THE JOURNAL OF AT-RISK ISSUES

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Specifications for Manuscript Submission

Focus

Manuscripts should be original works not previously published nor concurrently submitted for publication to other journals. Manuscripts should be written clearly and concisely for a diverse audience, especially educational professionals in K-12 and higher education. Topics appropriate for *The Journal of At-Risk Issues* include, but are not limited to, research and practice, dropout prevention strategies, school restructuring, social and cultural reform, family issues, tracking, youth in at-risk situations, literacy, school violence, alternative education, cooperative learning, learning styles, community involvement in education, and dropout recovery.

Research reports describe original studies that have applied applications. Group designs, single-subject designs, qualitative methods, mixed methods design, and other appropriate strategies are welcome. Review articles provide qualitative and/or quantitative syntheses of published and unpublished research and other information that yields important perspectives about at-risk populations. Such articles should stress applied implications.

Format

Manuscripts should follow the guidelines of the Publication Manual of the American Psychological Association (6th ed.). Manuscripts should not exceed 25 typed, double-spaced, consecutively numbered pages, including all cited references and illustrative materials. Submitted manuscripts that do not follow APA referencing will be returned to the author without editorial review. Tables should be typed in APA format. Placement of any illustrative materials (tables, charts, figures, graphs, etc.) should be clearly indicated within the main document text. All such illustrative materials should be included in the submitted document, following the reference section. Charts, figures, graphs, etc. should also be sent as separate, clearly labeled jpeg or pdf documents, at least 300 dpi resolution.

Submission

Submit electronically in Microsoft Word, including an abstract, and send to the editor at greg.hickman@dropoutprevention.org for editorial review. Manuscripts should also include a cover page with the following information: the full manuscript title; the author's full name, title, department, institution or professional affiliation, return mailing address, email address, and telephone number; and the full names of coauthors with their titles, departments, institution or professional affiliations, mailing addresses, and email addresses. Do not include any identifying information in the text pages. All appropriate manuscripts will be submitted to a blind review by three reviewers. Manuscripts may be submitted at any time for review. If accepted, authors will be notified of publication. There is no publication fee.

Book Reviews

Authors are encouraged to submit appropriate book reviews for publication consideration. Please include the following: an objective review of no more than five, double-spaced pages; full name of the book and author(s); and publisher including city, state, date of publication, ISBN number, and cost.

Submit Manuscripts to

Dr. Gregory Hickman, Editor,
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The Perceived Impact of Educational Management Organization Mentors Among Former High School Dropouts Who Subsequently Graduated High School

Greg Hickman and Shannon Anderson

Abstract: *The high school dropout problem has been the focus of educational leaders and researchers for several decades. Despite efforts, students continue to drop out of high school. In an effort to prevent at-risk youth from dropping out of school, educators have paired mentors with youth in hopes of increasing graduation rates. These efforts have produced mixed results at best. Given such, Educational Management Organizations (EMOs) have surfaced in recent years to provide educational support to help students who once dropped out to graduate high school. A major component of EMOs is pairing employed mentors with students. The purpose of this qualitative case study was to gain an understanding of how mentors employed by EMOs helped former high school dropouts graduate high school. Using survey sampling, 34 participants responded to open-ended questions regarding their experiences with their mentors. The sample included 27 females and 7 males ages 18-24 of Hispanic and Caucasian ethnic backgrounds. The open-ended questions were analyzed using thematic analysis. The resulting themes were (a) communication, b) encouragement, (c) motivation, (d) understanding, and (e) caring. Findings from this study may help inform educators how to improve communications with youth at risk for dropping out of school.*

To say that educational, business, and political leaders have focused efforts toward research on high school dropouts would be an understatement, given the profusion of historical and current research available (Alexander, Entwisle, & Horsey, 1997; Doll, Eslami, & Walters, 2013; Jimerson, Egeland, Sroufe, & Carlson, 2000; Mensch & Kandel, 1998; Rumberger & Lim, 2008; Valkov, 2018; Vallerand, Portier, & Guay, 1997). Indeed, educational leaders have established the National Center of Education Statistics (NCES; 2004); business leaders have developed numerous local, regional, and national initiatives and policies; and political leaders developed the landmark macroinitiative No Child Left Behind (NCLB; Markowitz, 2018). All of these have been aimed at promoting, conducting, and disseminating research on high school dropouts (Doll et al., 2013; Hussar & Bailey, 2013, 2017; Markowitz, 2018; NCES, 2004; NCLB, 2002; Snyder, de Brey, & Dillow, 2016).

Researchers have continued to acknowledge the "usual suspects" regarding high school dropouts (Kim, Joo, & Lee, 2018; Valkov, 2018). That is, dropouts tend to have experienced sociological factors such as criminogenic neighborhoods and low socioeconomic status (Archambault, Janosz, Dupere, Brault, & Mc Andrew, 2017; Barth, Cebula, & Shen, 2016), familial factors such as parenting styles and parental involvement (Balli, 1996; Fan & Williams, 2010; Gonzalez-DeHass, Willems, & Doan Holbein, 2005), and educational factors such as the quality of schools and teachers (Doll et al., 2013) that render them more likely to drop out of high school (Barth et al., 2016; Doll et al., 2013). As a result, educational, business, and political leaders have established a myriad of initiatives, strategies, interventions, and policies aimed at reducing school dropout rates and improving graduation rates (Agnus & Hughes, 2017; Heers, Van Klaveren, Groot, & Van den Brink, 2014; Iachini, Rogelberg, Terry, & Lutz, 2016; Oreopoulos, Brown, & Lavecchia, 2017).

Despite the many initiatives, strategies, interventions, and policies established by stakeholders in education, business, and politics, the well-documented high school dropout problem in the United States persists (Doll et al., 2013; Temple, Reynolds, & Miedel, 2000). As noted by Hickman and Heinrich (2011), perhaps this inability to reduce the high school dropout rate is based on our current level of understanding of high school dropouts. Hickman and Heinrich further note that waiting until high school to establish initiatives, interventions, strategies, and policies may be too late, as some future high school dropouts come to kindergarten already academically behind those students who eventually will graduate. Moreover, dropouts continue down this developmental pathway throughout their K-12 trajectory; they continue to fall further behind academically than those students who eventually graduate (Oreopoulos et al., 2017; Rumberger & Lim, 2008; Vitaro, Brendgen, Larose, & Trembaly, 2005).

The impact of dropping out of high school has been well documented in terms of the impact on the U.S. national debt and unemployment rates (Bridgeland, DiIulio, & Morison, 2006; Carlson, 2014). Researchers have also noted that high school dropouts impact their state economies, as many business leaders are unwilling to create companies in and/or move companies to states that have a negative educational reputation (Amos, 2008). As noted by Amos (2008), high dropout rates and low graduation rates are primary factors in determining a state's educational reputation, especially if business owners have children. Finally, researchers have noted the personal impact of dropping out of school, such as high divorce rates (NCES, 1996), unemployment and low-end jobs (Carlson, 2014), lower lifetime income (Alexander et al., 1997), low self-esteem and self-efficacy (Mensch & Kandel, 1998), and higher suicidal ideation (Fergusson, McLeod, & Horwood, 2015; Kosidou et al., 2014), to name a few.

Given that efforts to curtail the rate of high school dropout continue, business and educational leaders have now combined resources to understand and address this historical and current problem. One solution generated by this business-education partnership has been the creation of educational management organizations (EMOs; Bulkley, 2005; Gulosino & Miron, 2017; Miron, Urschel, Mathis, & Tornquist, 2010; Miron, Urschel, Yat Aguilar, & Dailey, 2012). EMOs are organizations that manage the educational platform, curricula, teachers, mentors, and operations within a school or across several schools and, in return, receive funding from the school. This funding is often derived from the partner schools' state funding (Ertas & Roch, 2014; Miron et al., 2010; Molnar, Miron, & Urschel, 2009). EMOs can be structured as both nonprofit and for-profit; most frequently, they tend to be for-profit organizations owned by business-minded stakeholders who then hire employees with professional experience in the education field (Bulkley, 2002). The rationale behind the EMO model is that teachers, mentors, researchers, and other employees are incentivized to produce measurable change, as they are paid employees of a private business versus a state-funded school or department of education. Typically, these EMOs are able to offer higher salaries, procure higher job satisfaction, lower turnover, and decrease perceived bureaucracy. Conversely, employees of state-funded schools report lower salaries, lower job satisfaction, higher turnover rates, and more bureaucracy (Bulkley, 2002; Ertas & Roch, 2014; Molnar et al., 2009).

Although there are many interventions employed by educators to address the high school dropout problem (too many to name for the scope of this study), one of the more commonly used initiatives in public state-funded, private, and EMO schools is the use of education mentors (Agnus & Hughes, 2017; Black & Daly, 2015; Miron et al., 2010). The mentors' main activities include working one-on-one with at-risk students (mentees) to provide a personal connection through which they assist students with their academic, sociological, and familial problems (Black & Daly, 2015; Sutherland & Snyder, 2007). Researchers have documented the significant impact mentors have on various educational outcomes (Ashwin, 2005; Cosgrove, 2011; Elton, 2001). However, such outcomes have come under scrutiny based on evaluative methods and the fact that youth are still dropping out of school at alarming rates (Barth et al., 2016; Jepsen, Mueser, & Troske, 2017; Jimerson et al., 2000).

Although the aforementioned research illuminates important findings regarding high school dropouts, we have found no research that has examined the perceived impact of EMO-employed mentors among former high school dropouts who graduated. Given such, further research is warranted to explore these graduates'/mentees' perceived impact of their mentors on their successful high school graduation process.

The purpose of this qualitative, single-case study is to understand the perceived impact of EMO-employed mentors on former high school dropouts who graduated

from high school. More specifically, the aim of this study is to understand what aspects of the mentor-mentee relationship former dropouts who are now graduates found helpful. The research question to be addressed in this study is, what is the perceived impact of mentors employed by educational management organizations in helping former high school dropouts to graduate high school?

Method

A qualitative, single-case study design was used to understand the perceived impact that mentors, who are employed by educational management organizations, have on helping former high school dropouts graduate high school. More specifically, the aim of this study was to understand what elements of these mentor-mentee relationships helped students who once dropped out of high school re-enroll and, subsequently, graduate from high school. The research question postulated was, what is the perceived impact of mentors employed by educational management organizations in helping former high school dropouts to graduate high school?

As an EMO, Grad Solutions solicits high school dropouts to enroll in their program. Upon enrollment, Grad Solutions places the student in a partnering high school and provides educational management to both the student and partnering school by providing the online educational platform, curriculum, teachers, texts, resources, and a mentor. Mentors are full-time employees of Grad Solutions who have earned a minimum of a bachelor's degree in education, business, or various social sciences who work one-on-one with students to help them obtain their high school diplomas. Although mentors serve a variety of roles (i.e., big brother/sister, teacher, tutor, life coach, friend), the perceived role such mentors have in helping these former high school dropouts to graduate high school, from the students' perspective, is unknown.

