

TECHNICAL REPORT

**PILOT STUDY OF THE
TOO GOOD FOR DRUGS AND VIOLENCE AFTER-SCHOOL
ACTIVITIES PROGRAM**

APRIL 2004

Submitted by:

Tina P. Bacon, Ph.D.
Researcher Consultant
St. Petersburg, Florida 33715

A project funded by C. E. Mendez Foundation, Inc.
601 South Magnolia Avenue
Tampa, Florida 33606

RESEARCH SUMMARY

Pilot Study of the *Too Good for Drugs and Violence* *After-School Activities Program*

This pilot study examined the effectiveness of the *Too Good for Drugs and Violence After-School Activities Program* (TGFVD-AS), a multifaceted interactive intervention. The *TGFVD-AS* curricula focus on developing personal and interpersonal skills that support children's abilities to adapt to changing social contexts, and resist influences that lead to risk taking behaviors. Participants were 66 students age 7-12 served in three inner city after-school programs. Children were matched on age-range, gender, and socioeconomic status. Students completed a survey questionnaire before and following program delivery. A trained instructor delivered the *TGFVD-AS* program to participants in ten 60-minute sessions over a two-month period. Results show that treatment students, as compared to control students, evidenced more positive scores on the Protective Factor Survey Questionnaire. After program delivery, students in the treatment group evidenced significant and positive improvement in goal setting and decision making skills, conflict resolution skills, social and resistance skills, and communication skills.

**Pilot Study of the *Too Good for Drugs and Violence*
After-School Activities Program**

Introduction

This pilot study examined the effectiveness of the *Too Good for Drugs and Violence After-School* (TGFDV-AS) activities program to impact children's skills development associated with protective factors that facilitate resistance to future drug use and violence. The study examined the following question: Do students participating in the *TGFDV-AS* prevention program, in comparison to students in the control group, indicate higher levels of social skills development?

Program Description

The *Too Good for Drugs and Violence After-School* activities program is a multifaceted interactive intervention that uses a universal education strategy. The *TGFDV-AS* prevention program (Ages 5-9 and 10-13) consists of: (a) 36 skill development activities covering eight core goals, (b) "Looking for More" component at the end of each lesson unit with suggestions for recommended reading, videotapes, and activities for reinforcing key concepts and skills, (c) parent component consisting of "Home Workout" sheets for families, and (d) staff development component for program facilitators for creating a caring and supportive learning environment.

Grounded in the theories of Social Learning, Social Development and Developmental Assets, the *TGFDV-AS* program is designed to develop knowledge and skills in: (a) goal setting, (b) decision making, (c) managing emotions, (d) bonding and relationships, (e) communication, (f) conflict resolution, (g) drug awareness, and (h) community involvement. The program also provides information about the negative consequences of drug use and the benefits of a drug-free life style.

Instructional strategies emphasize cooperative learning activities, role-play situations, and skills-building methods such as modeling, practicing, reinforcing, providing feedback, and promoting generalization of skills to other contexts. Children and youth are provided many opportunities to be active participants and receive recognition for their contributions and involvement. Teaching methods model and encourage bonding with prosocial others. Participants are also encouraged to share the "Home Workouts" with family members to reinforce concepts practiced during the lessons.

Method

Sixty-six students from three inner city elementary schools from a large Florida school district with after-school programs participated in the study. The student sample was 67% female, 62% African American, 35% Hispanic, and 3% Asian. Eighty percent of the students were categorized as economically challenged by receipt of reduced or free lunch services. Forty-eight percent of the students were in Grades 2-3, and 52% in Grade 4-5.

Students in the treatment school were matched with students in the control schools based on age-range, gender and socioeconomic status. Students in the treatment and control sample were administered 30-item Likert survey questionnaire prior to delivery of the *TGFDV-AS* program and following program delivery ($r_\alpha = .81$). Student survey responses were grouped into five protective subscales associated with impacting children's resiliency to social challenges. Protective factors were computed using the mean of the item scores for each subscale consisting of: Goal Setting and Decision Making Skills; Conflict Resolution Skills; Social and Resistance Skills; Emotional Competency Skills; and Communication Skills.

