2001

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STUDY OF A GANG RISK INTERVENTION PROGRAM: A PROFILE OF AT-RISK YOUTH IN THE PUBLIC SCHOOL SETTING

A Project
Presented to the Faculty of California State University, San Bernardino

In Partial Fulfillment of the Requirements for the Degree Master of Social Work

by
Patrick Saint Francis Muller
June 2001
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ABSTRACT

The Purpose of this study was: (1) to review programs directed towards students defined as "at-risk" in the literature, (2) to construct a profile of the at-risk population served by the Gang Risk Intervention Program (GRIP) in Riverside County, and (3) to make future recommendations towards enhanced service delivery to the same. The research consisted of a thorough review of the case files kept by the Riverside County Office of Education Gang Risk Intervention Program counselors. A profile of the typical user of service for the GRIP program was developed using the SPSS ver. 10.0. Of importance to note, is the finding that parental divorce accounted for 42.5% of the clients' current stressors in life that affected academic behavior and performance. It is hoped that an understanding of who is using the intervention program will help guide the program's treatment for those who are to receive it.
ACKNOWLEDGMENTS

I would like to thank the administration and staff of the Riverside County Office of Education (RCOE) Gang Risk Intervention Program (GRIP) for their support in gathering the data for this study. Also, to Dr. Nancy Mary, my "macro-maniac" mentor and academic advisor, who helped formulate the direction for this study. To my classmate and friend, William Sacks, I could not have done this without your help and encouragement, thank you. And to my family, I do not know how to fully express in words the gratitude and love I feel for them for their endless patience and support throughout my completion of this project. Especially my life partner and best friend, my wife. Thank you and remember I will always love you dearly.
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The complexities of childhood today can include homelessness, abusive, or non-existent parents and gang peer pressure. Dryfoos (1991) states there is a correlation between at risk students and poverty, race and ethnicity. The probabilities of being considered a high-risk youth between the ages of 10 through 17 are 52% for African American students, 59% for Hispanic students, and 16% for Caucasian students.

High-risk youth begin their problem behaviors early, with evidence of acting out and aggressive behavior seen as young as the preschool years (Dryfoos, 1991). These problematic behaviors, when encountered in the school setting, are dealt with reactively and punitively in hopes of suppressing them in the classroom. These interventions do not address the underlying root causes of the behavior, and therefore are not usually successful in extinguishing it (Grant, Van Acker, Guerra, Duplecain & Coen, 1998). The answer lies according to Grant et al. (1998), in developing prosocial behavior and preventing the development of aggressive and violent behavior. This is
important, as serious antisocial behavior in youth is indicated in the development of alcohol and drug problems for adolescents and adults (White, 1992).

High-risk students are those that display attention deficits, hyperactivity, oppositional behavior and aggressive acting out with peers and others (Grant et al., 1998). These factors make them more at risk for academic failure. White (1992), states that there are data that indicate that early antisocial behavior predicts later delinquency. Children most at risk for developing serious antisocial behaviors tend to demonstrate them more frequently than other children, and at an earlier age (Grant et al., 1998). These behaviors can lead to school failure, and this leads to further behavior problems. Falling behind in school is a signal of school difficulties, drop out rates, and other problem behaviors. Poor school performance is both an antecedent and a consequence of substance use, teen parenthood and other types of delinquent behavior (Dryfoos, 1991).

Research by Hawkins and Weis (1985) suggest that there is a greater probability for at risk youth to develop antisocial behavior due to a failure to develop
bonds with their family, school or other important individuals and institutions (i.e. grandparents, church, or other community organizations). Therefore, getting the child to actively participate in the school environment is important in reducing delinquency. As early antisocial behavior is linked with delinquency (White, 1992), it is important to start as early as possible with the students most at risk for school failure. Early interventions in the elementary school years have higher success rates then, as problem behaviors are not as complex or ingrained (Dryfoos, 1991). Dryfoos points out in her research, that individual attention given to a prevention program participant is vitally important to successful intervention. One fact she found across prevention programs is that the individual attention received by the participant is a good indicator of the success of the program.