To address the research question, all 460 graduates from the graduating classes of 2017 and 2018 from Grad Solutions, an EMO located in Mesa, Arizona, were solicited, asked to sign a consent form, and asked to complete a qualitative open-ended survey via SurveyMonkey to share their perspectives on the experiences they had with their mentors during their enrollment with Grad Solutions. The link to the open-ended survey was emailed to all 460 graduates. Reminder emails with the link to the survey were sent once a week for four weeks after the initial email. Confidentiality was maintained during the study through blind copying email addresses so potential participants were unable to view other email addresses. Responses via SurveyMonkey required no unique identifiers other than gender, age, and ethnicity, thus maintaining partial anonymity of responses. Survey responses were printed out per participant and read repeatedly to identify keywords and phrases. Using thematic analysis, significant keywords and themes were noted and compared once all responses were reviewed. Saturation was rapidly achieved, as

graduates' responses consistently reflected similar themes. See Appendix for a complete list of open-ended survey questions.

Results

A qualitative, single-case study design was used to understand the perceived impact mentors, who are employed by for-profit educational management organizations, have on helping former high school dropouts graduate from high school. The research question postulated was, what is the perceived impact of mentors employed by educational management organizations in helping former high school dropouts to graduate high school?

Of the 460 graduates solicited, 24 emails bounced back as nondeliverable. Of the 436 emails that did not bounce back, 50 graduates responded. Of the 50 who responded, five did not sign the consent form and 11 signed the consent form but did not attempt the survey. Hence, our data sample was 34 graduate mentees. Because it was not possible to determine the number of graduates who actually received the solicitation emails (i.e., rarely used email addresses, etc.), an accurate response rate cannot be determined. The graduate mentees who did respond were between the ages of 18-24, primarily female, and of Caucasian and Hispanic ethnic backgrounds. See Table 1 below for complete summary.

Table 1

Demographic Variables

Variable	n	Percent
Age		
18-24	34	100.00
Gender		
Male	7	20.59
Female	27	79.41
Ethnicity		
Hispanic/Latino	17	50.00
White	17	50.00

Based on responses from the participants, five themes emerged via participants' consistent use of specific keywords and phrases when sharing their mentee experiences. The five themes identified were communication, encouragement, motivation, understanding, and caring.

Communication

The most common theme discussed by participants when describing their experiences with their mentors was communication. Mentees noted that their mentors communicated on a regular basis via several modalities, including texting, phone calls, Skype, and regularly scheduled synchronous meetings. Following are examples of mentees' responses.

I can't stress the down-to-earth communication enough and checking on my actual well-being.

If he was going to be out of town, he would give us his number and email and he didn't just leave like nothing and when he got back, he would respond right away.

If I wouldn't log in after 2 or 3 days, I would get a call from her and she would give me reasons why she really wanted me to continue and succeed. She always communicated with me and always made sure I was doing okay on my lessons.

...constantly called me to make sure I was doing well...

While communication frequency and modality emerged as a central theme in nearly all responses, it was not just the sheer frequency of communication that was singularly important to mentees. Rather, the mentees noted that the content and nature of the communication of encouragement, motivation, understanding, and caring were germane experiences in assisting them to graduate high school.

Encouragement

A clear and consistent keyword that emerged was encouragement. Mentees noted that mentors provided positive communications, including encouraging them not to give up, that they can and will succeed, that others have competed degrees, and that mentors believed their mentees would graduate.

My mentor went pretty far to help me finish my diploma. There was a time where he actually stayed up till 2 in the morning with me when I was struggling and feeling frustrated with a test I took because I kept failing was beginning to break down and cry.

He texted me encouraging words, and even told me a story about himself to distract the sadness.

I wouldn't have done it without her. I needed the encouragement to finish. I believed I wasn't capable of graduating because I had already tried twice in the past and failed.

She walked me through every moment where I felt like I couldn't keep going and gave me confidence to continue my education in college.

Understood my trouble talking on the phone and reached in other ways. Encouraged me and also constantly made me feel like I was doing everything right and always rooted for me.

Didn't let me give up. Gave me numerous amounts of advice and always encouraged me to doing more!

95% was all my mentor giving me my goals, staying positive, congratulating me on my accomplishments and pushing me forward!

Motivation

Mentees noted that mentors were positive role models who helped them see the vision and plan for success, made them feel they could succeed by staying positive with them, pushed them to graduate, and had faith in their success by celebrating short-term goals and providing a vison and belief in long-term goals.

My mentor pushed me and told me I could do it and he was the most amazing person I could ever ask for.

She motivated me to keep going and not give up on my work.

If I wouldn't log in after 2 or 3 days I would get a call from her and she would give me reasons why she really wanted me to continue and succeed.

She was like 80 percent of my finishing my diploma because I was being lazy and didn't really want to do any work, but she still had hope for me and would call me to get to my work and remind me of my goal and encourage me.

Constantly called me to make sure I was doing well and would give me pep talks when I felt like giving up.

She pushed me to be the best me I could be.

Understanding

Mentees noted that mentors seemed to understand their situation and the difficulties in balancing life, work, family, and school. Mentors seemed to understand that such difficulties were normal and part of the process of completing high school.

My mentor talked to me as if we've known each other forever. So she really made me feel comfortable with her and it helped me open up a lot more when it came to my problems at school.

Helped me understand the course and choices I had. Helped me understand all the time how close I am to graduation.

She pushed me, supported me and listened to what was going on in my life. Little text messages from her telling me she was keeping an eye out for me did wonders.

My mentor is the reason I graduated, very positive, very supportive.
Was never judgmental, never too hard, and very understanding.

Caring

Mentees noted that mentors appeared to genuinely care about their success; it was obvious to them that the mentors cared whether their mentees graduated. Participants shared that mentors appeared to go out of their way to communicate and to remain positive, sympathetic, and encouraging at all times. It was apparent that mentees were not just numbers to mentors, but people for whom they cared.

I can't stress the down-to-earth communication enough and checking on my actual well-being rather than just why haven't you done work.

Well he helped me find a college just recently and he would always make sure I had everything I needed to graduate or finish a certain class.

My mentor asked if I needed any help or what I didn't understand. They always checked up on me.

He actually cared about me graduating and always kept me in check when I would almost not make the deadline or when I needed extra help.

My mentor genuinely cared about my progress. It's actually great to know you have someone who actually cares if you succeed.

Kept me accountable, constantly reminded me of what I had to do and that really showed me that she cared and taught me to be more conscious of my task that I have to complete.

Discussion

Our purpose of this study was to understand the perceived impact that mentors, employed by EMOs, had on students who had once dropped out of high school graduating high school. In other words, from students' perspectives, how did their mentors help them overcome having dropped out of high school and, subsequently, graduate when they were unable to graduate before enrollment in Grad Solutions? As we discovered, the themes of communication, encouragement, motivation, understanding, and caring were instrumental in helping students overcome dropping out of high school and subsequently graduating.

Although these five themes were clearly common in the participants' responses, caution should be utilized as there are several limitations with qualitative case study research. First, the results are not generalizable to the larger population of high school dropouts. However, our goal was not to generalize to the population of dropouts, but to understand students' perspectives of how mentors hired by EMOs were fundamental in helping former dropouts graduate high school. Second, we used open-ended survey questions versus student interviews. Interviewing the students would have allowed us to gain a richer and deeper understanding and explanation as to how these identified themes operated in helping them

graduate. Finally, but not exhaustive, many of the students' responses contained elements of multiple themes. Not gaining further explanation as to what they meant could have influenced our interpretation of what responses best fit with a particular theme.

Despite such limitations, the findings of our study are encouraging in helping our educational system understand and help at-risk youth in graduating high school. High schools, charter schools, dropout recovery schools, and EMOs have spent numerous hours designing, implementing, and evaluating programs to help at-risk youth graduate school. Such schools often integrate counselors, peer mentors, and volunteer mentors to help at-risk students graduate, often without success or with mixed results at best.

Perhaps the findings of our study may provide a blueprint for educating students at risk for dropping out of high school. More specifically, our study demonstrates the importance of the type of communication needed and, more important, desired by at-risk high school students/former dropouts. However, it was not just the quantity or mechanisms of mentor communication that graduates found relevant to their educational success. It was also how and what these mentors communicated to students. More specifically, it was the constant communication through which mentors provided encouragement, motivation, understanding, and caring that was instrumental in reaching students who once dropped out of high school and in getting them to graduate.

Although communication, encouragement, motivation, understanding, and caring were separate themes or mechanisms by which mentors were successful in assisting at-risk youth to graduate high school, these themes actually were embedded and woven collectively into their responses. That is, students noted not just one or two themes at times, but all five of these themes were often embedded in explaining how mentors helped them graduate. For example, one mentee noted,

> I liked how he communicated and he sent me an inspirational [encouragement] video every week or so because it showed me he cared about me as a person not just a student, he understands we could get discouraged so he sent things to keep us motivated.

This typical response highlights how these common themes might operate together versus operating in a separate and isolated manner.

Perhaps educators and EMOs could build on these common themes and create mentoring programs tailored toward communicating such themes to students who have dropped out and/or are at risk for dropping out of school. In addition, educators and EMOs may want to look for such characteristics from teachers and mentors during the hiring and onboarding process for those charged to educate at-risk youth. Moreover, educators might consider workshops and teacher and/or mentor training grounded in the embeddedness of communicating encouragement, motivation, understanding, and caring. Finally, research that further examines characteristics (i.e., background of mentors, length of employment, mentor success rate of student progress, etc.) of mentors that predict educational progress and graduation could identify mentors who possess the ability to communicate, encourage, motivate, understand, and care for at-risk youth and who inspire such youth who once dropped out of school to graduate.

Conclusion

Why were the mentors employed by Grad Solutions successful in getting students who once dropped out of high school across the graduation finish line? Perhaps the answer to this question is grounded in the blueprint of EMOs, such as Grad Solutions. More specifically, the mentors are employees who are carefully screened and selected through the hiring and onboarding process. As an employee, mentors are incentivized monetarily to perform and meet company objectives, namely getting students to graduate. Indeed, many other educational entities rely on peer mentors and volunteers to work with at-risk students. Although such efforts can be viewed as altruistic, there are no incentives for volunteers to perform to meet the objective of getting students to graduate. Also, mentors from Grad Solutions have the educational training, experience, and background to educate and work with at-risk youth, a very important element of Grad Solutions that puts mentors in a position to benefit student educational success and graduate.

