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Student Perspectives in a Recovery High School: How Students with Emotional Disability and Students with Other Health Impairment for ADHD Experience Success

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Student Perspectives in a Recovery High School: How Students with Emotional
Disability and Students with Other Health Impairment for ADHD Experience Success

by

Elizabeth (Libby) Kelly

A dissertation submitted in partial fulfillment
of the requirements for the degree of

Doctor of Education
in
Learning and Leading

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**Student Perspectives in a Recovery High School:
How Students With Emotional Disability and Students With Other Health
Impairment for ADHD Experience Success**

by

Libby Kelly

This dissertation is completed as a partial requirement for the Doctor of Education (EdD) degree at the University of Portland in Portland, Oregon.

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Abstract

The purpose of this bound, exploratory case study was to investigate how students with ED (Emotional Disorder) and students with OHI (Other Health Impairment) for ADHD experience success at a recovery high school (RHS). The five participants in this qualitative study, current RHS students and recent alumni, were asked to participate in a pre-interview activity followed by a semi-structured interview to gather the student voice and discover how students with ED and students with OHI for ADHD experience success within this specialized and seldom-studied educational environment. Through their pre-interview activities and their responses in semi-structured interviews, it was evident that participants in this study felt that they achieved success while attending their recovery high school.

This research provides important implications for helping students experience success in school. First, build and provide a positive school environment, and second, guide students to self-realization to assist them in making positive behavioral changes. Participant reflections in this research also made evident elements of their path to success: building positive relationships, gaining self-realizations, changing their behaviors, and realizing their purpose. This research displays how the RHS not only lead students to success but also helped them to flourish educationally and emotionally.

Participant responses in this research also exhibited elements of Social Cognitive Theory's (SCT's) triadic reciprocal causation and how it impacts students and their achieving success at an RHS. Triadic reciprocal causation reflects the mutually influenced relationship among personal, behavioral, and environmental

factors (Bandura, 1986). As evidenced by this research, if educational programs, such as RHSs and any others that service students in special education, provide an education that strongly considers and incorporates these factors of SCT to support students, then this population of students is more likely to experience success.

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Chapter 1: Introduction

High school can be a trying time for students. Many stressors and distractions can negatively affect a student's wellbeing and school success. The pressure to achieve in school is a common plight for students in adolescence. This pressure and the stress it creates can negatively impact a student's learning capacity, academic achievement and performance, employment attainment, sleep quality and quantity, mental and physical health, and substance use (Pascoe et al., 2020). Students with lower levels of school achievement and success and higher levels of stress are at increased risk for substance use disorders. A student's substance use disorder subsequently adds to their difficulties with wellbeing and school success (Sinha, 2008).

Recovery High Schools and Student Substance Use

Recovery high schools (RHSs) were created to address the connection between students with substance use disorders and low achievement levels both academically and personally (Moberg et al., 2014). It is estimated that one million students across the nation use substances, potentially leading them to lower levels of attainment and success (Substance Abuse and Mental Health Services Administration [SAMHSA], 2018). Substance abuse is described as the recurrent use of alcohol and/or drugs causing significant impairment (SAMHSA, 2018). Substance use combined with the typical stress of adolescence can be particularly debilitating to any high school student's career and decreases their rates of success in school—and in life. Research shows that high schoolers who use substances have a higher absenteeism rate, lower grades, and lower levels of overall school engagement than their peers who do not

abuse substances (Bugbee et al., 2019; King et al., 2006). These higher levels of student absenteeism and lack of engagement correlate with lower levels of academic achievement, student outcomes, and success, displaying the negative effects of student substance use (Bugbee et al., 2019; King et al., 2006). The National Institute on Drug Abuse reported in their 2020 study of adolescent youth that 18% of tenth graders and 22% of 12th graders reported using alcohol, marijuana, or other illicit drugs in the past month (National Institute on Drug Abuse [NIDA], 2020). It is estimated that 4% of American 12- to 17-year-olds—almost 1 million adolescents—engage in drug use to a level where they suffer from a substance use disorder (SAMHSA, 2018). Substance use disorders among school-aged youth is prevalent across American high schools.

Recovery high schools operate with the hope that all students would find not only assistance and support in their recovery from substance use but also improved academic outcomes and school success (Moberg et al., 2014). For the purpose of this research, recovery high schools are defined as “programs designed to meet both academic and therapeutic needs of adolescents who have received treatment for substance use disorders” (Moberg et al., 2014, p. 165). The design and purpose of recovery high schools is to assist students in recovery from substance use to continue their high school career on a successful path with a group of supportive staff and sobriety-focused peers who are committed to supporting each other’s recovery goals (Moberg et al., 2014).

The period immediately after a student commits to sobriety or receives treatment for a substance use disorder is a particularly vulnerable time, and they are at high risk for reverting back to substance use (Finch & Wegman, 2012). Research in

2012 found that 93% of students report that when returning to their high school after substance use disorder (SUD) treatment, they were offered drugs on the first day back at school (Klatzker, 2012). Therefore, most recovery high schools functioning in the U.S. in 2014 purposely chose to geographically isolate themselves from the traditional comprehensive high schools in an effort to avoid these negative influences (Finch et al., 2014). This *isolation by design* is an intentional effort to assist students at RHSs with both recovery and school success.

Recovery high schools work under a continuing care model to support their students (Finch & Frieden, 2014). A continuing care model is a substance use care model put in place as the next stage of treatment after an initial stage of more intensive care (McKay, 2008). There is concern among recovery practitioners that once a student is sober or committed to sobriety, there is a risk of students falling back into substance use, as their condition is typically chronic (Karakos, 2014). The continuing care model's mission is to provide students additional support in staying sober (i.e., being in recovery) beginning as soon as possible after their commitment and attempts at sobriety occur (Rural Health Information Hub, 2019). The continuing care model focuses on providing follow-up care after initial intensive care, and providing ongoing care management thereafter. Recovery high schools are a way to provide that ongoing care to students.

Students in Special Education

Students in special education, defined in this study as students with a difficulty in learning and who have been found eligible to receive special education services, exhibit lower levels of school achievement and higher levels of substance use as

compared to their general education peers (Kepper et al., 2011). Even without substance use, students in special education are shown to have higher school absenteeism rates and lower levels of school engagement and achievement as compared to their general education peers (Lane et al., 2006; Van Eck et al., 2017).

Lower Levels of School Achievement and Success

For students in special education, their difficulty in learning equates to a lower academic achievement level overall, lower graduation rates, and higher school-dropout rates than their general education peers (George et al., 2018; Wagner et al., 2005). National graduation and dropout rates illustrate how students in special education lag behind their peers in overall school achievement and success (National Center for Education Statistics [NCES], 2020). For the purpose of this study, success is defined as realizing personal potential, progress towards graduating from high school, and positively shaping one's future (Cardichon et al., 2017; Darling-Hammond et al., 2007; Hennessy et al., 2017). The 2018-19 national graduation rate for 14 to 21-year-old students in special education was 68%, much lower than the 86% rate for students overall (National Center for Education Statistics [NCES], 2019). Another sign of low school achievement and success for students in special education is their high dropout rate of 16%, more than three times higher than the national overall rate of 5% (NCES, 2018). These disproportionate graduation and dropout rate statistics for students in special education indicate that they have more difficulties experiencing success in school than their peers.

By definition, students in special education have a condition that negatively affects their ability to learn in the same ways as their peers without a disability

(Individuals with Disabilities Education Act, 2004). Therefore, students in special education have been deemed to require additional support through special education (IDEA, 2004) in order to adequately access their education and experience school success. To be in special education, one must be found eligible for special education services. Being found eligible for these services means the student requires specially designed instruction and additional intervention to help them progress successfully in their schooling (IDEA, 2004). If a student is found eligible for special education by their school eligibility team, that eligibility falls under one or more of the 14 federal special education eligibility categories where a student can be found eligible for special education services (Institute of Education Sciences, 2021). Examples of the federal special education eligibility categories include Specific Learning Disability, Developmental Delay, and Visual Impairment.

Student participants in this research were found eligible for special education services under the federal special education eligibility category of either Emotional Disorder (ED) or Other Health Impairment (OHI) for Attention Deficit Hyperactivity Disorder (ADHD) (IDEA, 2004). In this research, these students will be referenced respectively as either students with ED or as students with OHI for ADHD. (Note: If a student is found eligible for special education services due to having ADHD, this most commonly is under the federal special education eligibility category of OHI because ADHD is not itself a special education eligibility category (IDEA, 2004)).

Students with ED and students with OHI for ADHD both attain lower levels of school achievement and success as compared to their peers (Barkley, 2015; Lane et al., 2006). As an indicator of low school success and achievement, students with ED have

even lower dropout and graduation rates as compared to other groups of students, even other groups in special education. Nationally, students with ED have the highest high school dropout rate among students in special education, reaching almost 33%.

According to 2020 data from NCES, students with ED achieve the lowest graduation rate among students in special education, with only 60% earning a regular high school diploma, whereas the national average is 73% for students in special education (NCES, 2020) and nearly 86% for those in general education (NCES, 2020). When compared to their peers in both special education and general education, these lower graduation rates and higher dropout rates for students with ED is evidence of the hardships and lack of success they tend to experience in school.

Students with OHI for ADHD tend to fare better academically in school than students with ED but still have lower levels of school achievement and success and struggle greatly in school compared to their general education peers. It is well documented that there is a significant overlap between students diagnosed as having ADHD and students experiencing academic underachievement in school (Barkley, 2015; Trout et al., 2007). Nationally, these students score lower on standardized tests and have lower GPAs than the average student (Barkley, 2015). They also exhibit lower graduation and dropout rates, even as compared to students in special education in the other federal special education eligibility categories. Students in the United States with OHI for ADHD average a 75% graduation rate, still well below the 86% national average for their general education peers. As compared to the 5% national dropout rate of all students, students with OHI for ADHD are more than three times more likely to drop out of high school, as they have a dropout rate of over 17% (NCES,

2020). These statistics illustrate weaker school achievement and a lower degree of success in school is attained by students designated as OHI for ADHD.

Students in Special Education and Substance Use

Research has found that lower achievement in school relates to increased vulnerability to substance use in adolescents (Bugbee et al., 2019; Sinha, 2008). Therefore, it is not surprising to find that students in special education, who have lower levels of achievement and higher levels of stress in school, also have a higher incidence of substance use than their general education peers (Kepper et al., 2011). Again, as is the case with dropout rates, those most at risk for substance use, even amongst students in the special education population, are students with ED and students with OHI for ADHD (Kepper et al., 2011; Van Ech et al., 2017). Overall, students with behavioral disorders and other externalizing behaviors, which are common in students with ED and students with OHI for ADHD, are found to have a higher risk for substance use as compared to both their general education and special education peers (Bowermaster & Finch, 2003; Kepper et al., 2011; Thompson et al., 2006). Students in special education are more likely to experience higher levels of stress that manifest as mental health difficulties, low academic achievement, and relationship difficulties at school and at home. As these students are looking for ways to cope, they are more likely to turn to substance use (Sinha, 2008). For students with ED, potential family stress is higher as they are more likely to be in households of low socioeconomic status, and 45% are reported to live in a home where another person has a disability (Lipscomb et al., 2017; Wagner et al., 2005). Both of these factors potentially add stress to the home for these students. In school, students with ED and

students with OHI for ADHD commonly suffer from high absenteeism rate, low school engagement, low academic achievement, social problems, low distress tolerance and emotional regulation, and school adjustment problems (Barkley, 2015; Lane et al., 2006; Van Eck et al., 2017). Research implies that these skill deficits and lower achievement in school play a role in making these students more vulnerable to substance use (Perle et al., 2013; Van Eck et al., 2017).

Students in special education tend to experience more stressors and difficulties academically, socially, and behaviorally than their general education peers (Samuels, 2017; Wenz-Gross & Siperstein, 1998). Their experiences of increased academic stress and decreased level of school achievement both affect their mental health and academic outcomes (Samuels, 2017; Wenz-Gross & Siperstein, 1998). Students in special education are two to three times more likely to have received professional mental health services compared to their general education peers (George et al., 2018). Their increased struggle with mental health likely contributes to their increased likelihood of having a substance use disorder. Students in special education who use substances are at higher risk of school underachievement and dropout than those that do not use substances (Bugbee et al., 2019; King et al., 2006). As students who are in special education are more likely to use substances, they are less likely to achieve academic success than their general education peers. Research is clear: there are significant negative effects on student success stemming from substance abuse, and these effects are even more likely for students in special education.

As students engage in substance use to alleviate difficulties at home and school, ultimately they find this strategy ineffective since substance use is found to lower

achievement and success for students academically, behaviorally, and socially (SAMHSA, 2017). Students with ED and students with OHI for ADHD already have increased difficulties in school due to their emotional, behavioral, or attention disorder. When those factors combine with substance use, the combination unfortunately creates an additional complication for them personally and in their pursuit of school success. Substance abuse is associated with negative repercussions on student functioning such as deteriorating relationships, low school achievement and engagement, job loss, declining mental health, and increases in illness and even death (United States Department of Health and Human Services [USDHHS], 2016).

Substance abuse among teens while attending high school is found to lower their attendance rate and often inhibit their ability to fully engage in the classroom, even when they are present in school (Bugbee et al., 2019; King et al., 2006). The connection between substance abuse and behaviors impacting a student's level of engagement with school, such as attending class regularly, further inhibits a student in special education from achieving success (Perle et al., 2013; Sinha, 2008; Van Eck et al., 2017). A student's level of school engagement has a significant influence over whether they accomplish high levels of academic achievement. The connection between school engagement and school achievement and success is well established (Lane et al., 2006; Scott et al., 2014). School engagement, though to some degree an abstract construct, is often defined as simply good attendance and participation in school and classroom activities (Al-Hendawi, 2012). Students who effectively engage in school are more likely to experience school success and vice versa. Students with ED, students with OHI for ADHD, and students with a substance use disorder have all

been found to have higher absenteeism rates and decreased engagement levels as compared to their peers (Barkley, 2015; Marsh et al., 2019; Sinha, 2008). This connection is significant, since a high absenteeism rate negatively impacts student achievement and graduation rates (Cardichon et al., 2017). This loss of school instructional time sets these students up for school failure, not success.

Since students in special education tend to have increased levels of substance use (Berg & Eisenberg, 2018), it could be expected that this population would be found in attendance at a recovery high school. Finch (2005) cites a case study of a recovery high school in Minnesota (Bowermaster & Finch, 2003) where students in special education made up almost one-third of the entire student population. This number is high, as the national average for students in special education in public schools is closer to 14% (National Center for Education Statistics, May 2020). Of the students in special education enrolled in the RHS from the Minnesota case study, 63% were students with ED. This number is also atypical compared to public schools nationwide, where students with ED average just 5% of the special education population (NCES, 2020). Therefore, we see here that students with ED are significantly overrepresented at the recovery high school. Unfortunately, only limited research is available on students in special education, specifically students with ED or students with OHI for ADHD, and how they experience success at a recovery high school.

Purpose of the Study

The purpose of this bounded, exploratory case study is to investigate how students with ED and students with OHI for ADHD experience success at a recovery

high school. Pre-interview activities and semi-structured interviews were utilized with current recovery high school students and alumni to explore how students experience success within this specialized and seldom-studied educational environment and hear those experiences described in the students' own voices. The research questions guiding this proposed study were:

RQ1: What is it like to attend a recovery high school for students with ED and students with OHI for ADHD?

RQ2: What are the perceptions of recovery high school students and alumni with ED and those with OHI for ADHD regarding their experiences of success?

RQ3: What is the recovery high school doing to help students achieve these successes?

Significance of the Study

A better understanding of how students with ED and students with OHI for ADHD attending recovery high schools engage in their school experiences and how they experience success may provide information on how RHSs nationwide are working to engage and support these students. Research on school success and substance use recovery success for students attending a RHS can be significant in helping to better understand the ways that students with ED and students with OHI for ADHD experience various successes at an RHS, particularly when the students' voices are heard. This study focuses on a specific population within the RHS, students with ED and students with OHI for ADHD. This is an important population to study in the recovery high school as they are already a very high-risk population, and they have

such a large representation in RHSs (Bowermaster & Finch, 2003, as cited in Finch, 2005).

