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PERCEIVED EFFECTS OF A SUBSTANCE ABUSE PREVENTION
SCIENCE PROGRAM AMONG FOURTH AND FIFTH GRADE
CHILDREN: A QUALITATIVE STUDY

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

Sarah Morgando Palmer

Tracy Lee Inman

September 2003

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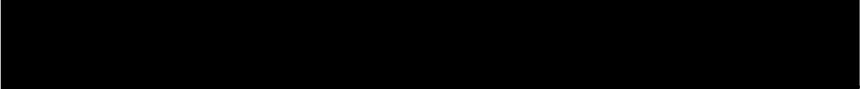
Dr. Thomas Davis, Faculty Supervisor
Social Work

9/29/03

Date



Courtney Cronley, Newark Mentoring
Program Director, San Bernardino
City Unified School District



Dr. Rosemary McCaslin,
M.S.W. Research Coordinator

ABSTRACT

This project explored the perceptions of fourth and fifth grade students who participated in a substance abuse prevention program. Literature is provided on substance abuse, factors contributing to substance use, mentoring programs, and the Newmark Mentoring Program. Risk and protective factors are presented to assist the reader with their understanding of this project. This study consisted of 4 fourth and fifth grade students from the Newmark Mentoring Program who had completed the substance abuse program prior to participating in the qualitative interviews. Based on responses provided by the participants, strengths and weaknesses were identified in this study. This study concludes with recommendations for future social work practice, policy, and research.

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The researchers would like to acknowledge Dr. Thomas Davis for his support, his knowledge, and enthusiasm throughout this project. The researchers would also like to thank Courtney Cronley for her patience and support. Additionally, we would like to thank Michael Gillespie for always answering his emails.

DEDICATION

The researchers dedicate this project to Dr. Rosemary McCaslin for her support in all that we do. The researchers would also like to dedicate this project to each other for being the best thesis partners in the whole world.

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CHAPTER ONE

INTRODUCTION

Problem Statement

According to the 2001 National Household Survey on Drug Abuse, 5 million youth's ages' 12-17 used an illicit drug the previous year, accounting for 21% of the youth population in the United States. Eight million youths, or 34% of the U.S. youth population, used alcohol that same year. These numbers are due to progress in fighting substance use among youth has either stalled or reversed during the 1990's (2003). Negative attitudes amongst youth about drug use have declined, and the actual use of alcohol and drugs has increased. It also appears that some adolescents believe that drug experimentation is normal and is a transition to maturity (Lisnov, Harding, Safer, & Kavanagh, 1998), leading adolescents to believe that drugs are not harmful (Sambrano, Jansen, & O'Neil, 1997).

These trends can lead to disturbing trends for youth. With the absence of intervention, almost half of teens who smoke will continue to smoke and significant numbers will use and abuse alcohol as they grow older. Of youth who do abuse drugs and alcohol, delinquency, violence, and criminal activity can occur (Adelman & Taylor, 2003). For

example, between 37 and 51% of youths aged 13-17 who committed serious crimes also used drugs (Huizinga & Jakob-Chien, 1998).

Given these factors, concerned community members from the Arrowhead Farms area in Northern San Bernardino came together to keep substance abuse and crime from occurring to the youth in their community. A result of this community action was the implementation of the Newmark Mentoring Program (NMP). NMP is an after school drug prevention program designed to educate elementary school children in the fourth and fifth grades about the negative effects caused by substance abuse. NMP also aims to provide positive role models and healthy-relationship building skills.

NMP is a new program, which was implemented in October of 2002. Because of this, feedback about the program has been sparse and not measured in a reliable, valid way. The director of NMP realized this, and proposed a qualitative study to accurately determine the perceived effects of NMP on the fourth and fifth grade students it serves.

Purpose of the Study

The purpose of the study was to explore students' knowledge derived from the NMP program. From preliminary pretest/posttests and anecdotal evidence, NMP appeared to be having a positive impact on the children and their community. However, NMP directors wanted a qualitative study done, performed by objective observers outside of the program. The NMP directors contacted California State University, San Bernardino to enlist graduate students in conducting a qualitative study, with face-to-face interviews with students who had completed the NMP program three months prior to determine which perceptions of skills and knowledge that had been acquired in the program. Interview responses were analyzed in order to determine which components of the program were perceived to be effective and which components might be further improved.

The Significance of the Project for Social Work

As a result of this study, social workers in this local community will have a project specific to their area to consult, giving them a better understanding of what needs to be done in northern San Bernardino. With qualitative information coming directly from the students

themselves, social workers will have a first hand account of what children in the area need.

NMP can look upon these results and determine which components in the prevention science program can be improved. The information gathered came directly from the students so that NMP can best adjust the prevention program to meet the students' needs. Future students will then benefit from a program that was designed with the help of past students.

Other researchers interested in this population, or anyone who is considering opening a similar prevention program may benefit from these results and this study design. Research in this area is usually comprised of quantitative, outcome research, and is done with adolescents or adults rather than children. This study was different in that the participants will be younger and gave qualitative responses to interviews. This study can change how some agencies view this population and, in turn, may change how they administer their prevention programs.

In an effort to determine the effects of NMP in the Arrowhead Farms area, the focus for this study was, "Perceived effects of a substance abuse prevention science

program among fourth and fifth grade children: A
qualitative study."

CHAPTER TWO

LITERATURE REVIEW

Introduction

This chapter focuses on a review of the literature, including a history on how substance abuse prevention programs became what they are today. Also covered are facts about mentoring programs, and the Newmark Mentoring Program. This chapter is ended with innovative theoretical approaches on how a substance abuse prevention program can be the most effective with today's youth.

Substance Abuse

Substance abuse is defined as the continued use of alcohol and/or other drugs in spite of adverse consequences in one or more areas of an individual's life, such as family, job, legal, or financial (Fisher & Harrison, 2000). According to the National Household on Substance Abuse, 16.6 million Americans (7.3 percent of the population) fit the classification of as a substance abuser in the year 2001. This number is up from the year 2000, when 14.5 million (6.5 percent of the population) was fit into the category of substance abuse (2003).

Children and Substance Abuse

Every day 6,000 young people under the age of 18 try cigarettes and 3,000 children become daily smokers before the age of 18 (Kann, Kinchen, & William, 1997). In addition to smoking, almost one-third of children in the United States have had their first drink of alcohol before the age of 13 (Fergusson, Lynskey, & Horwood, 1994). An additional study by Jackson and Dickson, found that 59% of the children surveyed in their study were regular drinkers (at least one drink per day). These children reported having their first drink in first, second, or third grade. Often these drugs are considered gateway drugs that lead to additional drug use while still in their teens. In 1997, 47% of students who reported having smoked also reported having used marijuana before the age of 10 (Hahn et al., 2000).

Little research exists regarding young children and their knowledge and use of alcohol, tobacco, and other drugs. Studies have shown that children whose parents use alcohol, tobacco, and other drugs are at a higher risk for substance use than children whose parents do not use or abuse these drugs (Anderson, & Henry, 1994). Adolescents who progress from experimentation to established smoking habits are more likely to have had parents in the home

that also smoked. An additional study found that multiple substance abuses by both parents in the house have an adverse effect of children's problem behaviors in school settings. These same children are at a greater risk for substance abuse later in life (Hops, Duncan, Duncan, & Stoolmiller, 1996).