Finally, Grad Solutions mentors carry a student/mentee caseload of 80-125 students, which is much lower than the caseload of school counselors who are charged with assisting students to graduate. For example, school counselors in Arizona, where Grad Solutions is located, have an average caseload of 903 students (American School Counselor Association, 2016), impeding these counselors' ability to provide individual attention to those at risk for dropping out of high school. EMOs, such as Grad Solutions, appear to be a successful and viable option that states should consider in educating students at risk for dropping out of high school as well as former dropouts who returned to complete their degrees.

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Appendix

Interview Questions

The following questions and prompts will be used to guide the focus group conversations:

1. Icebreaker discussion: Let's start by talking a little bit about how you became involved with Grad Solutions and what the experience was like for you. How has earning your diplomas helped you? What are you guys doing now?

2. What types of help or resources were you able to get through Grad Solutions that helped you successfully earn your diploma?

3. Let's talk about the role of the mentors as part of the Grad Solutions process. What was it like to work with a mentor?

4. What was your understanding of how the mentor process was supposed to work?

5. Most of you would have had an initial mentor for the first couple of months, and then switched to a longer-term mentor. What did you understand about the purpose of that process?

6. What were some of the things you liked best about working with a mentor? Liked least?

7. To what extent do you think your mentor helped you to finish your diploma? What specific things did s/he do that you found valuable?

8. What types of things did your mentor do that were maybe not as helpful in the process?

9. Was there anything that you wish that your mentor had done that did not happen? If so, what types of things would you have liked to have experienced?

10. If you were going to help select Grad Solutions mentors whose main role would be to help students successfully earn their diplomas, what characteristics would you look for in those people? What do you think they would specifically need to do to help students most effectively?

11. What else would you like to say about your experiences working with Grad Solutions and with the mentors specifically?

Understanding the Physical Health Status, Health Literacy, and Health-Related Interventions in School-Base Samples of Youth With Learning Disorders and Emotional Disturbance

Jacqueline Huscroft-D'Angelo, Alexandra L. Trout, Kristen Duppong Hurley, and Stacy-Ann A. January

Abstract: School environments provide an opportunity to address health-related topics and ensure students graduate prepared to manage health needs, including populations at risk for poor physical health or low health literacy, such as those with disabilities. Presently, little is known about the physical health status, health literacy, or approaches to address these topics in school environments for youth with high-incidence disabilities. The purpose of this study was to conduct a comprehensive review of the literature from 1994-2014 to understand the physical health status and health literacy of youth with Learning Disabilities (LD) and Emotional Disturbance (ED) as well as identify approaches to address these topics in school environments. A two-phase systematic process was used to examine the literature in each respective topic. This included identifying search parameters, an electronic database search, ancestor search, and coding of relevant articles. The initial search yielded 130 articles. After coding, 11 articles remained. Eight focused on physical health status, two on health literacy, and one on interventions related to health literacy. Although study results are tentative, youth with LD and ED are likely at risk for poor health outcomes and low health literacy. A need exists to develop school-based approaches that will contribute towards improving these outcomes.

As health care reform continues to be a primary topic of debate in the United States, understanding the physical health status and literacy of different populations is becoming increasingly important. One population at increased risk for poor physical health and health literacy is individuals with disabilities (Huscroft-D'Angelo, Trout, Epstein, & Thompson, 2014; Trout, Hoffman, Epstein, Nelson, & Thompson, 2014; Trout, Lambert, Nelson, Epstein, & Thompson, 2014; 2015). Although studies have examined these constructs in persons with disabilities in the general population, less is known about how physical health status and literacy manifest in school-based populations of youth with high-incidence disabilities, such as learning disabilities (LD) and emotional disturbance (ED). This is important as schools are ideal settings to contribute to the achievement of public health goals by providing students key information on health and graduating students who have strong health literacy skills that will help them lead healthier lives (American Association of School Health [AASH], 2016; Centers for Disease Control and Prevention [CDC], 2016). Understanding the physical health status and literacy of students with school-identified disabilities will also contribute to a comprehensive knowledge base for developing school-based interventions aimed at improving overall health literacy in this population.

Research on youth health-related outcomes has received national attention due to the close association between health and school-related outcomes (Cook, Li, & Heinrich, 2015). Professionals from the fields of health care and education agree that health and school functioning are interrelated. A clear association exists between physical health and academic and behavioral functioning areas in which youth with certain school-identified, high-incidence disabilities present increased risk (AASH, 2016; Lepore & Kliewer, 2013; Reuben & Pastor, 2013; Trout et al., 2009). For instance, youth with ED are at increased risk for dropout, substance abuse, arrest, mental health difficulties, familial problems, and unemployment (Bradley, Doolittle, & Bartolotta, 2008; Mayer, Lochman, & Van Acker, 2005; Trout et al., 2009; Wagner, Newman, Cameto, & Levine, 2006). Although not as severe, risks associated with school-identified LD are similar to those risks associated with ED. That is, nearly 33% of students with LD have been retained, 19% drop out of school, 50% face disciplinary actions while at school, and up to 55% have been involved with the criminal justice system (Deschler, 2014). Given that youth with LD and ED indicate risk in keys areas of school and behavioral functioning, they may also be at increased risk for poor physical health. Presently, a comprehensive understanding of specific school-identified disability groups and their overall physical health status is lacking. It is imperative to address this gap, given the relationships among health status, implementing healthy behaviors, future employment, and social stability in adulthood and to advance the national agenda on this topic (Lee, 2008).

Closely related to understanding the physical health status of youth is the health literacy of those navigating health systems, as individuals are asked increasingly to play a critical role in managing their physical health needs (Manganello, 2008). Health literacy is the ability to obtain, process, and understand basic health information and services needed to make sound decisions regarding health (U.S. Department of Health and Human Services [US DHHS], 2000). To demonstrate adequate health literacy one must be able to listen, analyze, and make decisions across various health situations (Haun et al., 2015). This includes understanding medication instructions, providing consent, and being an active

participant during health visits. Limited health literacy is tied to a decreased ability for self-care, avoidable hospital stays, poor health outcomes, medication mismanagement, higher mortality rates, more frequent emergency room visits, and increased medical costs (Baker et al., 2002; Beauchamp et al., 2015; Haun et al., 2015; Peterson et al., 2011; Riegel et al., 2009; von Wagner, Knight, Steptoe, & Wardle, 2007).

Youth with disabilities are at increased risk for poor health literacy due to elevated risk in areas such as academics, behavior, family stability, and co-occurring physical health challenges. In addition to previously mentioned academic outcomes, youth with school-identified disabilities such as LD and ED experience greater rates of depression, anxiety, bullying, and isolation that may further exacerbate health risk and overall well-being (Kinne, Patrick, & Doyle, 2004; Lepore & Kliewer, 2013). This likely contributes to frequent visits to health care providers and more follow-up examinations. Thomas and Atkinson (2011) reported that individuals with LD experience a greater burden of health care needs than the general population. For example, the prevalence of epilepsy for those with LD ranges between 15% and 25% compared with 1% in the general population (Deb, 2000). A relationship between stress and weaker immune functioning, as well as an association between asthma and emotion, stress, or other psychological factors which are likely to affect individuals with LD or ED, is also recognized (Connor, Doerfler, Toscano, Volungis, & Steingard, 2004; Nelson et al., 2011; Segerstrom & Miller, 2004).

One way to improve the proficiency of monitoring health-related issues and navigating the health system is to develop interventions targeting these objectives. Establishing effective health programs in schools can be a cost-effective method towards the improvement of education and health (AASH, 2016; World Health Organization [WHO], 2016). Health programs or interventions may address important health risks among youth and engage the education sector in efforts to change the educational, social, economic, and political conditions that affect risk while simultaneously improving health literacy (WHO, 2016). Despite proposed legislation such as the Healthy Schools Act (2010) and interventions to address targeted health-related issues (primarily obesity), relatively little is known about outcomes from these interventions on these actions. In fact, little is known about the number of programs or interventions that address the health outcomes/literacy in the general population, let alone programs targeting at-risk populations such as those with LD or ED. This fact is concerning, given the poor post secondary outcomes (health, family, behavioral, mental health) of individuals with LD and ED. Although it might be expected that intervention targeting health literacy would lead to improvements in outcomes which include improved physical health, to date, an exhaustive review of the literature has not been conducted. To address these gaps, this study examined the literature to address the following three questions:

1) What is the physical health status of school-aged students with LD and ED?

2) What knowledge do students with LD and ED have regarding health, health management, and wellness?

3) What school-related interventions, programs, or services exist to promote the health literacy of school-aged youth with LD and ED?

Methods

This review consisted of two phases. Phase one included an electronic database search, initial eligibility screening of articles, a secondary document search (e.g., ancestor search), and final eligibility determination of all identified articles. Phase two focused on the coding of multiple variables from each article.
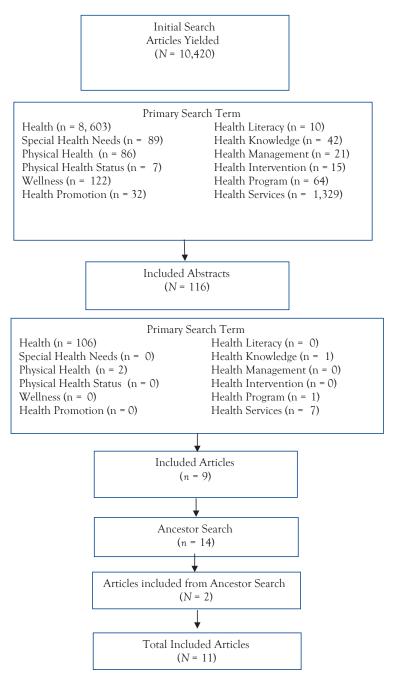
Phase One

Initial search strategies. The first search method included an electronic database search of PsycINFO and MedLine. The following were used as primary search terms: *health, special health needs, physical health, physical health status, health literacy, health knowledge, health management, health intervention, health program, wellness, and services*. The secondary search term included one of the following: *students with disabilities, special education, emotional and behavioral disorders, learning disabilities, ADHD, other health impairment, conduct disorder, disruptive behavior disorder, anxiety disorder, depressive disorder, anxiety disorder, at-risk youth, high incidence disability, oppositional defiant disorder, attention deficit disorder, ED, EBD, behavior disorder, emotional disturbance, emotional disorder*. Double quotes were used around all search terms, and the * is a "wild-card" term that was used to search for suffixes (i.e., al, s) when appropriate (e.g., disabilit*). Search parameters were also set to the following (a) published in a peer-reviewed journal from 1994-2014, (b) included a school-age and/or secondary age population, (c) written in English, and (d) excluded dissertations.