The findings of this study could help educators, parents, and community stakeholders to understand this population of students at the RHS and their experiences of success. When those that support students in special education with issues of substance use better understand the perspectives and experiences of these students, that information may improve student outcomes and success—academically, behaviorally, and emotionally. The findings from this study may also provide guidance for educators, parents, and stakeholders as they work with this population of students at an RHS and create programming to help them achieve higher levels of success in school. Additionally, findings from this study could be beneficial to anyone who supports students with ED or students with OHI for ADHD in any school environment, particularly those experiencing a substance use disorder. In addition to informing practitioners who work directly with these students, findings from this study may also provide insight into how school leaders can support recovery high school staff responsible for planning and delivering services to students with ED and students with OHI for ADHD.

Theoretical Framework

The theoretical framework that guides this study is the psychological perspective of social cognitive theory (SCT) (Bandura, 1986). In SCT, learning is believed to be an internal process that can include receiving, decoding, storing, and recalling information that has been observed and learned. The theory supports the concept that the mind processes information of lived experiences, and the learner then

forms a schema accordingly. The learner builds knowledge through the processes of observing others' modeling followed by repetition of deliberate tasks and the learner's personal practice (Kay & Kibble, 2016).

Social cognitive theory establishes the critical role that models and modeling play in the learning process. Learners learn by observing others who model behaviors. Modeling is a process where one matches themselves psychologically to another individual who is displaying a thought or behavior and results not just in the imitation of a model but also in broader learning effects (Bandura, 1986). Bandura argues that since people learn by observing others, they are greatly influenced by their environment and their personal thinking or cognition. How one perceives what they are observing and learning greatly affects their learning process and outcomes. Using SCT, Bandura describes human behavior and learning as based on three key influences: *personal characteristics and experiences, behavior of self and others, and environmental factors of the situation* (Bandura, 1986).

The influence of *personal characteristics and experiences* include individual thinking, beliefs, values, perceptions, and emotions. A learner's personal processes affect their social comparative thinking (comparing oneself to a social standard), self-efficacy (belief in one's ability to succeed), attributions, and expectations of outcomes (Schunk & DiBenedetto, 2020). These personal factors play a role in what one learns and how one behaves (Bandura, 1986). For students in an RHS setting these personal influences would also include perceptions of self and others, feelings, and emotions.

The influences of *behavior of self and others* include effort, achievement, and self-regulation. Within the RHS setting behavioral influences may include school

engagement, attendance, and sobriety. The influences of the *environmental factors of the situation* in the learning process consist of social models, instruction, feedback, rewards, and punishments (Schunk & DiBenedetto, 2020). For students attending an RHS, these environmental influences could include school community structure and social expectations. Social cognitive theory emphasizes the significant role the social environment plays in motivation and learning. In addition, SCT argues the reciprocal relationship between the environment and the learner. The environment influences people's thinking, and conversely, their thinking and resulting behavior influences their environment (Bandura, 1986).

SCT aims to analyze student motivation, thought, and action. It involves a model of causation where the interaction of personal, behavioral, and environmental factors are all determinants of each other (Bandura, 1986). Bandura refers to this interaction as "triadic reciprocal causation" (Bandura, 1986, p. 24). These three factors mutually influence each other. For example, environment affects behavior, and behavior affects the environment. These reciprocal relationships are significant as they all affect student learning. Triadic reciprocal causation results in students having opportunities for agency and control of their actions (Bandura, 1986). This study will analyze the narratives of students, their voice, through the lens of SCT to determine how students' personal, behavioral, and environmental factors have reciprocal, causal relationships amongst each other in a recovery high school.

Definition of Terms

- *Attention Deficit Hyperactivity Disorder (ADHD)*—a mental disorder as described in the DSM-5. It is not itself a category for special education eligibility (IDEA, 2004)
- *Dropout*—a student who was enrolled at some point in the school year but was not enrolled at the end of the school year (NCES, 2019)
- *Emotional disorder (ED)*—a federal special education eligibility category currently called Emotional Disturbance. Also referred to as Emotional Behavioral Disorder (IDEA, 2004)
- *General education students*—students that are *not* in special education and have not been found eligible for special education services (IDEA, 2004)
- *Individual Education Program (IEP)*—a written program outlining the special services that will be provided to a student who is found eligible for those services (IDEA, 2004)
- *Other Health Impairment (OHI)*—a federal special education eligibility category that requires a medical diagnosis (IDEA, 2004)
- *OHI for ADHD*—the federal special education eligibility of OHI with an ADHD diagnosis (IDEA, 2004)
- *Recovery high school*—a school for students who are in recovery from substance use disorder (Association of Recovery High Schools, 2020)
- *Students in special education*—students with a difficulty in learning and have been found eligible to receive special education services under federal and state guidelines (IDEA, 2004)

- *Substance use disorder (SUD)*—regular use, dependence, or abuse of illicit substances (SAMHSA, 2018)
- *Success*—realizing personal potential, progress towards graduating from high school, and positively shaping one’s future (Cardichon et al., 2017; Darling-Hammond et al., 2007; Hennessy et al., 2017)

Summary

This chapter examined the nature of students in special education, particularly students with ED and students with OHI for ADHD and their challenges in achieving school success, especially when they additionally have a substance use disorder. It also described the role that recovery high schools currently play in providing support to students in this at-risk population across the United States. Chapter 2 reviews the current literature around recovery high schools, students with ED and students with OHI for ADHD, their risk for dropout, substance use issues affecting education, and their participation in recovery high schools. Chapter 3 describes the research methodology used in this bound case study, the instruments used in the collection of findings, and the approach to the analysis of findings that was utilized. Chapter 4 details the findings gleaned from the pre-interview activities and interviews collected and, lastly, Chapter 5 provides a discussion of the findings, the limitations of the work, conclusions, and implications for further practice and research.

Chapter 2: Literature Review

The purpose of this bound, exploratory case study is to investigate how students with Emotional Disability (ED) and students with Other Health Impairment (OHI) for Attention Deficit Hyperactivity Disorder (ADHD) experience success at a recovery high school. The students in this research were found eligible for special education services under the federal special education eligibility category of either Emotional Disorder (ED) or Other Health Impairment (OHI) for Attention Deficit Hyperactivity Disorder (ADHD). In this research, these students will be referenced respectively as either students with ED or as students with OHI for ADHD. (Note: If a student is found eligible for special education services due to having ADHD, this most commonly is under the federal special education eligibility category of OHI because ADHD is not itself a special education eligibility category.)

This literature review is presented in two sections and discusses the current literature around the topic of both students with ED and students with OHI for ADHD, recovery high schools, and how these students experience success in those schools. The first section presents an overview of recovery high schools, including their history, mission, and current state. The second section describes the background and current state of schooling and success for students with ED and students with OHI for ADHD. The literature on student success is presented throughout this review, what it means, and how students demonstrate and achieve success in their school experience. Lastly, there is a chapter summary to help lend understanding to students with ED and students with OHI for ADHD, their experiences of school success, and how a recovery high school contributes to this success.

Recovery High Schools: An Overview

For the purpose of this research and as described throughout the literature, recovery high schools are defined as “programs designed to meet both academic and therapeutic needs of adolescents who have received treatment for substance use disorders” (Moberg et al., 2014, p. 165). America’s first recovery high school began operating in Maryland in 1979. Since then, recovery high schools (RHS) multiplied and now operate across the nation. RHSs were developed to serve and support students in recovery from substance use disorders exclusively. Historically, RHSs typically had no guiding blueprints for a school model (White & Finch, 2006). Recovery school founders were typically individuals in recovery themselves, substance treatment professionals, parents of recovering students, volunteers, and philanthropists. These founders saw a need for a school-based continuum of care to support students that were new in their substance use recovery (White & Finch, 2006).

Growth in the number of recovery high schools nationwide led to the establishment of the Association of Recovery Schools (ARS) in 2002, which now provides these schools with a process for accreditation. Through ARS, schools no longer have to open in isolation, as they did commonly before its establishment (White & Finch, 2006). Currently in the United States, there are approximately 44 recovery high schools located across 21 states. This number has increased by 10% since 2016, showing they are growing in popularity (Association of Recovery High Schools, 2020).

Public policies affect the possibilities for recovery high schools in any given state (Finch & Wegman, 2012). State legislation that allows for and promotes more alternative, charter, and voucher accepting schools gives parents more options and

school choice. Minnesota and California were among the first states to utilize school alternatives such as charter schools and open enrollments; as a result of this flexibility in policy, these two states were also the first to embrace and open recovery high schools (White & Finch, 2006). States that provide more funding for the mental health treatment of school-aged residents see greater numbers of students with substance abuse disorders accessing their services and a greater number of recovery high schools (Finch & Wegman, 2012). In the cases of higher funded states, students are more likely to explore continuing care options, which ultimately increases the likelihood that students will seek out and enroll in a recovery high school upon completion of substance use treatment. This variance in public policy and the availability of care for high school students with substance use disorders causes a variance in the number of students seeking these programs and, therefore, the availability of schools, state by state (Finch & Wegman, 2012).

The Mission of Recovery High Schools

Recovery high schools emerged from the desire to provide high school-aged students with a socially sound, positively supportive place for their recovery from substance use disorders. Students in recovery have a two-fold need: a supportive social context (i.e., being around people who support their sobriety) and therapeutic support in the continuum of care (Finch & Frieden, 2014). Both the social and therapeutic supports are essential to give students a better chance at maintaining their sobriety. In supporting an adolescent through addiction recovery, it is helpful to surround them with positive influences and non-using peers. This is one of the central tenants of a recovery high school (Finch & Wegman, 2012). High school-aged students in

recovery are more supported and have increased sobriety when they are around like-minded peers (Karakos, 2014). “There is ample evidence to suggest that peers—especially drug using peers—might exert a negative influence on other adolescents who are trying to quit using alcohol or other drugs” (Karakos, 2014, p. 216). With this in mind, most recovery high schools are physically located apart from comprehensive high schools, as they are thought to present more temptations. A student in addiction recovery would likely not find an environment of non-drug-using peers without the specialized environment provided by the recovery high school.

The recovery high school provides opportunities for students in addiction recovery to observe positive social modeling and receive mentoring and encouragement from peers and adult staff. “Most important, the adolescent is surrounded by peers he or she perceives as similar through the shared experience of recovery. These conditions set the stage for building self-efficacy” (Finch & Frieden, 2014, p. 275). Fewer students in the like-minded environment provided by recovery high schools is a significant piece of the social context offered to support students who attend.

Recovery high schools also provide a student in addiction recovery with therapeutic supports to help maintain a drug-free lifestyle. Pro-social modeling and reinforcement of sober behaviors are crucial components present in the recovery high school (Finch & Frieden, 2014), which is also part of the therapeutic design. Therapy is a designated component of the recovery high school. The students enrolled have access to “counselors” (for the purpose of this study: licensed counselor, therapist, or psychologist) or recovery coaches to assist in providing continuing care. These

counselors and coaches are typically on-site in a much lower counselor-to-student ratio than the comprehensive high schools from which most recovery students come (Finch et al., 2014).

Due to the relative newness of recovery high schools and their low numbers across the nation, little research is available on their effectiveness (Hennessy et al., 2018). Despite this, students attending recovery high schools report in surveys they are overall very pleased with their services (Moberg & Finch, 2008). Since addiction has a cyclical nature, a real need exists for students, particularly those who are just beginning their process of substance use recovery, to have access to recovery support (Finch & Wegman, 2012). Moberg et al. (2014) found in their study of 17 recovery high schools that a devoted, well-integrated staff effectively implemented and maintained a therapeutic community within a day treatment/school setting. These researchers also commented, “the milieu/therapeutic community concept did work, even with the severely troubled youth participating in the program” (p. 170). Feedback from enrolled students and their family members was uniformly positive regarding the therapeutic benefits of the recovery high school experience.

Recovery High School Admissions

The character of individual recovery high schools and their admittance practices can effect which students actually attend. A 2014 study analyzed 17 of the 40 recovery high schools that were in existence at that time and which included 320 current enrollees (Finch et al., 2014). This research found that typically students and families make the choice to enroll a student in a recovery high school after referral by their peers, treatment center, juvenile justice center, or other high schools.

A common avenue for a student to become aware of and be referred to a recovery high school is through their substance use disorder counselor or therapist from a treatment program. In their 2016 study, Oser et al. discuss possible racial and socioeconomic disparities in the ways in which students receive the opportunity to attend a recovery high school. The authors suggest that since white students and students of higher socioeconomic status have better access to substance use and mental health treatment via medical insurance, they may also have better access to recovery schools. They note that, “racial disparities observed in the population of students served by RHSs can be traced back in part to youths’ contact with broader social systems including the intersection of education, public health, and juvenile justice systems” (Oser et al., 2016, p. 269).

Often, RHS admission requires students to have recently completed a substance use treatment program to enroll in the school. In some states, with Massachusetts as an example, students may be denied admission to a recovery school if they have not completed a formal treatment program (Oser et al., 2016). The racial and socioeconomic disparity in treatment access, and potentially recovery high school access, lead the authors to observe that, RHSs “are not necessarily representative of an estimate of the population the schools are intended to serve” (p. 271). These researchers recommend that recovery high schools do more to expand referral sources. The juvenile justice system and community-based organizations could diversify the student referrals, so the RHS school community becomes a better reflection of the local community.

In keeping with their overall mission of pursuing and maintaining sobriety, recovery high schools typically require students to sign a contract upon admittance (Finch et al., 2014). In these contracts, students most typically commit to things such as overall sobriety, random urinalysis, outside support group meeting attendance, and securing a sponsor to assist in their recovery. Upon admittance, recovery high school students typically must state a particular number of days before enrollment that they have not been using substances to show their commitment to sobriety. Most schools require this minimum to be 30 days sober before admittance. With this being the case, recovery high schools do not require enrolling students to have completed or participated in a substance recovery program. Only 5 of the 17 recovery high schools in this study were found to require a substance recovery program for their enrolling students (Finch et al., 2014).

Who Attends a Recovery High School?

With RHSs being a relatively new schooling option, there are questions around who attends these specialized schools. In their study of enrolled recovery high school students, Tanner-Smith et al. (2018) presented data on the characteristics of students attending a recovery high school. The 2011–2016 data was from Minnesota, Wisconsin, and Texas, as they each had relatively high numbers of recovery high schools. Fifty-four percent of the 171 students in the study were 17 or 18 years old, and 86% identified as White. The male-to-female ratio was about 50/50. Close to 60% of students had a mental health diagnosis in the past year, and more than 97% had current health insurance. Close to 86% of the students reported a family history of substance use, and over 70% reported a family history of mental health problems

(Tanner-Smith et al., 2018). Regarding their substance use histories, the recovery high school students in this study most commonly reported past use of marijuana (100%), alcohol to the point of intoxication (95%), and opioids/narcotics (78%). These numbers were to be expected, as the students are all in recovery from substance use.

Researchers have looked into some additional predictors of who attends a recovery high school. Hennessy and Finch (2019), in their study of 294 students, investigated predictors of recovery high school attendance. The authors compared students in recovery from substance use who attend a recovery high school and those who attended any other high school type. They found that the likelihood of attending an RHS was significantly higher for students who: (a) were older (11th and 12th graders), (b) indicated drug use beyond marijuana and alcohol, (c) had health insurance, (d) reported higher stress, and (e) more frequently attended 12-step meetings to support their substance use recovery. These researchers also found that students were significantly less likely to attend a recovery high school if they (a) were older when first undergoing treatment for their substance use, (b) had higher scores of impulsivity in their problem-solving style, (c) had higher spiritual support, and (d) were aware of recovery high schools before their substance use treatment (Hennessy & Finch, 2019).

Researchers also found that students in low- or high-income brackets were more likely to attend a recovery high school than those in middle-income brackets (Finch et al., 2014; Hennessy & Finch, 2019). This could be due to health insurance, since families of higher income were more likely to have health insurance to support treatment attendance. Hennessy and Finch (2019) found that students with health

insurance were 10 times more likely to attend an RHS. Unlike students in high or middle income brackets, students in lower income brackets are eligible to receive scholarships, fee waivers, financial aid, and other assistance allowing formal treatment as well, possibly putting them on a path to recovery high school attendance (Hennessy & Finch, 2019). Though recovery high schools are mostly public and free to attend, the fact that students are often referred from a substance use treatment program can lend itself to this highly insured phenomenon.

Students with Concurrent Mental Health Disorders

Most students who attend recovery high schools have diagnoses of concurrent mental health disorders. These students are at risk for school failure, dropout, and relapse of their substance use recovery (Moberg et al., 2014; Weimer et al., 2019). Moberg & Finch (2008) found that 49% of enrolled RHS students reported receiving specific mental health treatment at some point in their past. In their study of students from 17 different recovery schools, those writers also found that 68% of students reported feelings of panic, fear, and/or anxiety, and 69% reported they were bothered by nervous, mental, and/or psychological problems in the 12 months before attending a recovery high school.