There is a consensus among education reformers that advocates the school as the center for a wide range of psychological, social and recreational treatment services (Dryfoos, 1991). Educators that are trained in assessing at-risk youth in the school environment are in an
excellent position to effectively intervene on their behalf. That is why school based prevention and intervention programs for at-risk youth are popular today. The question has been: Are they as effective as they seem to be on their face value? Richards and Smith (1985) state that successful school based prevention programs intervene early on in the student’s problem behaviors. At-risk youth are at risk for several factors that can hinder their academic performance. The inability to resist peer pressure, low self-esteem, poor coping skills, poor grades and a lack of attachment to family, school or community all contribute to academic failure. These factors can also lead to conduct disorders and behavioral problems in the classroom, substance use, and criminal activity.

At-risk youth are vulnerable to delinquency and failure in the school setting. With the rise in gangs, drug usage and recent rash of school shootings, greater emphasis on prevention for these youth is needed. The saying that “an ounce of prevention is worth a pound of cure” is applicable here. The Riverside County Office of Education (RCOE) runs a Gang Risk Intervention Program
(GRIP) with this goal in mind. The GRIP program attempts to reach at-risk youth in the school setting and prevent further problems for them through counseling, community resources and parental involvement. The question arises, who does this program serve?

Either their teacher, or the school principal must refer a student to the GRIP program. The referral is usually based upon some conduct problems occurring in the classroom. The program is voluntary and the GRIP program obtains parental consents before any services are offered to the family and the student. The GRIP program utilizes students from the California State University at San Bernardino (CSUSB) and Loma Linda University (LLU) Masters of Social Work (MSW) programs to conduct counseling with the youth at the school site. They work with the teachers and the families to link the student to appropriate resources to help them succeed in the school setting. The purpose of this research was to discover who this program is serving, and make suggestions as to how best to help at-risk students succeed in the academic arena, and how to refine the data collection for future outcome studies.
A literature review was conducted to ascertain the most successful approach to reaching at-risk youth, and preventing problems for them in the school setting. Most prevention programs target children between the ages of 11-17 years of age. Jones (1999) believes that this is too late and suggests starting at a much younger age. Targeting elementary age children might be more effective than targeting adolescents. Mitchem, Young and West (2000) suggest that elementary age children are more accepting of interventions of this nature as older children do not always see it as "cool". In designing their program for reducing academic failure and antisocial behavior of the at-risk students in two middle schools, they found that the sixth graders were the most likely to respond positively, seventh graders were half as likely, and eighth graders as a whole thought it was "lame". It is their belief that teaching the students self-management and social skills is one way to combat the risk of academic failure. Their program attempts to make positive social behaviors ingrained within the student regardless
of reward or punishment. To do this they feel that it is more effective to focus on recognizing the positive behaviors of the student instead of concentrating on the negative behaviors. It is their goal to build up the desirable behavior, rather than punishing the undesirable behavior.

This is in line with the research of West and Farrington (1973) who found that the most effective behavior management programs focused on reinforcing the positive behavior of the student, and not just punishing the negative behaviors of the student. The use of praise when the student follows directions, raises their hand, or helps another is an extrinsic reward. Their goal is to make this outside reward internal, and the student will maintain this behavior on their own even when no one is watching. That is the key to their program; catch the at-risk student doing something good, instead of doing something bad. Teaching the at-risk student social skills such as how to give and receive praise or compliments is one of their goals. The use of the teacher to model this behavior is the key according to their research. They note that the best way to praise a student is to be
sincere, specific and have the praise contingent upon the student having control over the behavior.

