the PSAT and was identified as a potential National Merit Scholar Student. He was enrolled in regular level courses. He received eight recorded interventions from September 1998 to January 1999.

Participant Seven, Caucasian female, had one at-risk factor identified. She had other concerns defined as an abusive family situation that caused her to leave her home and move in with the parents of her friend. As a result, she worked as a waitress over 20 hours per week in order to support herself. She was enrolled in Advanced Placement and
honors level courses. She received 13 recorded interventions from September 1998 to January 1999.

Participant Eight, a Caucasian male, had five at-risk factors identified. He had failed academic courses, lacked attendance at school, needed to pass two graduation requirements in addition to English 12 and Physical Education/Health 12, had little or no participation in extracurricular activities, worked 20 hours plus per week and was a recovering alcoholic. He was enrolled in regular academic courses. He received eight recorded interventions and bi-weekly academic tutoring from September 1998 to January 1999.

Participant Nine, a Caucasian male, had four at-risk factors identified. He failed academic courses, lacked attendance at school, needed to pass two graduation requirements in addition to English 12 and Physical Education/Health 12 and had little or no participation in extracurricular activities. He was enrolled in a shared time CAD/CAM vocational program. He received 10 recorded interventions and bi-weekly academic tutoring from September 1999 to January 1999.

Participant Ten, an African-American male, had five at-risk factors identified. He failed academic courses, had a poor academic record, lacked attendance at school, was tardy almost daily, and needed to pass five graduation requirements in addition to English 12 and Physical Education/Health 12. He was a classified student mainstreamed for all classes except English 12 and mathematics. He received 17 recorded interventions and daily academic tutoring from September 1998 to January 1999.
Participant Eleven, a Caucasian female, had four at-risk factors identified. She failed academic courses, lacked attendance at school, was tardy more than two times per week, and had other concerns. She was diagnosed as emotionally unstable and received professional treatment for depression. She was enrolled in honors level courses. She received 25 recorded interventions from September 1998 to January 1999.

Participant Twelve, a Caucasian female, had seven at-risk factors identified. She failed academic courses, had a poor academic record, lacked attendance at school, was tardy more than two times per week, needed all credits to graduate, needed to pass three graduation requirements in addition to English 12 and Physical Education/Health 12, and had little or no participation in extracurricular activities. She was a classified student mainstreamed for all classes except English 12, history and mathematics. She received 14 interventions from September 1998 to January 1999.

Participant Thirteen, a Caucasian male, had two at-risk factors identified. He failed academic courses and needed to pass two graduation requirements in addition to English 12 and Physical Education/Health 12. He was enrolled in a shared time automotive vocational program. He received seven recorded interventions and bi-weekly academic tutoring from September 1998 to January 1999.

Participant Fourteen, an African-American female, had five at-risk factors identified. She failed academic courses, lacked attendance at school, was tardy more than two times per week, was a single parent with many responsibilities and needed to pass two graduation requirements in addition to English 12 and Physical Education/Health 12. She was enrolled in regular level courses. She received 25 recorded interventions and daily HSPT/SRA remedial instruction from September 1998 to January 1999.
Participant Fifteen, a Caucasian male, had two at-risk factors identified. He failed academic courses and had other concerns. He was a recovering alcoholic and drug addict that spent 28 days in a drug rehabilitation facility within the last year. He was enrolled in a shared time CAD/CAM vocational program. He received five recorded interventions from September 1998 to January 1999.

Research Question 1: Was there a difference between the identified at-risk student's grade point average in quarter 1 of eleventh grade and quarter 1 of twelfth grade as a result of positive intervention strategies?

An analysis of the results indicated eight participants increased their grade point average, six participants decreased their grade point average and one participant showed no difference in grade point average between quarter 1 eleventh and twelfth grade. For participants that increased their grade point average during quarter 1, the mean change in grade point average was 9.77 and the mean percent change in grade point average was 14.75. For participants that decreased their grade point average during quarter 1, the mean change in grade point average was 5.06 and the mean percent change was 6.43. The mean change in grade point average for all participants was 3.18 and the mean percent change in grade point average for all participants was 5.26 (Table 1).