In their 2019 analysis, Tanner-Smith et al. found that more than 95% of the students enrolled in recovery high schools met the criteria of at least one of the following nine mental health disorders in their lifetimes: (1) major depressive disorder, (2) generalized anxiety disorder, (3) obsessive-compulsive disorder, (4) panic disorder, (5) post-traumatic stress disorder, (6) antisocial personality disorder, (7) manic episodes, (8) hypomanic episodes, and (9) suicide ideation. The average age at first

mental health treatment was 11.24 years (Tanner-Smith et al., 2019). Recovery high school students' backgrounds and histories of mental health issues, trauma, substance use, and treatment were found to be broad and varied. However, the presence of at least one of these mental health factors in their history was typical (Tanner-Smith et al., 2019).

Trauma, Impulse, and Attention Difficulties

Researchers have also noted that many students enrolling in a recovery high school report past trauma and impulse control and attention difficulties (Hennessy & Finch, 2019; Moberg & Finch, 2008). In their 2008 study, Moberg and Finch found that 60% of students attending an RHS reported trembling or restlessness in the past 12 months. In addition, 65% of students reported distress when reminded of the past, and 76% reported they were “disturbed” by memories from their past—events that the student saw, did, or was done to them. These responses could be indicators of past trauma that a student experienced and that still affects them.

Many students at RHSs report difficulties with attention and impulse control: 71% of newly enrolled RHS students reported being “unable” to stay in a seat or where they are supposed to be, and 86% reported having a hard time “paying attention” at school, work, or home in the past year (Moberg & Finch, 2008). Also, research has found that “adolescents with special needs required more intensive skill training to resist temptation, impulsivity, and peer pressure than their non-handicapped peers” (Bowermaster, 2008, p. 200). Therefore, it appears that students in special education may require even more individualized instruction at a recovery high school in these areas than their peers.

Recovery High Schools' School Discipline Approach

In keeping with their dual therapeutic and educational mission, most schools provided their students with a balance of appropriate student boundaries and collaboration (Finch, 2005). Since many students come to an RHS with a background of trauma and other difficulties, students commonly arrive resenting adults and school personnel, which makes discipline a particularly challenging issue. Rather than using a more rigid, rule-bound approach to discipline often found in traditional high schools, recovery high schools typically use an approach derived from the philosophies of the 12-step program: *Restorative Justice*, *Peer Mediation*, and *Collaborative Problem Solving* (Finch, 2005).

Restorative Justice is a theory of justice that emphasizes repairing the harm caused by hurtful behavior. Restorative Justice believes that those most affected by the hurtful behavior should participate in its resolution and involves parties from both sides of the conflict—the student offender and the one hurt by the behavior—encountering each other, making amends for the wrong, and assisting with reintegrating both sides back into the school community (Centre for Justice & Reconciliation, 2021).

Peer Mediation is a “facilitated deliberation that helps students resolve their disputes and create their own solutions, using shared problem solving within a school setting” (Asian Pacific American Dispute Resolution Center, 2014). Trained school peers assist with the problem-solving process as issues arise amongst peers in school. Peer Mediation typically involves mediation, agreed-upon ground rules, sharing perspectives from both parties, defining the problem, generating and evaluating

possible solutions, and finalizing an agreement between both peers (Asian Pacific American Dispute Resolution Center, 2014).

Collaborative Problem Solving (CPS) is an approach that focuses on identifying and teaching a student's lagging cognitive skills that pose a barrier to their ability to follow behavioral expectations. In the CPS model, staff will collaborate with the student to adaptively solve problems on their individual skills level. Lagging skills development is taught through a problem-solving process, which includes adult empathy and understanding of the student's lagging skills (Pollastri et al., 2013).

The benefit of using these approaches with students is that they help them see their role in issues and conflicts, which is often lagging in their abilities when they enroll. These discipline models also assist students with personal skill building in communication, problem solving, and conflict resolution, which are also areas where students are typically lacking upon arriving at an RHS (Finch, 2005). These models of discipline support the overall philosophy of the importance of relationship building and problem solving in the RHS environment. These models assist students in generalizing these skills to outside-of-school environments and in relationships as well.

Academic Offerings at a Recovery High School

In spite of their differences from traditional high schools, recovery high schools are still schools and therefore have a mission to provide an education to students, assisting them in attaining an accredited high school diploma. In their study of 17 of 40 recovery high schools, Finch et al. (2014) wanted to determine these schools' academic delivery models. They found overall that there was no identifiable model that shaped and guided these schools as a group. All of the schools are

regionally accredited and/or state “approved.” However, the RHSs were not shown to have any specific structure in their delivery of academics, even as they met at least the required minimum academic standards. This study noted that the academic structure and goals varied greatly from school to school, as did the quality of the academic programs themselves.

In their study, class sizes varied from 2 to 15 students. Class member organization varied widely as well. Students were grouped by grade level, ability, or credit completion level. In the smaller schools, students were not grouped at all and were all in one class, taught by one teacher, studying various things all at the same time. Students were found to range from being taught all subjects by one teacher, each subject by a different teacher, or following an online curriculum; in the latter case, the teacher provided individualized attention to the student as they worked at their own pace through the online class (Finch et al., 2014). In addition to the in-class curriculum, students at recovery high schools often could gain credit via work experience and community service. This credit policy could help in their mission of assisting students with credit recovery and attaining graduation (Moberg et al., 2014).

In the Finch et al. (2014) study, the mission of recovery high schools differed, as shown by the length of time students were encouraged to remain enrolled. Six of the 17 schools gave the students a choice to stay at the school and graduate or transition back to their home schools. These programs supported whichever route the student and their family felt was best for their individual needs. Six of the schools preferred that students stay and graduate from the recovery school. The remaining five schools aimed for their students to transition back to their home schools after six

months to one year. These programs believed that it was important for students to go out, experience, and practice “real life” again. This study found that the schools designed for students to stay and graduate from the program had higher academic standards and rigor (Finch et al., 2014). Also, the study found that the level of academic rigor varied according to each high school’s declared commitment to academics, their level of licensure, and time committed to teaching academics.

The study by Moberg et al. (2014) also looked at academic delivery at recovery high schools. They found that a significant challenge when teaching academics in a small program was the variation among students’ academic levels and ages. Teachers often had to meet a broad range of needs in a single classroom during a single period. Since students at recovery high schools have significant substance abuse history, they may have missed a considerable amount of school instruction in their academic careers, causing this population’s ability levels to be quite broad. The teachers in these institutions needed to significantly differentiate instruction and often teach several disparate subject areas. At times, an individual student might be taking a particular course needed for graduation while seated in a class that is teaching something different entirely (Moberg et al., 2014). When surveyed, recovery high school sites found it very important that their educators be responsive to frequent changes in the academic environment and be flexible in their delivery of academic content. These qualities were identified as being important to increase the overall academic product offered to students.

Another challenge the Moberg et al. (2014) study uncovered was that teaching academics was challenging because of limited resources that rarely exceeded minimal

education requirements. Recovery high schools generally cannot offer classes outside of the core, which generally does not include special electives or things like Advanced Placement (AP) classes. Some recovery high schools are under the umbrella of a larger school or even on-site with a larger comprehensive school. In these few cases, the recovery high schools could pull from the larger comprehensive school's resources and offer them to the students at the recovery high school. Though this proximity is believed to be a disadvantage for recovery high schools socially and therapeutically, it was found to be an advantage academically (Moberg et al., 2014).

The Finch et al. (2014) study found great variation in the education models offered in recovery high schools. All recovery high schools in the study held classes with teachers present. In some cases, online coursework or individual packet learning supplemented teacher led instruction. One commonality reported amongst recovery high schools was that students were given a great deal of independence and flexibility in their education compared to a traditional comprehensive high school. Students at recovery high schools had many opportunities to engage in individualized learning. This is believed to be helpful as students in recovery high schools have widely varying academic abilities (Moberg et al., 2014).

Therapeutic Offerings at a Recovery High School

Recovery high schools provide a therapeutic environment to help their students thrive in their small, supportive setting. This environment is part of the continuing care offered in recovery high schools. How a recovery high school accomplishes the delivery of therapeutic supports varies among schools, yet there are some consistencies. Finch et al. (2014) studied 17 of 40 recovery high schools to determine

the delivery of both direct and indirect therapeutic supports to students and found that access to counseling staff varied from school to school. This study classified “counselor” as anyone who was a licensed counselor, therapist, or psychologist. Seventy-seven percent of the schools had at least one licensed counselor on staff, while four schools had no counselor on staff. However, two of these schools contracted with a counselor outside of school to provide direct counseling services to students in need. It should also be noted that the counselors in recovery high schools typically have substance use specific certifications (Moberg et al., 2014) rather than school counselor or clinical mental health licenses. This data suggests that recovery high school students more often than not are directly receiving professional therapeutic support from school staff that specifically target substance use disorders.

Finch et al. (2014) found that all recovery high schools in their study had a primary mission to provide a safe and sober environment where students could pursue their education. They found diverse types of therapeutic services offered to support students. These services included individual and group counseling sessions, chemical dependency education, drug testing, and family support. Most of the recovery high schools studied provided daily or almost daily therapeutic time. Finch et al. (2014) also found that despite the variety of therapeutic offerings, resources that are commonly found along the therapeutic care continuum included providing programs and an environment that supported student abstinence and sobriety, providing support and assistance to students as they work through personal issues that threatened their sobriety or schoolwork, and providing students with the knowledge and tools they will need to continue their abstinence and sobriety throughout their lives. The therapeutic

supports and delivery methods in the recovery high schools studied were largely based on the 12-step model philosophies and teachings founded by Alcoholics Anonymous. All 17 schools studied required students to attend outside 12-step meetings or something similar (Finch et al., 2014).

In their study of recovery high schools, Moberg et al. (2014) found that a major challenge in providing therapeutic assets resulted from a lack of resources. They found this to be especially true for therapeutic supports compared to academic supports. Their respective school districts tend to feel that academics are the district's primary focus and responsibility, rather than providing therapeutic supports. As a result, therapeutic support is generally left up to the recovery high schools themselves. These researchers found that recovery high schools typically include the therapeutic supports of daily group time plus an individual check-in with each student. Most sites offered a recovery support activity and all-school extracurricular activities daily. Staff was flexible in working with a student's chosen individualized plan for supporting recovery—assuming they had one—although there was no requirement that the plan had to be a 12-step program (Moberg et al., 2014).

Using an ecological lens, recovery schools become less static places where adolescents spend their days and get an education, and emerge instead as dynamic microsystems where teens interact daily with peers and teachers. Teachers, counselors, and administrators forge connections with parents, other schools, and the local community as mesosystems that directly impact student transitions and growth. . . . And the macrosystem provides the cultural basis for

a recovery school, setting up value systems around adolescent issues such as treatment and recovery . . . (Finch & Frieden, 2014, p. 274).

Academic and Therapeutic Balance

In their study, Moberg et al. (2014) found that “a recurring issue in this program of research has been that of the balance between academic and therapeutic aspects of RHS programs” (p. 176). Of the seven schools that responded to the request concerning their primary focus—academic or therapy—four classified themselves as more heavily oriented towards academics. One recovery high school rated itself with a clear therapeutic and recovery support focus. The remaining two recovery high schools reported an equal balance of academics and therapeutic recovery support.

Though most recovery high schools report an academic focus, in the Moberg et al. (2014) study, participating schools reported that limited resources had the largest negative effect on their ability to deliver academic services. This review of the literature showed a lack of research to support or deny whether this reported lack of resources actually negatively affects academic outcomes for the students. This study found students still provided an overall positive report and satisfaction with their recovery high school in their surveys. However, they did rate academic quality lower than the quality of the clinical therapeutic component they received. This was found to be true no matter the recovery high school’s emphasis—academic or therapeutic. It seems that maintaining a balance of adequate levels of academic delivery and therapeutic recovery supports can be a challenge in recovery high schools.

Student Success at Recovery High Schools

Much of the research in the past few years examining recovery high schools focuses on what they are, why they exist, and who they serve, thus primarily focusing on the history and makeup of a recovery high school. More recently, there is research on how students are impacted in these schools. Multiple studies now suggest that students attending a recovery high school, when compared to their peers who also recently completed a substance use treatment program but attended a non-recovery high school, have higher levels of sobriety, school attendance, and high school graduation overall (Finch et al., 2014; Finch et al., 2018; Moberg & Finch, 2008; Weimer et al., 2019).

The Nature of Student Success

Knowing that students in special education, especially students with ED and students with OHI for ADHD, struggle to achieve success in school, the question arises of how these students might experience success at a recovery high school. In what areas are these students experiencing success, and how is it defined?

School success is a widely debated topic with many ideas regarding definitions and what does and does not encapsulate “success.” Student success has been defined as including good attendance, engagement, and school continuation, for example. It has also been described by factors such as a positive attitude about school, a higher level of student participation, and graduation (Darling-Hammond et al., 2007). Additional indicators of student success encompass broader definitions that include stronger thinking skills, social-emotional skills, pro-social behaviors, maximizing personal potential, and showing good citizenship with skills needed to assist in

building strong communities (Cardichon et al., 2017). School success additionally has been defined not just by student academic achievement and graduation but also by postsecondary success and college enrollment. The recovery high school aims to provide students with a stable school environment where they can gain the support they need in order to experience success not just in their recovery from substance use but also in their educational achievement (Rattermann, 2014).

The aim of high schools is ultimately for student “success,” and what that means varies across the literature. For this case study, no specific definition yet offered seems to encapsulate “success” for the recovery high school student. Therefore, for the purpose of this study, “success” will be defined as students realizing their potential, graduating high school, and being prepared to persevere and positively shape their futures. Since both current students and alumni were participants in this study, “graduating high school” is defined as completed graduation for alumni and *progress towards* graduating high school for current students. Progress towards graduation will be defined as remaining enrolled and attending school.

Although there appears to be a growing body of research on recovery high schools and their students’ outcomes, there are currently very few studies in the literature (Hennessy et al., 2018). The studies that have been completed on recovery high schools have largely focused on the recovery and academic outcomes of the entire student body as a whole. When searching for literature on students in special education as a focus of study within recovery high schools, the field becomes almost silent. After reviewing the literature, the experiences and outcomes of students in special education at recovery high schools come into question. There appears to be no

previous research reviewed using the context of students in special education, specifically students with ED and students with OHI for ADHD, and how they experience success at a recovery high school.

In their study of 13 adult practitioners who work with adolescents in substance use recovery, including those attending recovery high schools, researchers explored the practitioners' definition of "success" and successful outcomes for their clients (Hennessy et al., 2017). In their interviews, practitioners highlighted areas of success for students in recovery to include sobriety, learning and using life skills, building self-confidence, resuming school, and going on to post-secondary education. An additional area emphasized as a criterion of success was the student becoming emotionally healthy. As this was a study using practitioner interviews, their perceptions of "success" indicate areas that they value for students to achieve. These areas are inclusive of sobriety and academic achievement as well as social, emotional, and behavioral successes.

The practitioners interviewed largely agreed that providing students with a supportive environment is key to student success. Staff comments indicate that students need to demonstrate engagement with staff to progress toward successful outcomes.

Success was not about being perfect . . . but owning mistakes when they happened and working with staff to get to the next step. . . . [As one practitioner commented,] "we know they're gonna make mistakes, but as long as they stay engaged in recovery, then being successful will come" (Hennessy et al., 2017, p. 213).

Increased Sobriety, School Attendance, and Educational Attainment

Various positive outcomes have been found for students attending an RHS. Weimer et al. (2019) found in their 12-month follow-up study of recovery high school students that RHS students had better rates of maintained sobriety than their non-RHS-attending peers. Similarly, Moberg and Finch (2008) found that 81% of students enrolled at recovery high schools for 90 days or more reported improvement in their drug or alcohol issues. Additional research studies determined similar results for students attending an RHS, showing a significant likelihood that the students were abstaining from alcohol and drug use at six- and even twelve-month follow-ups (Finch et al., 2018; Tanner-Smith et al., 2020). These findings support the apparent effectiveness of one of the main purposes of an RHS —helping students maintain sobriety.