Risler and Sutphen (2000) denote seven areas used in predicting delinquent behavior in at-risk youth. They are: the at-risk youth’s family history of criminal activity, their present school functioning, if they are substance abusers, their peer group association, amount of parental supervision, age at first contact with authorities over behavior and the seriousness of that behavior that brought them into contact with the authorities. They state that as the recidivism rate of the delinquent behavior of the at-risk youth after intervention is high, a better method is needed of classifying them early in the intervention process to more appropriately target the higher risk youth. Using the correlates of delinquency referred to above, an assessment of first time referents to the GRIP Program that focused on these psychosocial factors might better predict which youth is the most at-risk for recurring delinquent behavior. One of the best predictors of continued delinquent behavior of a youth is the age at which they begin this behavior. The younger the age of the at-risk
youth starts to engage in behavior problems, the more likely it is that this behavior will persist into adolescence and adulthood.

The problem has been that there are a limited number of instruments in use to predict delinquent behavior in at-risk youth (Wiebush, Baird, Krisberg & Onek, 1995). Also, the instruments that are available are not totally reliable. The ability of the school system, or social workers in general to predict an at-risk youth's future delinquent behavior is invaluable to society in general. The early identification of these high-risk youth would allow prevention programs to focus their resources more efficiently and effectively. This is an area of research that needs to be more developed. At-risk youth can be defined as delinquent (Wiebush, Baird, Krisberg & Onek, 1995), and delinquency can be defined as continued persistent behavior problems, or the recidivism of the youth back into prevention programs. Risler and Sutphen (2000) state that the best predictor of continued delinquent behavior after intervention is the youth's age at the first referral for services and the seriousness of the offense that resulted in the referral, their families'
history of criminal activity, and their present school functioning level. These factors act synergistically to maintain the delinquent behaviors of the youth. The ability to predict which youth are the most at-risk may allow a concentrated prevention and intervention to break this cycle.

It is important to remember that these factors are only correlated with delinquency in at-risk youth, and are not causative in nature. Risler and Sutphen (2000) state that the most effective assessment tools not only take into account the youth in the initial assessment, but also the family of origin. They found in their research that substance use, amount of parental supervision and peer group association were not as reliable predictors of continued delinquent behavior as expected. It is their belief that peer group association probably plays a much more important role the older the youth is, especially for adolescents.

Richards and McKenzie (1996) also studied school based prevention programs for at-risk youth. They found that a three-tiered program could be successful. The first tier is working with the student on self-esteem and
academic performance. They would include in the students intervention counseling, tutoring and other community activities to enhance social functioning. On the second tier, they would work with the parents on education, follow up with home visits and also counseling services. On the third tier, they would work with the teachers and support staff on at-risk features, child resiliency issues and environmental modifications. This three-pronged attack on at-risk youth found that risk levels can be assessed, and then effective interventions designed to meet these increased risk factors. They also found that better outcomes for the at-risk youth are obtained if the prevention services are offered over at least two years consecutively; that parents of the at-risk youth can be successfully recruited and integrated into the program if given enough personal contact from the person in charge of the intervention; and that at-risk youth can be mixed with peer mentors for better success in the community.

One of the greatest challenges facing prevention programs for at-risk youth is engaging their parents in family based prevention and intervention. Hogue, Johnson and Liddler (1999) state that although many prevention-
based programs covet parental involvement, there are numerous difficulties in recruiting them. At a school based prevention program, the members of the program are a captive audience so to speak. This is not true of parents, who often work or are otherwise unavailable. Hogue Johnson and Liddler also state that one of the best ways to ensure a successful prevention program that includes parents is to anchor it with the local school. This builds upon the school’s established reputation in the community, and also focuses the attention of the parents towards scholastic success, and not poor parenting skills enhancement. Many parents are reluctant to attend prevention programs for their children according to Hogue Johnson and Liddler because they feel the focus will be on what a poor job of parenting they have done to have their child need the program in the first place. That is why it is important to work from a strengths perspective with parents to help them engage with the program. By focusing on the fact that the program will help their child achieve school success, enhanced parenting skills can be worked into the program.