Alcohol and drug use take a large toll on children, families, and communities. Although the use of drugs and alcohol under the age of 12 has been identified, most prevention programs continue to be focused on middle school, high school, and young adults (Finke & Williams, 1999). There is mounting evidence that young children are faced with peer pressure to engage in drug use every day. In addition to the stresses placed on children by peers, many of these children are living in families where drug and alcohol use are being witnessed every day (Finke et al., 2002). Often these children live in fear of the substance abuse user and also live in fear of being taken from their parents if someone was to find out about their parents drug use (Finke & Williams, 1999).

Substance Abuse Prevention History

As the number of people who abuse drugs continues to rise, researchers continue to search for substance abuse

prevention programs that are both effective and long term. Although there are conflicting ideas as to what programs work best, almost everyone agrees that prevention should begin early in life, when youth are developing a sense of self. Experts are advocating for prevention in elementary schools, or possibly as early as kindergarten and preschool (Adelman & Taylor, 2003).

Many different techniques have been tried with this impressionable population; most have been refined or discarded altogether. The process of building effective prevention programs was initially built on the idea of "scare tactics", or warning youth about how harmful substances can be with the assumption that the youth would choose not to use them (Vitaro & Dobkin, 1996). This style of prevention was dropped when research findings began to suggest that more education was leading to more experimentation, and that while education was changing attitudes, it was not changing behaviors (Backer, 2000).

The style of prevention that followed was based on the assumption that youth who used substances were at risk, and therefore needed self-esteem and values. This method combined education and prosocial activities. Despite its promise, this style also did not change behaviors and it too was eventually replaced. However, it

did prove to be effective when working with true at-risk youth, and portions of it are still used when working with this special population (Vitaro & Dobkin, 1996).

Subsequently, the third style of prevention incorporated social skills and education from the first two styles, but included modeling (such as mentoring) and ideas of peer pressure. Assertiveness training and decision-making skills were taught to deal with peer pressure. It was during this time that the idea that parents and community should be involved; however, this proved difficult to implement due to expenses and was not widely used (Vitaro & Dobkin, 1996).

The current model for substance abuse prevention programs is complex. It does not focus on one single aspect; rather, it examines all facets of an individual's life. Ideally, prevention programs should be designed to enhance "protective factors" and move toward reversing or reducing known "risk factors." One type of program that strives to do this is the mentoring program.

Mentoring Programs

Over the past 15 years, mentoring has been acclaimed as a solution to an array of educational needs. Mentoring is most commonly defined as a relationship between an

older individual and a young person that lasts over a period of time and focuses on the younger person's developmental needs (Getzloe, 1997). Most literature provides descriptions and evaluations for programs targeted for adolescents and young adults, but few programs have focused on the developmental needs of children and school-based elementary school programs (DeCosta, Klak, & Schinke, 2000).

Successful programs facilitate the development of mentor/mentee relationships, resulting in the social, emotional, academic, and economic growth of the youth involved in the mentoring relationship (Campbell-Whatley, Algozzine, & Obiakor, 1997). Research has shown that children who have successfully negotiated an array of traumatic or persistent difficulties in their lives often have at least one significant and consistent adult (or older person) in their lives (Ryan, Whittaker, & Pinckney, 2002). Most mentoring programs target children who lack adult role models, are having academic difficulties, are potential drop-outs, come from low-income families, lack self-esteem or social skills, and those that have committed crimes, been involved in gangs, or have engaged in drug and alcohol use. Mentoring programs are designed to counteract the negative influences and activities,

known as individual risk factors, by creating accessible protective factors. These terms will be explained in further detail in a later section.

Relationships that yield the greatest benefits for at-risk youth facing challenging environments are those in which the mentor and mentee are able to develop long-term emotional bonds. Additional benefits are seen when mentees who face multiple risk factors develop relationships with mentors at a young age and these relationships are allowed to grow over several years (Lee & Cramond, 1999). Other strengths are found in the appropriate screening and training of mentors. Mentors are more likely to be committed and persevere if they understand program goals and expectations and receive an appropriate orientation, followed by ongoing training and support.

The term "at-risk" is generally used to describe youth who come from single-parent homes, who show signs of emotional or behavioral problems, and who lack the support to navigate developmental tasks successfully. It is believed that mentoring programs prevent the need for future social welfare services (Grossman & Garry, 1997). The U.S. Department of Justice, Office of Juvenile and Delinquency Prevention, estimates that between 5 and 15 million children could benefit from being matched with a

mentor (Grossman & Garry, 1997). Mentors can serve as models with whom youth might identify, leading to increased socially appropriate behavior and reduced delinquent behavior (Stein, Fonagy, Ferguson, & Wisman, 2000).

Traditionally, mentoring programs have been located in the community, but more recently many programs are choosing to be site-based programs found in schools. These programs are more likely to be successful because they provide a consistent place and time to meet rather than expecting mentors to negotiate a location and schedule on their own (Herrera, 1999). One such program found locally here in the San Bernardino Area is the Newmark Mentoring Program. The Newmark Mentoring Program provides substance abuse education and after-school mentoring relationships to at risk children in the surrounding community.

The Newmark Mentoring Program

Newmark Elementary School is located in the center of a poverty pocket in an unincorporated area of San Bernardino County. The community is a small, older, challenged residential area with no sidewalks, streetlights, parks, or commercial development. Most of the area consists of large vacant lots. The school

represents an excellent focal point for community organizing to bring about much-needed support systems for students and their families. There is a high rate of drug use in the community and several identified methamphetamine labs located near the school. The location of the school does not provide adequate opportunities for positive youth and community development opportunities. There is low parental involvement in the academic development of the school's children. There is an absence of resources and education information for both parents and students in the surrounding community. Additional barriers such as transportation, poverty, and language prevent students and their families from accessing health care, mental health services, and additional social services.

With the use of a Healthy Start grant, the Newmark Mentoring Program was created to offer students and their families a place where all children are safe and healthy and where they can learn and grow into self-sufficient, strong families with access to effective community services and neighborhood support systems. The program is held at Newmark Elementary School, due to the fact that the school environment has a huge influence on children given the amount of time spent and level of social

learning that takes place (Pierre, Mark, Kaltreider, & Campbell, 2001). Program components include weekly curriculum sessions that discuss alcohol, nicotine, marijuana, methamphetamines, peer pressure, and refusal tactics. Each of these subjects are taught in a variety of ways, including games, worksheets, special projects, and fun quizzes which test the students information about the identified drug, as interactive programs have been shown to be more effective than noninteractive programs that simply give information (Gottfredson & Wilson, 2003). Each 8-week mentoring session ends with a community project, including a community clean up and a special project (such as a community mural).

Many of the children at Newark elementary School are considered at-risk children. Faced with risk factors of extreme poverty, little access to services, limited education, and lack of community involvement, these children are in danger of failing school, becoming addicted to alcohol and drugs, and likely to engage in destructive behaviors, including violence and dropping out of school. Many of these children come from single parent homes where resources, support, and money is non-existent and children are often left responsible for themselves.