An additional improvement found in students at an RHS is school attendance. RHS-attending students were found to have significantly less absenteeism from school than their peers who attended a non-RHS (Finch et al., 2018; Lanham & Tirado, 2011; Weimer et al., 2019). As they achieved improved attendance, one could expect better educational results as well, as higher attendance is linked to a higher graduation rate. Supporting that link, the RHS-attending students were found to have increased GPAs and graduation rates compared to their treatment recovery peers that went to other kinds of schools (Hennessy et al., 2018; Weimer et al., 2019). Students have also reported they have improved in moving forward educationally in general since enrolling at an RHS. When queried, 71% of RHS students who had been attending for at least 90 days felt they had improved in their “academic progress” (Moberg & Finch,

2008). These findings support success in another main mission of the RHS—academic achievement for their students.

Another research question posed of RHSs is whether the students experience lasting successes. A study by Lanham and Tirado (2011) examined 72 alumni from one of the longest-running recovery high schools in the nation. These researchers observed that 39% of respondents reported no alcohol or drug use in the past month. This number is encouraging to the long-term effects and outcomes of attending an RHS, as the average respondent had been out of school for an average of four years. Regarding educational attainment, 90% of respondents in this study reported enrolling in college post-graduation. Nine percent had already graduated college with a 4-year degree or more, and 10% reported earning a 2-year college degree. These findings support the belief that both the academic and sobriety successes of the RHS student indeed can be long-lived. Currently enrolled students attending this RHS were also found to have improved respect towards others compared to when first enrolled (Lanham & Tirado, 2011).

When reviewing the literature on RHSs, few of the researchers attained their data via student interviews. One researcher who did gain data that way found the students reported significant improvement and successes as compared to their non-RHS peers in increased attention span in class, fewer unexcused absences, and improved memory for academic material (Knotts, 2018). Through student interviews, this researcher also found that even after their difficulties prior to attending a recovery high school, once students attend an RHS, their levels of academic growth were similar to those in a nationally representative sample of high school students. This

indicates that RHS students can attain positive educational achievement on the level of their public school peers who do not suffer from substance use disorders.

Improved Levels of Life Satisfaction

Findings of various kinds of successes have been determined through the research on these schools and have been academic, behavioral, and social emotional in nature. Another area of positive student outcomes and success for those who attend RHSs is general life satisfaction. In their study of 246 high school students, Glaude et al. (2019) found that students who attend recovery high schools report statistically significant higher levels of life satisfaction when compared to students in recovery from substance use disorders that do not attend an RHS. Providing their answers through questionnaires, the students provided data on life satisfaction in family and romantic relationships, living arrangements, school and work performance, and general independent life satisfaction.

This study also examined how the two groups of students—recovery high school attendees and those attending non-RHSs—rated their perception of the social support that they receive in their lives. In the survey, social supports is defined as the student’s personal perception with items such as having a professional counselor, work and school friends, hobbies, and getting help with their schoolwork. The researchers did not find a statistically significant difference in reporting from the two groups of students regarding their perceived level of social supports received (Glaude et al., 2019). This research suggests that though these two groups of students are similar in their social support levels, the recovery high schools are providing

something to students that is enhancing their perception of overall life satisfaction (Glaude et al., 2019).

Improved Mental Health

Researchers have also found that RHSs appear to aid in the improvement of students' mental health (Moberg & Finch, 2008; Tanner-Smith et al., 2019). Research data collected from 174 students in 17 recovery high schools who had been enrolled for at least 90 days (Moberg & Finch, 2008) found that students reported improvements in such areas of mental health as depression, anxiety, suicidal ideation, and ADHD levels as compared to levels before attending their recovery high school. Student reports of being bothered by feelings of nervousness or a mental health problem also declined by more than half after attending an RHS, from 69% of students reporting these issues at baseline prior to RHS attendance, declining to 33% after RHS attendance. Students' self-reporting post-traumatic stress disorder symptoms declined significantly after RHS attendance, though this number remained high at 55% (Moberg & Finch, 2008). This supports the contention that attendance at an RHS can help a student feel improvement in mental health symptoms.

Though students are found to have improved mental health symptoms after recovery high school attendance, Tanner-Smith et al. (2019) indicated that the improvements are not to a level that is significantly higher than students in recovery after SUD treatment that attend non-RHSs. These researchers conducted a controlled quasi-experimental study of students attending an RHS for at least 30 days. They found students' self-reported survey answers of mental health symptoms showed a decline from the time of initial enrollment. However, their reductions in mental health

symptoms were not statistically more significant than their counterparts attending non-RHSs. This brings into question the level of improvement in their mental health that students experience at an RHS, though many had reported improvement in general.

Student Delinquency Rate

Though academics and mental health for students at an RHS are reported as improved, the question remains as to whether RHS attendance could assist students behaviorally in the area of student delinquency. Weimer et al. (2019) did not find a significant difference in the rates of delinquent behaviors at 12 months after leaving an RHS compared to their SUD treatment and recovery peers who attended non-RHSs. However, Tanner-Smith et al. (2020) found an association with RHS attendance and lower student delinquency rates at both six- and twelve-month follow-ups compared to students in non-RHSs. Looking further, this study also examined student problem solving styles to help determine how that affects students' behavioral choices. These researchers found that students with maladaptive problem solving styles who attend RHSs showed minimal improvements in their delinquent behaviors and intoxication rates. These results seem to indicate that the positive effects that recovery high school attendance can have on a student's sobriety and delinquent behaviors are lower for those students with maladaptive problem-solving skills (Tanner-Smith et al., 2020).

Addressing Special Needs at the Recovery High School

Students in special education benefit from additional student services and specially designed instruction to access their general education offerings and achieve educational success. When these students in special education attend recovery high schools, they may have varied experiences regarding the special education services

offered to them in that environment. Therefore, it would be beneficial for the recovery high school staff to know more about how students in special education engage in their recovery school and experience success.

Moberg et al. (2014) reported finding a recovery high school model that addressed special education academic needs in an alternative school setting. In this model, found at that time only in Minnesota, recovery high schools are located within a larger alternative high school setting, called an Area Learning Center (ALC). Several of the recovery high schools in Minnesota were embedded physically within these larger, non-traditional high school ALC settings. In this model, ALCs are a school of choice where teachers are shared between various programs, including the recovery high school. Because the teacher works in the ALC, they are not working full-time with recovery high school students. Often, the recovery high school students are intermixed with the general (in this case, alternative) population. This option is considered risky for the program's recovery agenda, as the students are not surrounded strictly by sobriety like-minded peers. In this Minnesota model, there were also instances where an ALC teacher would rotate between two recovery high schools, providing more specialized instruction to students in special education (Moberg et al., 2014).

Due to overall limited resources very often found at RHSs, special education services vary from school to school (Bowermaster, 2008; Finch et al., 2014). Parents could be in a situation where they would need to sign off on discontinuing special education services for their student in order for them to attend the recovery high school. This was sometimes the case, as some RHSs could not provide the specialized,

individual instruction in the special education Individual Education Program (IEP) (Bowermaster, 2008). The lack of resources and services offered at an RHS can be due to lack of funding, location away from the comprehensive high school, or limited staff. These factors can result in students in special education not being able to receive these services (or not in full) as outlined in their IEPs (Bowermaster, 2008; Finch, 2005; Moberg et al., 2014).

When serving students in special education at a recovery high school, multiple and sometimes-divergent support staff perspectives can be a challenge. Public school (or, in a few RHS cases, private school), special education, and recovery entities working under one roof can be complex. They may have differing points of view and philosophies on education. Therefore, it is recommended for the benefit of student outcomes that each entity take into account the other's multiple perspectives, especially when working together as a team with students in special education (Bowermaster, 2008).

Bowermaster (2008) found that students in special education at a Minnesota recovery high school typically would require fewer individualized services and a lower level of special education restrictive setting than they would at a traditional comprehensive high school. This was due to universal accommodations offered at the RHS, such as smaller class sizes, available emotional supports, and flexibility in earning high school credits. Therefore, students in special education may still achieve adequate educational progress at a recovery high school even though they are receiving less individualized, specially designed instruction via special education student services.

The disadvantages that Bowermaster (2008) pointed out in a single recovery high school case study were that students in special education who had very specific needs might not be able to be serviced at an RHS. Examples noted were the need for a time-out room, token economy behavior plan, or paraprofessional support staff in the classroom for individualized support. Largely, recovery high schools encourage more attendees and sometimes get pressure from school districts, treatment staff, juvenile justice counselors, and other outside entities to enroll students, regardless of special education eligibility and needs. As a result, recovery high schools work as best they can with students to meet their enrollees' needs, unless it is determined that the student has more special individualized needs than the school can provide (Bowermaster, 2008).

Special Education at Recovery High Schools

Significant numbers of students with Emotional Disorder (ED) and students with Other Health Impairments (OHI) for ADHD are commonly found at recovery high schools. According to Bowermaster and Finch (2003, as cited in Finch, 2005) students with emotional disorders or learning disabilities are more likely to have a substance use disorder than their non-special education peers. This is supported by the Finch (2005) study, which cites a case study of a recovery high school in Minnesota (Bowermaster & Finch, 2003), where students in special education make up almost one-third of the entire student population. This number is high, as the national average of public school students in special education is closer to 14% (National Center for Education Statistics, 2020). Of the students eligible for special education enrolled in the RHS in this case study, 63% had special education eligibility under the Emotional

Disorder (ED) category, and 21% were found eligible under the Specific Learning Disability (SLD) category. These numbers are not typical of public schools nationwide, where ED averages 5% and SLD averages 33% (National Center for Education Statistics, 2020). We see here that ED is significantly overrepresented at the recovery high school. Since students with ED are found to more likely have a substance use disorder (Bowermaster & Finch, 2003, as cited in Finch, 2005), it can be expected that one would find more students with this specific special education eligibility at a recovery high school.

Recovery high schools are encouraged to provide special education services to the greatest extent possible to those eligible to be in special education (Finch, 2005). As recovery high schools are dependent on enrollment to keep their doors open and maintain funding, it is in their best interest and that of their students to have optimal special education services offered at their schools (Moberg & Finch, 2008). The reality, however, is that many RHSs have limited resources for students in special education. Therefore, an RHS may have to turn away a student with extreme learning needs if the school cannot provide the necessary services for that student's emotional, behavioral, and learning needs. Still, with an overall therapeutic environment as the mission of these schools, the therapeutic services provided at a recovery high school can make it "a good fit" for most students in special education, especially students with ED (Finch, 2005) and others with behavioral difficulties such as students with OHI for ADHD.

Special Education Students: ED and OHI/ADHD

Recovery high schools often have high percentages of students with the special education eligibilities of ED, Specific Learning Disability, and OHI/ADHD. Despite the fact that only 14% of students nationwide receive special education services in American public schools, the percentage of students receiving special education services in RHSs has been reported as closer to 33% (Bowermaster & Finch, 2003, as cited in Finch, 2005). This study focuses on the experiences of students with ED and students with OHI for ADHD, two of the most commonly found special education eligibilities at a recovery high school. Students with ED tend to have difficulties with academics, behavior, relationships, and communication. These students often have overlap with other co-occurring conditions as well. Students with ED are reported to have additional problems or disabilities that include anxiety, bipolar disorder, depression, obsessive-compulsive disorder, oppositional behaviors, and even psychosis (Wagner et al., 2005). Among this range of co-occurring disorders commonly found in students with ED, the most commonly reported is Attention Deficit Disorder (ADD) or Attention Deficit Hyperactivity Disorder (ADHD). The number of ED students with a dual diagnosis of ADHD has been reported as high as 65% (Wagner et al., 2005). This research investigates students in special education and on IEPs at an RHS. In particular, this research examines students with ED and students with Other Health Impairment (OHI) for ADHD. This is with the understanding that many students experience both conditions of ED and ADHD, whether together or separately.

Emotional Disorder (ED)

In the literature and across states, varying ways are used to describe the special education eligibility of Emotional Disorder (ED). In the federal Individuals with Disabilities Education Act (IDEA, 2004), ED is referred to as emotional disturbance. However, many states choose to use the phrasing “emotional behavioral disorder” or “emotional disorder” to describe this special education eligibility. Nationwide in the 2018-19 school year, students eligible for special education services under the ED category made up 5% of all students in special education (U.S. Department of Education, 2020). To qualify for special education with an emotional disturbance, a student must meet the following federal criteria as quoted directly from IDEA:

(i) A condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a child’s educational performance:

(A) An inability to learn that cannot be explained by intellectual, sensory, or health factors.

(B) An inability to build or maintain satisfactory interpersonal relationships with peers and teachers.

(C) Inappropriate types of behavior or feelings under normal circumstances.

(D) A general pervasive mood of unhappiness or depression.

(E) A tendency to develop physical symptoms or fears associated with personal or school problems.

(ii) Emotional disturbance includes schizophrenia. The term does not apply to children who are socially maladjusted, unless it is determined that they have an emotional disturbance under paragraph (c)(4)(i) of this section. (IDEA Sec 300.8 (c) (4))

When students have difficulties and skill deficits in any of the above areas, they obviously face negative educational consequences. By IDEA definition, when a student is found eligible for special education services under ED, their skill deficits are inhibiting their educational performance.

Other Health Impairment (OHI) for ADHD

The current *Diagnostic and Statistical Manual of Mental Disorders* (DSM-5) is a handbook published by the American Psychiatric Association used to diagnose psychiatric illnesses. The DSM-5 criteria for ADHD require that a person show a persistent pattern of inattention and/or hyperactivity-impulsivity that interferes with functioning or development. The symptoms of inattention must be inappropriate for the developmental level, and hyperactivity and impulsivity must also be a level that is disruptive and inappropriate for the person's developmental level. Finally, there must be clear evidence that the symptoms interfere with or reduce the quality of social, school, or work functioning (Centers for Disease Control and Prevention, 2020).

Students with an ADHD diagnosis do not necessarily qualify for special education services. It is estimated that just over 50% of students with ADHD are found eligible for an IEP and special education services (Mattison & Blader, 2013). This research focuses on students with ED and students with OHI for ADHD. Students with ADHD are most commonly in special education under these two eligibilities

(Mattison & Blader, 2013). The large majority of students in special education with an OHI eligibility have an ADHD diagnosis (Jimerson et al., 2009).

To qualify for special education with other health impairment, a student must meet the following federal criteria as cited in the Individuals with Disabilities Education Act (2004):

Other health impairment means having limited strength, vitality, or alertness, including a heightened alertness to environmental stimuli, that results in limited alertness with respect to the educational environment, that—

(i) Is due to chronic or acute health problems such as asthma, attention deficit disorder or attention deficit hyperactivity disorder, diabetes, epilepsy, a heart condition, hemophilia, lead poisoning, leukemia, nephritis, rheumatic fever, sickle cell anemia, and Tourette syndrome; and

(ii) Adversely affects a child's educational performance (Sec. 300.8 (c) (9) (i)).

When a student has health impairments that negatively affect them educationally as described above, they can be found eligible for special education services.

Academic Achievement

As part of their determined disability, students with ED and students with OHI for ADHD are found to have significant deficits in academic achievement. Their level of underachievement in school and overall educational success is low even as compared to their peers both in general and in special education (Barkley, 2015; Mitchell et al., 2019; Wagner et al., 2005). Even when research accounts for moderators such as subject area, setting, and age, students with ED and students with ADHD perform at a significantly lower level than students without disabilities. This is

found to be the case across academic subjects and settings (Barkley, 2015; Lane et al., 2006; Reid et al., 2004; Wagner et al., 2005). As reported by standardized test scores nationwide, 61% of students with ED scored in the bottom quartile in reading. Math was a bit better, with 43% scoring in the bottom quartile. Both of these are still well above the 25% that would score in this quartile for the average student nationwide (Wagner et al., 2005), further displaying the struggle that both of these populations of students have with academic achievement.

A link has been found between the occurrence of ED and ADHD symptoms in the classroom and decreased ability in academics. In the Mattison and Blader (2013) study of 196 secondary students with both ED and ADHD co-occurring in a self-contained public school, teachers were asked to rate their students on apparent emotional, behavioral, and ADHD symptoms as displayed in the classroom. This research found that both reading and math achievement test scores significantly increased when a student exhibited lower levels of ADHD symptoms. This same study also found that when a teacher rated student's ADHD symptoms as lower, their overall GPA was higher. This data supports the notion that students with ED and students with OHI for ADHD struggle more academically due to their symptoms displayed in the classroom environment (Mattison & Blader, 2013).