The initial electronic database search resulted in 10,420 articles. Next, two researchers read the title and abstract of each article for further inclusion, using the following initial eligibility criteria: (a) included a high incidence disability population [LD, ED], (b) identified a health-related outcome (e.g., sleep, weight, literacy) or intervention, (c) included a sample of students ages 5-21, and (d) included a recruited population from a school-based setting. After reviewing several titles and abstracts it was determined that an additional inclusion criterion was needed, given the number of articles that included a school-based population who were identified as eligible for special education for either LD or ED, but also had a clinical diagnosis of Attention-Deficit/Hyperactivity Disorder (ADHD). Therefore, a Diagnostic Statistical Manual of Mental Disorders (DSM) diagnosis of ADHD along with an IDEA verification for LD or ED were

eligible, although many of the articles did not specify whether the participants were eligible under LD or ED, but rather globally that they were eligible for IDEA services. Furthermore, some articles also used a DSM diagnosis of learning disorder and thus, it was determined that including this would also be necessary so long as the sample was recruited from a school-based setting. Inter-rater reliability was established among raters for title and abstract inclusion until a criterion of 80% reliability was met. Inter-rater reliability agreements were calculated for 20% of the abstracts and titles and averaged 93% (see below for details on reliability agreement procedures). This initial eligibility screen resulted in 116 articles meeting the criteria for further review (see Figure 1).

Figure 1.
Flow diagram of articles included in review

Initial Search
Articles Yielded
(N = 10,420)

Primary Search Term
Health (n = 8, 603)   Health Literacy (n = 10)
Special Health Needs (n = 89)   Health Knowledge (n = 42)
Physical Health (n = 86)   Health Management (n = 21)
Physical Health Status (n = 7)   Health Intervention (n = 15)
Wellness (n = 122)   Health Program (n = 64)
Health Promotion (n = 32)   Health Services (n = 1,329)

Included Abstracts
(N = 116)

Primary Search Term
Health (n = 106)   Health Literacy (n = 0)
Special Health Needs (n = 0)   Health Knowledge (n = 1)
Physical Health (n = 2)   Health Management (n = 0)
Physical Health Status (n = 0)   Health Intervention (n = 0)
Wellness (n = 0)   Health Program (n = 1)
Health Promotion (n = 0)   Health Services (n = 7)

Included Articles
(n = 9)

Ancestor Search
(n = 14)

Articles included from Ancestor Search
(N = 2)

Total Included Articles
(N = 11)

Phase Two

The next step was to code the articles that met the full-inclusion criteria for the review. Two researchers independently read each article to determine if it satisfied the full-inclusion criteria. After applying these full-inclusion criteria, nine of the original 116 articles remained.

To be certain that all possible articles were included in the review, the reference sections for the nine articles included after final coding were reviewed for additional relevant publications. For all articles that were located through this ancestor search, reference sections were also checked for any additional articles that appeared to meet the established criteria. These secondary search strategies resulted in the identification of 14 potential articles, of which two met the final inclusion criteria, resulting in a total of 11 articles included in the review. The 119 articles that did not meet the inclusion criteria were excluded for the following reasons: age or grade exceeded parameters (30.2%), no health outcomes were reported (20.2%), not an original empirical study (e.g., commentary, meta-analysis, case study; 26.1%), unclear if participants were receiving IDEA services (17.6%), and other (5.9%).

Coding approach. All articles were coded using a systematic set of procedures (Duppong Hurley, Huscroft-D'Angelo, Trout, Griffith, & Epstein, 2014). A total of 21 variables were coded for each article. Six variables provided information about the article (e.g., author, year of publication, journal, etc.), nine variables were related to the study population, three variables were related to the methods portion of the study, and three variables were used for the study's result. Coding was documented on hard copies and then entered into MS Excel (Microsoft, 2010) for data cleaning, inspection, and analyses.

Reliability. Nine (82%) of the articles were double coded and assessed for inter-rater agreement. Inter-rater agreement required two reviewers to independently read and code the articles. The decisions were then compared for each variable on the coding sheet and disagreements were discussed. In the event of an inconsistency, a third reviewer read and coded the article (Duppong Hurley et al., 2014). Inter-rater agreement was 89% across the nine articles.

Results

This review of the literature resulted in the identification of 11 articles containing one study each that examined one of the three research questions. Findings associated with each research question are presented below. Eight articles focused on physical health status, two on health literacy, and one on a health literacy intervention. Table 1 displays results from each article.

Status, Literacy, Interventions Review

Table 1

Included Study Characteristics

Author(s) & Year	Topic Area[a]	Sample Size	Age	Gender	Race and Ethnicity	IDEA or DSM-IV Verification[bc]	Health Outcome	Design/Objective	Summary[d]
Ameri, E., Dehkhoda, M., & Hemayattablab, R. (2012)	PHS	N = 54	Range: 8-12	~	N/A	ADHD	- Calcium levels - Bone mineral density - Physical activity	RCT- 9 month intervention aimed at improving the bone mineral density of children with ADHD	Sample was divided into four groups, no significant differences were pr esent between level of physical activity, calcium levels, or bone mineral density
Beyer, R. (1999)	PHS	N = 112	Range: 8-12	Male-100%	N/A	LD (50%); ADHD (50%)	- Motor proficiency	Descriptive - Compare the motor proficiency of males with ADHD to those with LD	Males with ADHD had significantly poorer motor proficiency performance on five of the motor tasks (bilateral coordination, strength, visual-motor coordination, upper limb speed & dexterity) than males with LD
Chiang, P., Huang, L., Lo, Y., Lee, M., & Wahlqvist, M. (2013)	PHS	N = 2,283	Range: 6-13	~	N/A	ED (14.2%)	- Obesity	Descriptive -Secondary data analysis of national health survey to examine differences in obesity between individuals with and without symptoms of ED	Obesity prevlence was higher among individuals with symptoms ED than those without. Obesity was significantly correlated with symptoms of ED based on the SAED total and subscale scores.
Dryden, E., Desmarais, J., & Arsenault, L. (2014)	1	N = 114	Range: 13-21	Male-58%	Black, non-Hispanic (44%) Hispanic/Latino (28%) White (17.5%) Other (10.5%)	LD (1.8%)	-Advocacy skills related to physical health	Quasi-experimental-Examine the effects of the IMPACT intervention on the advocacy, self -efficacy, safety, and confidence of students with disabilities to those in a wait-list group	Significant positive findings were found for individuals in the IMPACT intervention in areas of self -advocacy knowledge, safety, c onfidence to defend self, and self -efficacy compared to the control group

Table 1 (continued)

Author(s) & Year	Topic Area[a]	Sample Size	Age	Gender	Race and Ethnicity	IDEA or DSM-IV Verification[b,c]	Health Outcome	Design/Objective	Summary[d]
Gruber, R., Sadeh, A., & Raviv, A. (2000)	PHS	N = 103	Range: 6-14	Male- 100%	N/A	ADHD (37%)	- Sleep problems	sleep wake system and patterns of individuals with and without ADHD	sleep duration, and true sleep than those without ADHD but the groups did not differ significantly in their means
Huscroft-D'Angelo, J., Trout, A., Epstein, M., & Thompson, R. (2014)	HL	N = 61	M = 16.98 SD = 1.21	Male- 72%	American Indian/Alaska Native (8.2%) Black, non-Hispanic (27.8%) Hispanic/Latino (13.1%) Multi-racial (9.2%) White (40.9%)	LD (34.5%); ED (19%); OHI (29%)	- General health literacy	Descriptive - investigate the health literacy status of youth receiving special education services in a residential treatment setting	
Hwang, J., Davies, P., Taylor, M., & Gavin, W. (2002)	PHS	N = 64	M = 9.48 SD = 2.14	Male- 83%	Black/non-Hispanic (39%) Hispanic (9%) White (52%)	LD (28%)	- Physical Fitness	Descriptive - Validate an assessment examining the spectrum of school related functional skills in elementary students. To examine differences in the physcial task performance of those with and without LD	There were no significant differences on assessments of physcial tasks or performance between those with LD and those without
Mandell, D., Eleey, C., Cederbaum, J., Noll, E., Hutchinson, M., Jemmott, L., & Blank, M. (2008)	PHS	N = 43, 219	Range: 12-17	Male- 66.5%	Asian (5%) Black, non-Hispanic (67%) Hispanic/Latino (6%) White (13.9%) Other (8%)	ED (2.1%); LD (10.7%)	- Illness/disease	Descriptive - Investigate the relative risk of sexually transmitted infectious disease among a special education population	Individuals classified as ED and no disability were found to have the least risk for STI; Males with LD were at an increased risk for STI diagnosis
Marcotte, A., Thacher, P., Butters, M., Bortz, J. , Acebo, C. , & Carskador, M. (1998)	PHS	N = 165	Range:	Male- 62%	N/A	ADHD (26%) LD (6.7%) ADHD/LD (15.1%)	- Sleep problems	Descriptive - Examine sleep related issues between individuals with ADHD, LD, ADHD/LD and comparison group	Individuals with ADHD and/or LD were more likely to report sleep related problems than the comparison group. This included sleep/breathing patterns and sleepiness
Singh, A., Zemitzsch, A., Ellis, C., Best, A., Singh, N. (1994)	HL	N = 220	M= 13.9 SD = 2.1	Male - 55%	Black, non-Hispanic (49%) White (51%)	ED (100%)	-Knowledge and Attitudes about AIDS	Descriptive - Examine the knowledge and attitudes of students with serious emotional disturbance on the topic of HIV and AIDS; explore differences between a hospital and school based sample	A majority of the sample knew the main modes of HIV transmission, but had major misconceptions about HIV transmission. Gender and ethnicity differences were found with African American females having significantly lower knowledge of transmission
Stein, D., Pat-Horenczyk, R., Blank, S., Dagan, Y., Barak, Y., Gumpel, T. (2002)	PHS	N = 144	Range: 13-16	Male- 100%	European descent (46%) Middle Eastern descent (54%)	ADHD (47%)	- Sleep problems	Descriptive - Examine sleep disturbance between individuals with ADHD taking medication to those with ADHD not taking medication and a control group	A significant difference was found between the three groups with the medicated ADHD group having the most severe sleep disturbance

Note. [a] PHS (Physical Health Status), HL (Health Literacy) [c] I (Health Related Intervention). [b] LD- Learning Disability, ED - Emotional Disturbance, ADHD- Attention Deficit Hyperactivity Disorder. [c] percentages are representative of the sample verified with diagnosis or eligibility category. [d] Summary- when appropriate information was only recorded from pretest data

Physical Health Status

Across the eight articles, sample sizes ranged from 54 to 43,219. However, data specific to those disability categories were extrapolated for this study. In the six articles (75%) that reported gender, students were predominantly male. The majority (88%) reported only participants' age range, and across all articles students ranged from ages 6-17. Race and ethnicity data were available for three (36%) of the articles. Three articles focused on youth with ADHD and IDEA verification of LD or ED, one article focused solely on ED, and one on LD. Three articles included multiple samples. Two focused on two of the disability categories and one focused on all three disability categories.