A trained instructor delivered the prevention activities to treatment students in the after-school program in ten 60-minute sessions over a two-month period. The number of lesson

activities included in each session ranged from two to four. The treatment group was divided into two sections, one group with students in second and third grade (ages 7 to 9) and the other group with students in fourth and fifth grade (ages 10 to 12).

To assess the quality of program implementation, four classroom observations were conducted for the two treatment age groups. The results of the observations suggest the program instructor was: prepared for instruction; provided clear directions about how and what to do for each lesson activity; transitioned effectively between activities; provided explanations and gave examples; provided all intended lesson activities; used all required activity materials; used strategies to keep students involved and on-task; provided students opportunities to participate in discussions; provided sufficient time for students to practice learned skills; recognized and reinforced student participation; modeled respectful behavior for and among children; listened to student input in a receptive and supportive manner; provided clear prosocial or “no use” feedback to student comments; and created an open and sharing learning environment. Overall, classroom observations suggest the lesson activities were delivered within the guidelines provided in the *TGFDV-AS* curriculum manual.

Results

Comparison between Treatment Pretest and Posttest Scores

Differences in pretest and posttest survey scores for children participating in the *TGFDV-AS* program were examined using correlated *t*-tests. The findings suggest students in the treatment group had significantly higher scores following the delivery of the prevention program ($t = 6.23, p = .0001$). The mean pretest survey score was 3.869 ($SD .509$) in comparison to a mean posttest score of 4.237 ($SD .348$). The overall results suggest a moderate to large program effect size ($d = .72$).

Significant improvement was also observed in four of the five protective factor subscales (see Figure 1). Students participating in the prevention program had higher posttest scores in goal setting and decision making skills, conflict resolution skills, social and resistance skills, and communication skills. No significant improvement in emotional competency skills was observed for children in this sample.