Students with OHI for ADHD are found to have long histories of educational difficulties. Their struggles with academic achievement are persistent and chronic. They have difficulties persisting with tasks and overcoming challenges (Fabiano, 2014; Murray et al., 2014). This lack of persistence would further contribute to their academic difficulties, as they are more prone to give up on tasks in school, even at a

young age. These students are often found to lack self-reflection ability (Barkley, 2015). This makes it much harder for them to learn from their mistakes, making their condition chronic in nature. As a result, these students have less positive, successful experiences in school, further leading them to stop moving forward and continuing to try.

Having such difficulties with their academics, students with OHI, who are most commonly students with an ADHD diagnosis, are significantly more likely to need extra help with schoolwork outside of school as compared to students in other eligibility special education categories (Lipscomb et al., 2017). Seventy-nine percent of students with OHI report getting extra school-based academic support outside of school hours. Interestingly, even though students with ED have academic difficulties, this group is significantly less likely to receive school-based academic support outside of regular school hours, with 66% reporting they receive such help (Lipscomb et al., 2017).

Students with OHI for ADHD are found to have a significant deficiency in executive functioning at the core of their disorder (Barkley, 2015; Predescu et al., 2020). Executive functioning allows students to self-regulate and plan, focus, pay attention, and multi-task, and students with ED are also found to have lagging skills in the area of executive functioning (Mattison & Blader, 2013). Yet students are expected to use these skills continuously in their schooling in order to be an effective student and keep up with the workload. Therefore, when a student is lagging in this area, they are bound to struggle with school achievement and success.

School Engagement and Dropout

When students have ED or OHI for ADHD, their deficits in academic achievement often lead to a lower level of engagement in school in general (Marsh et al., 2019). Not only may they pay less attention in class but they may also participate less in school itself because of lack of motivation. This process of disengagement can lead to and be exhibited by an increased rate of absenteeism as well. Students with ED and students with OHI for ADHD have higher rates of absenteeism, and this negatively affects both their level of achievement and school outcomes (Barkley, 2015). This is concerning, as there is a strong relationship between higher absenteeism and lower school achievement (Cardichon et al., 2017). Therefore, assisting students with ED and students with OHI for ADHD through their school engagement and absenteeism struggles can truly affect their eventual student outcomes and levels of success. For students, school dropout appears to be a culmination of the process of disengagement from the school in general. As students are left to disengage more from school, their risk for dropout increases (Finn, 1989).

A seminal model of school engagement (Finn, 1989) argues that as students' sense of belonging, participation, and identification with school decreases over time, their risk of dropout increases. But a student dropping out of school is not a sudden event. It is a process that builds up over time. In addition to academic achievement, students in special education, especially students with ED and students with OHI for ADHD, have many risk factors for potential disengagement and dropout from school. One of the additional risk factors they commonly have is a lack of belonging and bonding with their school. When these students feel they do not have a good sense of

school belonging, they will participate less in class and school related activities (Finn, 1989). This makes them more at risk of beginning the process of general disengagement from school.

Students with ED and students with OHI for ADHD have been found to have less school engagement, and within that, their level of bonding to school appears to play a role. A recent study of 68 students with ED examined their answers in administered self-reflection questionnaires. The researchers found that these students reported levels of school engagement similar to their general education peers. However, the students with ED reported significantly lower levels of bonding to their school than did their general education peers (Marsh et al., 2019). These results remind us of the complexity of school engagement and the influence of its parts, including bonding. It is postulated that this lack of bonding that students with ED feel with their school may negatively impact their success (Marsh et al., 2019).

Though there may be a lack of clarity on school engagement and how it affects students and their dropout rate, research does indicate that students with ED and students with OHI for ADHD are at higher risk for school dropout as compared to both their general education and special education peers (National Center for Education Statistics, 2020). The dropout rate for students with ED has been reported as high as 33%, which may be 50% higher than official estimates due at least in part to the mobility of these students and the resulting misinformation in school reporting (Sullivan & Sadeh, 2016). Students with ED have the highest high school dropout rate, even across special education categories. Therefore, students with ED achieve the lowest graduation rate among students in special education, with only 60% earning a

regular high school diploma (National Center for Education Statistics, 2020). These numbers are concerning indicators of the significant academic achievement struggles for a student with ED. Students with OHI for ADHD statistically tend to fare better in school than those with ED but still struggle greatly in school compared to their non-special education peers. It is well documented that there is a significant overlap between a student having ADHD and underachieving in school (Barkley, 2015; Trout et al., 2007). Students with OHI for ADHD also exhibit concerning graduation and dropout rates, even as compared to other students in special education. Students with OHI for ADHD average a 76% graduation rate with a regular diploma, similar to the national average of 73% for students in special education and 86% for those in general education (National Center for Education Statistics, 2019). Despite this graduation rate, students with ADHD have an 18% school dropout rate, which makes them more than three times more likely to drop out of high school than the high school national average rate of 5% (National Center for Education Statistics, 2019, 2020). These statistics exhibit a significant school achievement problem for students with ED and students with OHI for ADHD.

Dropout Predictors

Specific factors have been found to contribute to the likelihood of school dropout. Researchers Sullivan and Sadeh (2016) systematically reviewed the dropout prediction and prevention literature, specifically looking for trends and patterns for school dropout among students with ED. They found that students in special education, and students with ED in particular, are more likely to have multiple risk factors for school dropout. These factors include low overall school achievement and an

increased likelihood of being retained a grade in school. Thirty-seven percent of secondary level students with ED have reportedly been retained at least one grade in school, which is more than twice the rate of those who are not in special education, at 18% (Wagner et al., 2005). Other factors these students often experience that increase the likelihood for dropout are higher absenteeism, frequent changes in schools and living arrangements, low self-determination, and problem behaviors that negatively affect their learning and relationships in school (Darling-Hammond et al., 2006; Kelly & Shogren, 2014).

Students with ED are reported to have changed schools much more often than their peers. At the secondary school level, 65% of students with ED have attended four or more schools since kindergarten, almost 20% more than other students in special education. In addition, students with ED are more likely to change schools due to reassignment from their school district or a family relocation (Wagner et al., 2005). These school changes could further negatively affect these students in areas already difficult for them, such as relationships, academics, and school belonging and bonding.

Evidence-Based Practice and Drop Out Prevention

Though students with ED have increased their ability to stay in school and improve their dropout numbers slightly over the past 20 years, the improvement they have shown in this area has been minimal as compared to the other students in special education and general education students (Mitchell et al., 2019). Researchers question why students with ED are particularly slow to improve their school dropout rate. Some feel that these students carry many of the predictive school dropout factors, which increase their overall risk exponentially. Others feel it is also because there is a lack of

research specific to the ED population regarding their dropout prevention (Lane et al., 2006; McKenna et al., 2021; Sullivan & Sadeh, 2016). The ED student population is distinctive in persistently having the highest dropout rate than even their special education peers. Yet there has not been adequate research presented that provides proven best practices to counteract this phenomenon. The research so far lacks the empirical evidence that would prove best practices in assisting these students with school engagement and success. At this point, research is still minimal regarding evidence-based academic interventions that help students with ED and students with ADHD achieve academic success (Mattison & Blader, 2013). Therefore, educators continue to struggle to determine which best practices actually help these students with their education.

Educators often must rely on their own professional judgment based upon their education and related experiences when trying to determine how to best serve students with ED (Mitchell et al., 2019). Despite best efforts, students with ED still struggle with educational success. Their lack of overall school success as compared to their peers indicates that the typical classroom for students with ED lacks effective instructional strategies to maintain their academic and social success (Mitchell et al., 2019). Though this lack of empirical evidence for dropout prevention exists, it has been determined that some interventions show promise and at least some, however limited, improvement. Interventions that target things such as truancy, course completion, and academic achievement are beneficial (Sullivan & Sadeh, 2016). Even after such efforts are implemented, this group is still found to be more resistant to

interventions, and their dropout rate continues to show less improvement than their general education peers.

Social Skills and Communication

Students with ED score lower in social communication skills than their general education and special education peers and score significantly lower in overall social communication skills, self-control, and cooperation than their special education peers (Wagner et al., 2005). A student being poorly skilled socially could affect their school outcomes, as their ability to build and maintain interpersonal relationships is so limited.

For both students with ED and students with OHI for ADHD, their disability negatively affects their ability to communicate with others. Their lagging communication skills affect their ability to build and maintain satisfactory interpersonal relationships (Barkley, 2015; Lane et al., 2006; Wagner et al., 2005). Poor communication skills negatively affect students in various ways. Lagging communication skills can be detrimental in building and maintaining important peer relationships. This is important to student success in school as students who have less successful peer relationships in school show less school connection, engagement, and belonging (Kelly & Shogren, 2014). As another example of difficulties with their peer relationships, students with ED and students with OHI for ADHD report high levels of teasing and bullying from their schoolmates. Students with ED report the highest level of teasing by their peers compared to other students in special education. At 48%, the number of students reporting teasing is significantly high (Lipscomb et al., 2017). The second highest group in special education to report being teased or name-called by their peers is students with OHI, at 44%. This group's reporting is also significantly

higher than the national average reporting at 37% (Lipscomb et al., 2017). When a student is a victim of teasing, this negatively affects not only school relationships but also important factors such as attendance, engagement, and sense of belonging. All are elements that influence the probability of a student participating in school and achieving success.

Difficulties with communication skills and relationship development may not only negatively affect peer relationships in school but also student-teacher relationships. Struggling with developing and maintaining these relationships can negatively affect educational outcomes in various ways. When a student has poor relationships with peers, they are not as motivated to attend and engage in school. When they do not have a positive relationship with school staff, the same happens, plus they can be less likely to talk to the teacher and advocate for their needs. This lack of communication in self-advocacy would negatively affect them academically, as they would struggle more in helping the teacher understand how to help meet their needs. Students who can develop and maintain positive relationships with their peers and teachers have increased motivation and desire for engagement in school (Kelly & Shogren, 2014). As students with ED and students with OHI for ADHD generally lack these relationship skills, their academic achievement and school engagement suffers.

Students with ED also suffer from low direct communication skills, such as those needed for adequate give-and-take conversation. As many as 29.4% of students with ED at the secondary school level have been reported as having difficulty understanding what others say (Wagner et al., 2005). This could diminish the

relationships built with those in school and lead to higher frustration levels as these students lack understanding of what is said to them.

Despite their difficulties with social and communication skills, students with ED and students with OHI are both found to be quite social, at least outside of school. According to national survey data, these groups of students report getting together with friends at least weekly. This social activity is significantly higher than their special education peers (Lipscomb et al., 2017). This high incidence of social get-togethers would be a positive element for these students and their social communication and emotional health.

Behavior, Discipline, and Emotional Health

Students with ED show a frequent display of problem behavior. As Sheaffer et al. (2021) stated, “By definition, students with or at risk of EBD [i.e., ED] are prone to convergent behavioral, academic, and social risk factors and exhibit maladaptive behavior that prevents them from forming appropriate relationships and inhibits their learning” (p. 96). The combination of these elements has detrimental effects on these students’ educational outcomes and success. As students with ED struggle with appropriate classroom and school behaviors, we see they also are at increased risk for school discipline. The same is true for students with ADHD (Barkley, 2015).

Students with ED are more likely to get into trouble and be disciplined, both in and out of school, and are more than twice as likely as their special education peers to be suspended (65%) or expelled (19%) from school (Lipscomb et al., 2017). In addition, students with ED have a higher rate of being arrested (17%), which is more than twice the rate of their special education peers. Students with OHI are reported to

have the second-highest levels of school suspension (35%), second only to students with ED (Lipscomb et al., 2017). This is also significantly higher than their other special education and general education peers. Kincaid and Sullivan (2019), in their state-wide study of over 230,000 student records, found that students with ED and OHI were both significantly overrepresented in juvenile court involvement compared to students with other special education eligibilities. Students with ED were found to have almost twice the risk of court involvement as the second-highest student group, those with OHI. This supports the finding by Mattison and Blader (2013) that a student with conduct and behavior problems early in life, typically the case for both students with ED and students with OHI for ADHD, is more likely to experience delinquency and school suspension as an adolescent.

Tanfara (2017) noted that for students with ED, their internal or external behavioral difficulties negatively affect their success in school. Their low behavioral skills make it difficult for them to learn and effectively use the more appropriate behaviors that more often result in school success. For students with ED, their behavioral and social communication difficulties can result in not being well prepared for high school graduation. It also makes them less likely to be adequately prepared for post-secondary success.

Students with ED and students with OHI for ADHD are significantly more likely than their special education peers to have chronic physical or mental health problems (Barkley, 2015; Lipscomb et al., 2017). Some examples of specific emotional disturbances include the following disorders: anxiety, bipolar, conduct, eating, and obsessive-compulsive. Though to be eligible for special education in the

area of emotional disturbance, it is not required for a student to have a specific emotional disorder, those are some common examples (National Center for Parent Information and Resources, 2019). Though it is part of the definition for students with ED to have behavioral and emotional difficulties, students with OHI for ADHD do not lag far behind in these difficulties. Forty-six percent of students with ED and 41% of students with OHI are reported to have a physical or mental health condition that contributes at least in part to school emotional or behavioral difficulties. With this being the case, often these students reach out for extra support in the form of a doctor's prescription. These two groups are reported as having the highest numbers among students in special education to use prescription medication for behavioral support, both at approximately 50%. This is significantly higher than the 27% average for all students in special education taking a prescribed medication. The roughly half of students with ED and students with OHI for ADHD using medications demonstrate the significant attempts these students are making for behavioral assistance (Lipscomb et al., 2017). These numbers are a further indication of the serious struggles these students have with their behavior and the efforts they are making to regulate themselves.

Students with ED and students with OHI for ADHD lack skills in emotional regulation. Barkley (2015) describes this as a "core component" of the ADHD diagnosis, particularly as related to the self-regulation of frustration, impatience, and anger. A consequence of this deficiency is the lack of success in inhibiting emotions and the resulting emotional impulsivity. A study by Monopoli et al. (2020) of 209 adolescents across various school sites helps to show the correlation between ADHD

and struggles with emotional dysregulation in schools. When teachers completed rating scales of their students' observed in-school ADHD symptoms, those students who were rated as higher in ADHD symptoms also were found to score higher in emotional dysregulation. As emotional dysregulation causes students to react with primary, usually negative, emotions, it is no wonder that these students find themselves in more trouble and have heightened difficulties in following school rules, building and maintaining relationships, and communicating with others.

Difficulties with relationships and communication skills also trickle down to negatively affect student attendance and engagement in school. Students with ED have more negative comments written in their cumulative files and more school discipline referrals, contributing to a higher rate of absenteeism (Lane et al., 2006). Among secondary school students with ED, 73% are reported to have been suspended from school or expelled at some point in their school careers. This is a significantly higher rate than their special education peers at 28% (Wagner et al., 2005). When students have difficulties with relationships in school and have an increased rate of disciplinary removals from school, their school absenteeism tends to increase, and they are more likely to fall behind in their studies, resulting in further disengagement.

A student staying connected and engaged in school is important for their future outcomes, success, and persistence towards graduation. A student's level of school connectedness is also an important factor in whether a student may engage in health-risk behaviors (Marsh et al., 2019). Factors that define and influence school connectedness include school bonding, school attachment, school engagement, and school climate. Students that report positively on each of these areas of their schooling

experience tend to feel that people in their school environment care about them. When feeling more care from those around them, students tend to have more positive school and personal outcomes (Lane et al., 2006). Unfortunately, students with ED are shown to struggle in this area as well. In this group of students, a significantly low number of students report being “happy to be at school” compared to their special education peers. Though 74% report being happy at school, this is significantly lower compared to the overall national study average of 83% (Lipscomb et al., 2017). This percentage reporting happiness is the lowest of all students in special education. However, students with OHI, with 84%, scored in the average range on this factor of happiness at school compared to their special education peers. Despite many similar difficulties with schooling, students with OHI for ADHD rate their happiness in school significantly higher than students with ED. A student’s level of happiness at school is important as it affects their attainment of school and personal success.

Substance Use

Though empirical studies on substance use for students in special education are sparse (Kepper et al., 2014), some studies have investigated this element of adolescent behavior. Students in special education who have higher levels of underachievement in school have been found to have a higher incidence of substance use than their general education peers (Berg & Eisenberg, 2018; Kepper et al., 2011). However, the research seems to show that the likelihood of a student using illicit substances is linked to their emotional and behavioral difficulties and not significantly linked to their academic struggles (Berg & Eisenberg, 2018; Kepper et al., 2014). This could

help to explain why students with ED and students with OHI for ADHD have the highest levels of substance use among students in or outside of special education.

