



Early truancy evaluation: Replication of an evaluation using a regression discontinuity design



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ABSTRACT

This study replicates the evaluation of an early truancy intervention using a Regression Discontinuity Design. The current study assesses the effectiveness of the intervention for three cohorts of students ($N = 2760$). Approximately half of the students for each year of the intervention received the high risk, intensive case management intervention, while the other half received a warning letter only. The truancy intervention proved to significantly reduce truancy among participants in the high-risk intervention among two of the three cohorts ($p < 0.01$), while truancy among control group participants remained at pre-intervention levels. Successful case closure was associated with a reduction in truancy ($p < 0.01$). Findings continue to support the efficacy of the intervention. However, the intervention should be replicated with more diverse population and in other geographic locations.

1. Introduction

In the 2013–2014 school year > 6 million, or 1 in 7, students were chronically absent, with poor and minority students vastly overrepresented (Civil Rights Data Collection Center, 2016). Truancy has been linked to host of negative outcomes for students, schools, and communities (Alexander, Entwisle, & Kabbani, 2001; Burrus & Roberts, 2012). Chronic truancy is associated with lower reading and math achievement, grade failure, high school dropout, unemployment and/or underemployment in adulthood as well as lifelong health and mental health issues (Newsome, Anderson-Butcher, Fink, Hall, & Huffer, 2008; Sutphen, Ford, & Flaherty, 2010). Communities bear the brunt of individuals being chronically underemployed and/or unemployed, and businesses in those communities must train an undereducated/under skilled workforce. Thus, the effects of truancy become lifelong, systemic, and have far reaching effects throughout society (Newsome et al., 2008; Western & Pettit, 2010).

Historically, truancy has been classified as an issue affecting older students, particularly adolescents (DeSocio et al., 2007; Shoenfelt & Huddleston, 2006). However, as research has expanded it is evident that truancy issues are arising with students as early as kindergarten and elementary age students are missing school at an alarming rate (Rhodes, Thomas, Lemieux, Cain, & Guin, 2010). Current research indicates that truancy appears to be a symptom of underlying psychosocial issues, rather than a choice made by young students (Rhodes et al., 2010; Richman, Bowen, & Woolley, 2004). Moreover, some researchers now posit that it is possible to predict high school

graduation with about 70% accuracy based on individual risk factors such as poverty, truancy, grade retention before first grade, behavior issues, and lack of parental involvement (Alexander et al., 2001).

2. Review of the literature

There is not a single, agreed upon definition of truancy. However, the most common definition of truancy is “any unexcused absence from school” (NCSE, n.d.). Although this would appear to satisfactorily define truancy, the word “unexcused” has proven to be problematic concept for schools and school districts. For example, some schools recognize a parental note as a formal excuse, whereas other schools only recognize a note from a medical doctor. Defining truancy is further exacerbated by policies that fold tardies, early departures, and even school suspensions into the category of unexcused absences.

Researchers recognize defining truancy as an ongoing issue. Sutphen et al. (2010) noted that measures of truancy across hundreds of studies varied immensely. Measures of attendance and truancy have ranged from a) overall school attendance rates, b) school attendance rates plus number of students with 20 or more absences, c) number of absences plus the number of tardies, and finally, d) number of absences. Ultimately, researchers have indicated that the long-standing problem of defining truancy continues to impede both intervention programs and research (Sutphen et al., 2010).

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2.1. Correlates of truancy

2.1.1. Individual correlates

Children living in poverty experience greater rates of truancy regardless of other demographic and academic characteristics (Abedi, 2015; Civil Rights Data Collection Center, 2016). Children in poverty tend to be behind academically, thus leaving them susceptible to both truancy and eventual grade failure. The role of gender as a correlate of truancy appears to fluctuate based on student grade level (Cham, Hughes, West, & Im, 2015). For middle and high school students, gender has been linked to both the frequency and amount of truancy an individual experiences (Henry & Huizinga, 2007; Richman et al., 2004). In contrast, it has been found that elementary students, both male and female, become truant at nearly equal rates (Rhodes et al., 2010; Thomas, Lemieux, Rhodes, & Vlosky, 2011). Race is also a robust correlate of truancy. Children from minority and ethnic races are more likely to experience truancy (Henry & Huizinga, 2007; Teasley, 2004). Historically, age has been a correlate of truancy, with older students experiencing more truancy than their younger counterparts. Age as a correlate of truancy is rapidly changing with younger students experiencing almost equal amounts of truancy.

2.1.2. Academic correlates

Grade level has been identified as robust correlate of truancy (Catalano & Hawkins, 1996), however, the relationship is not linear. In elementary school, kindergarteners and first graders often experience more truancy than their older elementary counterparts as their families adjust to school expectations and attendance policies. Truancy problems reappear in 4th and 5th grade for what appears to be two separate issues: “gatekeeping” grade levels for standardized testing and the transition to middle school (Reschly & Christenson, 2013).