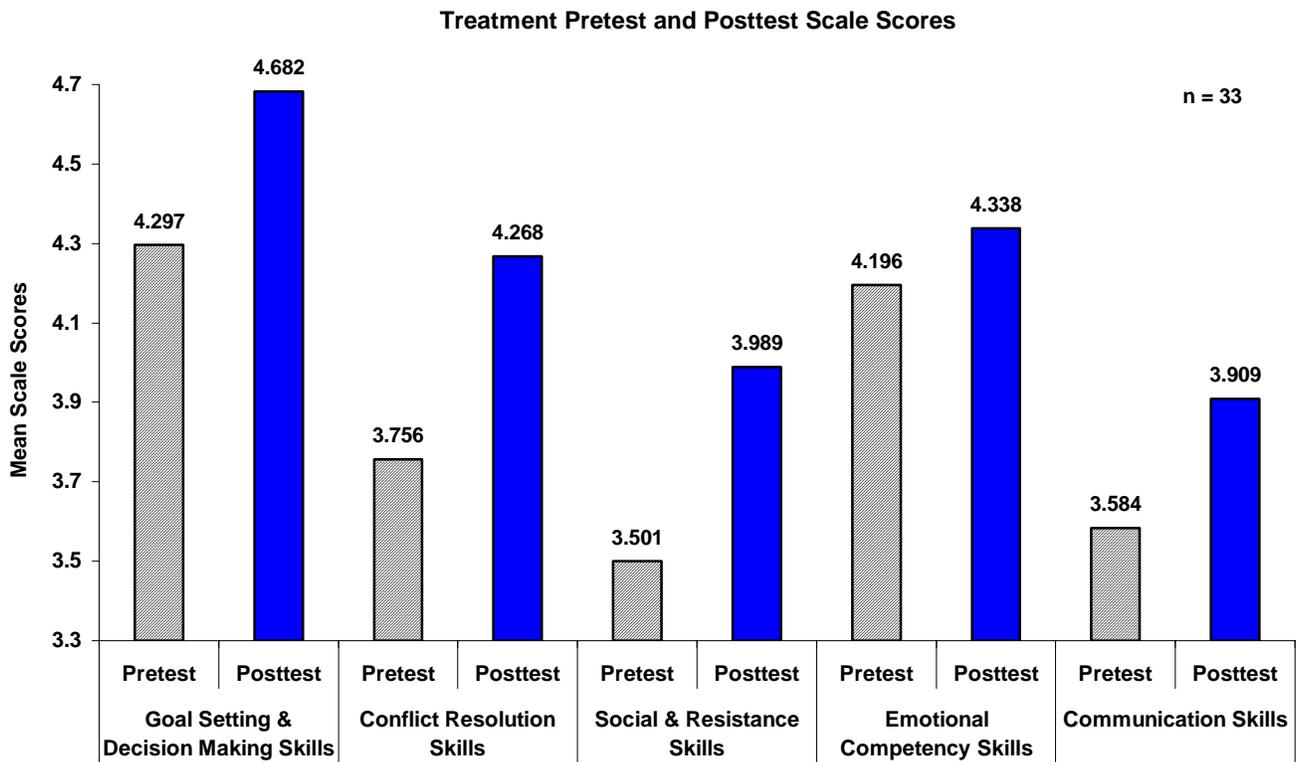


Figure 1. TGFDV-AS Treatment Pretest and Posttest Scale Scores

Comparison between Treatment and Control Scores

Although children in the comparison group were matched with children in the treatment group, students in the control group tended to have higher pretest scores on the student survey questionnaire. In an effort to statistically control for differences between the groups' initial skill levels, pretest scores were used as a covariate to estimate adjustments to student posttest scores. Mean survey scores for the treatment and control group were examined using a Univariate

Analysis of Covariance design. The findings suggest students in the treatment group had significantly higher scores on the Protective Survey Questionnaire in comparison to students in the control group ($F = 5.17, p \leq .0261$). Pretest and adjusted posttest scores by group are shown in Figure 2.