Students in special education are found to have significantly higher levels of emotional distress (12%) than their general education peers (8%) (Berg & Eisenberg, 2018). As emotional distress has been linked to a significantly higher likelihood for substance use among adolescents, this could help explain why students in special education have a higher incidence of substance use overall than their general education peers (Berg & Eisenberg, 2018). Even amongst students in the special education population, those most at risk for substance use are students with ED and students with OHI for ADHD, likely due to their behavioral difficulties (Kepper et al., 2011; Van Eck et al., 2017). Overall, students with behavioral disorders and other externalizing behaviors, such as those with ED and students with OHI for ADHD, are found to have a higher risk for substance use as compared to both their general education and special education peers (Bowermaster & Finch, 2003; Kepper et al., 2011; Thompson et al., 2006).

These students' often co-occurring conditions of anxiety and depression can also provide insight into why they are more at risk for substance use. As students with ED and students with OHI for ADHD are more likely to experience anxiety and depression, these conditions may result in internalizing or externalizing behaviors over time. This may lead these students to maladaptive coping mechanisms, one of which may be substance use (Perle et al., 2013). Over time their symptoms of anxiety and depression can lead to more externalizing risky behaviors, which include substance use. In their study of late adolescents, Van Eck et al. (2017) found that a lack of strong

positive coping and decision-making skills negatively affects students. Students with difficulties navigating emotions, often the case for students with ED and students with OHI for ADHD, are found to engage in more risky behaviors, including substance use. This study discovered there was less of a correlation between distress tolerance and emotional regulation and substance use. Instead, this research showed that internalizing and externalizing behaviors were more aligned with substance use among adolescents. Students with ED and students with OHI for ADHD display more internalizing and externalizing behaviors, perhaps explaining their risk for increased substance use.

Conflicts are common in the literature regarding the coping skills of students with learning problems and whether they turn to substance use more than their general education peers. Kepper et al. (2014) found no correlation for increased substance use among students with mild academic disabilities but found them more likely to use cigarettes. Substance use of alcohol and marijuana were found to not be elevated in students with mild academic problems. This study discovered that these students with mild academic problems had more conduct, emotional, and hyperactivity problems but did not show an increased risk for substance use.

This same lead researcher found in a subsequent study that it appears the factors that lead to substance use are more likely behavioral in nature rather than academic. In the Netherlands, Kepper et al. (2011) studied 603 adolescents in special education for behaviors similar to ED and OHI for ADHD in the United States. The researchers found that the level of substance use among these students was much higher than for those in general education. Thirty-one percent of the students in special

education for behavioral reasons reported hard drug use, significantly more than the 7% of general education students. Again, this study concluded that students in special education for behavioral or emotional difficulties showed significantly higher rates for substance use, even as compared to students in special education for academic difficulties only. Therefore, investigating the experiences for students with ED and students with OHI for ADHD in RHSs is imperative to understanding how to help them achieve success.

Summary

A review of the literature finds that students in special education struggle with academic, behavioral, and social communication skills (Lane et al., 2006; Mitchell et al., 2019; Sheaffer et al., 2021; Wagner et al., 2005). These struggles appear to negatively affect their overall academic, behavioral, and social success. This is especially true for students with ED and students with OHI for ADHD, who are found to have some of the highest levels of difficulty with school achievement and attaining positive school outcomes and success (Barkley, 2015; Sullivan & Sadeh, 2016; Tanfara, 2017).

When a student experiences these difficulties resulting in school stressors, they are more inclined to have a need to cope with these strains. Students in special education, particularly those with ED and students with OHI for ADHD, are more likely to turn to substance use as a way to cope (Berg & Eisenberg, 2018; Bowermaster & Finch, 2003; Kepper et al., 2014). This further complicates their already challenging school life and their school success.

Recovery high schools were designed to help students with substance use disorders (SUDs) in an environment that is supportive of both their educational and recovery goals (Finch, 2005; Finch & Frieden, 2014; Moberg et al., 2014). Although several studies examine the makeup and efficacy of students at RHSs, the literature is almost silent on students in special education at an RHS and how they experience success through that specialized school environment. This literature review discussed the currently available research on recovery high schools, and Tanner-Smith et al. (2018) highlighted “the overall dearth of prior empirical literature on recovery high schools” (p. 26). RHSs are a relatively new concept in school design and mission, and with 44 of these schools across the nation (ARS, 2020) research is scarce. A limited number of articles describe recovery high schools, their support of students in addiction recovery, and their teaching models and missions. There is even less mention of students in special education, specifically students with ED and students with OHI for ADHD, and how these populations experience success attending recovery high schools.

Chapter 3: Methodology

This chapter discusses the methodology used to conduct this instrumental, exploratory case study, which investigated how students with ED and students with OHI for ADHD experience success at a recovery high school. This chapter includes the study's purpose, research questions, rationale, participants, and specific design and procedure, including instrumentation, ethical considerations, role of the researcher, and data analysis.

By definition, students in special education have a condition that negatively affects their ability to learn in the same ways as their peers without a disability (Individuals with Disabilities Education Act, 2004). Therefore, students in special education have been deemed to require additional support through special education (IDEA, 2004) in order to adequately access their education and experience school success. To be in special education, one must be found eligible for special education services. Being found eligible for these services means the student requires specially designed instruction and additional intervention to help them progress successfully in their schooling (IDEA, 2004). If a student is found eligible for special education by their school eligibility team, that eligibility falls under one or more of the 14 federal special education eligibility categories where a student can be found eligible for special education services (Institute of Education Sciences, 2021). Examples of the federal special education eligibility categories include Specific Learning Disability, Developmental Delay, and Visual Impairment.

Student participants in this research were found eligible for special education services under the federal special education eligibility category of either Emotional Disorder (ED) or Other Health Impairment (OHI) for Attention Deficit Hyperactivity Disorder (ADHD) (IDEA, 2004). In this research, these students will be referred to as either students with ED or as students with OHI for ADHD. (Note: If a student is found eligible for special education services due to having ADHD, this most commonly is under the federal special education eligibility category of OHI because ADHD is not itself a special education eligibility category (IDEA, 2004)).

Purpose of Study and Research Questions

The purpose of this bound, exploratory case study was to investigate how students with ED and students with OHI for ADHD experience success at a recovery high school. Current students and school alumni were asked to participate in a pre-interview activity followed by a semi-structured interview to gather the student voice and discover how students experience success within this specialized and seldom-studied educational environment. The research questions to guide this study were as follows:

RQ1: What is it like to attend a recovery high school for students with ED and students with OHI for ADHD?

RQ2: What are the perceptions of recovery high school students and alumni with ED and those with OHI for ADHD regarding their experiences of success?

RQ3: What is the recovery high school doing to help students achieve these successes?

Rationale for Methodology

The research questions for this study were addressed through a qualitative research design. This research was conducted within the constructivist paradigm as it used participant responses to questions to gain deeper understanding of the specific topic at hand, the experiences of success for students with ED and students with OHI for ADHD at a recovery high school (RHS) (Creswell & Poth, 2018). The study used a bound, instrumental case study design (Creswell & Poth, 2018; Stake, 1995).

Instrumental case design examines the phenomenon of a particular case. For this research the particular case of study was students with ED and students with OHI for ADHD, and the phenomenon at issue is the recovery high school. In instrumental case research the case facilitates understanding of something else, which aligns with the purpose of the study. The rationale for this methodology was, in keeping with constructivist ontology and epistemology, to explore the student perspective and voice and discover patterns within their responses that reveal a clearer and deeper understanding of their successes at the RHS.

Stake (1995) describes instrumental case study as case study that includes “a research question, a puzzlement, a need for general understanding, and feel that we may get insight into the question by studying a particular case” (p. 3). In this research, the phenomenon of the recovery high school, and how it supports student success, was the focus. A deeper understanding of that concept from the perspective of participants is what was sought.

Further, case study was appropriate as it used the qualitative approach of exploring a single case within a real-life setting (Yin, 1994). The student experience of

success at an RHS is a contemporary narrative informing the study of the recovery high school phenomenon and people (the students) who are engaged in it. This case study is bound to students in special education, specifically those with ED and those with OHI for ADHD at one recovery high school in the Western United States. This limits its generalizability but does allow for a rich, full understanding of the bounded case (Stake, 1995). Therefore, case study inquiry was appropriate for this exploratory, descriptive research (Stake, 1995).

School Context

This study took place at one public charter high school in a suburban setting in the Western United States. School enrollment was approximately 20 students, Grades 9–12. From this point forward, the pseudonym of Danville Academy (DA) is used as the name of the school. The school enrolls students from four surrounding counties. Some students travel from more than 30 miles away to attend each day. To be accepted and enrolled, the students must be in recovery from substance use according to self-reporting, but not necessarily have completed a recovery program. They are required to submit to a drug test upon admittance and the result should be negative for illicit drugs. At the time of the study, the school was comprised mainly of students registered in Grades 11 and 12, who combined for approximately 75% of the student body. The staff consisted of a school principal, the principal's/school's administrative assistant, two full-time and one half-time classroom teachers, a half-time special education teacher, a school counselor, and two recovery coaches. Though limited in term and typically part-time, it is common for the school to also have on staff one or

more interns in positions such as recovery coach, school counselor, occupational therapist, and social worker.

The school provides in-person instruction, though when Covid-19 restrictions began in March of 2020, a small number of students elected to take some or all of their classes online. Beginning in the fall of 2021, all students returned to full time in-person instruction. The school day is a full day, Monday through Friday, 9:30 a.m.–3:30 p.m. Students can also elect to attend any of three, three-week summer school terms which operate for half days, four days per week from late June through mid-August.

Danville Academy offers special education services for those that are found eligible according to current state and federal criteria (IDEA, 2004). Since students attend this school from various surrounding school districts, many come with an existing and current IEP for special education that DA implements and services. The case manager for these students is DA's special education learning specialist, provided by the local public school district, who is a half-time employee of the district. The learning specialist works at DA for their full contract, which is a half-day every day, 191 days per year. This study focused on students with ED and students with OHI for ADHD in special education. In the 2020-21 school year, all but one of DA's students in special education fit into one of these two eligibility categories, and that one student had Specific Learning Disability (SLD) eligibility. Nine were students with ED, and three were students with OHI for ADHD.

Participants and Recruitment

Students were selected using purposive criterion sampling (Stake, 1995). The sampling criteria were as follows: (1) students with a current IEP in special education with ED and students with OHI for ADHD, and (2) students currently enrolled at DA or who are DA alumni. All students meeting the sampling criteria were invited to participate in the study, with a goal of 3–7 participants. As DA has been in operation for only a few years, they have a total of five alumni who were students with ED or students with OHI for ADHD. There were six current students either with ED or OHI for ADHD, giving a total possible participant pool of 11. For the purpose of this research, the word “student” refers to both current DA students and alumni. It was desirable to have participants who were students or alumni to gain insight into the perceptions of both current students and recent graduates. This RHS provided the researcher with the current contact information for the students, alumni, and the parents/guardians for those under 18 who required parent/guardian permission to participate in the study. There were approximately 11 total students/alumni that met the criteria and were invited to participate in the study.

The researcher contacted parents/guardians and students with an emailed letter inviting students to participate in the study and parents/guardians to grant their student permission. Students were also invited with a brief face-to-face invitation from the researcher. The letter described the study and included a parent/guardian/alumni consent and student assent form. Participation is defined as completing both the pre-interview activity and the interview. These forms are found in Appendix A. There was also a cell phone text invitation sent to the students as DA staff reported that as the

best way to reach them. All participants were offered an incentive to participate in the study: a \$25 gift card. They received the gift card after completing both segments of the study—the pre-interview activity and the interview. All five participants of this study completed both segments.

Instrumentation

Two instruments—a pre-interview activity and a semi-structured interview protocol—were used for data collection to gather written and narrative responses from participants. The pre-interview activities and interview questions were designed to examine further how student experiences are perceived and interpreted by the students and how that affects their overall experience at the school.

Pre-Interview Activity

Pre-interview activities (Appendix B) were used in this study to elicit open responses and “help the participant recall salient ideas and experiences” (Ellis, 2006, p. 113). Pre-interview activities were used to help participants recall, analyze, and reflect on experiences and their perceptions of how they relate to success at an RHS. The data from the pre-interview activity also informed the semi-structured interview that was to follow and helped to determine if changes to the interview were required (Ellis, 2006).

In addition, participants’ pre-interview activities were designed to further the conversation that occurred during the subsequent interview. Pre-interview activities helped guide the conversation of the interview and assisted participants to (a) express personality, emotions, and perspectives that may be otherwise hard for them to articulate, (b) have a base from which they can build a story, (c) provide concrete language that both the participant and researcher can then share, and (d) provide an

interaction where the researcher can convey genuine interest in what the participant has to say (Ellis, 2006, p. 120).

Interviews

Following completion of the pre-interview activity, semi-structured interviews (Creswell, 2005) were conducted with the participants. This method was selected to garner information from the student—while being cognizant of researcher bias in instrument design—and to prompt students into deeper responses, where they would provide their own explanations and perspectives.

The interviewer asked “a short list of issue-oriented questions” to evoke responses regarding each student’s perception of success at an RHS and what their experiences are or were as a student there (Stake, 1995, p. 65). The interviewer probed for clarification as appropriate during the interview. The interview questions were peer-reviewed by three doctoral students and four university faculty to increase the reliability of the interview questions (Creswell & Poth, 2018). The interview questions emerged from a review of the literature and similar instruments found in the American Psychological Association PsycTESTS database. The interview questions are in Appendix C.

Data Collection Procedures

Pre-interview Activities

After permissions were acquired via the consent and assent forms, participants were sent emails containing the pre-interview activity options. Consent forms from parents were required for any student under the age of 18. Assent forms were required from all participants 18 and older. Participants were sent a text message prompting

them to complete the pre-interview activity as well. Four pre-interview activities were offered to each participant, and each participant was asked to complete just one. They were asked to bring their finished pre-interview activity product to the interview. To garner responses that would answer the research questions, participants completed a pre-interview activity prior to their interview with the researcher. Their finished product was used to commence the interview, helping to create a conversational relationship and provide direction to the conversation (Ellis, 2006). Their discussion and explanation of their pre-interview activity was the first question of each interview and, therefore, was coded with the responses to the remaining interview questions.

Interviews

In addition to the data collected from the pre-interview activity, participants were interviewed to garner responses providing deeper, richer responses that address the research questions. Individual interviews occurred via Zoom or in person, according to the participant's comfort level. Each interview lasted 20-30 minutes. The researcher conducted the interviews. Interviews began with the interviewer providing some information on the study, defining terms, and reminding participants of the confidentiality of their responses. Interviews were conducted with the intent "to obtain the descriptions and interpretations of others" (Stake, 1995, p. 64) and with focus on participants feeling comfortable so they could be more inclined to share their honest thoughts and perspectives. The interviewer started by asking about their day and how they were doing to build rapport. Increasing the participant's comfort level provides them the safety they deserve and makes them more comfortable conveying information to the interviewer (Guillemin & Heggen, 2009). Interviews were audio

recorded with participant permission and descriptive notes were taken during the interview by the interviewer as a form of analytical memoing. Reflective notes were written immediately after the interview as part of the researcher's journal. The interviewer noted the start and end time of each interview, date, and location during the interview (Creswell & Poth, 2018).

The timeline that was followed in the completion of this research study was as follows:

- August 23, 2021–Defend Proposal
- September 4, 2021–Submit IRB for approval
- September 17, 2021–Initial invitation to participate sent
- September 21, 2021–Reminder to participate sent
- September 30, 2021–Final invitation to participate sent
- October 2, 2021–Pre-interview activity options sent and interviews scheduled
- October 30, 2021–Interviews close
- November, 2021–Analyze findings
- December 31, 2021–Chapter 4 draft due
- January 31, 2022 – Chapter 5 draft due
- February 18, 2022–Draft of dissertation study to chair and committee
- March 18, 2022–Defend final dissertation

Data Analysis

The research findings reported included data from the pre-interview activity, semi-structured interviews, and the researcher's log. The researcher's log included reflexive journal entries, analytic memos, and documentation of the study processes. Reflexive journal entries allow the researcher to be reflective and transparent, revealing how bias and experiences can affect the study. It also serves to show how the research progresses and its processes. "Reviewing and then discussing how biases, values, and experiences impact emerging understandings is actually the heart of being reflective in a study" (Creswell & Poth, 2018, p. 229).