Hogue Johnson and Liddler (1999) state that for most
school based prevention programs to successfully engage the parents in the work, there are three necessary requirements. First, the prevention staff must be well qualified. They suggest master level student interns to run the actual program, with supervision from licensed staff. These student interns should be the ones to contact the parents by telephone to encourage their participation, and answer any questions that they may have. They have found that the parent responds best when the one running the program actually makes the contact with them to answer their concerns and questions before they decide to participate. Finally, it is important to have hours available to support the parents' participation in the program. As most parents work during the time their child is in school this means after school evening hours must be set-aside for the parents as well as weekends. The possibility of home visits at the parent's convenience is also an option to show them the benefits of the program. Utilizing the three suggestions above is helpful in recruiting parents to participate in their at-risk child's prevention program. The parent must see the benefits of the program to their child or themselves, and the program should be individually tailored to the needs of the particular student and their parents. Hogue, Johnson and Liddler (1999) believe that if prevention
programs spend as much energy engaging the child’s parents as they do on the intervention itself, more success can be obtained using the family system than just focusing on the individual in the system.

Kramer (2000) makes an argument that broader social and economic forces than just peer group association and family are at work in contributing to at-risk youth and delinquency. He argues that poverty, discrimination, inequality and lack of access to social support systems contribute more to youth delinquency than things like the family, school and the community the youth is a part of. Youth delinquency is a result of the decline of the moral fabric of the American culture. He states the condition of the family and the community the youth is a part of is greatly affected by the larger social and economic conditions of the broader society. These broader conditions of extreme poverty, social exclusion and inequality affect the family and community of the youth, and these in turn affect the way youth respond to society.

These larger forces of economics and social deprivation contribute to the decay of the informal support system of the at-risk youth. Support from family, neighbors, community members and others are destroyed by the larger forces of poverty and inequality, leading to less support for the youth. This lack of informal support
leads to more risk of conduct disorders in children, like antisocial behavior. The lack of parental support and supervision is directly related to at-risk youths' delinquent behavior according to Cullen (1994). He cites the correlation between a lack of parental support and increased delinquent behavior. The opposite is also true, the more parental support and supervision a youth has, the less likely they are to engage in delinquent behavior. The larger forces of economics and the decline of two-parent households are directly related to the increased probability of youth delinquency. The amount of time a parent spends in intimate conversation with their child, confiding, sharing and problem solving is inversely related to the likelihood of that child engaging in delinquent behavior.

The proposition that macro forces of society undermine the ability of the family and community to prevent delinquent behavior in their youth is also espoused by Currie (1998). Poverty is linked with multiple stressors that limit the ability of parents to supervise and monitor their children's behavior. Poverty is linked with crime and child abuse, two factors that breed delinquency among at-risk youth. This lack of social support can hurt the at-risk youths intellectual development, which leads to poor academic performance. He
states that economic position is directly linked with the ability of parents to provide resources, opportunities and support to their children. The children of more disadvantaged parents are more likely to engage in delinquent behaviors.

Larzelere and Patterson (1990) also found a link between economic factors and delinquency. As the amount of economic inequality rises, so too does the number of single parent homes. Single parents are less likely to have the resources to monitor, supervise and control their children. They found a link between poverty and poor parenting skills, and then a link between poor parenting skills and delinquency. They suggest that to lessen the effect of the larger social forces on at-risk youth, early prevention is required. This prevention would target not only the youth, but the parents as well.
CHAPTER THREE

METHODS

The purpose of this study was to ascertain who is being served by an at-risk youth program in the school setting. One such program attempting to meet these needs is the RCOE GRIP program. As the need for such a program is well established, the next question is how to go about implementing it most effectively? The GRIP program is grant funded and staff must evaluate the effectiveness of this program to the ones supplying the money to run it. It is hoped that after the completion of this project, clarity on who is being served will be attained.