Physical health outcomes varied across articles. Three focused on sleep problems, three on physical activity or related topics (e.g., motor proficiency), one article focused on obesity, and one article targeted illness/disease. Mixed findings were reported across these studies. That is, six articles reported that youth with identified disabilities were at significantly greater risk for poor physical health outcomes. However, two articles found no difference in health outcomes between groups with and without disabilities, and one indicated mixed results, as one of the populations demonstrated elevated risk for poorer health outcomes whereas the others did not.

Health Literacy

Two articles examined health literacy in individuals with disabilities. Each study reported gender and ethnicity data with sample sizes of 61 and 220. One article focused on a specific area of health-related literacy (i.e., knowledge of HIV/AIDS), whereas the other study included global measure(s) of health literacy. Findings from these studies indicated low levels of health literacy in general, as well as with regard to knowledge of HIV/AIDS.

Health Literacy Interventions

With respect to interventions, programs, or services that promote health literacy in high-incidence populations, only one article met inclusion criteria. This article reported results of an intervention that incorporated an aspect of health literacy into the intervention and outcomes. IMPACT:Ability (Dryden, Desmarais, & Arsenault, 2014) was designed as a 10-session safety and self-advocacy training program for students with cognitive and/or physical disabilities. IMPACT:Ability focuses on increasing participants' knowledge, confidence, and skills to communicate assertively, to protect, and to advocate for themselves in settings which includes health-related settings. Specifically, the program was evaluated using a quasi-experimental design to determine differences between treatment (n = 21) and control (n = 36) conditions. The sample consisted of a small percentage of individuals identified as LD; however, significant findings were reported for the treatment group, as indicated by increased scores on measures of self-advocacy knowledge, safety, confidence to defend self, and self-efficacy for some health-related topics, indicating improvement in areas of health literacy.

Discussion

National health agendas such as Healthy People 2020 (US DHHS, 2010) and core beliefs of school-based health organizations (AASH, 2016) continue to emphasize the importance of addressing physical health and literacy in all students, including vulnerable populations. As such, a clear understanding of the physical health status, health literacy, and available health interventions for students with LD or ED in school-based settings is critical for the development of effective educational supports and long-term transition planning. Children and adolescents with LD or ED are particularly vulnerable as they present with well-documented risk factors that impact long-term health well-being. Using a systematic process, this review sought to better understand the health status and literacy of this vulnerable subsample of youth and to identify existing school-implemented health-related interventions to promote youth health literacy in school settings.

One key finding from this review was that very little research exists regarding the physical health status, health literacy, or school-based health-related interventions in populations of youth with LD or ED. That is, our systematic and broad review of the literature yielded only 11 studies published over the past 20 years that examined at least one of the aforementioned outcomes. Moreover, although most of the scant 11 studies that were identified focused on physical health status, not enough studies exist to draw definitive conclusions. Given the risks (e.g., academic, behavioral, familial) inherent with populations of students with LD or ED (Bradley et al., 2008; Deschler, 2014; Mayer et al., 2005) and their less-than-optimal health outcomes (Blackorby et al., 2002; Wagner et al., 2003; Wagner et al., 2006), it is concerning that such little information is available regarding the physical health and health literacy status of this population in school-based settings.

Despite the paucity of existing research, there are some very tentative conclusions that can be made regarding the physical health status, health literacy, and health-related interventions for youth with school-identified disabilities. With respect to physical health status, the included studies demonstrated youth with LD or ED are at greater risk of poorer health outcomes, regardless of the health outcome examined (e.g., sleep, obesity, physical activity, etc.). This is aligned with findings from larger longitudinal studies that indicate students with disabilities in general are more likely to have poorer overall health (Blackorby et al., 2002; Chen, Kim, Houtrow, & Newacheck, 2010; Reuben & Pastor, 2013; Wagner et al., 2003). Unfortunately, results of this review do not allow for any conclusions regarding youths' physical health status as a function of other variables of interest, such as demographic characteristics. This is due in part to the low number of studies, but also to the fact that many articles lacked specific sample details on the samples included (e.g., race or ethnicity, socioeconomic background).

The second and third purposes of this literature review were to understand the health literacy and available health-related interventions for youth with LD or ED in school settings. When examining the health literacy status of this population, it is very difficult to make even preliminary conclusions, given that only two studies were identified. Similarly, there was only a single article that examined the outcomes of a health literacy intervention. Although this study reported significant improvement in health-related self-advocacy, there is little that can be generalized from this information. To establish health-literate populations in high-risk groups, there must be direct, targeted interventions which specifically address topics (Huscroft-D'Angelo et al., 2014; Trout et al., 2014). Although relatively little attention has been directed towards better understanding the physical health status and literacy of this vulnerable population, school-based settings present an optimal opportunity to intervene and contribute to improving these outcomes.

Limitations

The search and coding procedures used in this review reveal potential limitations that may have affected the results. While specific criteria were used to locate articles from the electronic databases to allow for replication of the findings, it is possible that some articles were unintentionally left out. Second, while the goal was to focus on studies using a school-based sample, other studies with youth in alternative settings (clinic, home, out-of-home care) were excluded. Although we intended to focus specifically on these two IDEA disability categories, it was quickly discovered that the terminology used to describe samples was inconsistent, and when including studies from other countries, eligibility criteria may be different than those delineated by IDEA. It is likely that other studies included comparable samples but used a clinical diagnosis or parent report of disability status. Third, it is possible that interventions or curriculums targeting specific types of health literacy (i.e., mental health literacy, substance use, dental health) exist and were not captured in this review as they did not meet our inclusion criteria. Furture research should be conducted examining the various types of interventions or curriculums that target specific topics within the broader definition of health literacy. Finally, replication of this review with more broadly defined search parameters around the term *disability* may yield more studies and, as a result, the ability to draw different conclusions about the physical health status, literacy, and interventions for individuals with disabilities.

Conclusion

In sum, youth with LD and ED are likely at risk for poor health outcomes and low health literacy due to a combination of risk factors. This review examined these areas as well as interventions that aim to improve the health literacy and overall health outcomes for specific school disability categories. Unfortunately, there is little information available to determine which health conditions are most prevalent, to what degree youth with LD and ED understand health-related information, and which programs are available to improve these outcomes. Functional health literacy helps to prepare individuals for life challenges such as college, careers, and families, indicating a need for well-designed health education in schools accessible for all students. These programs can serve as a preventative and less costly approach to promote healthy youth and prevent future health problems (ASHA, 2016). Thus, there is a need to develop programs and conduct empirical research to gather more comprehensive knowledge on the relationship between health literacy and short- and long-term outcomes in students with LD or ED. Ultimately, youth with disabilities need access to programs that will maximize their health literacy and promote proficiency in navigating health systems to lead healthy and productive lives.

Implications

Findings from this review have implications for key stakeholders, including school health professionals, education professionals, educational researchers, and medical researchers. First and foremost, there is a need for conducting empirically based studies on physical health status and health literacy within school-based samples due to inherent risks associated with subgroups such as those with LD and ED. To address national health-related agendas and develop appropriate interventions for improving these outcomes, it is important to understand fully what issues are prevalent and how they relate to school-based outcomes. National longitudinal studies which include health- and/or school-related outcomes should consider incorporating a variable for school-identified disabilities aligned to IDEA as well as incorporating several health-status related questions.

Second, although very few school-based studies were represented in this review, findings are consistent with studies demonstrating that individuals with LD and ED are at increased risk for poor health outcomes and low health literacy (Blackorby et al., 2003; Chen et al., 2010; Reuben & Pastor, 2013; Wagner et al., 2003). Thus, youth with LD and ED will likely require additional supports while in school. Further, special education teachers, school health professionals, and other educational staff should receive specialized training on certain medical conditions, including symptoms, treatment, and monitoring.

Third, understanding the difference in physical health status and literacy, based on demographic variables such as gender, is essential for moving the field forward. For example, results from previous studies show that females in high-risk populations (such as those with ED or other disabilities) are at increased risk for pregnancy, substance abuse, and poor mental health outcomes. Therefore, understanding the overall physical health status, including increased risk for certain medical conditions, is important. Likewise, it is imperative that female youth have proficient health literacy as they are more likely to navigate health systems due to their

increased risks (Shandra, 2011; Shandra & Chowdhury, 2012; Shearer et al., 2002).

Fourth, if youth with LD or ED demonstrate more risk for certain health issues, then that higher risk likely factors into the amount of time they spend out of class and could negatively influence achievement in academic areas. None of the included articles investigated how a student health status was related to important school outcomes, such as academic achievement, attendance, or behavioral functioning. Future studies need to explore these health-related issues as well as how they affect school-related outcomes, including achievement.

Finally, if other studies have reported that similar at-risk populations have increased health risks and low health literacy, developing interventions that can be implemented in schools is important. Promoting positive physical health and functional health literacy will continue to be necessary to help youth access health-related information in a meaningful way, improving the likelihood they are able to navigate health services adequately and minimize risk for poor health outcomes. Additionally, interventions must take into account needs of the population. Interventions should be written or developed in a way that youth with disabilities can access and generalize to health settings. The scientific vocabulary and readability level of content must be considered as well as the presentation of materials, such as including visual representations of the content.

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Strong Families and Successful Students: A Qualitative Study of Families Involved in a Strength-Based Community Program

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Abstract: *Although researchers have found that family involvement impacts educational outcomes for children, there remains a dearth of knowledge regarding the connection between strengthening families and children's academic success. This study examined what parents' perceptions regarding the internal and external factors that strengthen families who face economic disadvantage are and how parents' perceptions of what strengthens families relate to children's academic outcomes. Using thematic analysis, this qualitative study explored the perceptions of economically disadvantaged parents (n = 33) regarding the internal and external factors that strengthen families and how this relates to children's academic achievement. Strong families communicate respectfully with each other, spend time together, and are active in the community. Further, participating in extracurricular activities strengthens families. In addition, the inclusion of agency/organizational oversight and accountability of student progress, along with access to educational resources, are important for economically disadvantaged families. As education begins in the home, families who encourage communication, extracurricular activities, quality family time, and social capital are setting their children up for success in schools.*

From Title I allocations introduced with the Elementary and Secondary Education Act of 1965, to the reforms within 1998 Nation at Risk and the infamous 2001 No Child Left Behind, the education world has encountered policies and reforms aimed at increasing the academic gains of underserved populations (Kessinger, 2011). Despite over fifty years of reform, there is still an academic gap along economic lines within the United States (Reardon, 2013). Federal policies such as No Child Left Behind highlight the significance of impacting both educational delivery and school operations to address such educational disparities, yet other factors including the role of families in children's academic achievement is highlighted less (Hursh, 2007).