Pre-Interview Activity and Semi-Structured Interviews

The interviews were each audio recorded and transcribed. During each interview, the researcher made analytic memos. The researcher also kept a journal for self-reflection and reflexive comments. To manage and organize the data, a file was kept on each participant based on their pseudonym code. Digital information was kept in a passcode-protected computer. Any written data, from the pre-interviews for example, was kept in a locked file and will remain for three years and will then be destroyed.

Pre-interview activity responses were thoroughly discussed to begin each participant interview serving as the first interview question. That content formed part of the interview transcript and data. Due to this overlap, the pre-interview data was included in the interview data's coding process.

Coding

To organize and interpret the emergent elements and themes from the findings, Saldaña's (2021) First Cycle, Transition, and Second Cycle coding methods were used. First cycle methods are those that are used during the initial coding of the research findings. In this study the first cycle coding methods used were in vivo and holistic coding. In vivo coding is described as literal or verbatim coding (Saldaña, 2021), where the code refers to a short phrase used by the participant. Holistic coding is an exploratory, macro-level coding method where the code is created from the general, broad idea of what the participant relayed in the study. After these first cycle coding methods were used, I used Saldaña's (2021) code mapping method before transitioning to second cycle coding.

Transition from first to second cycle coding involved using code mapping to organize the first cycle codes to create concepts from the category codes that emerged. Code mapping is "manually organizing and assembling the codes developed from first cycle process" (Saldaña, 2021, p. 281). Four iterations of code mapping were used to arrange the findings into its emergent categories. During this transition between cycle one and cycle two coding methods, first cycle codes were examined to determine outlier status, and decisions were made whether codes were retained or discarded before entering the second cycle coding. Then a Saldaña second cycle coding method, Pattern Coding, was used to group these coded summaries into their emergent themes. Pattern Coding is a "meta code" where the material from first cycle coding is pulled together to form more inferential codes.

Each transcript contained the findings from both the pre-interview activity and the semi-structured interview that followed. Since the first question of each interview

had the participant explain in detail their pre-interview activity responses, the pre-interview responses are included as part of each interview transcript. Therefore, the pre-interview activity findings were coded as part of and in the same manner as the interview transcript. The first cycle coding determined that the pre-interview codes, categories, and themes aligned to those in the semi-structured interviews. Holistic coding was used for the two pre-interview activity drawings to determine, “What is this picture about?” Again, the first cycle holistic coding confirmed that the codes from both the pre-interview activity drawings and the semi-structured interviews aligned with each other.

A Priori Codes

Prior to coding the findings, I selected three a priori codes based upon the literature review and my professional observations in this field. In many qualitative studies of this nature, a priori codes are taken from the literature and considered for coding (Saldaña, 2021). In this research, two separate bodies of literature were considered in determining a priori codes. The first is the literature regarding recovery high schools; the second is the literature regarding students with ED and students with OHI for ADHD. I garnered potential a priori codes from both bodies of literature and looked to see where they intersect. Concepts that appeared frequently in both bodies of work I considered as a priori codes. The a priori codes selected via this process were School Environment and Relationships, as they were identified in the literature as being significant factors in student success. In addition, I chose an additional a priori code based on observations I consistently made during my over 15 years as a special education teacher and behavior specialist of similar student populations. The a priori

code selected via this process was Improved School Behaviors (i.e., receiving fewer behavioral referrals) because it is an area of success I have regularly observed in students when working with this student population.

In this research I am working with two separate elements, first, the special education needs of my participants and, second, the recovery nature of the high school they attend—and consequently the uniqueness of that combination. Using multiple a priori codes—I selected three for this research—may create the tendency to cause the researcher to look for examples of these codes. I instead went through each transcript multiple times to ensure I understood what the students were saying, not looking to find things that match the codes on the a priori list. As this case study was exploratory, I wanted codes to emerge from student voice and input rather than from researcher prediction.

First Cycle Coding: In Vivo and Holistic Codes

To begin first cycle coding, holistic coding was used to determine the overall message and intent of participant responses. During the fourth read-through of interview transcripts, each transcript was assigned two to three holistic codes per page. During the transition phase following the first cycle these holistic codes allowed me to organize the findings overall and sense possible categories that may emerge during cycle two analysis. To increase focus on the specific findings that emerged from the participant responses, in vivo coding was also used. After assigning the findings holistic codes, in vivo codes were garnered from the student responses during the fifth iteration of reading each transcript. This method of coding would enable the researcher to present student voice when coding the findings (Saldaña, 2021). All key words and

phrases that pertained to the research questions were noted and became the in vivo codes. Each individual transcript produced between 47 to 112 in vivo codes. In coding each transcript line by line, more than 350 in vivo codes emerged from the five transcripts.

While I used the Saldaña (2021) two-cycle approach as the basis for my coding at large, I followed Bogdan and Biklen's (1992) method of allowing in vivo codes to be up to 10 words in length. This helped to ensure the participants' perspectives and language were fully captured, as sometimes this took that many words. I felt this approach was best to convey student voice considering the nature of these transcripts and the questions being asked. Transcriptions were assigned page and line numbers for ease of future reference. Each in vivo code was number coded (page and line) for easy retrieval during later analysis. In this way an in vivo code used in support of findings could be verified to ensure it was taken within the intended context of the participant. Two final iterations through the transcripts were made at the start of the transition phase to verify code accuracy, determine potential outliers, and prepare the findings for cycle two analysis.

At this time, between cycle one and cycle two, I decided to take out the a priori code, Improved School Behaviors, as students were not mentioning it in their interviews. Not a single student mentioned that they were getting in trouble less frequently in school, had decreased referrals, or were acting differently in school in this regard. This could be due to my small sample size, but I removed this a priori code off the master code list, as it was not represented in participant responses.

Transition to Second Cycle: Pattern Coding.

Bogdan and Biklen's (1992) *folders approach* in coding the transcripts was used to organize the in vivo codes by transcript and category. The folders approach is where every code is typed onto a separate slip of paper and placed into a folder of the appropriate emergent category. For this research, all in vivo codes were printed by color code based on which transcript they came from. Then, all 350+ in vivo codes, on color coded strips of paper, could be moved around to combine the codes into categories. During second cycle pattern coding, I looked for commonalities in the in vivo codes and grouped them according to their similarities. Those with commonalities in a broad topic area were grouped into a category. I considered and grouped all individual in vivo codes on the strips of paper to determine the 17 emergent categories. This process of grouping the in vivo codes was repeated with all of the in vivo codes from each transcript, one by one, until all in vivo codes were in their proper category (and folder) by topic. The folders' contents (the numbered in vivo code strips of paper) were read and re-read to confirm the codes were categorized appropriately and to determine the codes' emergent themes. This process resulted in the 350+ in vivo codes to be grouped into 17 categories. Prior to finalizing second cycle pattern coding, some first cycle codes were designated as outliers because I determined they were not addressing the research questions. They named outside resources not relevant to this research, so were not considered in the axial coding stage that followed.

Second Cycle Coding: Axial Coding

After the codes were grouped into 17 categories, I then used axial coding (theming) to reduce the 17 categories down to 3 essential themes. Again, using the

folder method, I collapsed codes. Categories were grouped further based on how the 17 categories relate to one another. Related categories were re-grouped as a singular theme and the others as categories. This process was completed with the 17 categories until it was determined that three essential themes emerged and that all other categories fell within them. This process was repeated and checked twice for accuracy of the warrant for these three emergent themes.

Analytic Memos and Concept Mapping

In addition to the coding methods described above, during data analysis I used analytic memos throughout first cycle coding to inform the transition between cycle one and cycle two (Creswell & Poth, 2018; Saldaña, 2021). Analytic memos were analyzed in addition to transcripts to “generate codes, categories, themes, and concepts” (Saldaña, 2021, p. 71) and to generate the warrants for expanding, condensing, or grouping codes during first and second cycle. During the transition period following first cycle analysis, pattern coding, code adjustments, condensing, and code mapping occurred and warrants determined prior to second cycle coding. Second cycle axial coding developed warrants for the determination of categories and emergent themes for the data (Creswell & Poth, 2018; Saldaña, 2021). A concept map was created to assist in determining categories, themes, and patterns of codes and responses. Concept mapping assists the researcher in direct interpretation of the results (Creswell & Poth, 2018; Stake, 1995). The “researcher concentrates on the instance, trying to pull it apart and put it back together again more meaningfully—analysis and synthesis in direct interpretation” (Stake, 1995, p. 75).

Ethical Considerations

The University of Portland Institutional Review Board approved and granted permission to conduct this research study. The School Board for DA granted approval for me to conduct the study (Appendix D). Data from all collection methods in this study were saved on a password protected computer and removed following study completion in compliance with record retention guidelines. Participation in this study was both voluntary and confidential for all participants. A signed letter of consent was required from each parent/guardian of each participant under the age of 18. Any adult participants signed their own consent form. Students under 18 were required to sign a written assent form in order to participate. All forms outlined to the participants and their parents/guardians that they could discontinue participation at any time without reason or consequence and that any data, if collected, would be removed from the study. Each participant was given a pseudonym to protect their identity and maintain confidentiality. Participants and parents of minors were informed in the letter of introduction and at the beginning of each pre-interview activity and personal interview that their information would be kept confidential. No identifying information was included in this dissertation. Each participant had a pseudonym, and no identifying information was included in the reporting. Any data collected that could be personally identifiable to a particular student was removed.

From the beginning, the purpose of the study was made transparent to the participants and the parents/guardians to avoid the perception of conflict of interest given my role with the district. In the dissertation itself participant pseudonyms are used to maintain confidentiality.

Positionality/Role of the Researcher

I began my work in education as a general education secondary science teacher. Quickly I moved into the field of special education, with a double specialization in ED and Specific Learning Disability (SLD) and have been working in that part of the education field for 15 years, mostly as a behavioral specialist. Through my work, I have been committed to assisting and advocating for students with behavioral difficulties, commonly students with ED and students with OHI for ADHD special education eligibilities. Based on my experiences in education, in both the general and special education fields, I have personal assumptions about how students with ED and students with OHI for ADHD experience success as well as their barriers to success.

In addition, I have worked at this recovery high school for the past two years as a special education services coach/mentor to staff, approximately three hours per week. I am not the students' classroom teacher but offer support in a general education class to all students on a bi-weekly basis. In addition, as a school district representative, I attend the annual IEP meetings for all students at DA who receive special education services. Therefore, the students and I know each other from this limited school and meeting contact. I do not provide any grading of students' work or influence their grading or earning of credits.

Trustworthiness of this Study

To strengthen the trustworthiness of this study, several strategies were used. Triangulation of the pre-interview activity data, interview data, and the literature on RHSs and students with ED and students with OHI for ADHD created a "thick, rich" description of the case (Geertz, 1973). To address researcher bias, a research journal

was kept for use throughout the data collection and analysis phases of the research to allow me to bracket my own perceptions and clearly interpret what the data is saying (Creswell & Poth, 2018). Bracketing helped set aside any bias I may have and take on “the burden of clarifying descriptions and sophisticating interpretations” (Stake, 1995, p. 102). The researcher’s journal included reflexive journal entries, analytic memos gathered during the data collection and analysis phases of the study, as well as documentation of the study’s processes.

Throughout this study, I maintained a focus on providing raw data and material from the student voice, with thick description so that the reader can do their own generalizing of the rich information acquired (Stake, 1995). My experience and positionality in this study gives me a unique perspective as a researcher on recovery high schools and the students’ experiences there. I bring that experience and knowledge forward during the discussion of the results later in Chapter 5.

To strengthen the trustworthiness of this study, specific strategies were used to cover the areas of credibility, transferability, dependability, and confirmability as recommended by Guba and Lincoln (2011). For *credibility*, triangulation was achieved in this study through three areas of information gathering: (a) Pre-interview activity, (b) interview, and (c) literature review.

To achieve *transferability* in this study, thick descriptions and purposive sampling were used. For *dependability* of this study, an audit trail was provided via the research journal and triangulation as described above. Lastly, the *confirmability* of this study came again via triangulation, clear documentation of the procedures and timeline

followed, and through reflexive journal entries during all stages of the research (Guba & Lincoln, 2011).

Summary

This chapter outlined the purpose and rationale of this qualitative instrumental case study, which investigates how students with ED and students with OHI for ADHD experience success at a recovery high school. It is exploratory in nature and seeks to build a rich understanding around how students with ED and students with OHI for ADHD experience success at the RHS. The data collection and analysis are aligned with accepted best practices in case study research (Bogdan & Biklen, 1992; Creswell & Poth, 2018; Saldaña, 2021; Stake, 1995). Measures, including research journaling, bracketing of personal experiences and perceptions, and memoing were included in this study to help reduce researcher bias. Triangulation was established between the literature, pre-interview activity responses, and answers to open-ended semi-structured interview questions. The findings of the study are presented in Chapter 4 with analysis and discussion provided in Chapter 5.

Chapter 4: Research Findings

The purpose of this bound, exploratory case study was to investigate how students with ED and students with OHI for ADHD experience success at a recovery high school (RHS). The students that were part of this research were found eligible for special education services under the federal special education eligibility category of either Emotional Disorder (ED) or Other Health Impairment (OHI) for Attention Deficit Hyperactivity Disorder (ADHD). In this research, these students will be referenced respectively as either students with ED or as students with OHI for ADHD. (Note: If a student is found eligible for special education services due to having ADHD, this most commonly is under the federal special education eligibility category of OHI because ADHD is not itself a special education eligibility category.)

Semi-structured interviews and pre-interview activities were conducted with current recovery high school students and recent alumni to explore how students experience success within this specialized and seldom-studied educational environment and to hear the experiences in the students' own voices. The research questions guiding this qualitative study were:

RQ1: What is it like to attend a recovery high school for students with ED and students with OHI for ADHD?

RQ2: What are the perceptions of recovery high school students and alumni with ED and those with OHI for ADHD regarding their experiences of success?

RQ3: What is the recovery high school doing to help students achieve these successes?

The study had a total of five participants. Four were students with ED or students with OHI for ADHD currently enrolled in Danville Academy (a pseudonym), a recovery high school. The fifth participant was a recent alumnus of Danville Academy and also was a student with ED or with OHI for ADHD. The currently enrolled students ranged from 9th through 12th grade and all participants fell in the 14- to 18-year-old range. Two participants identified as female, two as male, and one as non-binary. Length of attendance at Danville Academy for participants ranged from two months to two years. Given the small sample size and the small number of recovery high school students in the area, more detailed profiles of each participant are not included in order to maintain confidentiality of their responses.

Data Collection

Findings for this study were collected and triangulated using a pre-interview activity, semi-structured interviews, and a thorough review of the literature on students in special education and recovery high schools. This chapter presents the case study findings obtained from pre-interview activities and semi-structured interviews conducted with each of the five participants in the study.

Pre-Interview Activity

Pre-interview activities were used to help participants recall and reflect on ideas and experiences (Ellis, 2006). Pre-interview activities in this study were used to garner participant perceptions of how their ideas and experiences relate to success at an RHS. In addition, the pre-interview activity was designed to see if the interview questions needed to be adjusted or tweaked based on participant responses. In the ideal model, the pre-interview activity should be followed by a reflection and then the

interview to follow a period of time later (Ellis, 2006). In this study, due to timelines and participant cancellations, in some cases the reflection time between the pre-interview activity and interview was minimal—as little as 15 minutes. The pre-interview activity, found in Appendix B, was given to each participant prior to the interview appointment. In all five pre-interview activities, participant responses provided information to answer the research questions of this study. The pre-interview activities helped to determine that the interview questions would not need to be revised, and the original interview questions could stand (Appendix C).

I was physically present with each participant as they completed their pre-interview activity in the event there were any questions or any assistance needed. The participants completed their pre-interview activities independently and without assistance. Two participants chose to complete pre-interview option C, a drawing. Option C instructed participants to *Draw two pictures, one which shows your life before attending DA, and the other showing your life after attending DA*. These drawings are in Appendix E. The remaining three participants selected to complete pre-interview option D, which consisted of the following three short answer questions: (1) *List three things that you experienced at DA that are most helpful for you.* (2) *Describe two or more things you've learned at DA that you plan to use in the future.* (3) *How does the environment at DA affect your learning and success?*

Completion of the pre-interview activity took each participant 10 to 15 minutes. Once each participant had completed their selected pre-interview activity, one-on-one semi-structured interview appointments were scheduled. As the first question of their subsequent interview, I asked each participant to expand on and explain their pre-

interview activity responses. This allowed me to member check their pre-interview activity answers/drawings for accuracy, context, and intent.