The research method used was secondary analysis of the case records for the GRIP program participants from the 1998 and 1999 school years. The research focused on the elementary and secondary school aged children in the Perris school district. The case files were kept by MSW students from CSUSB, and LLU. The information included was student demographics, psychosocial assessment, diagnosis, treatment plan, follow up notes, and family history. The information gathered from the case files were examined as to patterns, intervention approach and
treatment plan, efficacy in recognizing potential serious issues for at risk youth and demographic data.

Limitations of the Study

The limitation of this study was that results could be generalized to the area of the Perris school district. Different schools and age groups were represented in the sample. Using the data from the literature review, questions can be asked of the efficacy of the GRIP program. The research question was stated as: who does the RCOE GRIP program serve and what are the at-risk factors of these youth? The assumption is that for this program to be evaluated for effectiveness, it must first gather solid information from valid and reliable research. Improvements may be possible through an evaluation of what is known to work in the literature, and how the GRIP program is attempting to accomplish the same goal.

The sample came from schools located in the Mead Valley region of the Perris school district. This area is economically disadvantaged, and largely Hispanic in population. The selection criteria were children who actively participated in the program in the years 1998 and 1999. The research followed a descriptive, correlational
design using a two-page questionnaire. This plan included a maximum sample population of 100 case files. Personal variables include information such as gender, school setting, ethnicity, living arrangement, religious preference, current stressors, and presenting problem. The second page of the questionnaire looked at other variables such as the treatment modality used, treatment goals, number of individual counseling sessions received, number of unexcused absences, number of suspensions, and the number of expulsions for the individual students.
CHAPTER FOUR
DATA COLLECTION INSTRUMENT

Data were collected from the RCOE GRIP case files. Some of the independent variables collected were the student ethnicity, school setting, gender, type of incident that brought them into the program, family structure and support, gang and drug risks, abuse issues and economic and environmental stressors. The level of measurement was nominal and ordinal. Variables such as the social workers intervention plan, referrals to other support systems and outside agencies, type of counseling provided, i.e. group family or individual, length of time in the program and prior suspensions and expulsions was unable to be obtained as the second page of the data collection tool was not completed due to the information being absent from the case files.

The data were collected during the fall of 2000. The files were reviewed for approximately three months. Case files were numbered so as to eliminate the need for a name on the data file. Confidentiality of those involved was protected and ensured at all times.
In examining case files, questions regarding patterns in whom the GRIP program is serving and what services are being provided were addressed. Also, data on what programs and interventions are proven effective in the literature was compared with what services the GRIP program offers. The data on the clientele of the program pointed to needed services for the student, or their family. Using a chi square analysis, patterns in who was being referred to the GRIP program were examined by looking at such variables as gender, ethnicity and school setting. Relationships were examined between the client’s presenting problem, current stressors, services received and family characteristics. Hispanic youth are more likely to be considered at risk according to the literature, this may explain this populations’ high representation in the GRIP program.

Likewise, as more males are considered at risk than females this was also reflected in who is being served by the GRIP program. It is possible that not many females will be in the GRIP program. At what school setting are
most of the participants in GRIP being referred to the program? The literature shows that the earlier intervention is started the more successful it is. Is the GRIP program reaching out to these students? As the case files were reviewed, other questions did arise. Data analysis was computed using the SPSS ver. 10.0. Frequencies and correlations were established as appropriate. Chi-square tests were utilized to compile the profile of the GRIP program user, and their family.
CHAPTER SIX
RESULTS

A total of 80 case records were sampled for this study out of a total possible 100 cases. Of that sample, eighty case records were sufficiently complete enough to fill out the data collection instrument. Twenty files were so grossly incomplete that they had to be omitted. The results are based on the remaining 80 case records.