Participant Ten gained the largest amount of increase, 20.37 points or 34.67 percent increase and received seven recorded interventions during quarter 1. Participant Six followed with 19.13 points or 30.43 percent increase with four recorded interventions; Participant Two, 11.86 points or 18.18% increase with 14 recorded interventions; Participant Fifteen, 10.92 or 14.70% increase with two recorded interventions; Participant Eleven, 5.50 points or 7.30% increase with nine recorded interventions.
Table 1

**Mean Comparisons of Grade Point Averages Quarter 1**

<table>
<thead>
<tr>
<th></th>
<th>N</th>
<th>Mean Change in GPA</th>
<th>Mean % Change in GPA</th>
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<tbody>
<tr>
<td>Increased GPA</td>
<td>8</td>
<td>9.77</td>
<td>14.75</td>
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<tr>
<td>Decreased GPA</td>
<td>6</td>
<td>-5.06</td>
<td>-6.43</td>
</tr>
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<td>No change</td>
<td>1</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>All participants</td>
<td>15</td>
<td>3.18</td>
<td>5.26</td>
</tr>
</tbody>
</table>
interventions; Participant One 3.0 points or 4.49% increase with four recorded interventions; Participant Five, 3.37 points or 4.33% increase with 16 recorded interventions and participant four 3.34 points or 3.91% increase with three recorded interventions.

Participant Thirteen lost the most points, 7.96 points or 10.32% decrease and received two recorded interventions. Participant Nine followed with 7.46 points or 9.49% decrease with two recorded interventions; Participant Twelve 5.86 points or 7.74% decrease with two recorded interventions; Participant Fourteen 2.46 points or 3.13% decrease with nine recorded interventions and Participant Seven 1.62 points or 1.70% decrease with six recorded interventions. Participant Eight showed no increase or decrease and received two recorded interventions.

Further analysis of the results indicated the eight participants that increased their grade point average had an average number of 3.85 at-risk characteristics and received an average number of 7.37 recorded interventions. The participants that decreased their grade point average had an average of 3.33 at-risk characteristics and received an average number of 3.66 recorded interventions. The average number of at-risk characteristics for all participants was 3.46. The average number of recorded interventions for all participants during quarter 1 was 5.66. The number of recorded interventions ranged from a high of 16 to a low of two (Table 2).

The findings suggested the eight participants that received a greater average number of recorded interventions during quarter one, 7.37, gained a higher mean change in grade point average, 9.77 and mean percent change in grade point average, 14.75. The six participants that received a lesser average number of recorded interventions during
Table 2

Comparison of Grade Point Average, At-risk Characteristics and Interventions Quarter 1

<table>
<thead>
<tr>
<th>At-risk Characteristics</th>
<th>N</th>
<th>Mean Number At-risk Characteristics</th>
<th>Mean Number Interventions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increased GPA</td>
<td>8</td>
<td>3.85</td>
<td>7.37</td>
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<tr>
<td>Decreased GPA</td>
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<td>3.33</td>
<td>3.66</td>
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<td>No change</td>
<td>1</td>
<td>5.00</td>
<td>2.00</td>
</tr>
<tr>
<td>All participants</td>
<td>15</td>
<td>3.46</td>
<td>5.66 quarter 1,</td>
</tr>
</tbody>
</table>
3.66 gained a negative mean change in grade point average of 5.06 and mean percent change in grade point average of 6.43.

Research Question 2: Was there a difference between the identified at-risk student’s grade point average in quarter 2 of eleventh grade and quarter 2 of twelfth grade as a result of positive intervention strategies?

An analysis of the results indicated seven participants increased their grade point average, seven participants decreased their grade point average and one participant showed no difference in grade point average. For participants that increased their grade point average during quarter 2, the mean change in grade point average was 8.45 and the mean percent change in grade point average was 13.47. For participants that decreased their grade point average during quarter 2, the mean change in grade point average was 4.60 and the mean percent change in grade point average was 6.16. The mean change in grade point average for all participants was 1.79 and the mean percent change for grade point average for all participants was 3.41 (Table 3).