With the understanding that academic achievement is not solely dependent on the classroom, researchers have examined the educational influence of family and the community (Barnard, 2004; Fantuzzo, McWayne, Perry, & Childs, 2004; Houteville & Conway, 2008; Woolley & Grogan-Kaylor, 2006). Organizations such as the Search Institute underscore how the family is one of the primary indicators of student success, with the idea that strong families lead to strong students (Roehlkepartain & Syvertsen, 2014). Although research regarding increased parental school involvement and support is associated with academic success (Banard, 2004; Hofferth & Sandberg, 2001; Houtenville & Conway, 2008), we have found no research that has examined the perspectives of economically disadvantaged parents regarding family assets and student achievement. Given such, additional research is warranted that would examine parental perspectives to address the gap regarding how strong families influence student success for marginalized children.

Approach to Study

The community participatory-based research (CPBR) design involved a collaboration between a university public affairs doctoral research practicum and The City Project, a local community agency. The CPBR design allowed for a community to be a part of the study, rather than simply serving as the subjects (Israel, Schulz, Parker, & Becker, 1998). In this way, roles and research responsibilities were shared, ensuring equity among agency staff, community residents, and university researchers. The current study was part of a comprehensive program evaluation of The City Project's Family Builders, a family academic initiative. It focused on how parents of economic disadvantage describe the practices and actions associated with strong families and how those qualities impact the educational outcome of their children.

While community and educational programs that aim to close the achievement gap via family academic encouragement and participation exist, there is limited research demonstrating the link between family strengthening activities and student academic achievement. The present study aims to further address this link through two research questions:

1) What are parents' perceptions regarding the internal and external factors that strengthen families who face economic disadvantage?

2) How do parents' perceptions of what strengthens families relate to children's academic outcomes?

Literature Review: Families and Academic Success
Family, Early Childhood, and Elementary School

Family contribution to academic success starts early in a child's educational experience. Fantuzzo, McWayne, Perry, and Childs (2004) looked at the role of family in early academics by studying 144 preschool students enrolled in the HeadStart program. Simple family activities such as reading as a family, incorporating

education at home, and discussions about the school day lead to increased student motivation to learn. This was particularly noticeable with language-based activities (through reading and discussions) which promoted vocabulary retention in young students. Additionally, students who had parents providing at-home support for education had fewer discipline issues (Fantuzzo et al., 2004). Similar results were found with older children.

While school takes up approximately one third of a day and sleep another third, how the remaining time is spent can relate to academic outcomes. Hofferth and Sandberg (2001), in their aptly titled article "How American Children Spend Their Time," looked at weekday and weekend time allowance diaries for 2,818 children under the age of 12. From these journals, time eating, sleeping, participating in family activities (chores and free time), school/daycare attendance, and leisure activities were reported. Ethnicity was found to play a role in how free time was spent, with the authors noting that White, non-Hispanic children watched less television while Asian and African American children logged more hours per week in front of the television (5 and twenty-five additional hours, respectively). Asian children were also more likely to indicate time at home spent doing academic activities; African American children spent more time at church; and Hispanic children reported more household chores and family meal time (Hofferth & Sandberg, 2001). For school-aged children, standardized test scores were reported and compared to their activity logs. Students who had greater amounts of family time (dinners, chores, church, etc.) had higher academic test scores (Hofferth & Sandberg, 2001). In this way, simply spending time with family may increase academic gains, regardless of interaction context. Coleman (1988) alluded to this phenomenon as social capital within the family; children who feel important and valued do better in school.

The combination of family time and parental education interaction in and out of school has lasting results. A Chicago longitudinal study of families (1,165 students, 94% African American, 6% Latino, 88% eligible for free or reduced lunch) and educational outcomes found for each activity that the parent regularly completed on the family involvement scale (cooking with family, talking about school, reading together), the benefitting child was expected to stay in school two months longer than similar students without parental involvement (Barnard, 2004). Simple family activities can have a lasting impact on educational attainment.

To validate the parents' claims of involvement in educational activities in the home, Barnard (2004) also asked teachers to rate the parents on their involvement. For every year of parent involvement in the schools, as rated by a classroom teacher, there was a 21% decrease in the possibility of high school dropout (Barnard, 2004). As there are many factors that influence academic retention and success, it is encouraging to recognize a potential intervention that can be easily implemented by a family. These studies all highlight the importance of family involvement in early educational endeavors.

Family and Secondary Education

Young children are not the only ones who benefit from family interaction with their education. Two large-scale studies conducted by Woolley and Grogan-Kaylor (2006) and Houtenville and Conway (2008) looked at how family involvement enhanced academic achievement in middle and high school students. The first study of 2,099 middle and high school students examined family factors of integration, satisfaction, support, and home academic environment as determinants of school outcomes (behavior, school coherence, academic performance), finding that different parts of family life translated to diverse areas in the education world (Woolley & Grogan-Kaylor, 2006). With a link between perception of family support to school coherence, or feelings about school, Woolley and Grogan-Kaylor described family satisfaction and family integration to be significant deterrents to misbehavior at school.

Where Woolley and Grogan-Kaylor (2006) addressed behaviors and attitudes towards school in relation to the home, Houtenville and Conway (2008) used data from the more than 10,000 student responses in a National Education Longitudinal Study to further understand the link between parent effort and student outcomes. Measured via eighth-grade student responses to questions regarding parental discussions of student interests, school activities, volunteering, and attending meetings, the researchers were able to quantify parental effort. Participating students' scores were then tracked for the next two years to determine academic growth. Houtenville and Conway (2008) found that parental effort had a similar effect on achievement as an increase in the state education budget or additional parental educational attainment. In other words, simply discussing school at the dinner table may result in similar academic gains as substantial educational budget increases.

While parental effort was also found to be positively related to family income and parental education, race and ethnicity were found to have little impact on parental effort with the exception of increased frequency of attending school meetings for parents of color. Similarly, Woolley and Grogan-Kaylor (2006) found that students of color self-reported greater feelings of school coherence, indicating that interventions at the family level (home academic culture) may work to further increase positive feelings towards education and academic success. This supports previous studies that linked parental involvement and interest in school (Race, ethnicity, and income were not associated with a change in school behavior in the Woolley and Grogan-Kaylor (2006) study.). Just as with elementary school studies, family strength and parental effort increases academic achievement for middle and high school students.

Family, Social Capital, and Education

In Coleman's (1988) seminal article regarding social capital as a predictor of human capital, two different forms of social capital are shown to make significant differences in educational outcomes. The first, social

capital within the family, as described earlier, relates to the student's perceived role in the family, the support of the family, and the attitudes towards one another. Similar to Woolley and Grogan-Kaylor (2006) and Houtenville and Conway (2008), students who feel that they are valued by their family were more likely to graduate and succeed academically (Coleman, 1988). Intrafamily relationships are not the only ones that matter. Families that are part of a larger group (i.e., religious affiliation while enrolled in a private school) also have a greater network that leads to a reduction in dropout rates (Coleman, 1988). Hill and Taylor (2004) recognize this form of social capital and add that when parents are involved in the school and meet with other parents, a new network of academic accountability is formed, strengthening the family ties to education. Echoing Woolley and Grogan-Kaylor's (2006) findings of school coherence, a family's pro-education message is amplified when matched by other parents in the community and social network.

This form of social control allows parents to work together and with schools. When positive beliefs about education and school behavior are promoted "across settings and from different sources, the messages become clear and salient, reducing confusion about expectations" (Hill & Taylor, 2004, p. 162). Woolley et al. (2008) agree, highlighting that an increase in social capital within a neighborhood leads to a subsequent increase in K-8 academic success. Furthermore, Woolley et al. (2008) note that neighborhood physical conditions relate to academic success. When a neighborhood declines, so does its students. This leads to the assertion that neighborhood projects to improve the physical attributes of the community, in conjunction with group meetings addressing common concerns, will lead to academic gains for the children who live in the area. Through the inclusion of other families and the community, the nuclear family expands into a support system which may benefit students.

Methods

In line with the collaborative principles of CBPR research, the agency, community, and university engaged in nearly every aspect of the research. An increased level of community and agency involvement allows for the project to become more authentic by sharing power and ownership of the research (Padgett, 2012). While the overarching community agency and university partnership used a CBPR approach to examine the Family Builders program, this qualitative study focuses on the education component using a multiple case design. Case studies use multiple perspectives to better understand a social question within a specified time and place (Mertens, 2009; Padgett, 2012). In this case, parents and guardians associated with a family-strengths program shared their beliefs and ideas in small focus groups. As case studies focus on a small area, it is often argued that they are not generalizable, a common concern in research. This study addresses this by encouraging open dialog among participants and working towards understanding the

reality of the families, rather than attempting to find an overarching solution (Mertens, 2009).

Setting

The City Project provides a variety of services and programs to a community that is 79% African American, 39% below the federal poverty level, and 10% unemployed (U.S. Census Bureau, 2011). One of these programs, Family Builders, works towards the goal of strengthening families within the community. Family Builders provides local families with monthly dinner meetings with guest speakers on topics of interest, community engagement activities, exposure to local culture and resources, and monitoring of student report card grades with opportunities for tutoring and mentoring.

Procedure and Sampling

Working collaboratively, The City Project and students of a university public affairs doctoral research practicum discussed and determined shared research goals and proposed focus group questions prior to entering the community setting (see Appendix). At one of the regularly scheduled Family Builders monthly meetings, prospective participants/participating families were introduced to the researchers and provided a consent form as well as a flyer explaining the goals of the study. Following this introduction, The City Project and student researchers remained in contact to plan the focus group research for the following monthly meeting. A week prior to the meeting, the agency reached out to residents reminding them of the upcoming meeting and study.

The Family Builder's meetings are voluntary and vary in attendance. They have served 95 individuals since the program began in 2015. For this study, 33 individuals attended the monthly meeting and agreed to be a part of the study. These 33 individuals formed five focus groups. This convenience sample was representative of the population that engages with Family Builders on a regular basis. Qualitative studies traditionally have smaller sample sizes to allow for more in-depth research, this study's sample size allowed for the participants voices to be heard within the focus groups (Padgett, 2012).

To ensure anonymity, participants used pseudonyms during the study. To determine group differences by attendance, participant attendance rates were determined by The City Project and assigned different regions of the United States. On the night of the focus groups, the participants chose their pseudonym from the region that matched their level of attendance, with the Northwest, for example, representing individuals who attended 75%-100% of the monthly meetings (see Table 1). There was an overflow category (Midwest) for three participants. Once the participants chose their pseudonyms from the predetermined region, they were given a paper survey requesting information regarding demographic data, their children's student information, and generic information regarding the program (see Table 2). After dinner, the children of the participating families went to

an activity while the adults moved to their region groups. Each group, led by a student researcher, was recorded using a digital recorder. The group session was 35–55 mins in length.

