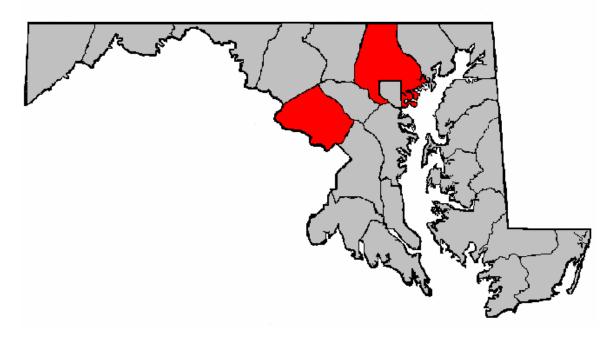
## Maryland Student Assistance Program

## Pilot Evaluation in Baltimore and Montgomery Counties Final Report



Dana Lehder, Erin Artigiani, Craig Winters, Melanie Westover, and Eric D. Wish

February 28, 2002 Center for Substance Abuse Research University of Maryland 4321 Hartwick Rd., College Park, MD

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## Acknowledgments

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#### **Maryland State Department of Education:**

Lynn Linde, Chief, Student Services and Alternative Programs Branch Milt McKenna, Specialist, Student Services and Alternative Programs Branch Lynn Widdowson, Specialist, Student Services and Alternative Programs Branch

#### **Baltimore County Public Schools:**

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#### **Montgomery County Public Schools:**

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## Safe and Drug-Free Schools: Baltimore County:

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Patti Sengebusch (Towson High)
Eileen Smith (Towson High)
Janet Terry (Pine Grove Middle)
Rosemary Wallis (Pine Grove Middle)

Sheila Myers (Martin Luther King, Jr., Middle) Davina Placella (Julius West Middle) Beth Shepherd (John F. Kennedy High) Judy Stenger (Parkland Middle) Linda Vann (Winston Churchill High)

#### **Montgomery County:**

Rita Rumbaugh, Substance Abuse Prevention Specialist Mike Codori, Intervention Specialist

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#### **FOREWORD**

The Maryland Student Assistance Program consists of multi-disciplinary core teams of school personnel who, in collaboration with local health department/agency adolescent addictions assessors, identify, collect data on, intervene with and refer to appropriate resources, students and their families who have been affected by alcohol, tobacco, or other drugs. A core team typically consists of a school administrator, a guidance counselor, a school nurse, and two or more teachers. The local health department or private treatment agency adolescent addictions assessors (counselors) serve as consultants to the core team and meet with the teams as needed. I cannot overemphasize the importance of an adequate adolescent addictions treatment network. The local health departments or local private agency adolescent addictions assessors are a vital link for our students and families, and we, as student assistance professionals, must continually commit ourselves to maintaining this vital network. School psychologists, pupil personnel workers, and local health department mental health counselors frequently serve as members-at-large of the core team.

More than five years ago, we established a goal of validating the hard work and efforts of those professionals who give their time and energy to work with adolescents and families through the Maryland Student Assistance Program. We have gone through many iterations in the journey toward evaluation to include: developing a model, locating funding, and finally creating a collaboration that could work with our local school systems to investigate the process and outcomes of Student Assistance. Given our limited resources, we conducted a "pilot" study that looked at a small population of schools. Once the pilot was complete it was our hope that we could interest other funding sources to support a multi-year, statewide evaluation, so that adolescents and their families could be followed for several years and we could determine the effectiveness of our school-based teams over time.

We have taken the first steps in this endeavor, and we are pleased to offer this important document that was made possible through the time, effort, and energy of many student assistance professionals. While this sample was small, it is important to note that 96 percent of the parents who met with an assessor agreed that there was a "problem." To me, this is a validation that we are identifying the right kids.

Also, we must remember that, in this instance, we are looking at our kids and families over a relatively short time period in relationship to the long journey that some of our adolescents have to make to recover fully from the effects of alcohol and other drugs. Intervention is not an event, it is a process, and recovery is not a destination, it is a journey that takes time, commitment, and dedication.

We hope that the reader finds the information presented in this study informative and that support can be generated to facilitate the expansion of the evaluation model to include more school systems, more schools, and more families, so that our results will truly represent the efforts of our student assistance professionals from across the state.

Milt McKenna Specialist, Safe and Drug-Free Schools Maryland State Department of Education

### Introduction

Early identification and assessment of students exhibiting behavioral and academic difficulties may diminish their risk for later alcohol and substance abuse problems, mental health and social conduct issues, and criminal justice involvement. The Maryland State Department of Education initiated the Maryland Student Assistance Program in 1987 to identify, refer, and follow up students deemed to be at-risk due to their dysfunctional behavior patterns. Children may be deemed at-risk due to changes in behavior, such as increased absenteeism or tardiness, declining grades, or changes in athletic or extracurricular activities.

Teams of trained school staff constitute the Student Assistance Program "Core Teams," which are typically a subunit of the Student Services Team at each school. Figure 1 summarizes the Student Assistance Program model, which involves the following five-step process:

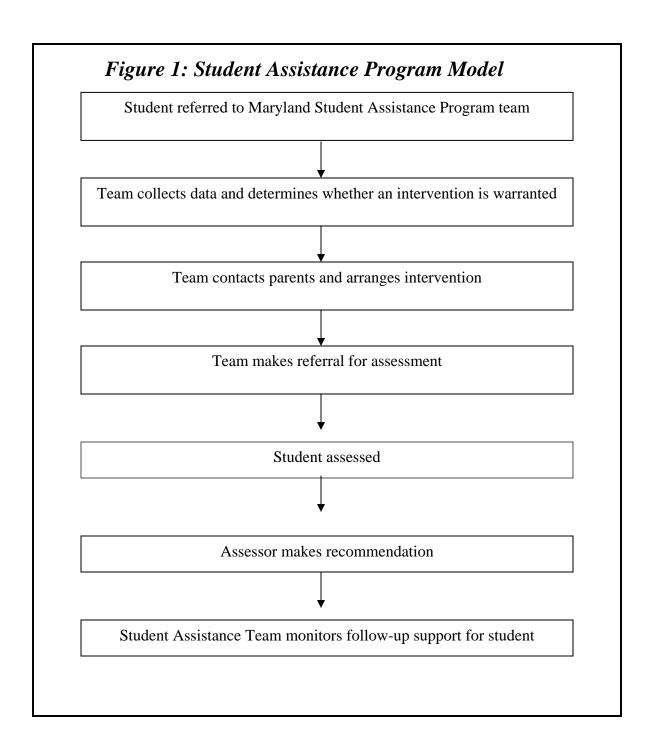
- 1. <u>IDENTIFICATION</u>: The goal of this step is to identify students whose changes in behavior, attendance, performance, and/or grades indicate that they may be at-risk because of possible involvement with alcohol, tobacco, or other drugs. Any concerned person, including teachers, school staff, other students, parents, and/or community members, may submit a student's name to the Student Assistance Team. After receiving the student's name, the team (confidentially) discusses the student at a team meeting, examines possible courses of action, and makes a determination about whether or not additional information is needed.
- **2. DATA COLLECTION:** The goal of this step is to compile a comprehensive profile of the identified student's attendance, performance, behavior, and grades from each adult who may have contact with this student during the school day. This information will determine whether the initial referral is part of an on-going pattern recognized by all of the adults submitting data, and whether or not the behavior pattern suggests that a problem may be related to involvement with alcohol, tobacco, or other drugs.
- **3.** <u>INTERVENTION</u>: The goal of this step is to gain acceptance and understanding by parents and the student that a problem exists that needs immediate attention. Using the <u>objective/observable</u> data that was collected during STEP 2, the team must develop an intervention strategy that presents the facts to the parents and the student and causes them to recognize the problem and agree to seek help.
- **4. REFERRAL:** The goal of this step is to have the student receive a professional assessment and, if appropriate, a referral for treatment. The team directs students and parents to the appropriate helping professionals. The team may refer a student to an adolescent addictions assessor, the school's guidance counselor, the school psychologist, or to pupil personnel workers, school nurses, or other helping professionals. In all cases, the student is assessed and appropriate referrals are made.
- **5. FOLLOW-UP:** The goal of this step is to provide the student and family appropriate support to enhance success. Student Assistance Program teams should be aware that they are often asking students to change a behavior that is strongly resistant to change. Unfortunately, this usually occurs at a time in the student's life when they may lack independent skills to make such changes. Teams should look at a variety of strategies to support these students in the school setting. These strategies may include recovery support groups for students, peer support groups, and faculty mentoring.