These factors have been shown to lead to an increased risk of drug abuse (Pierre et al., 2001).

Despite these hardships, there is hope. Social competency promotion interventions for children in elementary schools have been shown to improve cognitive and behavioral problem-solving skills, behavior, school adjustment, peer acceptance, and ability to cope with problems- which provides a protective factor against future substance abuse. Moreover, it has been shown that children ages 5 to 9 living in low-income neighborhoods gain the most from after-school programs, showing better behavior with peers and adults, work habits, and school performance (Pierre et al., 2001). With the education and support offered by the Newmark Mentoring Program some of these children will become successful, self-sufficient, resilient adolescents and young adults.

Risk Factors

Risk factors are factors shown to increase the likelihood of adolescent substance abuse, teenage pregnancy, school dropout rates, youth violence, and delinquency. Identified risk factors for children and adolescents include juvenile delinquency, substance abuse, school dropouts, teen pregnancy, and violence. Often

children and adolescents who engage in one or more of these activities are at greater risk for further problem behaviors in their future (Hogan, Gabrielsen, Luna, & Grothaus, 2003). Community risk factors include the availability of drugs, availability of firearms, community ideals favorable to drug use, media portrayals of violence, low neighborhood attachments and community disorganization, and extreme economic deprivation.

Family risk factors include a family history of the problem behavior (i.e.: substance abuse, delinquency, teen pregnancy, violence, etc.), poor family management by adults, conflict between family members, family support and encouragement for negative behaviors and problems. School risk factors include early and persistent antisocial, oppositional, and problematic behaviors in school, academic failure, and a lack of commitment towards academics and school. Individual and Peer risk factors include alienation from peers, rebelliousness against school norms, involvement with peers who engage in problem behaviors, early initiation of defiance, and the breaking of school rules or city/state laws (Hogan et al., 2003).

Protective Factors

Protective factors counter risk factors and the more protective factors that are present in a child's life, the less risk. Protective factors are conditions that protect youth from the negative consequences of exposure to risks, either by reducing the impact of the risk or by changing the way a person responds to the risk. Ideally, protective factors promote positive behaviors, health, well-being and personal success (Developmental Research and Programs, 1997, p. 60). Protective factors fall into three categories: individual characteristics, bonding, and healthy benefits and clear standards (Hogan et al., 2003).

There are four individual characteristics identified as protective factors for children. These are gender, a resilient temperament, a positive social orientation, and intelligence. While intelligence does offer protection from some problem behaviors (i.e.: violence, delinquency, and teen pregnancy), it does not offer protection against substance abuse. Positive bonding makes up for many other disadvantages caused by other risk factors or environmental characteristics. Children who are attached to positive families, friends, school and community and who are committed to achieving the goals valued by these groups are less likely to develop problems in adolescence.

Studies of successful children who live in high-risk neighborhoods or situations indicate that strong bonds with a caregivers or supportive adults can keep children from getting into trouble (Hogan et al., 2003).

To build bonding, three conditions must be present: opportunity, skills, and recognition. Children must first be provided with opportunities to contribute to their community, family, peers, and school. The challenge is to provide children with meaningful opportunities that help them to feel significant and important to others around them. Children must be taught the necessary skills that will lead to success. These skills should prepare them for opportunities that will arise so that full advantage can be taken as opportunities arise. Children must also be recognized and acknowledged for their efforts, regardless of their success. This gives them the incentive to contribute positive behaviors and reinforces their contributions (Hogan et al., 2003).

In order for young people to bond with an adult, the adult must have positive and clear expectations for their own behavior. This adult serves as a role model. When parents, teachers, and communities set clear standards for their children's behaviors, when they are widely and consistently supported, and when the consequences for not

meeting expectations are consistent, children are much more likely to follow directions and create norms of positive behaviors (Hogan et al., 2003). It is important that clear instructions be given to children and that the consequences are also discussed prior to that child engaging in an activity. This process creates an opportunity for the child to make a choice about whether engaging in an activity is right for them.

Resiliency

The process by which successful development or adaptive outcomes occur within a high-risk environment or stressful circumstances is referred to as resilience (Luthar, Cicchetti, & Becker, 2000). Resiliency is created in a child who has had traumatic, stressful, or adverse experiences and has learned to bounce back. Resiliency factors are factors that protect against social problems or risk factors. In 1986, Werner identified several environmental factors that foster resilience in children. They included the age of the parent of opposite sex closest to the child, the number of children in the family, the number of years between each sibling, the number of child available to help raise the child, steady employment for the mother, availability of a sibling for

support, church attendance, and the presence of multigenerational friends, teachers, and relatives.

Werner went on to study the risk factors associated with a group of children experiencing risk factors of poverty, parental psychopathology, caregiver deficits, delinquencies, and teenage parenthood. Werner found that the resilient factors helping children deal with each of these risk factors included intelligence and positive disposition attributes, affectionate ties with parental substitutes, such as teachers and other mentors who help to build trust, autonomy, and initiative in children, and protective factors such as external support systems that rewarded competence and provided coherence for the youth (Werner, 1986).

Theories Guiding Conceptualization

The 40 Developmental Assets Theory

Developmental assets are the building blocks that all children need to be healthy, caring, principled, and productive individuals. Stemming from research on resilience, prevention, and adolescent development, the Search Institute found that positive relationships, opportunities, competencies, values, and self-perceptions are the necessities a child needs to succeed (Scales &

Leffert, 1999). The developmental assets theory emphasizes the strengths found in children, not their limitations. Schools and communities who have adopted this framework consider young people as resources, not as problems. This theory contends that by building on strengths and increasing the assets that have been found to be associated with healthy, caring, responsible people, children will choose not to engage in problem behaviors, such as drug use (Hogan et al., 2003).

Essentially, building developmental assets is about building positive, sustained relationships, not only among teachers and students, but also among parents and students, parents and teachers, students and students, and among teachers and other school staff as well (Scales, 1999). One of the main strengths of an asset-building program is that it focuses on teaching kids a more positive way of living and how to look at life positively even when faced with adversity. This approach also teaches kids about relating to one another as people and about creating environments that are supportive and nurturing to the development of positive relationships (Scales & Taccogna, 2000). Creating a network of support for each child creates an enriched environment where students can express their thoughts and feelings, explore problems and

concerns, and learn positive coping mechanisms that can be put into practice in all settings (i.e.: home, school, day care, etc.).

The 40 developmental assets are divided into "external" and "internal" assets. External assets are factors surrounding young people with support, empowerment, boundaries, expectations, and opportunities that will guide them to behave in healthy ways and teach them to make wise choices about their present and future situations. Internal assets are the commitments, values, competencies, and self-perceptions that must be nurtured within children to provide them with "internal compasses" that will guide them as they make choices about their behaviors (Hogan et al., 2003). Combined these assets create a positive environment conducive to teaching and guiding children into adulthood.