Table 1

Participant Data by Assigned Region

Region	Attendance Range	Number of Participants	Average Age	Total Number of Children
Northwest	76-100%	8	47	15
Southwest	50-100%	7	37	16
Northeast	25-49%	8	37	13
Southeast	1-24%	7	45	12
Midwest	Overflow	3	54	2

Table 2

Participant Group Data

Participant Data	
Ages	26 – 68 years old
Race/Ethnicity	African American/Black (75%),
Relationship Status	Married (40%), Single (37%)
Education Levels	Community College/Junior College (30%), College/University degree (24%), Masters' Degree/Beyond (10%)
Employment	Full time (75%), Part time employees (12%), Not employed/retired (12%)

Data Analysis

Following the focus groups, the student researchers transcribed the recordings. Key words throughout the transcripts were observed, noted, and discussed to identify subcategories within the framework of the interview questions asked. Common codes included family communication, unity, structure, respect, exposure to opportunities, and participation in activities. The researchers then used axial coding to determine connections between the identified codes (Padget, 2012). For example, exposure to opportunities and family participation in activities both were related to the concept of outside factors that strengthen families.

The findings and analysis were presented to the agency and then to the community at a following monthly family meeting. The research team also produced a white paper outlining key findings that was given to the agency.

Ethical Considerations

To be enrolled in the practicum research course, the student research team had to complete the core coursework of their public affairs doctoral program (minimum of 27 credit hours). Supervised by the course professor, and operating under the auspices of the university IRB, the research team was careful to safeguard the privacy of those involved in the Family Builders program. To further ensure that the interview and survey questions were relevant and appropriate for the community, The City Project shared the proposed questions with community leaders. The final interview and survey questions reflected the suggested edits by both The City Project and the community leaders.

To maintain participant confidentiality, minimize potential risks, and ensure database security, we implemented several risk management procedures. Our IRB-approved consent form delineated several elements for individuals to better appraise the costs-benefits of their participation:

1) a clear statement of the general purpose of the research,

2) an invitation to voluntarily participate in the study,

3) an explanation of all research procedures,

4) a clear statement of any reasonably foreseeable risks or discomforts,

5) a description of any benefits to the participants that may be reasonably expected from the research, and

6) confidentiality assurances.

All data were coded, summarized, and quoted in such a way that the participants could not be identified. At the research site where information was processed or maintained, all confidential records that would permit identification of individuals were kept in locked file cabinets when not in use by authorized personnel. Password-protected computers were used, and electronic data transfers were protected by data encryption.

Results

Parents identified that practices and actions of strong families include respectful communication between parents and children, spending quality time together, and being engaged in the school and community, particularly in activities that strengthen families. Specifically,

internal traits within the family included four categories: communication, respect, structure, and unity. External family factors included three categories: Attending community activities, engaging in new opportunities, and working together/spending time outside of the home. Education-focused themes included the agency's student accountability and access to educational resources.

Internal Factors: Communication and Togetherness

Internal factors were heavily discussed during the interviews, the four categories (i.e., communication, respect, structure, and unity) merged to form two themes: communication allows for respect and strong families spend time together. Communication was often described as a form of mutual respect between parents and their children. One participant observed: "Also respect. We respect our children as well as ourselves...knowing that our children have an opinion too, when sometimes it may not be what we want to hear, but we have to listen" (South Dakota, age 38). New Hampshire (age 32) agreed, noting that it is important to family strength that children feel that they can express their concerns.

> Sometimes you listen to your kid and they're like complaining about something that you take is just irrelevant...but you know, it's really important to them is really big for them and being able to sit down and even if you tell them...don't worry about it. It's OK. Giving them the respect to know that, hey, you matter to me what you feel about that matters.

Respect also was mentioned in terms of tone and forging the expectation for open communication and conversation within the household.

> I allow my son to talk, not in a disrespectful way, but I allow him to voice what's on his mind because I started this from the time he could talk. I always have an ongoing conversation with him and he's ok so far. And I think it's a big difference for the child to be able to respectfully tell the parent what's on their mind and in their heart. That way you get to know your child as well and you're not just a sergeant in the house but you're allowing them to communicate with you and you communicate with them. (Georgia, age 51)

Several of those interviewed also highlighted the importance of listening to their children. New Mexico (age 35), for example, stated, "I feel communication is a big part of it... especially with kids, having them feel comfortable enough to talk to you about certain things and being open minded with them and basically not putting anything off limits." South Dakota (age 38) added, "Also respect [is important]. We respect our children as well as ourselves. Letting our children have an opinion too, when sometimes it may not be what we want to hear, but we have to listen." This sentiment was repeated with Alaska (age 40) who stated:

> I just want to add, listening to each other [parents and children] helps a lot because I think a lot of times as parents we provide the information. We tell them what to do and then they give feedback as to why they don't want to do or why they don't feel like it. So I think if you listen to each other, that helps a lot too because at least you'll get a better understanding where they're coming from and you can get the same understanding. And so that goes with communication. But definitely listening, too.

Another theme found within internal support was that strong families do things together. This theme, merging spending time with unity, was seen in Georgia's (age 51) comment:

> Within the family, I think spending time together to do things together. The whole family. Not just the children doing stuff and the mother and father someplace else doing what they want to do. But to bring the whole unit together...spend time together as a whole.

Vermont (age 49) mentioned that family time was important, even if it is during every day travel, noting "quality time together...we still got a lot of times in the car going here, going there, going here. They're going to get home and you're covering things, books, quality time outside of the school." New Hampshire (age, 32) equated intentional time with family time:

> I feel like it's in the intentional time day to day. We can spend that time in the morning or taking them to school or when we are picking them up from school or whatever it is. We're taking the activities. Just engaging with them and talk with them saying how was your day? What are you learning? What did you like about school? What didn't you like about school? And so that intentional time together is really what makes it quality time in my opinion.

Family time, according to participants, could consist of a variety of activities. The general idea, however, was that the time spent together is important. Montana (age 68) said: "Family is having family gatherings and family time together, doing things together, especially dinner time. Having that special time."

External factors

Events and entities outside of the home also provide a way to strengthen families. Participants mentioned a variety of external resources, such as church, community, extracurricular activities, mentors, resources, organizations, and the Family Builder's program that they were a part of as ways to externally strengthen the family. From this list emerged two themes: Strong families are active in the community and participating in activities strengthens families.

As the participants were active in a neighborhood group provided by the The City Project, it was appropriate that community came up as a way to strengthen families. Maine (age 33) equated the neighborhood to a village:

It literally takes a village to raise a family. So just having that, knowing that your village, or those people that are going to be involved in your family, who do have those relationships with your kids. When you have those you work to build those relationships too.

The City Project's Family Builders program, was also considered a community, consisting of greater area outside of the neighborhood. Louisiana (age 56) touched upon this, "The community, no matter what your socioeconomic status is, here we all get along and we all interact. And it doesn't matter whether you're in a house or an apartment, we're all in one family".

The theme of participating in activities together makes families stronger looked at parental support of activities and experiencing new things together. The parents spoke fondly of supporting their children in extracurricular activities, "like activities that are part of their student plays or track or basketball. Just being there to support them in more than one of the things that they enjoy" (New Jersey, age 35). Oklahoma (age 30) mentioned that one external way to strengthen families is by

Figuring out what your children love to do and supporting them in that. Finding outside services to support that. So from my daughter, she loves dancing and singing... same for my son. He loves basketball, he loves soccer. So just really making sure that I'm honing in on their skills and their talents and I'm supporting it.

Many noted that the monthly meetings were helpful and that The City Project's Family Builders exposed the families to find new things.

My kids are getting involved in a lot of activities that they normally wouldn't do. My kids have been getting to a lot of activities that normally they wouldn't go. Cause like in August they went to the Science Center downtown. At first I said this is going to be boring, but when I get in there – I did not want to leave... I mean it's just awesome a lot of stuff that normally I wouldn't do, but now they get to do it now. (South Carolina, age 55)

Being involved with the Family Builder's program also helped families to engage in preplanned activities to ease their burdens, "It takes away the burden and the time of just trying to figure out what to do that the kids would enjoy... My kids have enjoyed, I've enjoyed it" (Alaska, age 40).

Strength and Education
One of the main goals of The City Project's Family

Builders is to strengthen academic achievement for the families in the program. The parents in the focus groups spoke about two main areas in which Family Builders helps: keeping students accountable and providing resources for families.

One of the ways Family Builders holds students accountable for their grades is by collecting report cards at the end of every term. South Carolina (age 55) exclaims that their kids brought up their grades knowing that someone else would be looking at the report card, and that low grades were unacceptable, "they [the kids] want to get praised for the grades they got". Another parent spoke about the idea of having additional reminders about report cards and progress reports, and the impact that it has on the children.

Having these meetings and conversations it makes them [children] want to do better and they know we're watching. Like you say, Family Builders text us and say don't forget report cards or progress reports. And they will text us to say they are coming out today or like they let us know ahead to be on the lookout you know here it comes. So you know It's good to know that someone is watching. (Alabama, age 44)

One of the coordinators provides support to families by visiting schools, meeting with teachers, and suggesting resources for families. "He went to the school to see what's going on... If the kid does not have his grades in order, he will talk to the counselor and see what we need to do for the kids" (Kentucky, age 59). Another way the Family Builders helped was by providing access to tutoring.

My kids have benefited because now they're on honor roll and everything. Cause this group introduced us to a program on Saturdays for tutoring for the kids and my daughter has been. I was so proud. She was on honor roll. (Texas, age 29)

Through consistent monitoring and assisting with resources Family Builders is considered an asset to the families involved.

Discussion
While the families did not explicitly connect the activities that strengthen families to the educational outcomes of their children, the descriptions of what makes families strong parallels the literature regarding family time and parental interest, social capital, and parent school engagement. These themes align with the participants' discussion of communication and support, respect and community, and Family Builders school engagement.

Researchers have shown that families spending time together and talking about student interests increases academic achievement (Bernard, 2004; Hofferth & Sandberg, 2001; Houtenville & Conway, 2008). In the current study, both the internal and external factors related to strengthening families focused on conversations

between family members, quality time together, and support in extracurricular activities. Asking about school and spending time together brings families closer and supports the education of the children. Support was also heavily mentioned in the findings, as several parents spoke about attending their children's sporting events, dance recitals, and supporting their interest and hobbies. Each of these activities inherently includes quality time and allows the child to feel like their interests matter. Replicated in the activities and field trips provided by Family Builders, the monthly meetings also revolve around family dinners, increasing the opportunities to build into strength within families along with increasing academic attainment.