Currently, there are approximately 300 teams active throughout the Maryland public school system. In 2000, the Maryland State Department of Education requested that the Center for Substance Abuse Research (CESAR) at the University of Maryland, College Park, conduct a pilot evaluation of the Student Assistance Program in Baltimore and Montgomery counties. The main purpose of the pilot evaluation was to answer the following five questions:

- 1. Is the Student Assistance Program adequately identifying and assessing at-risk students?
- 2. Are parents and students pursuing the interventions recommended?
- 3. How many students receive outside treatment recommendations?
- 4. Do the intervention and treatment (if recommended) make a difference?
- 5. What do parents think of the Student Assistance Program?

A secondary purpose of the pilot evaluation was to gain information that would be helpful for implementing a statewide evaluation in the near future. This report summarizes the methods used in the pilot evaluation and the characteristics of 305 students who were referred to the Student Assistance Program. It also presents results on 104 cases in which parents gave informed consent for a phone interview conducted by CESAR staff about their experiences with the Student Assistance Program; what courses of action, if any, they felt were appropriate for their child; and their general opinions about the Student Assistance Program. Lastly, this report presents data on student grades and attendance, provided by the Student Assistance Team, before and after the Student Assistance Team intervention.

This pilot evaluation is an essential step in better understanding students identified by Student Assistance Teams and the course followed by their parents after students were identified as being atrisk. A team approach that involves parents, teachers, and intervention specialists is necessary if early intervention is to succeed at changing the trajectory of at-risk students. Information about parental perception of Student Assistance is crucial for improving the program.



#### **METHODS**

The first step in the pilot evaluation was to identify schools in Baltimore and Montgomery counties that would be willing to participate in the evaluation and meet certain criteria set by the Maryland State Department of Education (MSDE). Schools were selected based on the effectiveness of each Student Assistance Team and team leadership using the following minimum characteristics:

- Leadership as indicated by an established track record of consistent attendance at monthly team leader
  meetings, timely submission of reports, ongoing communication with Safe and Drug-Free Schools Project Staff,
  and efficient overall management of team operations.
- Commitment to the team's mission of intervention and follow-up
- Supportive principals who affirm the work of their school's Student Assistance Team
- Strong staff and community support as evidenced by the frequency of student referrals to the Student Assistance Team
- High intervention rate (denoted by greater than 50% contact for all students referred to the team)
- Excellent record of follow-through on all cases while maintaining strict adherence to established protocols in the prescribed student assistance processes

Table 1 below lists the schools whose Student Assistance Teams met the criteria and who agreed to participate. (See Appendix A for letters of support.)

Table 1. Baltimore and Montgomery County Schools Participating in the Maryland Student Assistance Program Pilot Evaluation

BALTIMORE COUNTY	MONTGOMERY COUNTY
Catonsville High School	John F. Kennedy High School
Franklin High School	Northwest High School
Loch Raven High School	Springbrook High School
Owings Mills High School	Walter Johnson High School
Towson High School	Winston Churchill High School
Cockeysville Middle School	Julius West Middle School
Deep Creek Middle School	Martin Luther King, Jr., Middle School
Dundalk Middle School	Parkland Middle School
Pine Grove Middle School*	Rocky Hills Middle School
Stemmers Run Middle School*	Sligo Middle School

<sup>\*</sup> These two schools were unable to complete the study.

Cases referred to the Student Assistance Program were eligible for the evaluation if they met the following criteria:

- The Student Assistance Team determined an intervention was necessary.
- An intervention with the parents took place either in person or over the phone.

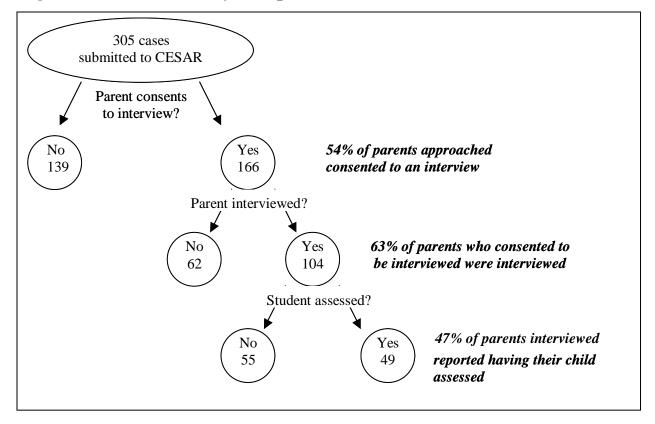
At the time that the Student Assistance Program team member contacted the student's parents to discuss behavioral concerns, s/he described the pilot evaluation and requested parental permission for a CESAR researcher to contact them in several weeks. Parents were read or given a description of the study and asked to participate by completing the consent form with their contact information for a later interview. Parents who consented were contacted several weeks later by CESAR staff. Informed consent was obtained and an interview was subsequently conducted. (The informed consent and parent interview forms are attached in Appendix B.) The interview involved questions about parents' satisfaction with the Student Assistance Program and changes in their child's behavior since the time of the initial Student Assistance Team intervention.

Figure 2 illustrates the flow of cases into the study and shows that only 54% of parents consented to an interview with CESAR staff. Moreover, only 63% of those parents completed an interview. It is possible that parents were unwilling to disclose information about their child, even though they were told of the confidential nature of the evaluation. In addition, insufficient time or lack of interest, or denial about their child's problems, could have influenced their decision not to participate in the interview. Although not surprising, these results call for a more intensive effort to inform parents of the importance and confidentiality of the evaluation, so that a more representative sample of parents can be obtained.

At the end of the school year, the student assistance evaluation coordinator or team member in each school completed a student data collection form for each student included in the study. These forms were identified by number only. No names or other identifying information were provided to CESAR. The data collected included grades, absences, and behavior problems for the 1999-2000 and 2000-2001 school years.

By design, the evaluation attempted to examine both objective information gathered from student records as well as more subjective information from parental interviews. On a few occasions, school administrative personnel did not allow access to student records. Since obtaining administrative support is critical to obtaining accurate and complete data, future evaluations should focus on overcoming this challenge. In addition, the lack of consistency between schools in the way students' grades and absences were recorded made it difficult to collect this information on a standard form.

Figure 2: How the Study Sample Was Obtained



Extend the follow-up time on students involved

Develop outcome measure instruments based on the availability of data at the school of interest

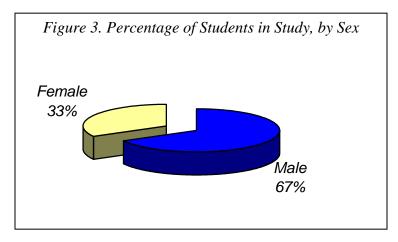
Although it is interesting and valuable to collect short-term outcomes, it is essential to examine the long-term impact of this program by examining the school performance data for students a year or more after the intervention.

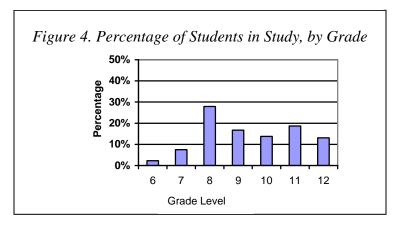
It was clear from the experience of this evaluation that schools vary with respect to the manner in which they record student grades, absences, and behavior problems. Any statewide evaluation should take these differences into account before designing outcome measure instruments.