The last three academic correlates of truancy all appear to be related to overall school engagement and thus problematic absenteeism. Students who have been diagnosed with a learning disability or who have been placed in special education are more likely to be truant. Students who have been retained a grade and who are subsequently over-age for their grade are more likely to experience chronic truancy, further grade failure, and eventual school dropout. Lastly, students who have been previously suspended or expelled also experience more truancy than their counterparts who have never been disciplined in this manner (Alexander et al., 2001). Identifying the correlates of truancy has been imperative to assessing truancy intervention programming and for identifying best practices for truancy intervention.

2.2. Truancy intervention programs

The National Center for School Engagement (NCSE, n.d.) database provides an extensive list of prevention and intervention programs that address chronic absenteeism across the country. However, few of the identified programs address truancy specifically and even fewer have undergone rigorous evaluation. Gandy and Schultz (2007) reviewed over 2000 programs that identified truancy intervention as their main focus. From this list, Thomas et al. (2011) identified 6 programs that were both community-based and utilized a case management intervention to deliver services to both the child and their family. These programs were: Project START (Stop Truancy and Recommend Treatment; Fantuzzo, Grim, & Hazan, 2005), Check and Connect (Lehr, Sinclair, & Christenson, 2004), Family and Community Involvement (Epstein & Sheldon, 2002), The School Attendance Initiative (Holbert, Wu, & Stark, 2003), Early Elementary Truancy Initiative (McCluskey, Bynum, & Patchin, 2004), and Kern County Truancy Reduction Program (Van Ry & Garcia, 2006). Among these, Project START was the only program that showed promising evidence of effectiveness, while the rest showed only suggestive evidence of effectiveness (Gandy & Schultz, 2007).

Findings from the six identified truancy reduction programs all

indicated initial success with eliminating or reducing truancy. However, over time, participants in the programs often regressed to pre-intervention levels of truancy (Fantuzzo et al., 2005). The greatest increases in attendance for program participants ranged from 1.9% (Family and Community Involvement, Epstein & Sheldon, 2002) – 10% (The School Attendance Initiative, Holbert et al., 2003). Reductions in truancy ranged from about 1.9% (Epstein & Sheldon, 2002) to approximately 6% among program participants (McCluskey et al., 2004).

In addition to the 6 programs reviewed above, two more interventions are reviewed here. The first is the Early Truancy Intervention (ETI) program, which was instituted in 36 schools from 1999 to 2002 and consisted of a letter sent home for 5 absences within a month or 10 absences in 90 days (Lawrence, Lawther, Jennison, & Hoghtower, 2011). Among the 36 schools that participated, 34 displayed positive results and 26 reported reductions in chronic truancy. However, attendance gains were not maintained, as participation in the program was not consistent. Some schools that stopped participation saw an increase of 19–23% in truancy while schools that used the intervention consistently maintained much smaller rates of truancy, averaging between 3.75% and 6.75% (Lawrence et al., 2011). The other program is the Truancy Intervention Program (TIP), an intervention that pairs volunteer attorneys and non-attorneys with children who are not attending school (Skola & Williamson, 2012). The specific goal of the program is to prevent involvement in the juvenile justice system for youth experiencing chronic truancy. TIP served over 6000 students from 2000 to 2006 and boasts an overall success rate of 80%. In other words, 80% of the children served by TIP have not returned to juvenile court (Skola & Williamson, 2012). However, the findings of this study do not address truancy specifically.

Although the successes of the programs described above are mixed, the findings do indicate there are certain approaches that appear to garner the most success. From these findings researchers and school social work professionals have identified several best practices for truancy intervention. Best practices include a) early and swift intervention, b) intensive, individually tailored case management and c) wrap around services that treat both the child and the family (Gandy & Schultz, 2007).

In summary, research in the area of early elementary truancy remains scant. The problem of defining truancy has further exacerbated this issue. Although the risk factors for truancy, as well as the life long impact of truancy, have been widely studied, few empirically evaluated interventions are available in the extant literature. Moreover, available interventions focus on older adolescents (DeSocio et al., 2007; Shoенfelt & Huddleston, 2006). The current study aims to partially address this gap in the knowledge by replicating the results of a rigorous evaluation of the Truancy Assessment and Service Centers (TASC) early intervention program. The TASC program intervenes with elementary age children and is grounded in best practices.

3. The Truancy Assessment and Service Centers Program (TASC)

The Truancy Assessment and Service Centers (TASC) are a statewide truancy intervention initiative that began in 1999 in one state in the Deep South.¹ The TASC program is an intensive, multi-modal, case management intervention, geared toward students, and their families, in kindergarten through fifth grade who are experiencing truancy (Rhodes et al., 2010). The TASC intervention focuses on assessing risk factors for continued truancy in an effort to treat the underlying causes of truant behaviors.

A cornerstone of the TASC intervention is that children are referred as swiftly as possible. Children who accumulate five unexcused absences at any point during the school year are referred to the TASC

¹ The TASC program changed from a University partner to a community partner in 2013, thus data from 2013 forward are no longer available to evaluators.

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