Student Profile

The typical child receiving services in the GRIP program looks like the following; he is a male, of an ethnic minority in the elementary school age years that most likely lives with one parent or a guardian. The family income is below $30,000 per year and they are probably on some type of government assistance. It is common for the family to not have full time employment. The client is likely to have other problems outside of school that affect either his academic performance, or increase acting out behaviors in class necessitating a referral for counseling. The client probably has not had counseling services or psychiatric treatment in the past.
The study population was 65% male (n=52) and 35% female (n=28). Their educational setting varied, but the majority 54% were in elementary school (n=43), 17% in middle school (n=14), and 29% were in a high school setting (n=23). The ethnic diversity of this sample is varied as is the community served by the school district. The sample was 40% Hispanic (n=32), 35% African American, and 25% Caucasian. What is noticeable is the lack of any other ethnic groups being included in the population. According to school records, a number of Native Americans live in this school district as well as other ethnic minorities. The majority of the sample population lived with a single parent family model of home setting. The majority (39%, n=31) lived with their mother, only 5% (n=4) lived with their father. This is not unexpected considering that after divorce children generally reside with the mother. What was unexpected was the high percent of the population that was under a guardianship type living arrangement. Guardians could include foster care placement as well as grandparents and other family members. A full 25% (n=20) lived in this type of setting. Only 31% (n=25) lived with both parents in the home.
The presenting problem, or the reasons why the individual was being referred for intervention services was: 25% for fighting (n=20), 22% for being disruptive in class (n=18), 6% for being disrespectful to staff (n=5), and 4% for inability to follow directions (n=3). A large number of the sample, 42% (n=34) was accounted for by the "other" category, which encompassed issues dealing with the student's personal life such as pregnancy, loss and parental divorce. It is important to note that nearly one-half of the presenting problems were not related to misbehavior at school. However, these personal problems
had an impact on the student’s academic performance, requiring a referral for counseling services.

The religious preference for the sample population was not well documented in the case files. Of the 80 case records, only 5% (n=4) contained this information. These case records listed Christian as their religious preference.

Student Stressors

Of the current stressors of the population, 42% (n=34) was parental divorce as the main stressor. Loss was 22.5% (n=18), trauma was 10% (n=8), alcohol and drug issues 5% (n=4), and other category 20% (n=16). Only 21% (n=17) had received previous counseling services, and none had a previous psychiatric hospitalization (n=80).

Two-thirds of the sample population had parents that were employed. The family of origin for the sample is described as 29% unemployed (n=23), 7% employed part-time (n=6), and 64% employed full time (n=51).
The family income level was $20,000 and below 37% (n=30) of the time, between $21,000 and $30,000 27% (n=22) of the time, and between $31,000 and $40,000 16% (n=13) of the time. 18% (n=15) of the families of the students were in the $40,000 and above range. Over one-half of the families in this population (51%, n=41) were receiving
some type of welfare assistance. The correlation matrix pointed to positive significant relationships between parent education level and family income level \((r = .380, p = .001)\) and parental work history and family income level \((r = .602, p = .000)\). This appears to be logical given the nature of the relationship between these variables, e.g. the higher the parents education, the more likely the family income was higher, and the more one worked full time the higher the family income level. Using a chi-square, the relationship between employment and receiving welfare was examined. The more one was employed full time, the less likely they were to receive welfare \(\chi^2 = 22.82, df = 2, p = .000\).

I was unable to ascertain the information from the second page of the data analysis instrument such as number of counseling sessions received, type of counseling sessions, intervention method and treatment goals. Unfortunately, this information was not available in the case files, and this second page of the questionnaire was unable to be used for this study.
Differences Among Students

Differences and relationships were examined between profile characteristics, presenting problem, and services received. Family of origin, and poverty also pointed to a correlation with being defined as at risk. Therefore, these variables were examined too. Living arrangement was compared with current stressors in life where a strong relationship was found using a chi-square. Of those living with single moms, nearly twice as many as expected complained of parental divorce as their primary stressor and all of the students who lived with just their father complained of this also ($X^2 = 63.358, p = .000$). Living arrangement was also correlated with ethnicity. Hispanics were more likely to live with both parents in the home and African Americans were more likely to live with a single mother ($X^2 = 18.593, p = .005$). Likewise, living arrangement is correlated with whether or not the family received welfare benefits. Single mothers were more likely to receive welfare benefits, and families where both