Four types of specific assets make up each of these broad categories of assets. Support, empowerment, boundaries, expectations, and constructive use of time comprise a child's external assets. Support refers to the way a child is loved, affirmed, and accepted. Empowerment focuses on community perceptions of children and the opportunities available to them for contribution to society in a meaningful way. Boundaries and expectations

refer to the healthy development of clear and consistent boundaries that are coupled with support and empowerment. Constructive use of time provides children with constructive, positive opportunities in which children can engage (Leffert, Benson, & Roehlkepartain, 1997).

Commitment to learning, positive values, social competencies, and positive identity comprise a child's internal assets. Internal assets include the values, competencies, and identity needed to guide and create a sense of centeredness in children. Commitment to learning refers to opportunities presented to the child that contribute to the learning and educational process of that child. Positive values refer to the family values passed on to a child through demonstration and education. These include honesty, responsibility, and integrity. A social competency contains assets that guide children in how to handle conflict and interpersonal interactions. Positive identity assets include building the child's self-esteem, sense of purpose, and other self-actualization behaviors (Leffert, Benson, & Roehlkepartain, 1997).

Based on the 40 developmental assets, which highlight the strengths of the Newmark Mentoring Program, questions were formulated to explore Newmark Mentoring Programs

impact on the perceptions of 4th and 5th graders about the effects substance abuse.

Summary

The literature important to the project was presented in Chapter two, which consisted of literature about substance abuse, risk and protective factors, mentoring programs, and the Newmark mentoring program. Also covered were theories guiding conceptualization giving the reader a knowledge base to understand how the questions used in this study were formulated.

CHAPTER THREE

METHODS

Introduction

Chapter Three documents the steps used in developing the project. Included are study design, sampling, data collection and instruments, procedures, and data analysis.

Study Design

The purpose of this study was to identify perceived effects of the Newmark Mentoring Program among the fourth and fifth grade students. In order to assess these effects, a qualitative research project was conducted.

Qualitative research has many advantages. This type of research allows for an open-ended, personal approach, which will help NMP receive extensive feedback about their program. This study consisted of several open-ended questions that allowed for answers and reasoning beyond the thoughts of the researcher, and therefore opened up possibilities not previously considered by NMP. These questions and answers were then compared and contrasted, and presented to NMP.

This type of study did have its drawbacks. For example, the small sample size makes it unlikely to be useful to generalize across large populations. Another

consideration is that since this study was conducted in a face-to-face fashion, the respondents may have felt pressured to answer questions in a way they feel the researcher wants to hear. However, if done properly, this study will show "Perceived effects of a substance abuse prevention science program amongst fourth and fifth grade children: A qualitative study."

Sampling

All children who are referred to the Newmark Mentoring Program are done so by a counselor. The counselor at the Newmark Elementary School identifies children from the fourth and fifth grades who she considers at-risk. At-risk children are those who have poor school attendance, are performing below academic expectation levels, or are exhibiting social difficulties.

In order to determine if the prevention science program is changing students' perceptions of substance abuse, NMP has asked that a qualitative outcome study be conducted from students that have recently completed the eight-week program as of April 1st, 2003. All 12 students will be contacted to ensure the largest sample size. These 12 students will be the only ones contacted to determine if NMP has a long-term effect; those who completed the

program more recently would not be an accurate portrayal of whether or not the program has left an impression.

This project was approved by the Institutional Review Board of California State University, San Bernardino as well as the San Bernardino Unified School District. No data, names, or other indicators were looked at until both review boards had approved this project. After the project was approved, the list of names became available to research. From this list, phone numbers and addresses were obtained from closed files in order to contact these 12 children that completed NMP.

Data Collection and Instruments

In this qualitative, descriptive study, the objective was to determine the perceived effects of the Newmark Mentoring Program.

The basis for our questionnaire was based on the 40 Developmental Assets, developed by the Search Institute. The 40 Developmental Assets theory addresses all aspects of a child's life, and therefore was an excellent model to determine if NMP has an effect on a child's behaviors, thoughts, self-esteem, and values- rather than solely focusing on the information received. An example of the complete questionnaire can be seen in Appendix A.

Procedures

After the project was approved, a list of student names became available to the researchers. Permission slips, as well as a letter describing the study in conjunction with California Education Code 51513, were sent to parents of 8 students (see Appendix B and C). An audiotape permission slip was also sent home for parents to give permission for their children to be audiotaped during the interview (see Appendix D). A follow-up phone call was then made to the parents. Permission slips were turned in to the students' teachers, who will then give them to Courtney Cronley, the program director of NMP. Interviews were only conducted with those students whose parents have given signed consent.

Once the permission slips were collected, a time was arranged with each student's teacher to conduct a qualitative interview during class time. All teachers that participated signed a consent form giving their permission for their students to leave class for the interview (see Appendix E). Each student was read a verbal consent, which informed them of what the study consists of and that all of their responses are confidential (see Appendix F). After the child consented by writing his or her first name of the consent form, they were interviewed individually in

a room separate from other students, teachers, or NMP staff for approximately 30 minutes. The interview consisted of 8 opened-ended questions. The questions are designed to offer a personal account of the student's outcome experience in the prevention program.

After each interview, the students were read a debriefing statement thanking them and letting them know that they can talk to an on-call therapist. The students were also given a copy of the debriefing statement (see Appendix G). All interviews were held in one school day, so the students did not have the opportunity to discuss their responses with each other until after the interviews were completed.

Protection of Human Subjects

Due to the small sample size of this project, confidentiality was vital. In order to ensure that anonymity was maintained within NMP and to anyone who reads this project, many steps were taken. The interview will be tape recorded and transcribed. The audiotapes of the responses will be kept in a locked box on the school campus, and no identifying information will be available to anyone but the researchers. All interviews will be coded with a number system to keep all of the student's

responses confidential. Once the responses have been coded, the consent forms with the students' names will be kept confidential in a lock box located in the Newmark Mentoring office located at the school. The responses will then be removed from campus to be analyzed.

All data collected will be kept for 3 years on campus in the NMP office. A letter will be kept along with the data explaining that the information must be kept for 3 years, and then destroyed. This data will have already been stripped of all identifiers, and therefore pose no risk to confidentiality.

Data Analysis

Once responses were coded, all interview data was removed from campus to be analyzed by the researchers. Each question was looked at and compared with the responses of other students to determine themes, strengths, and weaknesses. These categories were then interpreted for discussion in Chapter 5.

Summary

This chapter discussed the methods by which the study was conducted. Study design, sampling, data collection and instruments, procedures, protection of human subjects, and

data analysis were covered at length to give the reader a step-by-step layout for how this study was conducted.

CHAPTER FOUR

RESULTS

Introduction

This study was composed of four elementary school children who had completed the Newmark Mentoring Program as of April 2003. This study was conducted at the three-month mark following the completion of the program. All of the students were female. Ages of the students were ten and eleven. Interviews took approximately 15 minutes to complete and were conducted during school hours in a private room designated for the research interviews.

Presentation of the Findings

Each question in the taped interview was used to determine to students perceptions of the Substance Abuse Prevention Program. Responses were then used to identify themes pertaining to the Newmark Mentoring Program's effectiveness as a substance abuse prevention program.