## **RESULTS**

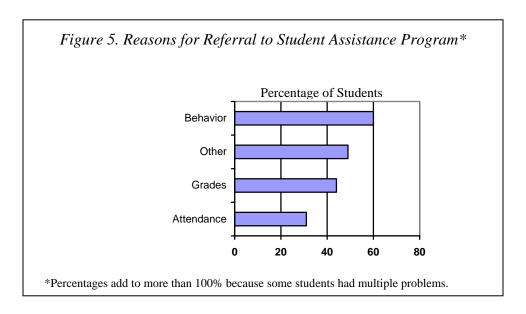
# 1. Is the Student Assistance Program adequately identifying and assessing at-risk students?

In this pilot study involving two counties (Baltimore and Montgomery), approximately two-thirds of the students referred to the Student Assistance Program were male. The average age of students was 15, but ages ranged from 10-19, and a majority of the students were in the 8<sup>th</sup> grade or above (see Figures 3 and 4, below).





The instrument used in the evaluation allowed for multiple responses to the question concerning the reason for referral to the program. Students could be referred to Student Assistance for concerns including behavior, grades, attendance, or other problems, as well as a combination of these. Figure 5 shows the reasons for referral to the Student Assistance Program. Sixty percent of the students were referred because of behavioral issues; another 44% of cases were referred because of academic performance. Approximately one-third (31%) of students were referred for attendance problems. In one-fourth of the cases, a different reason other than behavior, grades, or attendance was cited as the only reason for referral (no other reason was listed). (In Figure 5 below, the "other" category includes both those students whose only reason for referral was listed as "other" as well as those students whose referrals were a result of "other" and another problem.) The Maryland State Department of Education is interested in learning more about the specifics of these reasons for referral that were coded as "other."



Information from the 104 parent interviews indicated that two-thirds of parents were aware that their child was having a problem before contact by the school staff. A slightly larger percentage (72%) believed that intervention was necessary to address the problem with their child. These figures could be interpreted as evidence that, in general, parents and Student Assistance Program teams have similar opinions about the need for child intervention. However, in the absence of a control group—a group of parents whose children were *not* identified by the Student Assistance Program team—it is difficult to say whether the Student Assistance Program is adequately identifying most of the children who are at risk and in need of intervention. Often, children's behavior can be influenced by the environment and social context, and therefore, it is possible that problems could surface at home that may not be apparent to school personnel. The goal of the Student Assistance Program is to focus on problems that affect school functioning rather than those problems visible within the wider context of family dysfunction.

#### 2. Are parents and students pursuing the interventions recommended?

When parents and school staff sit down together at the intervention, the school staff discusses the options for the child in question. Often the staff recommends an assessment by a health care professional. Table 2 summarizes what actions parents who were interviewed took after meeting with the Student Assistance Program team.

The majority of parents (75%) interviewed reported that student assistance staff recommended an assessment for their child. After the intervention, parents made the decision of whether or not to take their child for a subsequent assessment. Forty-seven percent of the parents whose children were recommended for further assessment had met with an assessor by the time they were interviewed by CESAR. It is possible that some of the parents had not had sufficient time to meet with an assessor by the time CESAR interviewed them. However, 38% of those who had not met with an assessor had indicated that they did not believe that an assessment was necessary (See Table 2).

The parents' decision to pursue assessment is the determining factor in whether or not the child will receive future treatment. With competing influences, such as other children at home, work and family obligations, financial constraints, and the possible stigma and emotional distress associated with seeking intervention, not all parents chose the course of action recommended by the Student Assistance Team. This evaluation provides a baseline by which Student Assistance Program personnel can set future goals for engaging parents in making the most appropriate decision for their child.

Among parents who took their child for assessment, slightly more than half (57%) reported that the assessor recommended treatment for their child. Most parents (96%) agreed with the assessor's conclusions about their child.

Table 2. Characteristics of Assessment

Reported an assessment was recommended by Student Assistance Program staff (n=104)	75%
Reported meeting with an assessor (n=49)	47%
Parent reported assessor recommended treatment	57%
Parent agreed with assessor	96%
Assessment occurred at school*	47%
Reported not meeting with an assessor (n=55)	53%
Parents' plan for further treatment	
Have no plans for treatment	51%
Have pursued	34%
Plan to pursue	14%
Parents' reason for not assessing student	
Not necessary	38%
Other	35%
Schedule conflicts	14%
Child would not go	8%
Not gotten to it yet	5%

<sup>\*</sup>This question was added partway through the parent interviews, and hence only 43 parents were asked whether or not their assessment occurred at the school.

#### 3. How many students receive outside treatment recommendations?

Of the parents who reported treatment was recommended, 52% have started their child in treatment. Parents reported primarily meeting with clinical social workers, counselors, and psychiatrists, although several reported meeting with drug and alcohol specialists and medical doctors. This finding attests to the diverse needs of at-risk children identified through the Student Assistance Program process.

#### 4. Do the intervention and treatment (if recommended) make a difference?

#### ....in noticeable behavior?

Among parents who were interviewed, half (50%) had noticed changes in their child since the intervention. Among those that noticed changes, the majority (64%) noticed positive improvements in their child's behavior, attitude, attendance, or grades. About one-fourth noticed both positive and negative changes and the remainder (12%) noticed negative changes in their child since the intervention.

#### ...in student grades and attendance?

Two measures of academic performance were used in this evaluation, namely, the percentage of As and Bs the child received, and the number of days absent at two time points—the quarter before and the quarter after the intervention. Averages of grades and absences are presented in Figures 6 and 7 for the entire sample for which data was available. We found that no significant differences existed between grades and absences for these two time points. It is possible that changes in academic performance as a result of any intervention would not be apparent until more time had elapsed. (See Appendix B for Student Data Record Forms from both counties).

Figure 8 shows average percentage of As and Bs for students who were assessed (n=49) and those who were not assessed (n=55). After taking into account possible effects of gender, age, and county, we found that assessed children had lower grades than non-assessed children after the intervention. It is possible that poor academic performance is one reason for parents to have an assessment completed on their child. Without more information on whether academic difficulties preceded or followed the assessment, it is difficult to interpret this finding.

Figure 9 shows average number of days absent for the two groups. After taking into account possible effects of gender, age, and county, we found that the greatest predictor of absences after intervention was the number of absences prior to intervention. Again, it is possible that children who are having more severe problems, as indicated by high absenteeism, are more likely to receive an assessment.

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<sup>&</sup>lt;sup>1</sup>Some cases were excluded from the analyses if data on any one of the relevant variables were missing.

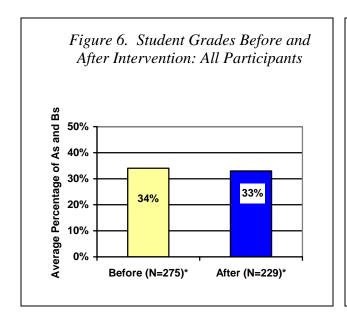
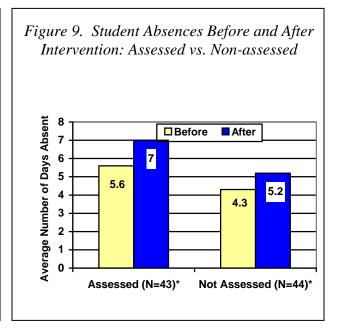


Figure 7. Student Absences Before and After Intervention: All Participants

8
7
8
7
9
9
1
9
1
9
1
9
Before (N=261)\*

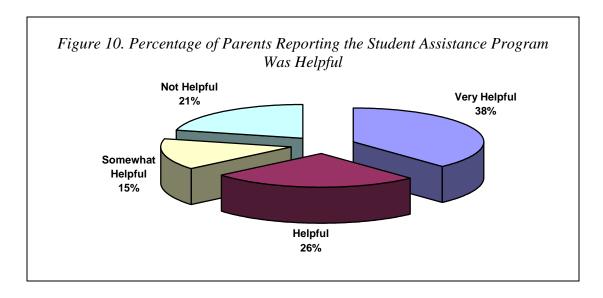
After (N=242)\*

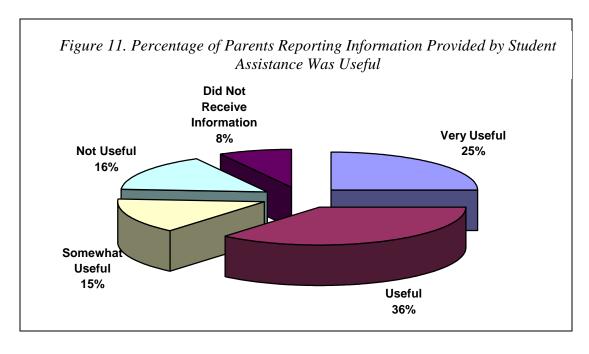


<sup>\*</sup> Ns may vary due to missing data.