Participant Six gained the largest amount of increase, 15.63 points or 22.4% and received four recorded interventions during quarter 2. Participant Two followed with 13.5 points or 19.96% increase with 25 recorded interventions; Participant Five with 14.12 points or 15.9% increase with 10 recorded interventions; Participant Eight with 6.09 points or 8.37% increase with four recorded interventions; Participant Four with 5.71 points or 6.66% increase with three recorded interventions; Participant Fifteen with 1.98 points or 2.69% increase with three recorded interventions and Participant Seven with 2.12 points or 2.25% increase with seven recorded interventions.
Table 3

Mean Comparisons of Grade Point Averages Quarter 2

<table>
<thead>
<tr>
<th></th>
<th>N</th>
<th>Mean Change in GPA</th>
<th>Mean % Change in GPA</th>
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<tr>
<td>Increased GPA</td>
<td>7</td>
<td>8.45</td>
<td>13.47</td>
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<tr>
<td>Decreased GPA</td>
<td>7</td>
<td>-4.60</td>
<td>-6.16</td>
</tr>
<tr>
<td>No change</td>
<td>1</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>All participants</td>
<td>15</td>
<td>1.79</td>
<td>3.41</td>
</tr>
</tbody>
</table>
Participant Thirteen lost the most points in quarter 2, 10.86 or 16% decrease and received six recorded interventions. Participant Thirteen also suffered the largest loss in points in quarter one. Participant Twelve followed with 9.64 points or 15.9% decrease with 12 recorded interventions; Participant Nine with 6.75 points or 10% decrease with nine recorded interventions; Participant Ten with 2.08 points or 2.75% decrease with ten recorded interventions; Participant Eleven with 1.88 points or 2.67% decrease with 16 recorded interventions; Participant One with .67 points or .076% decrease with four recorded interventions and Participant Fourteen with .32 points or .043% decrease with 16 recorded interventions.

Further investigation of the results indicated the seven participants that increased their grade point average during quarter 2 had an average number of 3.28 at-risk characteristics and received an average number of 12.56 recorded interventions. The participants that decreased their grade point average during quarter 2 had an average number of 3.85 at-risk characteristics and received an average number of 15.14 recorded interventions. The average number of at-risk characteristics for all participants was 3.46. The average number of recorded interventions for all participants during quarter 2 was 14.07. The number of recorded interventions ranged from a high of 26 to a low of three (Table 4).

The findings implied the seven participants that gained a higher mean change in grade point average, 8.45 and mean percent change in grade point average, 13.47, received a lesser average number of recorded interventions during quarter 2, 12.56. The seven participants that suffered a negative mean change in grade point average, 4.60 and
### Table 4

**Comparison of Grade Point Average, At-risk Characteristics and Interventions Quarter 2**

<table>
<thead>
<tr>
<th></th>
<th>N</th>
<th>Mean Number At-risk Characteristics</th>
<th>Mean Number Interventions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increased GPA</td>
<td>7</td>
<td>3.28</td>
<td>12.56</td>
</tr>
<tr>
<td>Decreased GPA</td>
<td>7</td>
<td>3.85</td>
<td>15.14</td>
</tr>
<tr>
<td>No change</td>
<td>1</td>
<td>2.00</td>
<td>6.00</td>
</tr>
<tr>
<td>All participants</td>
<td>15</td>
<td>3.46</td>
<td>14.07</td>
</tr>
</tbody>
</table>
negative mean percent change in grade point average, 6.16, during quarter 2 received a greater average number of recorded interventions, 15.14. The findings suggested the number of recorded interventions during quarter 2 did not influence the grade point average of the participants.

Research Question 3: Was there a difference between the identified at-risk student’s rate of attendance in quarter 1 of eleventh grade and quarter 1 of twelfth grade as a result of positive intervention strategies?

An analysis of the results indicated five participants increased their attendance rate, five participants decreased their attendance rate and five participants showed no increase or decrease in their attendance rate during quarter 1. For participants that increased their attendance rate during quarter 1, the mean change in attendance rate was 7.2 days. For participants that decreased their attendance rate during quarter 1, the mean change in attendance rate was 4.60 days. For all participants the mean change in attendance rate during quarter 1 was 1.70 days.