Another similarity between the literature and the focus group results revolve around the concept of Social Capital within the family and within the community. Social capital is created and maintained through relationships with others (Coleman, 1988). Ranging from advice to friendship networks, social capital can be seen in this study as children being considered a respected member of the family or in the participation of families within the community, both of which were highlighted in the focus group discussions. The participants overwhelming exclaimed the need for communication and feelings of mutual respect between children and parents, ensuring that children felt like valuable members in the family. Increasing social capital in the family directly relates to lower school misbehavior, in other words, students who feel that their families care are less likely to misbehave, leading to better focus in the classroom and better grades (Woolley & Grogan-Kaylor, 2006). As discussed multiple times within the focus groups, raising children really "takes a village". By becoming involved in the community, being a part of the village, the parents are raising the social capital of their family, thus increasing their children's chances of a better academic future (Hill & Taylor, 2004). Again, involvement with Family Builders assists in this as parents are brought together in a community setting.

Academic development discussed in the literature revolves around school engagement, which was less pronounced in this study's findings. Visiting schools, meeting with teachers, and keeping track of student grades assists in ensuring that students were doing well and succeeding (Houtenville & Conway, 2008; Woolley & Grogan-Kaylor, 2006). For this study, parents described Family Builders as the source for school engagement. While the parents seemed more aware of report cards and the resources available to their children, the real credit lay within one of the coordinators acting as a substitute/support for the parent at meetings and maintaining the level of accountability that may be lost otherwise due to busy schedules and inconvenient meeting times. This engagement via the Family Builders parallels the family/community social capital and accomplishes the community interest factor as discussed by Hill and Taylor (2004). When there are multiple adults promoting education (parents, Family Builders, monthly

meeting community), the group message is that academic achievement is not only accessible, but expected.

Limitations

As this paper is part of a larger subset of data collected from focus groups, the questions were geared towards a process program evaluation rather than a study strictly on educational outcomes. Additionally, while the researchers were all trained during class and had the same set of questions, there was variation in the conversations, and comments related to educational attainment may not have been fully explored. As data were collected during the focus groups only, with anonymous participants, follow up questions were not an option.

Despite the limitations of this study, there were several strengths. Since the City Project, Family Builders, and the university student researchers had a collaborative presence during the introduction and the focus groups, participants were open and felt comfortable with the researchers. The qualitative approach allowed for participants' voices to be heard, adding to the body of research, and confirming what had previously been seen in quantitative inquiry.

Implications and Conclusion

The findings of this study align with the literature regarding how strong family habits can impact education. This study also adds to the body of research with the inclusion of an outside agency that assists in the education process by providing support, resources, and additional opportunities for families in an underserved location. Future research should identify other organizations that provide similar services, speak with children, and look to refine the themes found within this study. As education begins in the home, families who encourage communication, extracurricular activities, quality family time, and social capital within their family are setting their children up for success in schools. Programs such as Family Builders that encourage strength within the family and community can help to bridge the achievement gap, grow capacity within the community, and promote academic achievement among the children in the group. After all, strong families can create strong neighborhoods, and enhance academic achievement.

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Appendix

University and Agency Shared Research Goals*

(1) How do families' perceptions of what strengthens families align with Family Builder's/Search Institute's developmental framework?

(2) What are the families' perceptions regarding what is working for strengthening families for the Family Builders program?

(3) What are the families' perceptions regarding what is needed for strengthening families for the Family Builders program?

Focus Group Interview Questions

We will be asking 4 questions with about 10 minutes allowed for discussion per question.

1. Our first question is: What do you think helps to strengthen families? This is a two-part question.

   - We will be asking about what within the family helps to strengthen it.?

   - And we will be asking about what outside of the family/home helps to strengthen families.

2. Our second question is: How does participating in Family Builders impact your family?

3. Our third question is: What advice do you have for other families who might want to participate in Family Builders but haven't yet?

4. Our fourth question is: What advice do you have for the Family Builders program?

Book Review: *Ending Zero Tolerance: The Crisis of Absolute School Discipline*

Reviewed by Janet Babb

Ending Zero Tolerance: The Crisis of Absolute School Discipline
Derek W. Black, 2016
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In *Ending Zero Tolerance: The Crisis of Absolute School Discipline,* author Derek W. Black equates a student's expulsion or suspension from school to an educational death sentence and a destiny of second-class citizenship. As a teacher at a center for students who have been expelled or are at risk of expulsion from a large suburban school district in Colorado, I see this comparison come to life every day. The numbers of students expelled and suspended from school are staggering, and the effects of this exclusion from school lead to lifelong setbacks. According to the U.S. Department of Education (2016), during the 2011-2012 school year 3.45 million students were suspended out-of-school, and 130,000 students were expelled out of the 49 million students attending public schools.

Ending Zero Tolerance begins with the stories of numerous victims of zero-tolerance policies in school discipline. Black gives example after example of students who have been suspended or expelled for bringing a butter knife, nail clippers, or a cough drop to school. The author notes that not only have zero-tolerance policies allowed students to be suspended or expelled for minor incidents, but they have also created a culture where school exclusion is an acceptable form of discipline for even accidental infractions. In the book's introduction, Black also outlines the bleak outcome for students who are suspended or expelled. Citing a 2012 study in Florida, Black writes that nonsuspended freshmen drop out at a rate of 16 percent, yet those who are suspended even once double this dropout rate to 32 percent, and those with two suspensions drop out at a rate of 42 percent. These frightening statistics, along with Black's descriptions of zero-tolerance policies leading to more significant numbers of students entering the juvenile justice system and leading to more misbehavior in schools, set the stage for Black's call for the courts to step in and create some direction, justice, and uniformity within educational discipline methods.

Over the past few decades, individual states and districts have enacted new policies attempting to regulate harsh discipline to decrease the harmful effects. At the same time, numerous studies and arguments have been published to provide alternatives to zero-tolerance discipline policies, such as restorative practices and collaborative problem-solving. However, Black attacks the problem not from a replacement frame of thought, but through the assertion that the only way to thoroughly address the issue is through the courts. Black calls for courts to re-engage in the legal battles surrounding school discipline and force the passage of broader reforms, which would, in turn, protect students' rights. Although heavy with legal jargon, *Ending Zero Tolerance: The Crisis of Absolute School Discipline* convincingly uses prior court cases and legal precedents to lay out the framework for judicial intervention to protect students' rights and end zero-tolerance policies once and for all. Black's book focuses on where constitutional law and public education meet, especially in relation to equality and fairness in education for disadvantaged students.

Ending Zero Tolerance is divided into two parts. In the first part "The Making of an Education Crisis," Black focuses on the history of court precedent regarding education, including how the courts have bypassed involvement in school discipline and recent changes in social science and policy. Black begins his explanation by laying out the basis for the current state of student discipline by outlining the early applications of *in loco parentis.* The use of this legal precedent sets up schools and teachers as *de facto* parents within the education setting but also presumes that the schools and staff have the students' best interests at heart, and in such creates a partnership between schools and students. Based on years of desegregation policies and legal rulings, schools have demonstrated this optimistic view has not always translated to reality. In fact, with zero-tolerance discipline policies, students and schools are no longer partners, but are now enemies. Black contends that the adoption of zero-tolerance discipline policies has voided any chance of collaborative behavior correction between students and schools. He goes on to explain that the courts' disengagement with school discipline has left students without any protection against unfair and overreaching discipline practices.

The first of two major cases that Black references, *Goss v. Lopez,* a 1975 Supreme Court case, ruled that a public school must follow due process before suspending or expelling students. Although *Goss* concluded that due process does apply to educational suspensions and expulsions, Black argues that the ruling was too narrow and that subsequent related cases diminished

its impact. One such case discussed by Black, *Wood v. Strickland* (1975), held that school board members are subject to a lawsuit if they violate a student's due process rights. The issue with this ruling, however, is that a court must first determine if a student's due process rights were violated, which is difficult to do as neither *Wood* nor *Goss* outlined what such due process should entail. In the end, Black argues that although *Goss* affords students some right to due process before suspension or expulsion, it is vague and unenforceable.

In Part I, Black also calls on courts and policymakers to actively protect students. While recent significant changes to discipline, including many districts abolishing corporal punishment, have taken place, Black argues these policies do not safeguard students. Without court intervention, he asserts, students will be suspended, drop out, and be sent to prison in record numbers each year as society waits for discipline reform. Black calls on the courts to draw the boundaries of acceptable school discipline, which would in turn force policymakers to find otherwise ignored solutions to manage student behavior.

In the second part "Courts' Role in Ending the Crisis," Black addresses the constitutional rights at stake in school discipline matters and how addressing these constitutional issues may be a key to forcing a fair evaluation of school discipline policies. According to Black, the first of those theories is based on the U.S. Constitution and contends that, based on the principles of substantive due process, school discipline policies and practices must be prudent. He details the breakdown of this theory by demonstrating how zero-tolerance policies do not allow for due process to be applied fully to students and, therefore, take away the protection the legal requirement of due process offers. Black continues to break down the need for substantive due process by examining what he refers to as the "three pillars of substantive due process: intent, culpability, and harm" (p. 102). Black argues that since zero-tolerance policies do not address these three pillars of due process (a student's intent, culpability, or harm), due process does not exist for students within school discipline policies.

The second theory Black argues that should force a review of school discipline is based on state constitutions and precedents set by school finance and quality litigation which should force new analysis of school suspensions and expulsions. This theory is two-fold. Black suggests that by using precedent rulings on school finance and quality, plaintiffs would be able to prove that school climate and discipline are essential to educational outcomes, and as such, the court (and the state) must treat climate and discipline under the same category as other core parts of educational programs.

Black concludes with a description of how litigation strategies to change policies might be integrated with research and policy agendas to bring an end to zero-tolerance policies within schools. He calls for advocates of student and civil rights to step forward now and ultimately end zero-tolerance policies and irrational harsh discipline tactics in the education system.

In my work with students who have been expelled, some due to zero-tolerance policies and some due to possible lack of due process, it is clear that students need more protection within the education discipline system. The gender, race, income, and ability discrepancies within school exclusion discipline methods are sickening, and a lack of uniform policies between schools and districts often leave at-risk students without clear expectations and appeal options, putting these students at greater risk. Derek Black highlights the legal precedents that have set up this system and clearly describes the possible methods to attack the current system through the judicial challenge. *Ending Zero Tolerance: The Crisis of Absolute School Discipline* will help those working with at-risk students gain a deeper understanding of the creation of zero-tolerance policies and through what methods one might lead students, schools, and districts to ultimately challenge these policies and create a more just discipline system for students.

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Reviewer

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