#### 5. What do parents think of the Student Assistance Program?

Most parents felt that Student Assistance was helpful to their child (see Figure 10). In fact, the vast majority felt the program was at least somewhat helpful (79%). Most parents reported that the information provided by the Student Assistance Program was useful (see Figure 11). Although some parents (8%) reported not receiving information from the program, the majority who received information found it useful. (See Appendix B for the complete Parent Interview Form.)





Additional qualitative information was obtained from parent responses to open-ended questions. Of the 104 parents interviewed, 82 gave a response when asked if they had any further comments or recommendations for improving the schools' Student Assistance Program. Parents responded with positive comments (27 parents), negative comments (10 parents), or recommendations for changes in the program (45 parents).

<u>Positive Comments:</u> Twenty parents were extremely happy and satisfied with the program. They felt the program should continue as is. Seven parents expressed their satisfaction in knowing that there were teachers who were showing interest and concern about the children.

<u>Negative Comments:</u> Five parents had negative reactions regarding their interactions with the assessor. An additional five parents had an altogether negative reaction toward the Student Assistance Program. Few parents, though, went so far as to say it was a waste of time altogether.

<u>Recommendations:</u> Three recommendations were voiced by different groups of parents.

- 1. Some parents (15 parents) expressed the need for more communication between all parties involved. They felt they were not adequately informed of the situation before the intervention.
- 2. Parents (20 parents) also expressed concerns over their child's initial referral to the Student Assistance Program.
  - a. Fifteen parents expressed deep concerns over the way in which their child was referred. They recommended that the referrals not be anonymous and not be based on only one student or teacher's observations. Parents expressed concern about how the referral could affect their child's reputation. Parents were concerned that the basis of the referral was anecdotal and felt that there should be a more concrete basis for referrals.
  - b. Five parents thought the reason for the referral was inaccurate and did not apply to their son or daughter.
- 3. Ten parents noted some disjuncture in their expectations of the program and the actual experiences that they had. These parents felt that they needed more help in the referral process from the Student Assistance Team. Parents also expressed the need for more moderate punishments for students with moderate problems (e.g., in-school suspensions and detention).

#### LESSONS LEARNED AND RECOMMENDATIONS

The following are recommendations for a Statewide Evaluation:

Provide incentives for Student
Assistance Program staff to be
involved

One of the largest hurdles encountered in this evaluation was the lack of sufficient time for team leaders to complete their work. Because school personnel are under considerable pressures and time constraints, incentives might be a useful way of engaging team leaders in the process and complying with the study requirements. Incentives could include monetary reimbursement for time spent collecting data, or building adequate time into team members' schedules to complete work associated with the study.

✓ Integrate more elaborate training and monitoring

Comprehensive training sessions are essential for all school staff that would be responsible for completing forms. Training topics would include instruction on completing the forms accurately, as well as establishing a mechanism for obtaining data from the school in the case where data are initially missing. Close contact between research staff and school personnel would be useful for detecting logistical problems with data collection or low response rates so that appropriate action could be taken. (See Appendix C for Pilot Evaluation training materials.)

✓ Integrate school administrators into the process

Although initial verbal consent by school administrators was received in the current pilot evaluation, some administrators were not willing to give access to student data towards the end of the study. Involving administrators more consistently and frequently to reassure them that confidentiality requirements were being upheld throughout the study and to remind them of the importance of the evaluation could encourage active participation and support by school administrators.

✓ Include a control group

Collect data on students who were referred to Student Assistance but who the team determined were not in need of intervention. Also collect data on students whose parents refused an intervention.

Conduct a second parent interview at a later date

This pilot evaluation indicated that many parents were hesitant to speak to research staff about sensitive issues concerning their children. In the future, it is recommended that parents receive initial information via a short introductory discussion about the study, followed by a subsequent interview that focuses on their child's needs.

✓ Conduct a student interview

The Student Assistance Program's main goal is to help the students. A student interview would allow us to assess the impressions of students who had gone through the program.

Nancy S. Grasmick State Superintendent of Schools 200 West Baltimore Street Baltimore, Maryland 21201 Phone (410) 767-0100 TTY/TDD (410) 333-6442

January 18, 2000

Dr. Jerry Dean Weast Superintendent Montgomery County Public Schools 850 Hungerford Drive Rockville, Maryland 20850

Dear Dr. J

We are pleased to inform you of a very exciting joint initiative of the University of Maryland Center for Substance Abuse Research and the Maryland State Department of Education. We have developed a plan to evaluate the Maryland Student Assistance Program (MSAP). The evaluation will be accomplished in two phases. Phase one will be a pilot to develop protocols and phase two will be a full-scale statewide evaluation.

You are invited to participate in the pilot phase of this initiative. We hope to implement our pilot evaluation model in two or three schools in both Baltimore and Montgomery Counties. After the pilot evaluation, we will seek funding to conduct a statewide evaluation of the MSAP. We believe you would agree that the MSAP is having a positive impact on attendance, suspensions, and overall student achievement. However, we are all aware that we can no longer rely on intuitive evaluations of this program. In accordance with the United States Department of Education's Principles of Effectiveness, published in July 1998, we must design and implement our programs for youth based on research and evaluation that provides evidence that the programs we use prevent or reduce drug use, violence, or disruptive behavior. We see this as a unique opportunity to determine the effectiveness of the MSAP.

Please let us know by February 18, 2000, if you agree to participate so that we can move forward with this initiative. The point of contact for this initiative is Mr. Milt McKenna, Specialist, Safe and Drug-Free Schools. Mr. Mckenna may be contacted at (410) 767-0304 or E-mail mmckenna@msde.state.md.us.

Sincerely,

Nancy S. Gasmick

State Superintendent of Schools

NSG:MM:crt

c: Mr. Milt McKenna

## BALTIMORE COUNTY PUBLIC SCHOOLS

Anthony G. Marchione, Superintendent

Towson, Maryland 21204

February 28, 2000

Eric Wish, PhD.
Director, CESAR
University of Maryland
Center for Substance Abuse Research
4321 Hartwick Road, Suite 501
College Fark, Maryland 20740

Dear Dr. Wish:

Baltimore County Public Schools does consent to participation in the evaluation of the Maryland Student Assistance Program (MSAP). We look forward to the process and of course the results of this review so that we can continue to provide the students of Baltimore County the best Assistance Program possible. We have orally communicated with Milt McKenna, MSDE, this decision as well.

Your contact persons in our county are Patsy Holmes, Coordinator of the Office of Safe and Drug Free Schools (410-887-4013) and Dale Rauenzahn, Director of Student Services and Alternative Programs (410-887-4360). They will be able to assist you with this process.

Thank you for this opportunity and the recognition of our efforts in the area of substance abuse reduction and student assistance.

Sincerely,

Anthony G. Marchione

Superintendent

c: Milt McKenna, MSDE Dale R. Rauenzahn, BCPS Patsy Holmes, BCPS

#### Office of Instruction and Program Development MONTGOMERY COUNTY PUBLIC SCHOOLS Rockville, Maryland

June 5, 2000

#### **MEMORANDUM**

To:

Selected Principals

From:

Judie Muntner, Associate Superintendent

Subject:

Participation in Pilot Evaluation of the Montgomery Student

Assistance Program

As you know the Student Assistance Program began in the Montgomery County Public Schools (MCPS) in 1988. Presently, there is a student assistance team in each MCPS secondary school. Until now, there has been no formal evaluation of the effectiveness of the student assistance program. However, earlier this year MCPS agreed to participate in a pilot evaluation that is a collaborative effort with the Maryland State Department of Education (MSDE) and the Baltimore County Public Schools (BCPS). Also participating and directing the evaluation is the Centers for Substance Abuse Research (CESAR) at the University of Maryland, College Park.