Question One, "How did your mentors help you?" This question was used to determine whether or not the mentors provided support to the mentees. All students gave responses indicating that their mentors taught them about drugs. For example, "They helped me understand that drugs are bad for my body and that I should never use them

because it could kill me" (Student 2). Another student answered by saying, "They helped me know what alcohol and drugs and methamphetamines could do to your body, your brain cells, your body and your lungs. That's how they helped me" (Student 4).

Question two, "Tell me about the mural you painted. What did you learn?" This question was used to determine the extent of which the Newmark Mentoring Program instilled community empowerment and pride as perceived by the students. Three out of four students did not report having been involved in the mural painting and reported no knowledge of any other community service project. For example, "What mural?" (Student 1). One student did respond favorable, providing the following statement, "My group decided to [paint] a beach thing, surfing, ice cream, and everything else and they hung it out on the side gate" (Student 3). Student three also added, "I learned you should do something else. Like if somebody asks you to do drugs you should say no."

Question three, "What sort of things did you do during your mentoring time?" This question was used to determine whether clear and concise boundaries and expectations were established and maintained between the mentors and the mentees during the NMP. Responses

highlighted the program activities participated in by the students. For example, " We had parties for different occasions, not just to have a party, sometimes they just treated us for the hard work we were doing" (Student 1) or "Towards the end, we have this test and you don't have to do it on paper. They'll ask questions and you win a trophy or something if you get all of the questions right or if you beat all of the other people" (Student 4).

Question four, "Why did you come back to the mentoring program every week?" This question was used to determine whether the Newmark Mentoring Program was a constructive use of time. All of the responses favored wanting to learn more about drugs as the reason for returning each week to the program. For example, " I wanted to learn that drugs are bad for me" (Student 2) or "Because I knew no to take drugs, but I thought it would be a better experience to go further into it, so I learned more about it" (Student 1).

Question five, "What would you tell other kids about the program?" This question was constructed to determine if the students had a commitment to learning and a commitment to the program after completion of the program. Responses favored participation in the program. For example, " I would tell them its really fun and they teach

you what's inside the drugs and why its wrong to do it" (Student 3) or "It's a good thing to go because you'll learn different experiences you don't know about, like I've learned so far" (Student 1).

Question six, "What is your anti-drug?" This question hoped to identify whether or not the Newmark Mentoring Program taught the students positive values. Three of the four students answered with alternative activities to using drugs, such as, "I like singing, cleaning, or watching my brother" (Student 1) or "Riding my bike" (Student 2). A third student responded, "My anti-drug is playing video games or going swimming with my brother" (Student 3). The fourth student did not remember what an anti-drug is and had to be reminded before responding. Her response, "I do my homework and help my brother and sister and stuff and clean up my house."

Question seven, "What would you do if someone offered you drugs?" This question was used to determine whether the program had provided social competency skills, such as resistance, for the students. All of the students responded with answers confirming their use of resistance skills. For example, "I would say no and walk away" (Student 3) or "Say No" (Student 2). Another student

responded by saying, "I wouldn't take it, drugs are just ewww." I'd say no and walk away, or run home" (Student 4).

Question eight, "How will other kids know you're drug free?" This question was used to determine whether or not students had developed a positive identity regarding drug use following the completion of the program. This question yielded various responses, which were inconsistent with the question asked. One student responded by saying, "I don't know" (Student 2) or "They'll know I'm, drug free, like if you drink and smoke then at a certain point you'll see something but you won't walk straight to it, you'll walk crooked and stuff. That's how they'll know I'm drug free because I can walk straight to them" (Student 4). Another student responded by saying, "By staying away from the people who does drugs and going somewhere else" (Student 3).

Summary

Chapter Four reviewed the results extracted from the project. If additional information on responses giving during this study is desired, please refer to Appendix H "Summary of Responses." The responses of these students identified both strengths and weaknesses of the Newmark

Mentoring Program. These areas will be explored further in Chapter five.

CHAPTER FIVE

DISCUSSION

Introduction

Included in Chapter Five is a presentation of the interpretations and conclusions from this study. This study also identified both the strengths and challenges in the mentoring program, including recommendations in regards to the identified program challenges and future social work practice, policy, and research.

Discussion of Strengths

Program strengths identified in this study included knowledge of drug terminology, social competency skills, in the form of refusal skills, recognition of alternative activities to drug use, and effectiveness of activities.

Knowledge of Drug Terminology

Throughout the interviews the students expressed their knowledge of methamphetamines, alcohol, and other drugs by identifying the ingredients commonly found in these drugs, the various names associated with these drugs, and their knowledge of how these drugs will harm their bodies. Additionally, all four students identified Methamphetamines as a drug to avoid. Taking into consideration the location of the school, which is settled

in an area known for methamphetamine use and production, this knowledge is beneficial and could contribute to the use of future refusal skills and help prevent future use.

Refusal Skills

All of the students reported being able to utilize resistance skills in the event drugs were offered to them. A social competency skill, such as refusal, contains the assets that will guide the students in how to handle future conflict and interpersonal interactions (Hogan et al., 2003). In the Arrowhead Farms area, refusal skills are essential tools a student should have when living in neighborhoods where drug use is so prevalent. With little adult supervision in this area, the students' ability to recognize and say no to drugs will help ensure a drug free future.

Recognition of Alternative Activities to Drug Use

The Mentoring Program places heavy emphasis on the recognition of alternative activities. All of the students positively identified alternative activities to drug use, in the form of an anti-drug. In the Arrowhead Farms area few after school activities are available to students, lacking in sports, community centers, and tutoring. The

students' ability to identify positive alternative activities to drug use on their own verifies this strength of the program.

Effectiveness of Activities

Each student reported a fondness for the after school activities provided by the mentoring program. The activities provided are designed to be both interactive and educational. The effectiveness of these activities became clear as there was no specific question designed to identify this strength. Answers were completed voluntary and unsolicited.

It is the researchers' belief that these responses attested to the poor community resources, limited parental involvement, and significant drug use in this particular neighborhood. When offered a resource, students were enthusiastic to have a place to go, to have someone to talk to, and activities to participate in. This was shown both in the student responses and the high attendance rate of all participants.

Discussion of Challenges

As shown above, several of the program's components are working effectively in educating students about drugs and drug use. Interviews also identified three challenges

in the program. These were the mentoring relationships between the mentors and the mentees, lack of support, and lack of community empowerment.

Mentoring Relationships and Support

When the students were asked to describe how they spent their time with their mentors, all of the students gave examples of the activities they participated in while in the after school program. No student spoke of their relationship with the mentor or expressed feelings of support from their mentor.

According to the research on mentoring programs, the mentor-mentee relationship is the driving force behind mentoring programs. This relationship was not apparent for several reasons. First, mentors were not given ample training in the material presented to the mentees. Mentors are introduced to the material only a few days before beginning the mentoring program. In addition to this, mentors arrive at the NMP only one half hour before the mentees, giving them little time to familiarize themselves with the material. Therefore, the mentors are learning the material along with the mentees, which may lead mentees to think of the mentors as peers rather than experts on the material.