Two participants increased their attendance rate by 100% during quarter 1. Participant One increased the attendance rate by one day present and received four recorded interventions during quarter 1. Participant Two increased the attendance rate by eight days present and received 14 recorded interventions during the same period. Participant Ten followed with an increase of 23 days present or 82.14% with seven recorded interventions; Participant Fourteen increased by two days present or 40% with nine recorded interventions and Participant Eleven increased by two days present or 25% with nine recorded interventions.
Participant Twelve decreased the attendance rate by 16 days absent or 266.67% and received two recorded interventions. Participant Three followed with decreased attendance rate by four days absent and received two recorded interventions; Participants Six, Seven and Thirteen decreased attendance rate by one day and received four, six and two recorded interventions respectively. Participants Four, Five, Eight, Nine, and Fifteen showed no increase or decrease in attendance rate and received 3, 16, 4, 2 and 2 recorded interventions respectively.

Further analysis of the results indicated the five participants that increased their attendance rate during quarter 1 had an average number of four at-risk characteristics and received an average number of 8.6 recorded interventions. The five participants that decreased their attendance rate during quarter 1 had an average number of 3.4 at-risk characteristics and received an average number of three recorded interventions. The five participants that showed no increase or decrease in attendance rate during quarter 1 had an average number of three at-risk characteristics and received an average number of 5.4 recorded interventions. The average number of recorded interventions for all participants during quarter 1 was 5.66. The average number of at-risk characteristics for all participants was 3.46. The number of recorded interventions ranged from a high of 16 to a low of 2 (Table 5).

The findings suggested the five participants that received a greater average number of recorded interventions during quarter 1, 8.6, increased their attendance rate by an average number of 7.2 days. The five participants that received a lesser average number of recorded interventions during quarter 1, three decreased their attendance rate by Table 5 an average number of 4.6 days. The five participants that maintained
Table 5

Comparison of Attendance Rate, At-risk Characteristics and Interventions
Quarter 1

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their attendance rate during quarter 1 received an average number of 5.4 recorded interventions.

Research Question 4: Was there a difference between the identified at-risk student’s rate of attendance in quarter 2 of eleventh grade and quarter 2 of twelfth grade as a result of positive intervention strategies?

An analysis of the results indicated five participants increased their attendance rate, seven participants decreased their attendance rate and three showed no increase or decrease in their attendance rate. For participants that increased their attendance rate during quarter 2, the mean change in attendance rate was 3.2 days. For participants that decreased their attendance rate during quarter 2, the mean change in attendance rate was 2.0 days. For all participants the mean change in attendance rate during quarter 2 was zero or no change.

Participant Eleven increased the attendance rate by seven days present or 54% and received 16 recorded interventions. Participant Eight followed with an increase of four days present or 50% with four recorded interventions; Participant One increased days present by one day or 33% with four recorded interventions; Participant Seven increased attendance rate by three days or 27% with seven recorded interventions and Participant Nine increased attendance rate by one day or 25% with five recorded interventions.

Participants Three, Four and Fourteen decreased their attendance rate by 100% during quarter 2. Participant Three decreased the attendance rate by one day absent and received four recorded interventions. Participant Four decreased the attendance rate by three days absent and received three recorded interventions. Participant Fourteen decreased the attendance rate by two days absent and received 16 recorded interventions.
Participant Twelve followed with six days absent or 86% decrease in attendance rate with 12 recorded interventions; Participant Ten decreased attendance rate by two days absent or 67% with 10 recorded interventions; Participant Fifteen decreased attendance rate by one day or 33% with three recorded interventions and Participant Five decreased attendance rate by one day or 13% with 10 recorded interventions. Participants Two, Six and Thirteen showed no increase or decrease in their attendance rate with 25, four and six recorded interventions respectively.

Further investigation of the results indicated the five participants that increased their attendance rate during quarter 2 had an average number of three at-risk characteristics and received an average number of 12.8 recorded interventions. The seven participants that decreased their attendance rate during quarter 2 had an average number of 3.42 at-risk characteristics and received an average number of 14.14 recorded interventions. The three participants that maintained their attendance rate during quarter 2 had an average number of 4.33 at-risk characteristics and received an average number of 13.33 recorded interventions. The average number of at-risk characteristics for all participants was 3.46. The average number of recorded interventions for all participants during quarter 2 was 14.07. The number of recorded interventions ranged from a high of 26 to a low of three (Table 6).