MCPS has agreed to identify ten (10) student assistance teams – five teams from both the middle school and high school levels, to participate in the pilot evaluation. CESAR will conduct the study between September 2000 and May 2001 and will generate a report of findings during the summer of 2001. Teams that agree to participate in the pilot evaluation will receive both orientation and training on July 24, 2000.

Effective student assistance teams have the minimum following characteristics:

- Leadership as indicated by an established track record of consistent attendance at monthly team leader meetings, timely submission of reports, ongoing communication with the Safe and Drug-Free Schools Project staff, and efficient overall management of team operations
- Commitment to the team's mission of intervention and follow-up
- Supportive principals who affirm the work of their school's student assistance team
- Strong staff and community support as evidenced by the frequency of student referrals to the student assistance team
- High intervention rate (denoted by a greater than 50 percent contact for all students referred to the team)
- Excellent record of follow-through on all cases while maintaining strict adherence to established protocols in the prescribed student assistance processes

Although there are 53 secondary schools in MCPS with active student assistance teams, only 19 schools are being asked at this time to "self-select" for participation in the pilot evaluation next year. From this number, only five middle schools and five high schools will be selected for the pilot.

Please discuss this opportunity with your school's student assistance team and complete and return the attached response form via Pony, before June 14, 2000, to Mrs. Rita Rumbaugh, Safe and Drug-Free Schools Project specialist, at Mark Twain School. You also may send your response to Mrs. Rumbaugh via fax at 301-517-5910.

JM:gcem

Attachment

Copy to:

Community Superintendents

Mr. Masood

Mrs. Rumbaugh Mr. Schoendorfer

Approved:

James A. Williams, Deputy Superintendent of Schools



CESAR 4321 Hartwick Road, Suite 501 College Park, Maryland 20740 301.403.8329 TEL 301.403.8342 FAX

http://www.cesar.umd.edu

February 10, 2000

Anthony Marchione, Superintendent Baltimore County Public Schools 6901 N Charles St. Towson, Maryland 21204

Re: Proposed Evaluation of the Maryland Student Assistance Program

Dr. Marchione:

We are writing to request your county's participation in an evaluation of the Maryland Student Assistance Program (MSAP). After receiving requests from several counties, the Center for Substance Abuse Research (CESAR), and the Maryland State Department of Education (MSDE) have agreed to conduct an evaluation of the MSAP. Five counties have now pledged \$22,000 to develop and collaborate on an evaluation that could be duplicated by MSAP programs throughout the State.

We are now inviting two counties to be pilot sites -- Baltimore County and Montgomery County. Your continuing pursuit of excellence is evident in the essential curriculum and the partnerships you have forged with other educational facilities makes Baltimore County a logical place to start. The combination of a well developed program and a highly experienced staff such as yours are essential to create and sustain a model evaluation. As you know, evaluations are an important part of all state and federal grants, and the State is eager to show that a program like MSAP can successfully guide at-risk students away from trouble and into successful academic careers. A description of our proposed evaluation of MSAP is attached.

I look forward to receiving your consent to conduct this evaluation in Baltimore County. Please give me a call at your convenience at 301-403-8329 if you have any questions about CESAR or this evaluation.

Sincereb

Eric Wish, PhD. Director, CESAR

cc: Milt McKenna, MSDE

#### (To be completed by Student Assistance team member) Student Tracking Form

## TO BE COMPLETED FOR STUDENTS REFERRED TO STUDENT ASSISTANCE AND IDENTIFIED AS AT-RISK

Sch	ool Informati	on				
School ID #: Str	udent Assista	nce ID n	umber: _			
Student Name: (PLEASE PRINT) Last: (To be blacked out by EVALUATION COOL						
Stud	lent Informati	ion				
Student Gender: Male Fe	male			Age:		
Current Grade: (Please circle one) 6	7	8	9	10	11	12
Referral Reason: (Please circle all applicable	)					
Attendance Grades Behavior Pr	roblem	Other_			<del></del>	
Pare	ent Informati	on				
Date of meeting/call:/ / M	eeting type:	In pers	on	Phon	ıe	
Language spoken by parent: (Please circle or	ne)					
English Spanish French Chinese V	ietnamese	Other_				
Parent:						
Agreed to assessment Refused assess	ment	Other_				
Student Assistance Staff member who contact	ted parent (II	NITIAL	S):			

COMPLETED STUDENT TRACKING AND PARENTAL CONSENT FORMS SHOULD BE RETURNED TO YOUR STUDENT ASSISTANCE EVALUATION COORDINATOR

#### (To be read to parent during the meeting between Student Assistance program and parent)

#### **Description of Study**

A local research firm, CESAR, has agreed to help us evaluate our Maryland Student Assistance Program. The study will allow us to improve the program for our students. It is our hope that you will help us by participating in the CESAR study. If you agree to participate, a researcher from CESAR will call you in about 3 weeks for a short 10- minute telephone interview. The interviewer will ask you about your experiences with Student Assistance and your satisfaction with the program. The answers you give will never be connected with you or your child's name. Participation is completely voluntary. After giving your consent, you are free to change your mind at any time and refuse to participate further.

Do you have any questions about the study?

Do you agree to participate in the CESAR study? (COMPLETE PARENT CONSENT FORM)

#### **CESAR Parent Consent Form**

# (To be filled out by Student Assistance team member during meeting with parent) DO NOT DETACH FROM STUDENT TRACKING FORM TO BE SIGNED BY PARENT/GUARDIAN OR MSAP REPRESENTATIVE (PHONE MEETINGS ONLY)

Statement of Consent: I give my consent to be contacted by the Center for Substance Abuse Research (CESAR), a research facility at a local university, for a follow-up interview as part of an evaluation of my school's student assistance program. I understand that no personal identifiers (e.g., name or social security number) will be included with my responses.

<u>Purpose</u>: The purpose of this research is to ask some questions about my experiences with my school's student assistance program.

<u>Procedures</u>: In approximately three weeks, a researcher from CESAR will call me to ask some questions about my experiences with student assistance. The interview will take no more than 10 minutes, and I will not be asked for any personal information about my child or myself.

Confidentiality: I understand that all information collected is confidential. After verifying that I am the correct respondent, only coded identification numbers will be used. The consent form that identifies me by name will be destroyed after the interview has been completed. Neither my name, nor the name of my son/daughter, will appear in any published reports.

Risks: My only responsibility in this study is a 10-minute phone interview.

Benefits: I understand that this study is designed to evaluate the effectiveness of the student assistance program and to provide information to the school system. I understand that this study in not designed to help me personally. I understand that information about my child will not be provided to the school nor will my child's participation effect his/her status at the school.

If I have questions, I understand that I am free to ask them at any time during the administration of the interview. My participation is completely voluntary, and I can decline to answer any or all questions if I so choose.