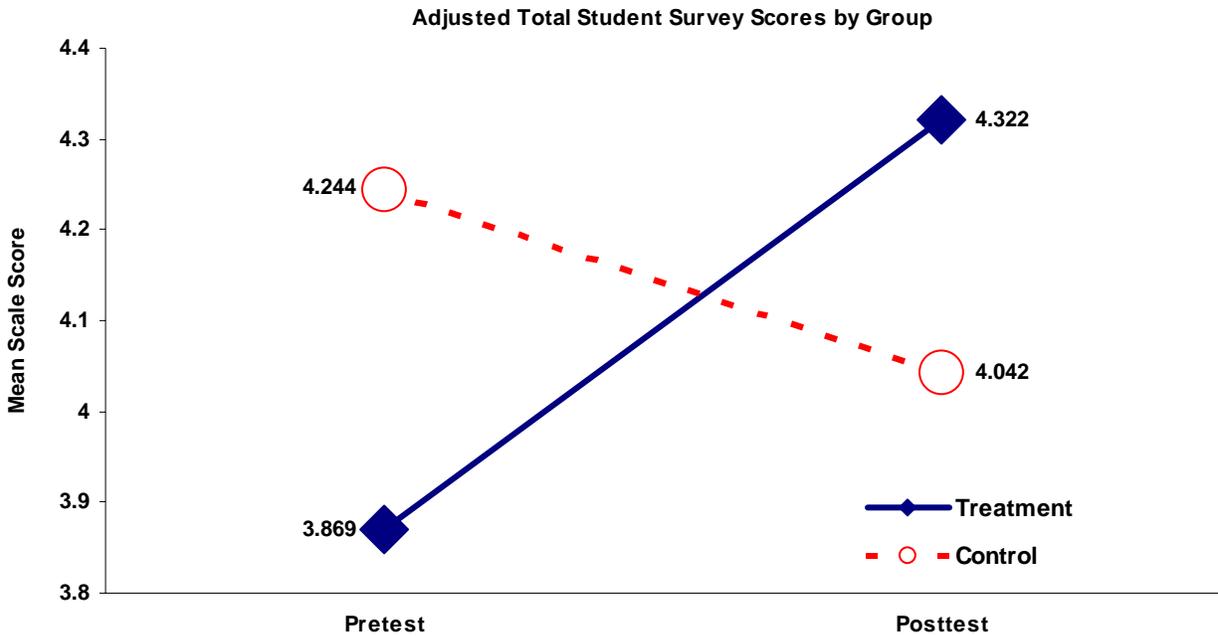


Figure 2. Pretest and Adjusted Posttest Scores by Group

To explore potential trends in treatment effects on the five protective factors, estimates of posttest subscale scores were computed. Shown in Figures 3-7 are the estimated posttest subscale scores for the treatment and control group adjusted for pretest survey scores. Given the limited sample size, findings should be interpreted with caution. The graphic trends suggest that students participating in the *TGFDV-AS* prevention program had a positive linear relationship relative to students in the control group's flat or slightly negative trends. Initial findings of the pilot study are promising. They suggest the potential for the prevention program to have a significant and positive impact on participants' skills development across the five protective areas in comparison to students not participating in the program.

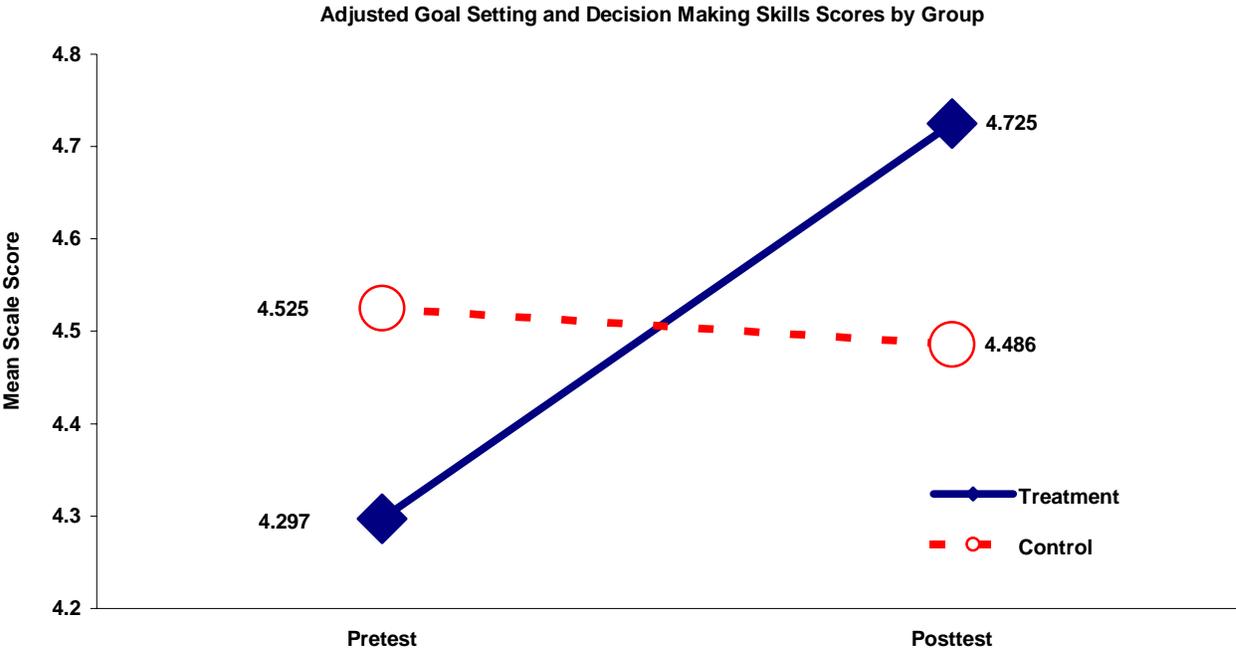


Figure 3. Pretest and Adjusted Posttest Scores for Goal Setting and Decision Making by Group