The findings suggested the seven participants that received a greater average number of recorded interventions during quarter 2, 14.4, decreased their attendance rate by an average number of two days. The five participants that received a lesser average number of recorded interventions during quarter 2, 12.8 increased their attendance rate by an average number of 3.2 days. The results indicated the average number of recorded
Table 6

Comparison of Attendance Rate, At-risk Characteristics and Interventions
Quarter 2

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interventions received by participants during quarter 2 did not influence the attendance rate of the participants.

Analysis of the data indicated positive effects of interventions were found in the results of Research Question 1 and Research Question 3. In Research Question 1 this researcher studied the effects of positive interventions on the grade point average of at-risk students during quarter 1 of the school year. During the first quarter of their twelfth grade, eight of the fifteen participants experienced a positive increase in grade point average from quarter 1 of eleventh grade. This researcher observed a similar happening in the results of Research Question 3. In Research Question 3, this researcher analyzed the effects of positive interventions on the attendance rate of at-risk students during quarter 1 of the school year. Again, ten of the fifteen participants either increased or maintained their attendance rate in quarter 1 of twelfth grade when compared to quarter 1 of eleventh grade. In Research Question 2, this researcher examined the effects of positive interventions on the grade point average of at-risk students during quarter 2. The results suggested positive interventions received by the participants did not influence their grade point average. This researcher noted that the mean percent change in the grade point average of seven participants increased 13.47% compared with the mean percent change in grade point average of seven participants that decreased 6.16% even though they received an average of 22% more interventions.

The participants received an average number of 5.66 recorded interventions during quarter 1 and an average of 14.07 recorded interventions during quarter 2. In Research Questions 1 and 3, the results suggested the number of interventions received by the participants during quarter 1 positively influenced their grade point average and
attendance rate. In Research Questions 2 and 4, the results indicated an overall positive gain in grade point average and attendance rate for all participants during quarter 2; however, the participants that decreased their grade point average and attendance rate received more recorded interventions than those students that increased their grade point average and attendance rate. The groups of participants that increased or decreased their grade point average or attendance rates had an average number of at-risk characteristics compared to all participants. The number of at-risk characteristics did not seem to affect the results. In general, the results seemed to indicate intervention strategies were more effective during quarter 1 than during quarter 2. Conclusions and implications based on these results will be presented in the next chapter.
Chapter 5

Conclusions, Implications and Further Study

Obtained results indicated intervention strategies were more effective during quarter 1 than during quarter 2 and the number of at-risk characteristics did not seem to affect the results. Specifically, it was found that eight of the fifteen participants experienced a positive increase in grade point average and ten of the fifteen participants either increased or maintained their attendance rate in quarter 1 of twelfth grade when compared to quarter 1 of eleventh grade. The results of the quarter 2 comparison indicated an overall positive gain in grade point average and attendance rate for all participants; however, the participants that decreased their grade point average and attendance rate received more recorded interventions than those students that increased their grade point average and attendance rate. The groups of participants that increased or decreased their grade point average or attendance rate had an average number of at-risk characteristics compared to all participants.

Implications of such findings suggest that positive intervention strategies defined as early identification of at-risk students, clear explanation of attendance policies, parent involvement and support, concerned staff intervention, personal contact and counseling and follow-up did not produce an overall positive increase in the participants’ grade point average and attendance rate. Closer inspection of the effects of positive intervention strategies produced further thought.
Several authors listed early identification and intervention of potential drop outs as the first component of successful drop out prevention programs (Woods, 1995; McMillan et al., 1992; Black, 1998; Westfall and Pisapia, 1994). For purposes of this study early identification was defined as identification of at-risk twelfth grade students before or during the first two weeks of the school year. Researchers indicated at-risk students contemplated dropping out of school as early as fifth grade due to poor grades (50%) and problems at home (47%) (Downing et al., 1994). Schwartz (1995) reported two-thirds of dropouts leave before the tenth grade and 20% leave by the eighth grade. Thus the question of at what age interventions should begin was considered. If at-risk students were identified as early as fifth grade and mentors began interventions, many children may have avoided the pain associated with poor attendance, academic failure and non graduation. In this study, mentors identified and began interventions with at-risk twelfth grade students during the first two weeks of their senior year. It was possible that the mentors provided interventions too late in the students' life to be totally effective; however, with no mentoring the same students may have opted to leave school. Students new to the district could have only received mentoring upon arrival; therefore, mentors needed to be in place at all grade levels to effectively assist at-risk students.