Parent Contacted: (PLEASE PRINT)	
Last: First:	
☐ Parent Agreed to Participate  IF PARENT IS PRESENT	IF PARENT IS NOT PRESENT
I have read the above consent form and agree to let CESAR contact me in the near future for a short interview.	I have read the document above to the parent/guardian of the student in question and have received verbal consent for CESAR to contact them for a short interview.
Parent's/Guardian's/Responsible Adult's Signature	Student Assistance Staff Member Signature
Date	Date
Parent would like to be contacted at () Contact at the following times:	
	use back of sheet if more space is needed)
☐ Parent Refused to Participate	RRB APPROVED VALID UNTIL
- 1987年 - 19874年 - 1987年 - 19874年 - 19874 - 19874 - 19874 - 19874 - 19874 - 19874 - 19874 - 1	[1986年] [1886年] [1986年] [1986年

## STUDENT ASSISTANCE PARENT/GUARDIAN SURVEY

School ID:  Date of interview///	Student ID:
READ AS WRITTEN: Good [Morning, Afte[Name of parent who signed consent form]  • [IF THE SPECIFIC PARENT/GUARDIAN CONTINUE WITH THE INTRODUCTION PHONE. IF THE SPECIFIC PARENT/GUARDIAN THAT YOU ARE A HEALTH RESEARCY CONTACT THAT PERSON.	N IS AVAILABLE TO INTERVIEW, N BELOW ONCE S/HE IS ON THE ARDIAN IS UNAVAILABLE, STATE
My name is, and I work for the Center the University of Maryland. Several weeks ago you member at [INSERT SCHOOL NAME] and gave y evaluation of the program. At this time, I would like experiences with your school's student assistance priminutes. Information provided will not be provided participation affect his/her status in school. Further recorded about you or your child. Do you have any	met/spoke with a Student Assistance team our consent to be interviewed as a part of an e to ask you some questions about your rogram. The questions will take about ten to the school, nor will your child's e, no names or identifying information will be

1.	Do you remember meeting/talking with your child's school's student assistance staff on[insert date of meeting from student tracking form]?  A. IF NO, attempt to refresh their memory by telling them the date, the school, the grade of the child in question and the referral reason.  o If they DO remember the meeting, continue with interview and change answer to question 1 to YES  o If they still DO NOT remember the meeting, thank them for their time and discontinue interview	Yes No (ASK A)	1 2
2.	Were you aware of any problems with your child before the school staff contacted you?	(ASK A) Yes	1
	A. IF YES, What type of problems? (RECORD VERBATIM BELOW)	No	2
	:		
	•		
_			
3.	Would you describe this meeting/conversation as necessary or not necessary?	Necessary	1
	Please explain:	Not necessary	2
٠			

	<b>7</b>		
4.	Have you noticed any changes in your child's attitude, behavior, school attendance, etc. since the meeting/conversation with the school staff?	(ASK A) Yes	1
	A. IF YES, What type(s) of changes have you noticed? (RECORD VERBATIM BELOW)	No	2
	2		
5.	During your contact with the school's Student Assistance staff (i.e. the intervention), was an assessment of your child recommended?	Yes	1
	•	(SKIP TO Q 7) No	2
6.	Did your child subsequently meet with an assessor or other health care professional?	(ASK A-E -PINK) Yes	1
		(SKIP TO F-G-BLUE)	2
	6a. Was the assessment completed at the school?	Yes	1
		No	2
	6b. If yes, was the assessment completed at the intervention, or at a later date?	Yes	1
	·	No	2

# TO BE ASKED OF SUBJECTS WHO DID SEND CHILD FOR ASSESSMENT (i.e. answered YES to Q6)

 (1.0. 4.10.1.0.1.1.2.0.1.0.4.7)		
IF YES, A. What kind of assessor or health care professional met with your child?		
 B. Was treatment or other assistance recommended?	(ASK B1) Yes	1
B1. IF YES, what type of treatment/services? (RECORD VERBATIM BELOW)	No	2
•		:
C. Did you agree with any of the recommendations made by the assessor or other health care professional?	(ASK C1) Yes	1
C1. Please Explain (RECORD VERBATIM BELOW)	(ASK C1) No	2
	•	

# TO BE ASKED OF SUBJECTS WHO DID SEND CHILD FOR ASSESSMENT (i.e. answered YES to Q6)

D. Has your child begun any treatment or other assistance?	(ASK D1) Yes	1
D1. IF YES, what type of treatment/services? (RECORD VERBATIM BELOW)	(SKIP TO D2) No	2
D2. <b>IF NO</b> , why not? (RECORD VERBATIM BELOW)		
*		
	as an index of	
E. Have you pursued, or are you planning to pursue, any type of program for your child?	Yes, Have pursued (ASK E1)	1
E1. <b>IF YES</b> , what type of treatment/services? (RECORD VERBATIM BELOW)	Yes, Planning to pursue (ASK E1)	2
	(SKIP TO Q7) No	3
		,

# TO BE ASKED OF SUBJECTS WHO DID NOT SEND CHILD FOR ASSESSMENT (i.e. answered NO to Q6)

		_
F. Why did your child not meet with an assessor or other health care professional?  (RECORD VERBATIM BELOW)		
G. Have you pursued, or are you planning to pursue, any type of outside assistance for your child?	Yes, Have pursued (ASK G1)	
G1. IF YES, what type of treatment/services? (RECORD VERBATIM BELOW)	Yes, Planning to pursue (ASK G1)	
-	(SKIP TO Q7) No	

**GO TO QUESTION 7** 

7.	Would you say the school's Student Assistance Program was very helpful, helpful, somewhat helpful, or not helpful at all to you?	Very helpful Helpful	1 2
		-	
		Somewhat helpful	3
		Not helpful at all	4
8.	Would you say the information you received from the staff was very useful, useful, somewhat useful or not useful at all?	Very useful	1
	Somewhat useful of not useful at all?	Useful	2
		Somewhat useful	3
		Not useful at all	4
9.	Do you have any further comments or recommendations for improving your school's student assistance program? (RECORD VERBATIM BELOW)		
	<u> </u>		
	· · · · · · · · · · · · · · · · · · ·		
j			

**READ AS WRITTEN:** This is the end of our questions.

Thank you for your time. We appreciate your honesty and thoughtful responses.

# STUDENT ASSISTANCE: STUDENT RECORD FORM Baltimore County

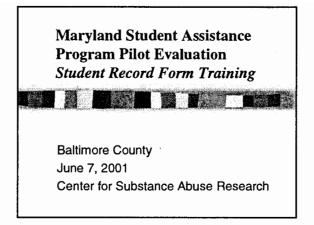
School ID:		Student ID:		· <del></del>
Date of Collection:	/	Name of Collec	tor:	
	placked out by EVALU			CESAR)
	Stude	nt Demographic Inform	nation	
1. Student Gender:	1. Male 2	. Female	2. Birthdate:/_	
3. Grade: (Please Cir	rcle One) 6 7	8 9	10 11 12	
	ground: (Please Circle of African American	0 77' ' 4 4	Asian 5. O	other
		Attendance		
		2000-2001 School Year		
	Quarter 1	Quarter 2	Quarter 3	Quarter 4
# Days Absent				
# Days Late				
		1999-2000 School Year		
	Quarter 1	Quarter 2	Quarter 3	Quarter 4
# Days Absent				
# Days Late				
		Grades		
		2000-2001 School Year	•	
	Quarter 1	Quarter 2	Quarter 3	Quarter 4
# of A's				
# of B's				
# of C's				
# of D's				
# of E's				

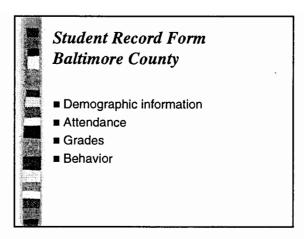
		1999-2000 3	chool Year		
	Quarter 1	Quart	er 2	Quarter 3	Quartei
# of A's					
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# of C's					
# of D's					
# of E's					
		Beha	vior		·
			2000-2001	1999-200	0
# of Suspens	ions				
for Attendance	ce				
for Dangerou	s Substance(s)				
for Weapons					
for Attacks/T	hreats/Fighting				
for Disrespec	t/Insubordination/Disrup	ption			
for Other		_			
1					
# of Expulsion	ons				
for Attendance	ce				
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for Attacks/T	hreats/Fighting				
for Disrespec	t/Insubordination/Disrup	ption			
for Other					

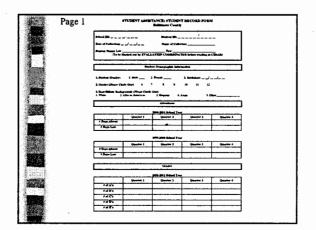
# STUDENT ASSISTANCE: STUDENT RECORD FORM Montgomery County