Some differences among the students were noticed along the lines of ethnicity and gender. Using a chi-square analysis of those that had received previous counseling, Caucasians were found to have significantly higher rates of receiving this service at the .001 level of measurement. Although comprising only 25% of the
sample, Caucasians were twice as likely than African Americans and three times as likely as Hispanics to have had received previous counseling services. Concurrently, of the 17 students who had received previous counseling in the sample more than half were female (n=9).

On the issue of the presenting problem being one of fighting, using a chi-square analysis this was highly correlated with the male gender ($X^2 = 4.689, df=1, p = .034$). Likewise, this presenting problem was highly correlated with the African American ethnicity, with 94.7% of all fighting referrals being made for an African American student. There was no correlation between fighting and the school setting of the client, whether elementary, middle or high school.

There were no significant differences between the ethnic groups and whether or not the client's family received welfare benefits. Likewise, there were no significant differences between the school setting of the client and whether or not the client's family received welfare. This was true also for the gender of the client and if the family received welfare. Receipt of welfare benefits was not correlated with whether or not the client had received previous counseling, and family income level was not correlated with the client having had previous counseling.
What was correlated and not unexpected was the more full time employment history of the family the less welfare received by them and vice versa ($X^2 = 22.825$, $p = .000$). This was also the fact for the parental education level and the family income, with the two being directly correlated together with one going up the other does too ($X^2 = 50.497$, $p = .000$). What was also not unexpected was the fact that single mothers tend to be poorer, and those that live with both parents tend to be richer ($X^2 = 23.925$, $p = .004$).

When both parents were in the home were more likely to not receive welfare benefits ($X^2 = 21.175$, $p = .000$). More African Americans were found to be unemployed, and less likely to be working full time ($X^2 = 7.978$, $p = .047$).
CHAPTER SEVEN

DISCUSSION

There are several areas for discussion from this research. There were noticeable patterns as to who were being served and variables related to them. The literature points to several recommendations for future service interventions. Additionally, recommendations for future data collection and record keeping has been formulated due to the experience of not finding the necessary information in the case files.

There are several possible explanations for the correlation of the variable ethnicity and previous counseling services. It is possible that Caucasians are referred to counseling services more often than other ethnicities. It is possible that other ethnic groups and their family perceive counseling services as a stigma. Also, it might reflect an attitude among parents as to the worth of counseling services for their children. Since no Native Americans were represented in this sample, the notion that they express or present differently with their problems should also be examined. Concurrently, as more females were referred for previous counseling services

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than males this may also point to a bias as to who is referred to counseling.

Likewise, the relationship between ethnicity and presenting problem needs to be examined. As the majority of referrals for fighting were for the African American ethnic group, does this point to a bias on the part of those who do the referring for counseling services? How is it that African American males get referred far more often for fighting than any other group?

This may tie in with the importance of getting parental involvement in these types of programs. According to Hogue, Johnson and Liddler (1999) parental involvement is a main key to successful intervention with at risk youth. Perhaps reframing the intervention from Gang Risk Intervention Program (GRIP), to a student faire or workshop might take away the stigma of the "bad parent". This type of service might also include booths on campus with classes and services offered to all students, not just those considered at risk. Similarly, as this sample had a high Hispanic population the language barrier needs to be examined. Having forms in Spanish as well as English is recommended.
The literature states that the earlier one intervenes the more successful the intervention. This coincides with this sample as the majority was in the elementary school setting (n=43). Working as part of the GRIP program as a social work intern I can also incorporate my experiences in the program. I worked with a high Hispanic population of mostly males who were referred from the school guidance counselors for problem behaviors in and out of the classroom setting. A way to meet these students' needs may be to offer not only individual counseling, but also group therapy. The support of school staff in this endeavor is also needed. There is a high emphasis on academic performance, and the teachers do not want their students out of class for counseling. This problem is also compounded by the lack of adequate workspace to conduct the counseling sessions. A concerted effort must be made to encourage the participation of the school staff to be involved with the counseling program. As this study showed a high amount of students dealing with divorce issues perhaps the school site is the place to develop a curriculum on dealing with divorce and its effects.

