

# **THE PASSAGE PROGRAM: PARENTING ADOLESCENTS SOCIAL SERVICES AND GENERATIONAL EDUCATION PROJECT YEAR THREE**

Wilbur M. Whitney, Ph. D., Morehouse College; Atlanta, GA  
Alan Marks, Ph. D., SUNY Plattsburgh Extensions Center; Queensbury, NY  
Charles L. Eaddy, Ph. D., Metro Atlanta Youth for Christ; Norcross, GA

## **Introduction**

Metro Atlanta Youth for Christ is offering the Parenting Adolescents Social Services and Generational Education (PASSAGE) project to serve primarily African American pregnant or parenting adolescents aged 19 or younger, and their families. The project intervention involves bi-weekly or more frequent training sessions utilizing a parent skills training curriculum, psycho-educational small group discussions and comprehensive case management. Project participants took part in pre and post testing, assessing the effectiveness of the project in altering their attitudes and behavior and preventing further pregnancies. The evaluation of the PASSAGE project is designed to assess a broad range of attitudes and behaviors that are predictive of positive outcomes for young mothers and their children. More specifically, the project assesses the following outcome objectives: (1) program participants will demonstrate an increase of parenting skills knowledge as indicated by pre- and post-test surveys; (2) project participants will have prevented an additional pregnancy as indicated by self report; (3) project participants will remain in school and (4) project participants will have been provided comprehensive case management services.

## **Methods**

To analyze the scale response a repeated measures mixed model anova was used comparing baseline versus post treatment responses as the repeated measure and control versus treatment groups as a between subjects measure. If the treatment had significant effects one would expect to see a significant treatment versus control by baseline versus follow up interaction indicating greater changes in the treatment group than the control group. The PASSAGE project is offered to high school students located in Fulton and DeKalb Counties in the State of Georgia, almost all of whom are students in the City of Atlanta public school system. Graduation coaches at several area high schools refer all of the pregnant and parenting girls within the school to participate in the intervention group for the project. Similarly, coaches from other area high schools refer girls to participate in the control group. Intervention participants receive classroom based instruction in addition to comprehensive case management, whereas control participants receive case management only. The project questionnaire is administered to intervention and control group participants upon entering the project, then again at 6 months and 12 months after entering the project. In addition to the cross site survey the project has also included a local supplemental test as part of the pre/post test instruments. The questions on this instrument were taken from a cross-site test developed for a study of teen mothers conducted by the Center for Substance Abuse Prevention that was found to be both reliable and valid. In addition to printed instruments, the project is also assessed via site visits by the evaluation team, focus groups and individual interviews with participants, staff members and the graduation coaches. Thus the basic research design is a quasi-experimental mixed model repeated measures design comparing non-randomly assigned control and treatment groups at baseline and post-test.

To analyze the scale response a repeated measures mixed model ANOVA was used comparing baseline versus post treatment responses as the repeated measure and control versus treatment groups as a between subjects measure. If the treatment had significant effects one would expect to see a significant treatment versus control by baseline versus follow up interaction indicating greater changes in the treatment group than the control group. For dichotomous measures Fisher's exact z test was employed since all such analyses were two by two tables and Fisher's z is not subject to the limitations imposed by low vales expected cell frequencies.

## **Results**

In accordance with the agreement between the PASSAGE project and the Atlanta public school system, all data from students must be collected at the schools, rather than any other location so that school staff members could monitor this activity. For this reason, post test data has primarily been collected from students who have graduated and could be surveyed at their home. Permission to begin post testing for

most of the other students was not given until late September; therefore data collection is ongoing at this time. Included in the analysis for the present abstract were 100 pre-test surveys for the intervention group and 30 for the control group. The matching post-tests consisted of 37 for the intervention group and 10 for the control group. Following extensive analyses of these data, no significant differences were identified between the intervention and control groups at either pre or post testing. For example, for those who provided responses to the question "Being a parent is a good thing in my life" there were no significant shifts in this variable. For baseline the control (n =10) m = 1.3 and treatment (n = 25) m = 1.36. At the follow up control m =1.1 and treatment m = 1.48. Neither pre versus follow up was significant ( $F(1, 33) = .07, p = .8$ ) nor was the pre versus follow up by treatment versus control interaction, assessing any treatment effect, significant ( $F(1, 33) = 1.01, p = .31$ ). The questions assessing the number of days of the week various interactions between the parent and child occurred were combined to form a scale (Cronbach's alpha = .81) by taking the mean of all the items. Since this did not apply to the pregnant group at baseline only the post treatment means were examined. The control mean was 4.15 and the treatment mean was 4.7. The difference between groups was not significant ( $F(1, 32) = .83, p = .37$ ). An analysis of the dosage data will be included in the final version of the poster presentation. No significant differences between treatment and control groups were found in plans to get pregnant before marriage or before high school graduation, use of contraceptives or the occurrence of repeat pregnancies. Despite the lack of any quantitative evidence for the effectiveness of the program, the results of the interviews and focus groups have been universally positive. Indeed, most of the girls in the treatment group requested that the groups meet more often than every other week.

## Discussion

The results of this analysis suggest that the PASSAGE project is not having the intended treatment effect. However, several factors need to be taken into consideration when interpreting these data. The small sample in the current analyses may play a role in the lack of any statistical significance. However, a larger sample would also have to reveal a dramatic change in the pattern of results to provide support for the effectiveness of the program. In the current sample the differences between groups have been trivial and have generally found more positive attitudes and behaviors in the control group than in the treatment group (although all these differences have been very small and non-significant). Based upon the current data the most likely conclusion to be drawn from a larger sample is one of no differences between control and treatment groups. The project continues to be challenged by difficulty in recruiting participants to be part of the control group. Most potential sites continue to request the "full" program for their pregnant and parenting teens. The project has developed additional relationships with sources for control participants that should address this issue for year four of the project. Other methodological limitations are also present. Given that random assignment is not being utilized, selection bias is possible.

## Implications

The PASSAGE project continues to be challenged by not being part of a pre-existing program to which the participants attend to receive other services, such as at a hospital or health clinic. The relationship that the project *has* established with the Atlanta Public School system has allowed access to a good number of pregnant and parenting students. However, as PASSAGE is not a project of the school system, the services offered are often not given the priority that they would receive were that the case. This has meant that the project has had to wait for the school system to find the time and place to allow PASSAGE to reach the project participants. Given the positive feedback provided by the project participants regarding their taking part in the program, it is clear that they feel positively about the project. Future programs would likely benefit from being included as part of larger systems that provide services for pregnant and parenting teens. The lack of treatment effect *may* reveal a need to develop instruments that better capture the critical aspects of interventions designed to meet the needs of this population or the need to alter the program so that it more positively affects participant behaviors and attitudes.

## Contact Information

Charles L. Eaddy, Ph.D.

Telephone: Work – (770) 638-5220 Cell – (678) 732-6765

E-Mail Address: [profaddy@aol.com](mailto:profaddy@aol.com)