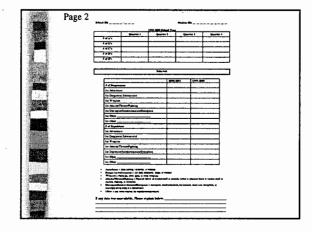
School ID:	<u>-</u>	Student ID:		_
Date of Collection: _	//	Name of Collect	tor:	
Student Name: Last:_ (To be b	lacked out by EVALU	First:  ATION COORDINAT	OR before sending to	CESAR)
	Stude	ent Demographic Inform	nation	
1. Student Gender:	1. Male 2	. Female	2. Birthdate:/_	
3. Grade: (Please Cir	rcle One) 6 7	8 9	10 11 12	
	ground: (Please Circle African American	One) 3. Hispanic 4. A	ssian 5. O	ther
		Attendance		
		2000-2001 School Year		
	Quarter 1	Quarter 2	Quarter 3	Quarter 4
# Days Absent				
		1999-2000 School Year		
	# Days Absent			
		Grades		
		2000-2001 School Year		
	Quarter 1	Quarter 2	Quarter 3	Quarter 4
# of A's				
# of B's				
# of C's				
# of D's				
# of E's			•	

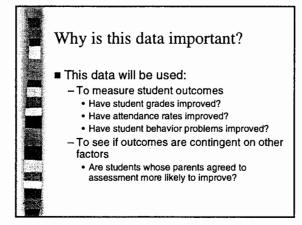
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		1999-2000 Sc	hool Year		
	Quarter 1	Quarte	er 2	Quarter 3	Quarter
# of A's					
# of B's					
# of C's					
# of D's					
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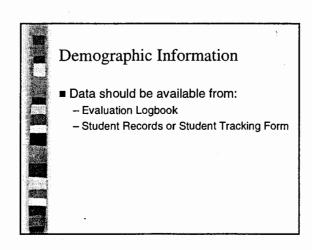


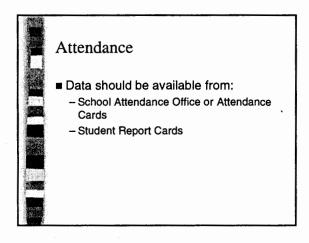


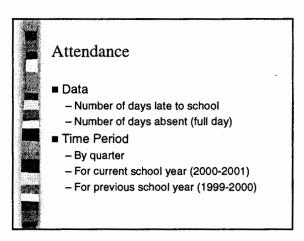


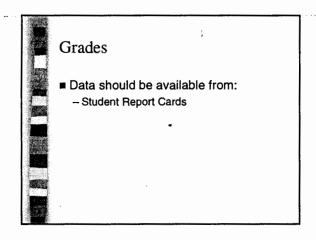


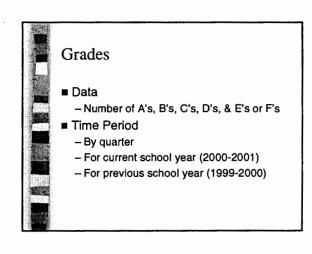


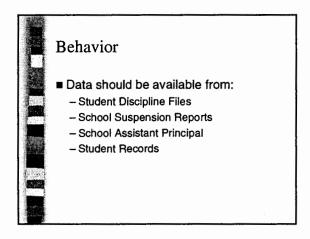


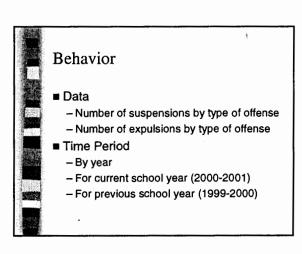


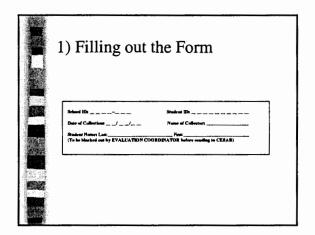


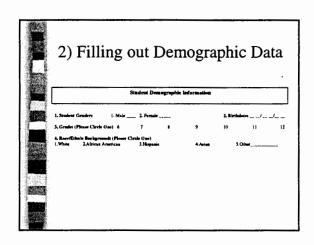




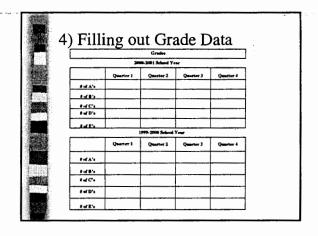




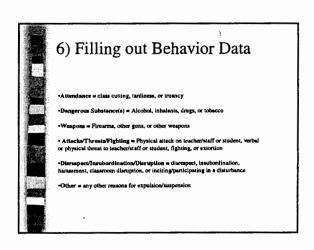




3) Filli	ng out	Atten	dance	Data
		Attendance		
	29	00-2001 School Year		
	Quarter 1	Quarter 2	Quarter 3	Quarter
# Days Abanes				
9 Days Late				
		1999-2000 School Y-	127	
	Quarter I	Quester 2	Quarter 3	Quarter 6
# Duys Absent				
# Days Late				



L	Sela-ter .		
	2990-2091	1979-2000	
# of Suspensions			
for Attendance			
for Dangerous Substance(s)			
for Wespons			
for Attacks/Threats/Fighting			
for Disrespect/Insubordination/Disruption			
for Other			
for Other			
# of Expulsions			
for Attandance			
for Dasgerous Substance(s)			
for Wespons			
for Wespons for Attacks/Thresta/Fighting		<del> </del>	





# 7) Completing the Form

- Make sure all boxes contain information. Do not leave boxes blank. Please use zeros or slashes for a zero.
- CESAR staff will call all collectors who submit forms with blanks for clarification.



### 8) If data is unavailable

- If you are unable to locate data on a specific student, speak with school administrators or Glenda.
- If data remains unavailable, please call Dana at CESAR and fill out the final section of the form.

If any data was unavailable, Please explain below:





### When the form is complete

- Double check that the form is complete.
- Fill in all boxes with something.
- Black out student's name on top of form.



### Form Testing

- One packet of materials for each school
- In the next five days (by June 12<sup>th</sup>), complete the two sample forms in your packet
- When complete, fax to CESAR, 301-403-8342
- Dana will call you to discuss the forms
- After this discussion, final forms will be sent FedEx for you to begin the data collection
- Data collection must be complete by July 15.
- You will be paid the same perform rate for completing the sample forms as for the final data collection



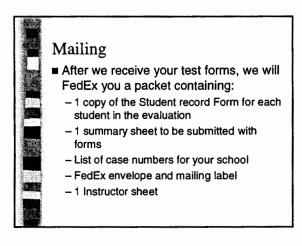
## Reminders

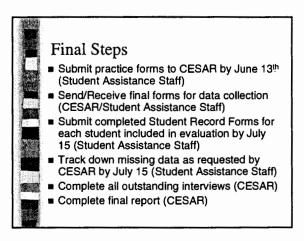
- Data must be collected before 8th grade records are transferred to the High Schools
- Please complete Summary Sheet
- All forms are due to CESAR on or before July 15th
- If you have any questions about where to find data in your school, please contact Glenda
- If you have any questions about the form, please contact Dana at CESAR

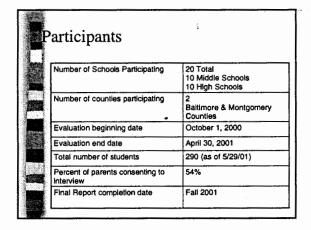


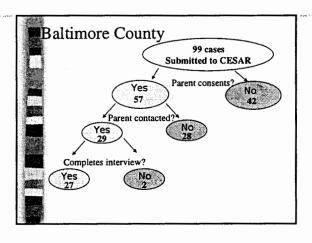
# Packets - 1 per school

- List of case numbers for your school
- 2 Instruction sheets
- 2 sample copies of the Student record form
- 1 Summary sheet to be submitted with forms in July
- List of information CESAR is missing for your school & corresponding form