Participants of this study had one or more at-risk characteristics gleaned from the literature and identified by the At-Risk Committee. Frymier (1992) noted at-riskness was pervasive and if a student was at-risk in one area that student was likely to be at-risk in every other area. As the mentors worked with the participants throughout the school year additional at-risk factors surfaced that were not identified originally. These additional factors were disruptive to the school, family and social life of the participant, and were
beyond the control of the students or help of the mentors. The mentors found themselves solving one problem then uncovering layers of other problems. For example, Participant Twelve was told to leave her home by her parent because her parent disapproved of her boyfriend. The packing, moving and attempt to transfer to her boyfriend’s school caused her to lose over three weeks of school. After resolution with her mother, she returned to school facing non-graduation due to absenteeism and imminent failure in her courses. During the three-week absence, both the parent and participant were unavailable to the mentor. Participant Six found himself in a power struggle between his parents at the end of quarter 2. Prior to the parental negative rhetoric, he began a positive climb in grades and attendance. The sudden strife in his life and the refusal of the custodial parent to continue the student’s therapy and medication threw the student into a downward spiral. His mentor provided support, met with each parent separately and tried to reconcile the parents; however, the conflict could not be resolved to benefit the student. Similarly, the psychiatrist treating Participant Fifteen decided to reduce the student’s medication. Within three weeks the student began cutting classes, arguing with his parents, and refusing to do homework. Even with the unlimited support of the student’s father, the mentor could do little to control the situation until the medical issues were resolved.

At-risk seniors had complex problems that overlapped each other and were accumulated over many years. In most cases the problems of the at-risk seniors caused attendance and/or eventual academic problems even if the students were committed to success. For example, an at-risk twelfth grade mother of a nine-month-old baby found it difficult to arrive at school on time each day due to the inconsistency and the unreliability of her baby-sitters. It took her almost two weeks to find a reliable sitter so she could
come to school on time and stay at school the full day. It was only through the tireless efforts of her mentor who demanded emergency service that an affordable, reliable babysitter was found. The typical waiting list for this service was three years. If this student were left to challenge the bureaucracy alone, she surely would leave school. Later in the year the same student was forced to leave her mother’s home. She found herself alone and searching for a home for herself and her baby. Only after the major issues in her life were resolved, food and shelter, was she able to focus on attendance, grades and graduation. Her mentor supported her and referred her to social agencies that eventually helped her; however, the process was very slow and several days of school were lost despite the best efforts of the mentor. In this case earlier intervention may have helped form a different life path for this student. Without any intervention this student may have given up and left school.

From a senior class of 102 students, 28 students were identified in early September as meeting the criteria of at-risk students as defined in the literature. Only 15 of the identified at-risk students qualified as participants in the study because these students were enrolled from September 1997. Rather than abandon the remaining 13 at-risk students, the five mentors decided to evenly divide the 28 students among them, which increased their caseload from three to five or six students. This was significant for several reasons. The numbers indicated over one fourth of the senior class was at-risk of not graduating due to possession of numerous at-risk characteristics. Only 15 at-risk students were enrolled in the district for one year or more. The other 13 students enrolled late in eleventh grade or during twelfth grade. Each brought multiple social and academic problems with them. The mentors were faced with providing services to a new
group of at-risk students that required even more intervention time than the participant
group. Secondly, the influx of at-risk students supported the fact that the district needed
to acknowledge changes in the incoming student population. Because the district was
located in the county seat, at-risk populations gravitated to this urban location for social
service assistance. Thus, all of the entering eleventh and twelfth grade students were
at-risk and/or classified.

