

RESEARCH

TO

PRACTICE



With the advice of program staff and leaders in the field, CWLA's Research to Practice (R2P) Initiative identifies well-researched, effective methods and practices in public and private agencies—both CWLA member and nonmember agencies—that affect the lives of children, youth, families, and communities in a positive way.

Agency staff, an outside individual or group, or a university may have conducted the qualitative or quantitative research or evaluation component. R2P's goal is to support and promote the implementation of well-researched, evaluated methods. (See the sidebar at right on levels of rigor.)

CWLA disseminates information about these programs and practices, as well as strategies for implementation or replication, to its member agencies and the field through a variety of media, workshops, consultation, and development services.

Topics the R2P initiative is initially exploring include youth development and mentoring, such as the programs described here; family reunification; workforce issues; behavioral health; brain research and early childhood development; and juvenile justice.

One of the first areas R2P is examining is Positive Youth Development (PYD). PYD programs have been created for adolescents in varied settings, as in Across Ages, and for older teens and young adults who are in or aging out of residential treatment centers, as in Vista Del Mar's Health and Wellness Project, or the Work Appreciation for Youth Program highlighted in the March 2002 issue of *Children's Voice*.

Across Ages: Intergenerational Mentoring for At-Risk Youth



Commendable Practice

Across Ages is a drug prevention program for elementary and middle school students in inner-city Philadelphia neighborhoods. Established by the Temple University Center for Intergenerational Learning (CIL), the program is for children and youth at high risk for substance abuse, leaving school, and antisocial behavior.

Across Ages has four components: mentoring, a 26-week PYD lifeskills curriculum, community service, and family activities. The PYD curriculum is enhanced with six sessions of the Smart Kids, Smart Choices program to promote positive ways to deal with stress and to aid decisionmaking.

The program's greatest strength is pairing mentors, age 55 and older, with one or two student participants. Since it began in 1991, Across Ages has served some 800 children ages 9–13. Mentors have to make a one-year commitment of at least four hours per week, including a minimum two hours per week with each child, participation in monthly family programs, and ongoing inservice training. Some mentors are involved for 10 hours a week or more. Few mentors terminate after the formal one-year program, and 75% have continued to work with new kids each year for five years. Most mentors voluntarily continue with the child they are mentoring for a second year, and many have

continued their relationships for three or four years.

The kids and their families view their mentors as grandparent figures. Mentors share their life experiences, teach skills like cooking and using public transportation, visit classes, and assist with school work and projects. Mentors and youngsters also share various activities, teaching each other their favorite music and dances; attending sporting events or movies; roller skating; scouting; visiting historic sites, libraries, the zoo, or museums; and attending antidrug programs. Activities may be one-on-one, with parental permission, or in small groups with other mentors and young people.

The community service component benefits others in the neighborhood and helps the children develop self-value. In Philadelphia, for example, the program has links with local nursing homes. To prepare for their visits, kids and mentors discuss ageism and perceptions about the limitations of elderly people. During their visits to the nursing homes, the students are encouraged to ask residents, "What were you like at my age?" and to develop oral histories of the people they visit.

Across Ages stresses communication with parents and other family members. Monthly family activities, such as picnics, talent shows, sporting events, or birthday parties, involve all family members, and the program provides transportation, lunch, and, when necessary, tickets.

Communication with and the support of the host agency are also important. Across Ages staff and mentors work closely with social workers and teachers. School personnel in Philadel-

phia note that mentors' school visits even benefit students not in the program.

Evaluation

To study the specific effects of mentoring, CIL researchers used a three-group evaluation design: Group 1 received all program components; Group 2 received all program components except mentoring; and Group 3, the control group, was not enrolled in the program.

CIL conducted randomized pretest-posttest evaluations of 729 sixth graders from 1991 to 1994 as they entered, and again as they exited, the program. Children in Group 1 had better scores on several measures of attitude and well-being than did their peers in Groups 2 and 3. Scores for the mentored group

were considerably better in measures of attitudes toward school, older persons, and community service. In addition, measures of well-being and knowledge about how to react to situations involving drug use were significantly greater among the mentored children, compared with children not enrolled in Across Ages.

Children participating in the program also missed significantly fewer days of school (an average 15.4 days absent per year for those working with mentors), compared with those receiving only the lifeskills and community service components (average 19.9 days absent) and those not enrolled in the program (average 21.8 days absent). Youth who were most involved with their mentors tended to have the best attendance.

To further explore the effects of mentoring on children's scores on 11 outcome variables, Group 1 participants were separated into three groups based on the level of mentoring they received. Children who received the highest level of mentoring scored significantly higher than did children in the other two groups in their attitudes toward school and the future, attitudes toward older people, reactions to situations involving drug use, and knowledge about substance abuse. And although the differences were not statistically significant, these children also performed better on the other seven measures, including frequency of substance abuse, problem-solving, community service, reactions to

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Research to Practice Levels of Research Rigor

Each program or practice included in the R2P initiative has been identified as effective, with successes supported by a research component. R2P has developed four categories to describe the level of empirical support available. All programs and practices exist within an organizational context, with many factors that may influence outcomes. For further information, visit R2P's website at www.cwla.org/programs/r2p, or contact the R2P team by e-mail at r2p@cwla.org

Exemplary Practice



Research in this category has the following characteristics: a randomized study, a control group, posttests or pre- and posttests, effects sustained for at least one year, and multiple replications.