Another contributing factor to the peer relationship rather than a mentor/mentee relationship could be age difference. Mentors and mentees are close in age, and often share similar interests. This makes it difficult for mentees to view mentors as role models, and instead view them as friends.

Last, there appears to be poor communication between the administrators and the mentors, specifically in regards to rationale behind activities and projects. This trickles down to the students, who also lack rationale. Mentees did not understand the meaning behind particular activities. Researchers believe this is due to mentors not being given rationale behind the projects, and are then unable to explain to mentees the meaning to activities. This was most apparent when students were unable to answer questions about community service, thinking of it as another project rather than understanding the meaning behind it.

Lack of Community Empowerment

A component of the Newmark Mentoring Program that is highly emphasized is the community service project. When students were asked to describe their involvement in the community service project, three of the four students

responded by saying they had no knowledge of a community service project. One student did report having knowledge of the project, but reported no rationale for why she was participating in the project, she thought of it as another activity.

Previous research reported that to build bonding, three conditions must be present: opportunity, skills, and recognition. Children must first be provided with opportunities to contribute to their community, family, peers, and school. The challenge is to provide children with meaningful opportunities that help them to feel significant and important to others around them. Children must also be recognized and acknowledged for their efforts, regardless of their success. This gives them the incentive to contribute positive behaviors and reinforces their contributions (Hogan et al., 2003). While the Newmark Mentoring Program strives to provide its students with community service opportunities and opportunities for recognition, based on the students answers this was not apparent.

Recommendations Based on the Findings of this Study

The program can benefit from its merging of present program strengths and the following recommendations. As

mentioned in Chapter 2, the 40 Developmental assets are designed to provide children with the necessary skills to become productive adolescents and adults. The Newmark Mentoring Program also strives to provide these same skills to its students.

This study suggests that the program might benefit from implementing all eight assets of the 40 Developmental Assets to improve the likelihood of continued success. The 40 Developmental Assets are research and evidence based, their guidelines are easy to comprehend, and implementation is feasible.

In comparing the Newmark Mentoring Program with the literature on the developmental assets three of the eight originally identified areas of internal and external assets are not being taught to the students of the Newmark Mentoring Program. Specifically, support, boundaries and expectations, and empowerment are not being taught.

The program focuses more on a drug and alcohol curriculum, and little focus is placed on developing the mentoring relationship. This relationship is what contributes to the development of a child's internal and external assets, and from which support is supposed to come from. According to the 40 Developmental Assets, support is defined as the way children are loved,

affirmed, and accepted (Hogan et al, 2003). We believe that support is lacking because the students only mentioned drug and alcohol related material, and did not attest to the mentor/mentee relationship as a relationship in which they had someone to talk to when faced with difficulties, or as someone they could look up to.

The researchers in this study observed that mentors were seen as peers of friends by the mentees participating in this study. This peer relationship may account for the lack of identified mentor-mentee relationships by the students, thus not providing clear boundaries and expectations. Research affirms that in order for young people to bond with an adult, the adult must have positive and clear expectations for their own behavior. This adult serves as the role model (Hogan et al., 2003). Mentors need to give a rationale behind all activities in order to pass this rationale on to the mentees. This will accomplish two things: one, mentors will understand why it is that they are doing a particular activity and the outcome expected of the activity; two, mentees will understand why it is they are participating and completing a particular activity and the outcome goal of the activity. To achieve this recommendation, mentors need

more preparation for each session creating more of a mentoring role rather than a peer/friend type role.

In examining the lack of knowledge about the community service project, this study recommends better communication between program staff and mentors and the mentees participating in the program. Based on the answers given by the students during the interviews, the term community service project was not recognized, and three of the four participants had no reported involvement in a community service activity. While this remains one of the most important aspects of the program, the community service project needs to be understood by the students prior to their participation in the study. Students need to be aware of what is meant by community service, who is benefited by community service, and the rationale behind the specific project being conducted. Communication is needed much more in neighborhoods like Arrowhead Farms because of low community involvement, poverty, and the disintegration of community morale. Communication will increase the likelihood of community empowerment for both the students and the program.

Limitations

A number of limitations apply to the project. This study consisted of a small sample size. Because of the small sample size, results may not be generalized to other programs or groups. Another consideration is that the students interviewed were more likely to have parental involvement, having returned their permission slips. This sample may have not best represented the entire student population from the NMP. Additionally, results have also been interpreted by two different researchers, which could reflect researcher biases.

Recommendations for Social Work Practice, Policy and Research

Social workers should continue to explore this important area of mentoring and the building of internal and external assets among youth in poor economic areas. As increasing amounts of social workers work in the school systems, substance abuse prevention programs will likely become a part of their scope of practice. In an effort to have the most effective programs, social workers must educate themselves on the current policies such as the guidelines put forth by NIDA, and continue to advocate for positive changes in regards to future policy.

To make this happen social workers must continue to conduct research with children exposed to drug and alcohol abuse. Often children are overlooked in this area of research, as research is commonly found on adolescents and young adults.

Ignoring this vulnerable population, who are both susceptible and vulnerable to drug use and peer pressure, will lead to continued at-risk populations going unserved. Research is just as important in poor communities because of little community resources, low community involvement, and greater exposure to drugs, violence, and crime. Often these are the neighborhoods that cannot afford community centers, training in the latest literature on substance abuse prevention, or research for economically disadvantaged youth. Social workers are vital to these neighborhoods, as they have the ability and knowledge to continue research, train communities to advocate for themselves, and can identify grants and resources that can be brought to these areas.

Social workers should also continue conducting qualitative research in order to identify the needs of specific areas and programs. Qualitative research offers social workers direct input from those affected most by poverty, substance, violence, and crime. This input helps

to create programming and resources that are unique to the population in need.

Conclusions

Conclusions from this project "Perceived effects of a substance abuse prevention science program on fourth and fifth grade students: A qualitative study" identified strengths and challenges in the Newmark Mentoring Program. Students interviewed for this study showed a strong fondness for program activities and drug education. Challenges included poor mentor-mentee relationships, lack of support, and no signs of empowerment through the community.

Despite these challenges, this mentoring program continues to be a vital and important component of the outreach services provided to at-risk children.

APPENDIX A
QUESTIONNAIRE

Questionnaire

External Assets

Support

1. How did your mentors help you?

Empowerment

2. Tell me about the mural you painted. What did you learn?

Boundaries/Expectations

3. What sort of things did you do during your mentoring time?

Constructive Use of Time

4. Why did you come back to the mentoring program every week?

Internal Assets

Commitment to Learning

5. What would you tell other kids about the program?

Positive Values

6. What is your anti-drug?

Social Competencies

7. What would you do if someone offered you drugs?

Positive Identity

8. How will other kids know that you're drug free?

APPENDIX B
PARENT LETTER

Parent Letter

Dear Parent/Guardian(s),

We are a group of researchers at California State University, San Bernardino. Newmark Elementary School recently began a substance abuse prevention program called the Newmark Mentoring Program (NMP). We request your permission for your son/daughter to participate in our study, "What Are The Perceived Effects of a Substance Abuse Prevention Science Program Among 4th and 5th Grade Students?" **The California Education Code 51513 requires that parents must be notified prior to having their children questioned about personal beliefs or practices.**

We will be asking about different mentoring activities and your child's personal experiences with topics addressed during the program. There are many benefits that come from asking these kinds of questions. First, NMP can look at the results to decide if there are areas in the program that can be improved. The information collected will come directly from the students, so NMP will know what the students want.