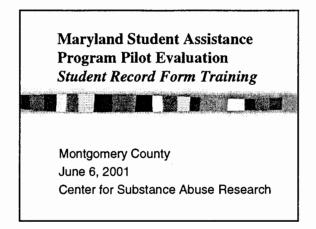


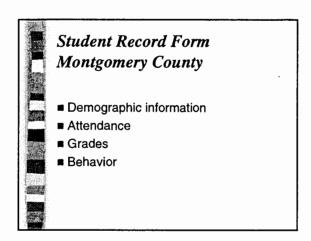


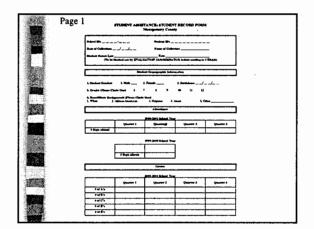


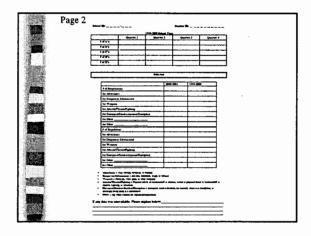
	Baltimore N=99	Montgomery N=191
Gender	62% male	65% male
Age	Range:10-17 Mean=14.08	Range:11-18 Mean=15.11
Grade	6 <sup>th</sup> = 3% 7 <sup>th</sup> = 14% 8 <sup>th</sup> = 36% 9 <sup>th</sup> = 20% 10 <sup>th</sup> = 12% 11 <sup>th</sup> = 12% 12 <sup>th</sup> = 3%	6th = 3% 7th = 9% 8th = 30% 9th = 12% 10th = 10% 11th = 19% 12th = 18%
Reason for referral	Attendance=29% Grades= 48% Behavior=62%	Attendance=38% Grades= 48% Behavior=56%

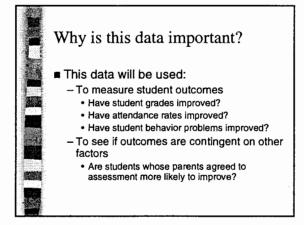
Interviews		
	Baltimore N=27	Montgomery N= 40
Aware of problems?	Yes =59%	Yes =63%
Intervention necessary?	Yes =78%	Yes =74%
Assessment recommended?	Yes =74%	Yes =78%
Meet with Assessor?	Yes =29%	Yes =69%

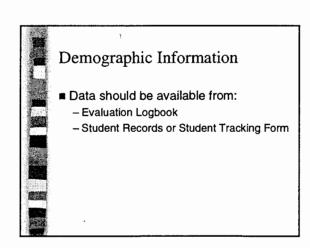


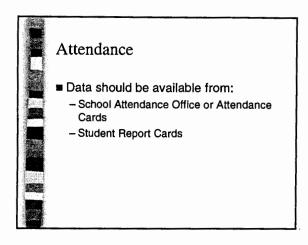


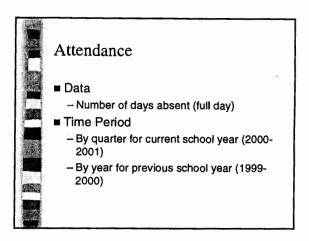


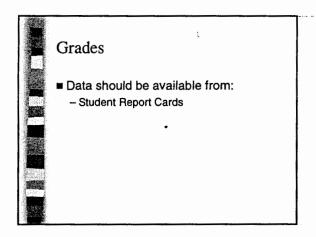


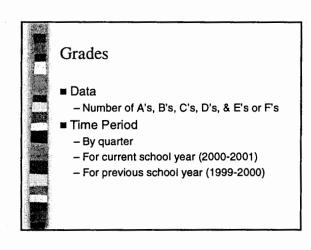


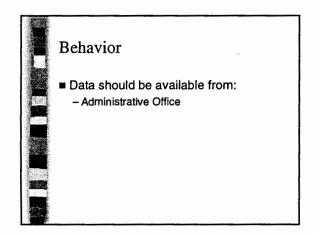


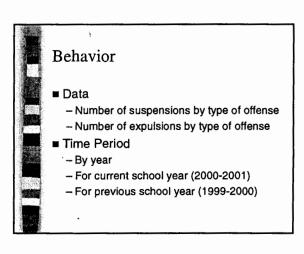


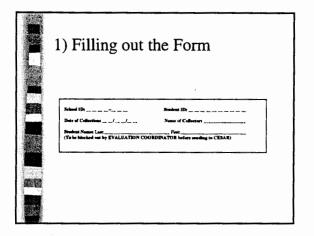


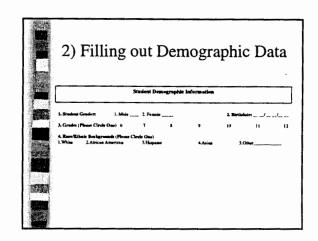


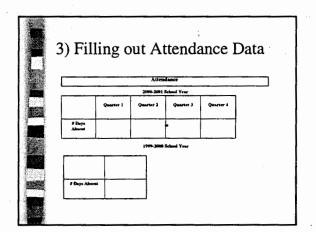


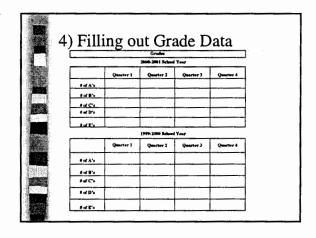


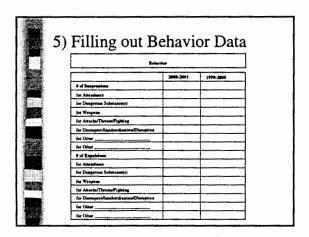


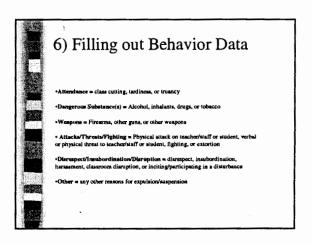


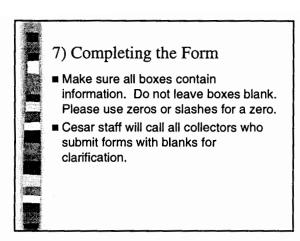


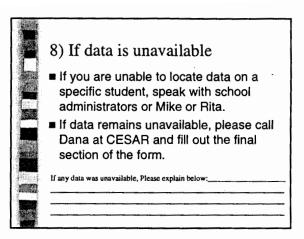




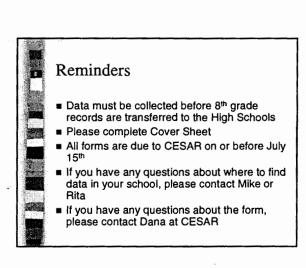


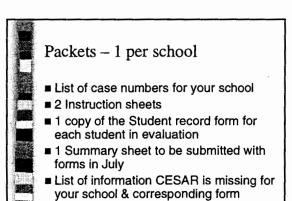


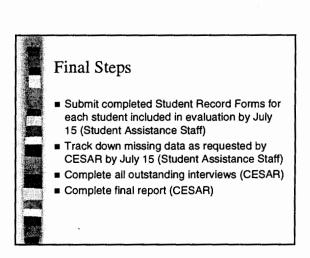




# When the form is complete Double check the form is complete. Fill in all boxes with something. Black out student's name on top of form. Fax or FedEx forms to Dana at CESAR







	Preliminary l Interviews Student Met with Asse		from
		Baltimore N=8	Montgomery N= 24
	Treatment Recommended?	Yes=57%	Yes=58%
<b>1</b>	Agree with Assessor?	Yes=100%	Yes=91%
4 1000	Begun Treatment?	Yes=38%	Yes=30%
	Planning to Pursue?	Yes=50%	Yes=35%
	Includes interviews	completed by 5	5/29/01

	inary Resu	iics ii oiii
Intervi	iews	
Student did	not Meet with Ass	essor
	Baltimore	Montgomer
	N=16	N= 11
Why Not?	Not	Not
•	Necessary=25%	Necessary=27%
	Schedule Conflict=19%	Schedule Conflict=27
Pursue	Yes= 13%	Yes=22%
Further?	Planning To≃44%	Planning To=22%
	No= 44%	No=56%