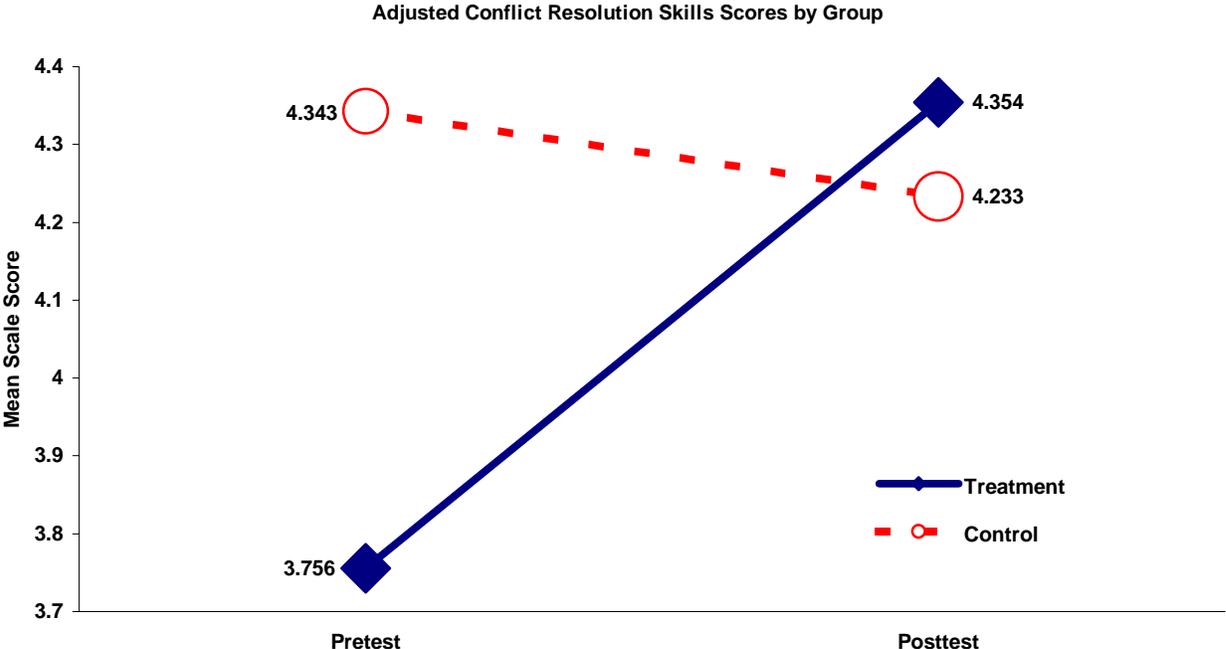


Figure 4. Pretest and Adjusted Posttest Scores for Conflict Resolution Skills by Group