Additionally, the literature reports of the
relationship between the effects of poverty on a youth being labeled as at-risk. As this sample showed a high relationship with the youth’s parent receiving welfare benefits and still working full time how does this effect the parents ability to be involved with the school program? Perhaps outreach on the weekends and after school hours would be more able to encourage parental involvement. Concurrently, baseline data on the family history needs to be collected. Family involvement in criminal activity, drugs or gangs is important in formulating a treatment plan for the at-risk youth.

It is imperative that proper record keeping be maintained so as the in formation in the case files will more accurately reflect the population served. One recommendation is to ensure that time is set aside during the work day for proper record keeping, and that periodically supervision inspects the workers’ files to address any issues of inadequate record keeping. This will help ensure that the necessary data is collected and recorded for future outcome studies. Enlisting the school site personnel to help with demographic data such as unexcused absences, suspensions and expulsions will free
up the GRIP counselor to more adequately address the needs of the student while still capturing the needed data.

It is hoped that this research will set the foundation to answer the questions raised as to how to make the program more effective now that the population is known, and what are some of the issues they face. To that end this work will be given to the GRIP program for their review and future planning.
APPENDIX

DATA COLLECTION INSTRUMENT
APPENDIX - DATA COLLECTION INSTRUMENT

• GENDER: MALE  FEMALE

• LIVING ARRANGEMENT: MOTHER  FATHER  BOTH PARENTS  GUARDIAN  OTHER

• PARENTAL EDUCATION LEVEL: DID NOT COMPLETE HIGH SCHOOL  
  HIGH SCHOOL GRADUATE  SOME COLLEGE  COLLEGE GRADUATE  OTHER

• FAMILY INCOME LEVEL: BELOW $20,000  BELOW $30,000  
  BELOW $40,000  OTHER

• PARENTAL WORK HISTORY: UNEMPLOYED  PART-TIME  FULL-TIME

• ETHNICITY: CAUCASIAN  AFRICAN AMERICAN  
  HISPANIC  ASIAN  NATIVE  
  AMERICAN  PACIFIC ISLANDER  OTHER

• PRESENTING PROBLEM: FIGHTING  DISRUPTIVE  
  DISRESPECTFUL  INABILITY TO FOLLOW DIRECTIONS  
  OTHER

• PSYCHIATRIC HISTORY: PREVIOUS COUNSELING: YES  NO

• PREVIOUS PSYCHIATRIC HOSPITALIZATION: YES  NO

• CURRENT LIFE STRESSORS: TRAUMA  LOSS  ALCOHOL/DRUG USAGE  PARENTAL DIVORCE  OTHER

• RELIGIOUS BACKGROUND: CHRISTIAN  MUSLIM  JUDAISM  
  ATHEIST  OTHER

• AGE OF CLIENT: ELEMENTARY  MIDDLE  HIGH SCHOOL

• PARENTS RECEIVING WELFARE: YES  NO
• DSM IV DIAGNOSIS:

• TREATMENT GOAL:

• TREATMENT STRATEGY:

• NUMBER OF INDIVIDUAL COUNSELING SERVICES:

• NUMBER OF FIGHTS:

• NUMBER OF SUBSTANCE USE VIOLATIONS

• NUMBER OF SUSPENSIONS:

• STUDENT EXPELLED: YES NO

• NUMBER OF UNEXCUSED ABSENCES:
REFERENCES