For one new at-risk twelfth grade student, ABC district was her fourth high school
in so many years. She failed many required courses, had credits withheld due to
attendance problems and required a special schedule. Several staff members and her
mentor devoted many hours resolving her problems only to find out the student was not a
legal resident of the district. Her mother left her and her four siblings with her aunt;
however, the aunt was not a legal guardian of the children. The investigation of the
residency issue took one month. In order for the student to remain in the district, the aunt
was asked to file for legal guardianship. With time, the aunt declined guardianship and
requested that her sister take the children. It was mid-year before this student transferred
to another district and was dropped from the attendance roles. Her mentor provided
continuos support throughout the entire process; however, the mentor’s four other
students did not receive as much attention due to the many problems of the student.

This study brought attention to the fact that the needs of students new to the
district were much more complex compared to those of currently enrolled students. New
students not only brought social and academic problems with them, but also had to blend
into the existing social strata of the school, perform to the academic requirements of the
school and adhere to the strict attendance policies of the school. Most found themselves
tossed to the fringes of the groups, overwhelmed with the academic demands of their classes and unable to adhere to the attendance requirements. To alleviate this problem it was recommended that faculty and student mentors were assigned to each entering student. It would be their responsibility to assist the student by acclimating them to the building, introducing them to other students and staff, providing tutoring for their courses and accompanying them to extra-curricular activities and clubs.

Many at-risk students held part-time and in some instances full time jobs after school. These students used their paychecks to support their families and themselves. The investigation into an alternative start time for these students was found necessary. Many students arrived to school late due to working late the night before or caring for a sick infant throughout the night. The at-risk students were treated the same as the other students who did not have nearly the same problems, yet little if any provisions or exceptions were made for the at-risk students. The attendance policy did not provide any alternatives for them. It was extremely frustrating for the mentors to work with the at-risk students, encourage them to attend school, help them with their homework, refer them to social agencies, and then tell them they are in danger of not graduating because they were late to homeroom too many times. Mentors discussed flexible starting times as an alternative. The students could elect to start school at second or third period rather than first period. The current policy of attending eight periods per day could be reduced to five or six periods per day as long as the student had enough credits to graduate. This would allow them to fulfill their responsibilities and still attend school on time. It was also discovered that students could not be enrolled in the vocational school shared time school to work program because all enrollment slots were filled. They were not able to
receive credits for their part-time jobs because no one was available to supervise them and their employer. Many of the at-risk students needed only two or three classes for graduation and filled the remainder of their school day with electives. Four years ago the ABC district provided a cooperative education program. Almost 20 students left school after fourth period and went to their jobs. When the vocational district began providing the school to work program, only 75 slots were allowed for the entire county. Many of the at-risk students would have benefited if they were allowed to attend only four classes per day, leave for their jobs and also receive credit for working. If the slots in the school to work program could not be increased, perhaps the employed student could be encouraged to keep a journal of the their work activities and present the journal to a work mentor for elective credit. Some students could have used distance learning and email to complete requirements and then consulted with their advisor every two weeks regarding their progress rather than attending school for the full day.

The at-risk students were faced with very serious decisions because the school policies and programs did not allow alternative solutions for them. At each turn it appeared the at-risk student needed to adjust to the policies of the school that in many cases could not be fulfilled by this population. The policies were not centered on the needs of the at-risk students. Without interventions, even though not perfect, many of the at-risk students would have collapsed and retreated when faced with so many hurdles to overcome.

During the course of the study, the mentors found it difficult to follow-up five or six at-risk students in one week in addition to their other duties. The at-risk students had social, family and academic problems that required extensive intervention, follow-up and
referral to outside agencies. At times the mentors expressed that the problems of these children were so extensive and pervasive that the students’ issues were only partially solvable and beyond their expertise or control. Limiting the caseload to three students or increasing the number of mentors in the program may have improved results. Prior to working with at-risk students, mentors should be trained and made aware of the numerous problems and obstacles they will face when helping at-risk students.

Although the researcher directed the mentors to record the date of each contact, source of information, type of intervention and follow-up with each identified student, differences in record keeping, intensity and quality of each intervention varied greatly among the mentors. This made it difficult to measure the effectiveness of the interventions. For example, one mentor recorded as few as two interventions during the first and second quarter. When questioned, the mentor reported talking with the student for periods of 10 to 15 minutes numerous times but lacked the time to record each meeting or intervention. Another mentor submitted as many as 26 recorded interventions for one student during one quarter. These interventions consisted of a 10-second greeting of the student in the hallway. It was not the intention of the researcher to monitor the quality or intensity of the interventions of the mentors, only the number of interventions. If mentors recorded minutes spent with each student, had specific goals to reach with each student and set follow-up dates, more precise data could have been collected. Directives needed to be more specific and mentors needed to be trained in the process.