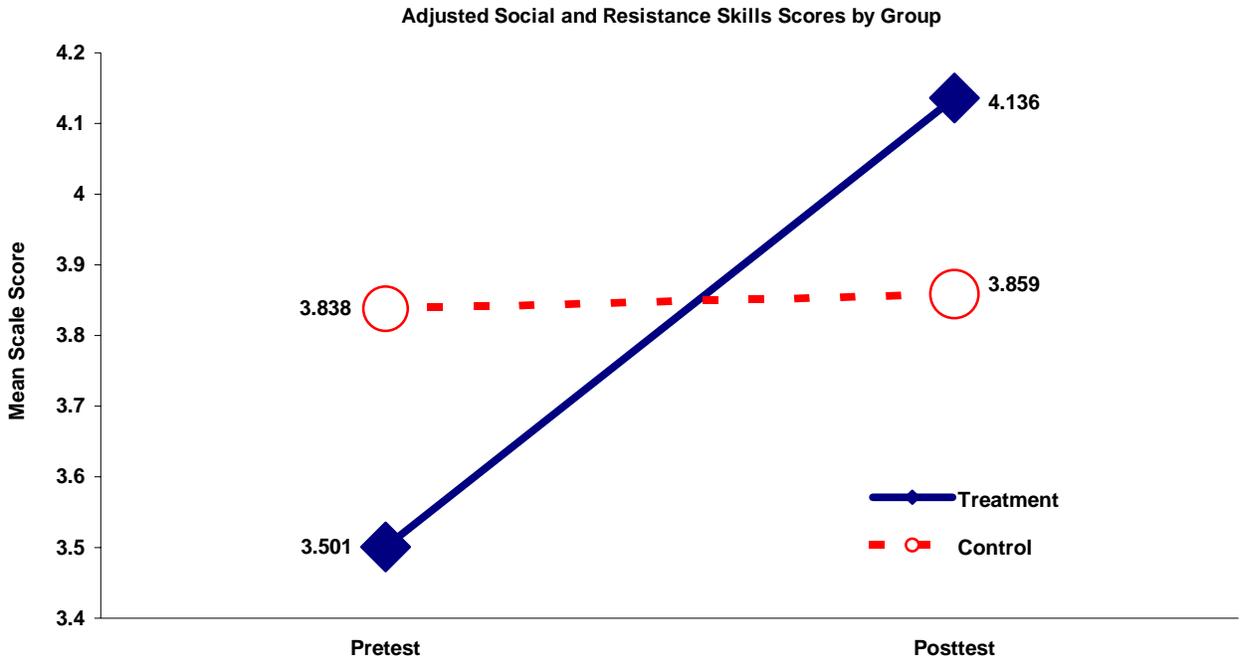


Figure 5. Pretest and Adjusted Posttest Scores for Social and Resistance Skills by Group

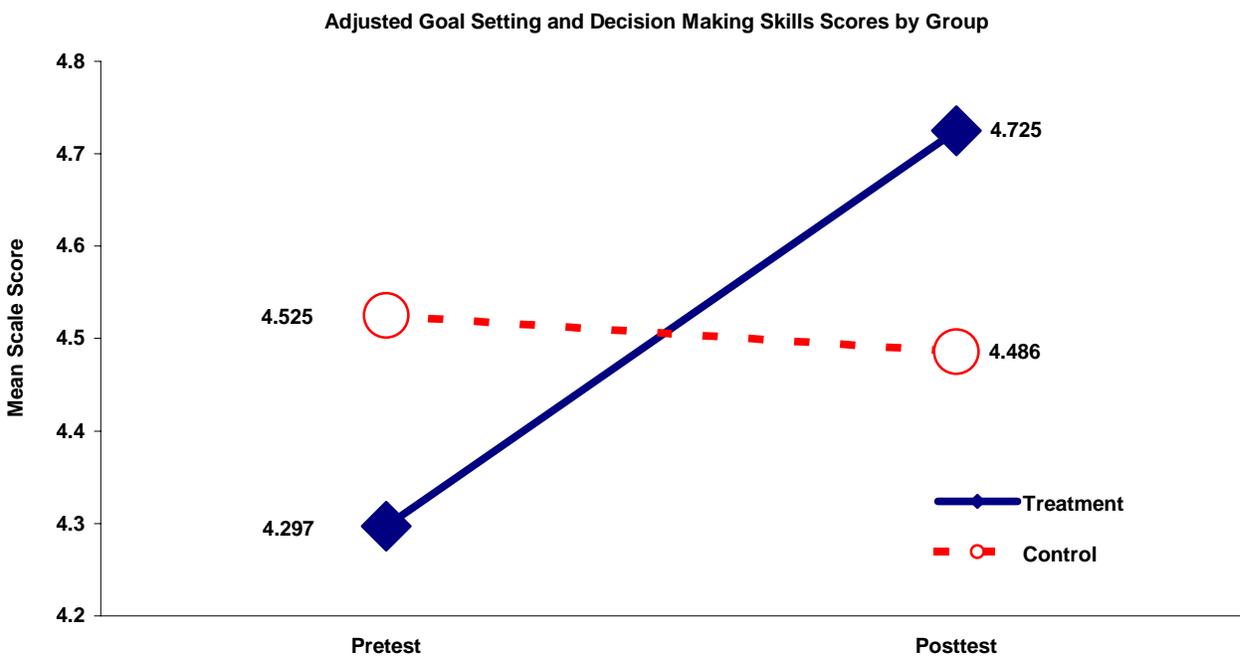


Figure 6. Pretest and Adjusted Posttest Scores for Emotional Competency Skills by Group