Commendable Practice



Research in this category has most of the following characteristics: a randomized or quasi-experimental study, a control or comparison group, posttests or pre- and posttests, follow-up, and replication.

Emerging Practice



Research in this category has most of the following characteristics: a quasi-experimental study, a correlational or ex post facto study, posttest only, single group pre- and posttest, and a comparison group.

Innovative Practice



Research in this category has most of the following characteristics: a case study, descriptive statistics only, and treatment group only.

stress and anxiety, self-perception, knowledge about older people, and the RAND well-being scale.

Across Ages is being replicated at 42 sites in 21 states, both in schools and in afterschool sites such as community centers. According to a cross-site study by the federal Center for Substance Abuse Prevention (CSAP), follow-up data demonstrate continuous long-lasting effects. CIL staff have developed manuals, handbooks, and videos addressing key aspects of implementing the program, including specific challenges in replication.

Across Ages is a model program of CSAP, which makes funds available for programs through state incentive grants. Funds for replication are also available through the Communities That Care juvenile delinquency prevention program, the U.S. Department of Education's Safe and Drug Free Schools Program, and various state and local initiatives.

Consultation on replicating Across Ages is available through the collaborative efforts of R2P and CIL. For more information about Across Ages, visit the CIL website at www.temple.edu/cil/Acrossageshome.htm, or e-mail r2p@cwla.org.

Vista Del Mar Health and Wellness Project



Emerging Practice

Vista Del Mar provides mental and behavioral health services to children and families in the Los Angeles area. In 1999, the California Wellness Foundation provided funds to introduce a health and wellness component into Vista Del Mar's transitional living program.

The new component focuses on nutrition, exercise, confidence building, emotional wellness, and lifeskills and is open to all of the approximately 120 youth in the agency's residential treatment centers, as well as the 25 or so youth in day treatment who attend

school on campus. Youth volunteer to participate in the program. All youth age 14 and older, presently about 80 youngsters, are enrolled in the lifeskills and independent living curriculum.

The target population is youth referred to Vista Del Mar by the Los Angeles County Departments of Mental Health, Probation, and Child and Family Services. These youth are unable to function in other therapeutic settings or foster care. Many have had multiple foster care placements or placements in psychiatric facilities because of depression or conduct, bipolar, or schizoaffective disorders.

The health and wellness component has three goals:

- provide youth with the information needed to become happy, productive adults;
- prepare them for employment and transitional living; and
- provide them with counseling that specifically addresses their needs as they transition from residential care into the community.

The Health and Wellness Project is delivered through a series of classes that include experiential learning exercises. Components are coordinated so instructors can reinforce content in other classes as they teach in their own subjects.

As they transition to independence, alumni may apply for a scholarship program that offers financial assistance for education or training. The agency also maintains a four-bed transitional living house off campus for those youth who have no families or other resources to assist with their move to independence.

Evaluation

Vista Del Mar has collected data for the first two years (1999–2001) of the health and wellness component. Because the average stay in residential treatment is one year, the data largely represent two groups in the program. Pretest data were available for 84 participants; because of turnover in residents, posttest data were available for only 54 participants. This

translates into a completion rate of about 60%. More than half the youths were male; ages ranged from 12 to 19.

The youth improved significantly in 10 areas:

- money management and consumer awareness;
- health and food management;
- personal appearance and hygiene;
- housing and housekeeping;
- transportation and community resources;
- educational planning;
- job seeking and job maintenance;
- emergency and safety (for example, knowledge of first aid, CPR, and emergency numbers);
- interpersonal skills; and
- legal issues (such as understanding the rights of minors versus adults, registering to vote, contracts, credit cards, taxes, and rights if arrested).

Because of the importance of specific life skills, youth who do not improve significantly in money management, housing, and job skills receive additional support as they transition out of Vista Del Mar.

Vista Del Mar also administered the Child & Adolescent Functional Assessment Scale (CAFAS), a nationally recognized standardized test, at intake and discharge. Youth participating in the Health and Wellness Project showed marked improvement on the CAFAS outcome measures of behavior toward others, mood/self-harm, substance abuse, and thinking.

Although the original grant has ended, Vista Del Mar continues to administer the pretest and CAFAS at intake, and attempts to contact alumni for follow-up assessments six months and one year after students complete the program. The agency plans to use the additional data to further its research and demonstrate the continued success of its transitional living program and the Health and Wellness Project.

More information about Vista Del Mar is available online at www.vistadelmar.org/vdmcf.html, or e-mail r2p@cwla.org.