Second, anyone who is considering opening a program like NMP will benefit. This study will give NMP directors an idea on how to run their program.

Most importantly, future students will benefit from a program that was designed with the help of past students.

Risks to the students are few but do exist. Some questions about the student's experience could lead to uncomfortable feelings or emotions. If this occurs, the interview will end immediately and any answers they have given will be taken out. The student will be referred a Program Specialist from the Student Assistance Program in San Bernardino will be on-call to assist your child in the event there is a problem or concern. If you have any questions for Mrs. Kathy Estes, please call (909) 386-2504 at the Student Assistance Program.

Second, talking about substance abuse may bring up family issues that the researchers are legally bound to report. Such issues would include substance abuse in their home, abuse, or neglect. If this happens, the researchers will call Ms. Kathy Estes, who will then contact the proper agencies or authorities.

The interviews conducted by the researchers will be tape-recorded. The information we obtain will only be used in-group form so that no responses will be associated with your child or family name. Please know that all information is confidential. When children are interviewed, their names are kept separate from their responses. We respect every child's

privacy. If you choose not to have your child participate, this choice will not affect the child's grade or standing in the school.

If you allow your child to take part in this study, please sign your name on the attached permission slip and have your son/daughter return the signed form to the NMP office. The study will be conducted during school hours. The time away from class will not be more than 30 minutes. If you would like to see the questionnaire, it will be available for your review in the NMP office A-1.

Please feel to phone Courtney Cronley, at (909) 475-2400 if you have any concerns.

Sincerely,

Dr. Thomas Davis, Ph.D.

Tracy Inman

Sarah Palmer

APPENDIX C
PARENT PERMISSION SLIP

Student and Parent/Guardian Permission Form

By signing below, I grant permission for my child to participate in the study, "What Are the Perceived Effects of Substance Abuse Prevention Science Program Among 4th and 5th Grade Children?"

This study has been approved by the University's Institutional Review Board and conforms to CA Ed. Code 51513. This study is not a test and will not influence my child's grade in any way. My child will be interviewed individually about their understanding of drugs and alcohol. If at any time my child wants to stop his/her participation, it can be done without penalty or affecting his/her grade in school. Additionally, if I choose not to have my child participate, this choice will not affect my child's grade or standing in the school.

I also understand that the information my child provides will be tape-recorded. My child's information will be held in strict confidence by the researcher. At no time will my name or my child's name be reported along with his or her responses. All data collected by the researcher will be reported in group form.

I may request my child's data be removed from the study at any time. At the conclusion of the study, I understand that a copy of the results can be found in the California State University, San Bernardino Pfau Library and in the office of my child's elementary school. If I have any questions or concern about this study, I am aware that I can contact Dr. Thomas Davis at 909-880-5500, extension 3839 for information.

I acknowledge that my child and I have been informed about and understand the purpose of the "What Are the Perceived Effects of a Substance Abuse Prevention Science Program Among 4th and 5th Grade Children?" study. I freely consent to allow my child to participate in the study and acknowledge that I am the parent/guardian.

Parent/guardian Permission Form

"What Are the Perceived Effects of a Substance Abuse

Prevention Science Program Among 4th and 5th Grade Children?" Study

Student Name (Please Print): _____

Student Signature: _____

Parent Signature: _____

Teachers Name: _____

Classroom: _____

APPENDIX D
AUDIOTAPE PERMISSION FORM

AUDIOTAPE USE
INFORMED CONSENT FORM
FOR NON-MEDICAL HUMAN SUBJECTS

As part of this research project, we will be making a audiotape recording of your child during their participation in the experiment. Please indicate if you are willing to consent to the researchers audio taping your child by initialing below. We will only be using the audiotape of your child to transcribe information for our research.

(AS APPLICABLE)

- **The audiotape can be studied by the research team for use in the research project.**

Please initial: _____

I have read the above description and give my consent for the use of the audiotape as indicated above.

SIGNATURE _____ **DATE** _____

APPENDIX E
TEACHER CONSENT FORM

Teacher Consent Forms

Dear 4th and 5th Grade Teachers,

Recently students in your classroom participated in the Newmark Mentoring Program after school. California State University Master of Social Work students are conducting an outcome study to determine the effects of this program on participants. We are asking for your consent to remove students from your classroom for 30 minutes to conduct an interview with them. We will make every attempt to coordinate with you the most appropriate time to remove these students in order to prevent them from missing important assignments and information. Please sign below if you wish to allow the students in your classroom who participated in the mentoring program to leave class for the interview.

By signing below, I indicate my consent in allowing researchers from California State

University to remove students from my classroom during class time to participate in interviews for the study, "What are the perceived effects of a prevention science program on 4th and 5th grade students?"

Signature: _____

Name: _____

(Please print)

Classroom: _____

APPENDIX F
VERBAL CONSENT FORM

VERBAL CONSENT

Child Verbal Consent

You are being asked to be part of a research study that tries to understand how Newmark Mentoring Program can help students. We hope that by learning more about your experiences in Newmark Mentoring Program, we will be able to understand how to make this a better program.

This is not a test, there are no right or wrong answers, and you will not be graded on your performance. Some of the questions about the program may be easy to answer. Some may be hard to answer. We just want you to tell us about your experience in the program.

During our interview, we will be using a tape recorder to record what we are talking about. This is so we can listen to what you said later and then type it onto the computer. This way, we can type exactly what you said during the interview.

Participating in this study is completely voluntary. Voluntary means that you have the choice to do the interview if you want to. If you do not want to participate, are uncomfortable with a question, or don't want to finish the interview, just tell me and we can talk about your concern or I will take you back to class. We can also talk to a counselor if we need to.

None of your friends, teachers, or anyone else will know what you said. We call this "confidentiality", which means that we respect your privacy. The interview will take about 30 minutes to finish. We appreciate your participation.

Now that I have explained the project, would you like to participate?

APPENDIX G
DEBRIEFING STATEMENT

Participant Debriefing

Thank you for participating in today's interview. If you or your parents have any questions about the study, you can call Courtney Cronley at (909) 475-2400 or stop by the Newmark Mentoring Program office. Courtney will have a copy of the study once it is finished.

If our interview today has made you uncomfortable, please tell Courtney. Courtney will be able to call a counselor who you can talk to about your feelings.

Thanks again. We enjoyed meeting with you.

APPENDIX H
RESPONSE SUMMARY

Response Summary

Question 1 (Support)- How did your mentors help you?