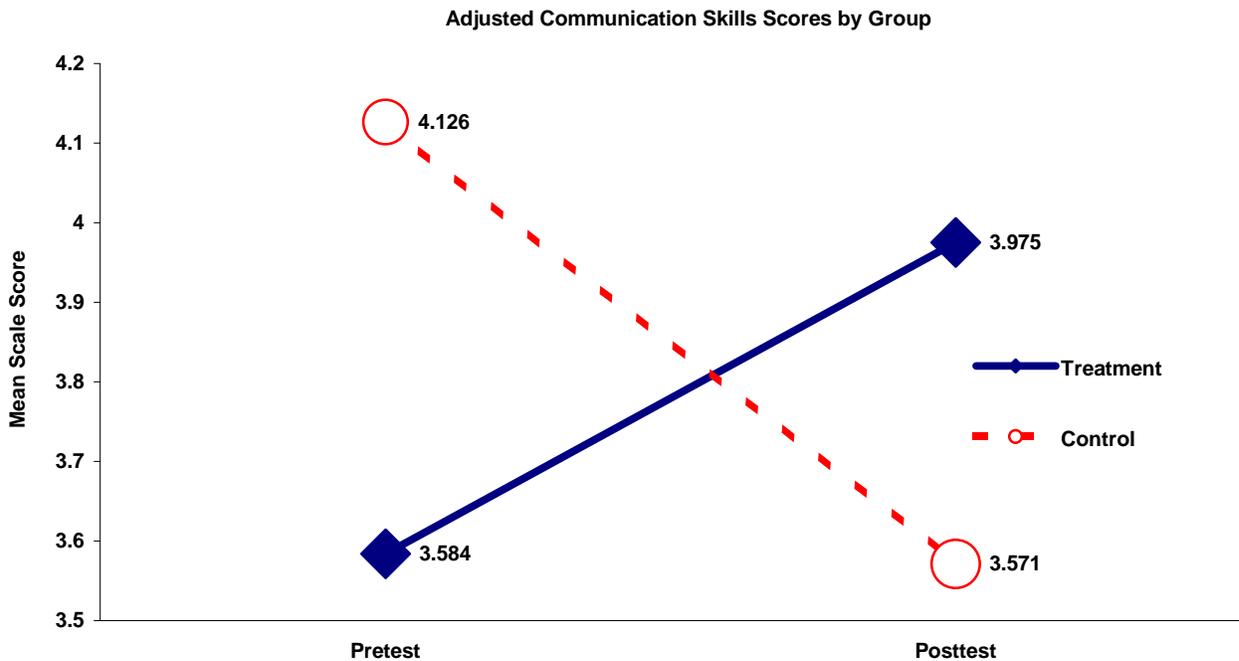


Figure 7. Pretest and Adjusted Posttest Scores for Communication Skills by Group

Discussion

Prevention research has identified risk factors that increase the likelihood of children and youth engaging in risk taking behaviors and certain protective factors that decrease the impact of risk factors. The *TGF DV-AS* prevention program incorporates instructional activities aimed at reducing risk factors and building protective factors. The findings for the pilot study suggest students participating in the prevention program evidenced significant improvement in goal setting and decision making skills, conflict resolution skills, social and resistance skills, and communication skills. The findings also suggest that students in the treatment group had significantly higher protective survey scores following program delivery in comparison to students in the control group.

Given the small sample size for the study, results should be interpreted with caution. Consideration should also be given to the limited ethnic diversity of the sample, with most of the

participants being African American and Hispanic. The study focused on students served in after-school programs located in high poverty inner city locations. Student mobility and consistent attendance in after-school programs were a challenge.

Recommendations for future research include further study using large sample sizes. Study of the *TGFDV-AS* program with representative samples of different types of student populations should be considered. In addition, the long-term impact of the program should be explored. In the present study, the 36 lesson activities were delivered in ten 60-minute sessions. Other lesson activity delivery strategies should be examined. It may be of interest to explore the combination of the *TGFDV-AS* program and one of its companion programs *Too Good for Violence* and *Too Good for Drugs*.