In all cases except three, the parents of the participants were positively and regularly involved with the mentors and increased their involvement during the course of the school year, an important ingredient in successful school programs (Brooks, 1995;
Black, 1998; Westfall and Pisapia, 1994; McMillan et al., 1992; Woods, 1995). A feeling of working together for the sake of the child was generated between the mentors and the parents. This was especially evident for the parents of Participant Twelve. She stopped talking to her parents during quarter 2 and the only information they received about their daughter's academic progress and college plans were through the mentor.

In those cases where the parent refrained from involvement, the mentor worked more diligently with the child. The parent of Participant Three had tired of reminding her child to strive in school and left the fate of twelfth grade to her child. Because it was evident this student was particularly needy for attention and help, the mentor met with the child over 26 times in both quarter 1 and quarter 2. In quarter 2 the student gradually stopped working in her classes and required more intervention time from the mentor. The increased interventions produced a positive effect in the student’s grade point average; however, the time demands on the mentor became difficult to continue. The parents of Participants Eight and Thirteen never responded to the phone calls or letters of the mentors. Because the mentor worked closely with Participant Thirteen, the mentor discovered this child lived with an alcoholic, abusive father and a very frightened mother. The child lived under these circumstances for many years with no help. The mentor referred the student to the student assistance counselor, who in turn found appropriate contacts for the family. Both participants were in danger of not graduating due to academic problems even though they received continual support from their mentors. It was only through numerous conversations with these children that the reasons behind their academic problems were found.
Open dialogue between parents and the mentors helped focus the students and in general, the relationships between the mentors became stronger and more beneficial to the students. Parental involvement was a positive aspect of the program and when the parents did not get involved other reasons existed. The importance of the parental contact was continually stressed and discussed. It was suggested a more definitive plan to involve parents was needed to support the mentors.

Studies similar to this one should be conducted in order to determine if positive intervention could be more effective at grade levels other than at grade twelve. If students were identified and provided intervention throughout their school career, it could be possible to alter the path of many children that would otherwise drop out of school before entering eleventh or twelfth grade. Such intervention would need commitment from the entire staff, not just five mentors. The needs of the children in ABC district changed quickly over a few years. Everyone in the school district and community must be made aware of changing populations and be readied to approach and intervene on behalf of these children. This study began because five percent of the senior class did not graduate each year due to attendance problems. A committed effort by administration, teachers, staff and parents caused positive change for 25 at-risk twelfth grade students. If the program was increased for grades one through twelve, even more positive results could be generated and reported.

Throughout this study this researcher experienced professional development as a leader by listening actively and responding appropriately to the ideas and opinions of teachers, administrators, parents and students. Additionally, this researcher learned the value of shared decision making and the importance of communicating with individuals
and groups. This researcher analyzed and solved the problems of at-risk students by leading others in the development of effective strategies to uniquely meet the needs of the students. As a leader, this researcher recognized the need for increased involvement of all personnel to effect change for at-risk students and the importance of creating opportunities for more staff participation in the decision making and problem solving processes.

As this researcher reflected on the conversations and discussions with the mentors, it was acknowledged that the program was successful even though the numbers did not indicate this. At each meeting conducted by this researcher, the mentors were encouraged to help and support each other. As the leader of the study and program, this researcher met with each of the mentors to discuss the unique situations of their at-risk students and to provide ideas for assistance. As a group, the mentors found their task challenging and rewarding because they knew, especially as time went on, that these children needed every intervention they could provide. The at-risk students did not produce overall higher grade point averages and better attendance rates, but each of the 15 participants were still in school at the end of quarter 2 and eligible for graduation. Of the 13 at-risk students new to the district, two transferred to other schools and one received her General Equivalency Diploma. The success of this program may not be established with numbers but only with close inspection and appreciation of the students' lives that were positively changed by devoted mentors, parents and staff members of a small urban school district in southern New Jersey.
References


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