- They explained like what we go through, because like at the end we have a jeopardy game, for like to remember like what is different from marijuana and what's different from methamphetamines. And they helped explained that, they like tell us the basics and then they asked questions about what we know and they help, they like when they explain it to us, they explained it in detail so that we would understand it more. (Student 1)
- They helped me to understand that drugs are bad for my body and that I should never use them because it could kill me. (Student 2)
- They helped me not to do drugs. They helped by teaching us how what's in it and whatever. It was kind of hard the first time I came, but I got used to it. That's how. (Student 3)
- They helped me by knowing, they helped me like know what alcohol and drugs and methamphetamines could do to your body, your brain cells, you body and your lungs. That's how they helped me. (Student 4)

Question 2 (Empowerment)- Tell me about the mural you painted. What did you learn?

- What mural? No. (Student 1)
- I did not paint a mural. No. (Student 2)
- Yes, well, they're like thinking of something because we're always doing something, and they want to do something back for us, 'cause we did everything for them. So they said, let's do a mural. We went out here on like a Saturday, when my mom went somewhere else, we're out here painting, we decided, my group decided to do like a beach thing, surfing, ice cream, and everything else. We painted it! But then, it was like a little messed up 'cause it was too windy that day, and so we came in here and finished it. When we were done, they had to repaint it, because we got too nasty little, so they had to repaint it just a bit. They hung it out on the side gate right there, that's um, that's it. I learned you should do something else, like if someone asks you,

to do drugs, you say no, they say why, you be like saying, because I'm smarter, and you don't want to do it because it can mess up your brain, you livers, or something in your body, and you could die. (Student 3)

- No. (Student 4)

Question 3 (Boundaries/Expectations)- What sort of things did you do during your mentoring time?

- We had parties for different occasions, no just to have a party, some they just treated us sometimes for the hard work we were doing, and that they are doing, we treat them too. We learned about the different subjects in drugs. Like marijuana has different names, and like there is a kind of drug called crystal, if anybody asks you do you want a crystal, just like say no. Some people might think that it is like a real crystal, but it's not, its like drugs, so just say no. And we also learned how to say no to drugs and not take them and how to stay away from other people with drugs. (Student 1)
- Sometimes we drew what it could cause, so that people could understand that drugs are bad. (Student 2)
- Um, like sometimes they'll give us papers so we'll go anywhere we'll go somewhere around here the school, and we'll find like some stuff we'll like cigarette butts, or like old batteries and all, and put them in a shopping cart and start going but we're in the group found a shopping cart start doing it. And um, some of us won, some of us didn't, but we had a good time. (Student 3)
- We talked, wait, in the beginning when we first came, we draw what like our title was. There would be like 3-4 groups, and we'd make up a title name. In the second year, I think, we were the monkeys. That's what we would do the first day, and then like we'll talk about a little stuff, we'll introduce ourselves, and if we want, we can say how many brothers and sisters we have, and stuff like that. And then, they'll give us this sheet. And then they'll explain it, and they'll tell us the answers but they won't go by question, like they won't tell us the question they'll tell us the answers, they'll tell us the answers and then we'll take the test. Then, like, we'll keep on doing that for a couple of weeks, and then in the middle, towards the end, we have this test and you don't have to do it on paper. They'll ask questions and you win a

trophy or something if you get all of the questions right or if you beat all of the other people. And that's what we did. We talked about the drugs and what the names were and stuff like that, and we'd have homework to do every week. And we'd get a star if we did our homework, and at the end we'd get something for doing all of our homework. (Student 4)

Question 4 (Constructive Use of Time)- Why did you come back to the mentoring program every week?

- Because I knew not to take drugs, but I thought it would be a better experience to go further into it, so I learned more about it. (Student 1)
- 'Cause I wanted to learn that drugs are bad for me, because I never ever wanted to take drugs. (Student 2)
- Because, it was hard, I was like, I know I should, because I signed the paper and I should go every week, but then I had cheerleading and it was kind of hard, so I went here first, because I wanted to learn more things. And then, I said forget cheerleading. I quit. I actually dropped out, so I could just be in mentoring, instead of two things at once. (Student 3)
- 'Cause I liked it, it was fun, and I wanted to learn more about what drugs and alcohol can do to your body and your brain cells, and then I'd go home and tell my mom. (Student 4)

Question 5 (Commitment to Learning)- What would you tell other kids about the program?

- That it's not like anything, it's fun, but it's not like mentors help you with your work, it helps you with drugs and like sometimes I think they might of helped you with your work, and like it's a good thing to go to because you'll learn different experiences that you don't know about like I've learned so far. (Student 1)
- That it's good because they keep you out of drugs and they teach you everything that you should know about drugs. (Student 2)
- I would tell them it's really fun, they teach you what's inside the drugs, like dried up leaves or something, they'll tell you what's inside the drugs, they'll tell you why it's wrong to do it. (Student 3)

- Well, first they'd have to tell me that they wanted to be in the program. And then I would explain what the mentors did, like I'd say the mentors weren't mean, because we never had any mean mentors. I'd say a couple of the mentor's names, like I know Rachel and Stephanie. I'll tell them what we learned and stuff, like the what I just told you about alcohol, methamphetamines, and drugs. And then like, then I'd ask them do you still want to join the mentoring program. And then they'd say yes or no. (Student 4)

Question 6 (Positive Values)- What is your anti-drug?

- I like singing, or cleaning, or watching my brother. (Student 1)
- Riding my bike. (Student 2)
- My anti-drug is playing video games or going swimming with my brother, because he's only down for a short time. (Student 3)
- Hmm. My anti-drug is what you like to do, right? Well, I do my homework and sit down. I'd do my homework and help my brother and sister and stuff and clean up my house. (Student 4)

Question 7 (Social Competencies)- What would you do if someone offered you drugs?

- I would either say no, and if that doesn't work I'll walk away or run away. (Student 1)
- Say no. (Student 2)
- I'd say no and walk away. (Student 3)
- I'd say no and walk away, or run home. I wouldn't take it, drugs are just ewww. (Student 4)

Question 8 (Positive Identity)- How will other kids know that you're drug free?

- If I were to stay away from people, 'cause I do, with drugs like I don't touch them or anything, and I don't buy them from people or anything like that. (Student 1)
- I don't know. (Student 2)

- By staying away from the people that does drugs, and going somewhere else. (Student 3)
- Well, first of all I'd have to tell them that I'm drug free. And, they'll know I'm drug free, like if you drink and smoke, then like you at a certain point you'll see something but you won't walk straight to it, you'll walk crooked and stuff. That's how they'll know I'm drug free because I can walk straight to them and I won't walk like they're here, and I'll walk there. (Student 4)

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ASSIGNED RESPONSIBILITIES PAGE

This was a two-person project where authors collaborated throughout. However, for each phase of the project, certain authors took primary responsibility. These responsibilities were assigned in the manner listed below.

1. Data Collection:

Team Effort: Sarah Palmer and Tracy Inman

2. Data Entry and Analysis:

Team Effort: Sarah Palmer and Tracy Inman

3. Writing Report and Presentation of Findings:

a. Introduction and Literature

Team Effort: Sarah Palmer and Tracy Inman

b. Methods

Team Effort: Sarah Palmer and Tracy Inman

c. Results

Team Effort: Sarah Palmer and Tracy Inman

d. Discussion

Team Effort: Sarah Palmer and Tracy Inman