Semi-Structured Interview

For their interviews with me, one participant selected to be interviewed via Zoom, and each of the other four interviews was conducted in person. The interview questions and protocol are found in Appendix F. Member checking, defined as having the participants review drafts of their responses with the researcher after the interviews (Stake, 1995), was not part of this research process. Given the difficulty of member checking with this population, particularly the difficulty of their being available and responsive to appointments, member checking was not possible. Therefore, probes for clarity were done during the actual interview process to confirm participant intention regarding the specific content of their responses. These probes for clarity included clarifying questions and paraphrasing their responses back to participants as part of the interview itself.

The researcher recorded each interview on Apple Voice, a digital device that used a computer software program to create a transcript. The researcher listened to and read through each transcript twice to ensure accuracy of the transcript. Once they were determined to be accurate, each transcript was then printed on paper with wide left and right margins to allow for handwritten analytic memos and holistic coding on the transcript itself (Bogdan & Biklen, 1992; Saldaña, 2021). The researcher then read through each transcript two more times to consider content and context prior to the coding process.

Analysis of Findings

This section presents the findings collected via the pre-interview activities and semi-structured interviews. Students were given pseudonyms to protect their identities. The findings will be presented in two parts. To begin, this chapter will present the three themes that emerged and were identified through the two-cycle analysis process (Bogdan & Bilken, 1992; Saldaña, 2021) and the categories and warrants associated with each theme. This organization method helps clearly present and identify the three emergent themes and their categories.

Three essential themes emerged from the findings. Each of the three themes was derived from categories that arose from the first cycle coding. The three emergent themes and their corresponding categories are listed in Table 1.

Table 1

Emergent Themes and their Categories

The RHS Environment	Connections/relationships The school community environment Teachers and classes Perseverance to Keep Going Safe socially Supports/understands me Tools and advice Similar and different people and values
Changed Student Behavior	Changed my behaviors Recovery Open and honest. Be myself Improved Academics
Personal Identity and Self-discovery	Feelings Mental health Purpose/Future Hard truths/Challenges me Changed me/Self-realization

The Three Emergent Themes

The transcribed and coded pre-interview activity and interview findings showed three emergent themes:

1. The RHS Environment
2. Changed Student Behavior
3. Personal Identity and Self-discovery

A total of 17 categories were represented within these three themes relating to how students experience success at the RHS.

Theme 1: The RHS Environment

When asked questions on how they have experienced success since attending DA, participants' responses referred to several key elements represented by the following eight categories of environmental influence:

1. Connections/Relationships
2. The School Community Environment
3. Teachers/Classes
4. Perseverance to Keep Going
5. Safe Socially
6. Supports/Understands Me
7. Tools and Advice
8. Similar and Different People and Values

Through their responses to the pre-interview activity and the interviews, all eight of these categories were described by participants as elements they found in the general environment of the school. Considering the responses of all five participants in

aggregate, these eight categories represented all of the elements they articulated as having contributed to their experiences of success since attending DA. In this section of the chapter each of these categories is discussed.

Student responses that fell into the eight categories of environmental factors above pointed to the value students placed on aspects of the school environment and the support provided by the school environment and personnel. From “I love everyone here” to “everyone here is in the same boat,” the environment at Danville Academy clearly made a major contribution to the success of these students.

Category 1: Connections/Relationships

In reflecting on their newfound success since attending DA, all five participants conveyed that the relationships and connections they gained there have been strong, positive, and supportive. Included in this category are participants’ comments that refer to the social connections and relationships amongst those in the RHS. This includes connections between staff and students and students and their peers. Participants reflect that this “tight knit” community of staff and students has helped support them as they work towards successful outcomes.

Table 2*Theme 1: Category 1: Connections/Relationships*

Student	Verbatim Participant Responses
Grey	I love everyone here...overall, everyone here is great We all really relate to each other I have an emotional connection with teachers here
Reggie	It's a tight knit community...everyone knows each other. We're all really close More bonding than a normal school
Charlie	Everyone is so tightly knit
Regina	I have real friends and real support...we all want to be real together They know my authentic self
Kate	Very supportive community...relationships are strong We get to create this sense of belonging and success for all of us

Regina was happy with the true friendships gained while at DA, something she had struggled with in the past. “When I came here it was like a group of people, and we all wanted to experience things together, and we all wanted to be real together.” Though all five participants discussed how they appreciated the connectedness of the people, Grey was the only one to point out that he observed a down side to the small, connected community:

It can get a little hard when there's people who are just freshly sober and they're still, like, very angsty and they have a super short fuse. Like, that's what I was saying about “people can snap at any moment.” But, I mean, overall everyone here is great. Everyone here also has their moments. And I don't blame them, I've had my moments too here.

These codes were determined to collectively create an emergent *Connections/Relationships* category as they all describe social connections and relationships of participants inside school.

Category 2: The School Community Environment.

When asked about success, a common response for participants was to mention the helpfulness of DA's school community environment. All five participants expressed that the school environment itself attributed to their success since attending DA. They described it as an overall nice place to be. Included in this category are participants' comments that describe the school environment and what they find there that helps them to succeed. They included elements found in the classrooms, therapeutic recovery discussion groups called recovery circles, and the overall school environment and culture. They agreed the school environment was supportive, a safe place to be yourself, inspirational, with people who care about them. This amounted to participants wanting to be there, feeling welcome and secure. These aspects of DA's positive school community nurtured success for its students. Reggie describes this further: "I've been thinking about this a lot recently, all of my teachers here are really . . . they're really easy going and laugh with us, and it's just a really chill environment, so that helps me."

Table 3*Theme 1: Category 2: The School Community Environment*

Student	Verbatim Participant Responses
Grey	I can be myself Great experience with my social time here
Reggie	A really supportive place
Charlie	You're just kind of close with everybody, even if you don't hang out outside of school People take you for who you are Happy to see me and talk to me and included me
Regina	Every day there's something <i>good</i> There's a lot of communication Showed me...they cared about me
Kate	Feels like family It's a beautiful experience Very inspirational A really nice place

The codes in this table were all found to collectively create an emergent *School Community Environment* category, as they all describe how the participants describe the school environment and what they find there whether it be in the classrooms, recovery circles, or overall school environment and culture.

Category 3: Teachers and Classes.

All five of the participants also expressed the importance of the positive influence the teachers and classes at DA had on their being successful there. Included in this category are participants' comments that describe the teachers and classes at DA. Their descriptions of the teachers' approach to teaching students in this special environment—and the class setups themselves—revealed how helpful these two elements were to the participants' achieving success at DA. Mentioned as helpful were things such as one-on-one support, small classes, and positive teachers who appear to

like their work. In addition, participants explained that it was close connections with their teachers and classmates that helped them to feel more secure in class. Having good relationships with those around them enabled the participants to feel more comfortable to ask questions and get extra help. The small classrooms at DA also afforded the participants more time to learn and process the material being taught. All these things were found to be helpful for the students to achieve success, as described in more detail by Regina:

They kind of *explain* what my options were for classes and stuff. And so when I did take a math class or whatever, I got a lot of help around it. And I got a lot of explanations. And I was starting to be able to be a little bit more held accountable with actually turning in my homework. Like that one's a huge one [laughs]. Like actually being able to process and learn the information instead of like spending 10 seconds on a huge thing and then the next day, doing the exact same thing with something else. Like, I was actually able to be explained to and process what I am learning to be able to actually apply it and pass the class or whatever.

The table below contains additional examples of participant responses that correspond to teachers and classes at DA and how they were a contributor to student success.

Table 4*Theme 1: Category 3: Teachers and Classes*

Student	Verbatim Participant Responses
Grey	Classrooms here are small They'll actually thoroughly explain They [the teachers] <i>want</i> to be here Positive people...actually care
Reggie	Easy to have one-on-one time with teachers You can get a lot closer to them
Charlie	You get...raw personality from each one of the teachers Teachers...meet us halfway
Regina	Actually explained to me Actually showed that they cared Explained...what I needed, was nice to know <i>why</i>
Kate	Close connections with teachers No judgment in these classrooms

These codes were determined to collectively create an emergent *Teachers and Classes* category as they all are descriptors provided by the participants of how the teachers and classes at DA led them to experience success.

Though all five of the participants received special education services at DA and have IEPs, when asked about success, only one student specifically mentioned special education and the services she had received while at DA. Kate explained, "I have never felt confident in school with my dyslexia and ADHD." She admits that "asking for help is super hard for me and so I think the teachers have an amazing way of studying the students on what they need. Like when I first came here, they were like, 'How can *we* help *you*?''" She expressed how pleased she was with this approach from the staff at DA and how it helped her overcome learning barriers and find success academically. "I get to voice what I really need, and it wasn't someone else deciding for me."

Category 4: Perseverance to Keep Going

One participant felt perseverance and not giving up was a key to her success while at DA. Included in this category are her comments that describe how DA helped her move forward and not give up. Kate felt that the staff not only taught and encouraged personal perseverance but also modeled it by showing students they would not give up on them. Kate expressed great appreciation of the staff's encouragement and that they were clear in letting her know that they were not going to give up on her, even after she made mistakes. They would continue working with her to help ensure her success. "I think that the structure of this school . . . that we can't just leave and give up . . . I think that has really helped me become a successful student." She found it very helpful that the staff worked on perseverance with her each day. "The staff and all the recovery coaches do an amazing job of reminding us every day that we're here for a reason and need to keep being here." She was pleased to report how this perseverance also affects how she feels about her relationships with the people of DA: "They're really not gonna leave. . . . I will always have these people with me."

Kate added that prior to coming to the school, she struggled with staying on track and thought that she needed to not make mistakes to achieve success. In attending DA though, she learned that not being perfect is OK. She learned she could make a mistake and continue to move forward, even despite difficult situations. Kate describes her road to learning the importance of perseverance and how to achieve it:

DA has really helped me with recovery in the sense of, when I first got out of my treatment programs and came here, I was kind of under the impression that I had to be this perfect, sober student. And things got super stressful and I

relapsed. And I think that the recovery coaches here, and the teachers, and students have taught me that . . . that can be a part of my recovery. And it doesn't have to be the straight and narrow line. You know, but as long as I get back onto the path I was going, like I don't have to take 10 steps backwards. I just have to keep going from where I'm at. And I think that's really helped me a lot.

These examples provided by participants via their pre-interview activities and interviews all describe how DA helped them to move forward, stay strong, and not give up. From these quotes the category of *Perseverance to Keep Going* emerged.

Category 5: Safe Socially

This category reflects the importance of DA being a safe place for students and how that also had such a positive effect on them and their achieving success. Included in this category are participant comments that describe the socially and emotionally safe environment for them to open up, be their true selves, and speak openly without fear of repercussions. Two participants mentioned that this feeling of safety while at DA contributed to their success. Kate explained that DA has a “very safe social aspect” that helped her. Charlie also explained how the safe social environment at DA helped her and others to be themselves, which ultimately contributed to their success. Charlie explained she felt others “being real” and her being able to “be really who I am” both were large contributors to her experience of success since attending DA. She added, I can “unapologetically just speak my mind” and appreciated that at DA, “people take you for who you are.”

These participant responses all describe how DA provided them with a socially and emotionally safe environment where they could open up, be their true selves, and speak openly without fear of repercussions. Participants stated these helped to create experiences of success for them.

Category 6: Supports/Understands Me

All five participants referred to DA as a place where people support and understand them with the challenges they are facing. They all mentioned that this aspect of DA contributed to their successes. Included in this category are comments that describe DA as having people that support them. This support was shown through staff and fellow students' helpful actions and having people there that understand them and their needs. Participants expressed their perspective of how helpful it was having understanding and supportive people surrounding them.

Table 5

Theme 1: Category 6: Supports/Understands Me

Student	Verbatim Participant Responses
Grey	They actually understand students here
Reggie	Everyone...was really supportive Exactly what I needed
Charlie	People really get it (the struggle) We all have felt what it feels like...at rock bottom
Regina	I know I have people by my side They help me get through really <i>hard</i> things Actually work with me
Kate	Support from the students Support me and understand Always going to be in my corner

Participants emphasized that people at DA have in common “the struggle” and therefore understand each other very well. They also feel this greater understanding

results in more empathy amongst one another, certainly to a higher level than they had experienced elsewhere. Participants said that those in the DA community were patient and actually worked with them rather than dismissing them. They expressed that this support and understanding amongst their DA community was something they really needed, and it impacted their ability to achieve success since attending there. Regina added:

I feel like every single individual person here has made an impact in my life in some different way. And I can't even really pinpoint one person, because they all have contributed to my life a lot and . . . it's just like every single person here.

These codes were all found to collectively represent a *Supports/Understands Me* category as they all describe how DA provided people that supported them, showed actions they found supportive, and had people that understood them and their needs.

Category 7: Tools and Advice

Two participants asserted that another component of attending DA that was very helpful for their achieving success was the advice and tools they received while there. Included in this category are participant comments that describe students receiving relevant, helpful advice. It also includes comments regarding receiving additional new skills or “tools” they need and can use for their futures. Participants asserted that the tools and advice they received while at DA pertained to life in general, not just schooling and recovery. Grey noted that he benefitted from “extremely good advice” that he received from staff, often informally and outside of class. In addition, students mentioned that DA helped and supported not just them with tools and advice

but their families as well. Kate described the helpfulness of “all these tools that I’ve been taught” since attending DA and how she would take those with her into the future. She mentioned that DA gave her great “life advice,” skills she could use moving forward, even after graduation and in future scenarios and situations. Grey and Kate both shared that the tools they received helped them most with relationships, which they greatly struggled with prior to attending DA. Kate illustrated her point in more detail:

The recovery coaches have helped me a lot with my family. . . . They’re not just here, you know, for the students. They’re definitely here for families too and understand that it’s very hard having a kid in recovery. And so they’ve definitely taught me these life skills to use with my parents that I haven’t ever learned and didn’t really learn throughout treatment and things like that, of just how to be a successful member of the family again. And I think DA’s really taught me how to rebuild those relationships with my parents and my family and rebuild this trust. And I think they’ve also really helped me to voice to my family what it’s really like to be an addict, so that they get that perspective of like, this is why school is so hard for me. This is why all of these things are happening. And I think that that’s a really important aspect in my life now because I’ll be able to continue to use those tools that I didn’t get elsewhere.

These participant quotes all describe how DA helped them to experience success by giving them relevant, helpful advice and additional tools they may need and use for their future. These participant responses were found to justify a category of *Tools and Advice*.

Category 8: Similar and Different People and Values

Participants were split on how they felt that the mix of people at DA affected their experience of success. When talking about how they experienced success at DA, all five participants pointed out that their peers at DA were similar to them—or different from them! Interestingly, whether they conveyed difference or sameness, participants thought it was still positive for them and created a more helpful environment for their achieving success. This finding is unique for this study as it is the one category where the participants were split in their perceptions. Included in this category are participant comments that describe the fact that they were surrounded either by others like them with the same issues and values or by others who were quite different from them even though they learned to get along with them.

In this category, three of the participants described how the students at DA were similar to them, and that was really helpful and impactful to their success. In contrast, two participants described how the students at DA were very different from them yet this turned out to still be a positive for the participants. The three that described people as the same found solace in the fact that others at DA were like them, a feeling that led to more understanding and connectedness. The two that described people as different were impressed that the community was supportive and understanding despite their differences. They described that this “different people” element of DA’s environment still positively impacted their success and impressed upon them that people can get along well and be helpful and encouraging to each other even if they are very different people from one another.

Table 6

Theme 1: Category 8: Similar and Different

Student	Verbatim Student Response	
	Same/Similar	Different
Grey	Everyone's in the same boat	
Reggie	People have the same struggles Realized. . .people have similar stories	
Charlie		Different stories...doesn't matter Different people
Regina		We're all so different
Kate	Similar aspects to our story I'll find people like me A lot of the same values	

What participants did agree upon was that, as long as students came together and could relate to one another, it was helpful to their experience of success. All participants reported that the students and staff at DA successfully relate to one another, whether they were the same or different as people, ultimately contributing to their experience of success. As further explained by Charlie, “DA really shows you that no matter how different you feel like you are from someone . . . you can always come together.” These codes were all determined to collectively create an emergent *Similar and Different People and Values* category, as they all describe the fact that the students were surrounded by others like them and with the same issues—or the converse, students at DA getting along despite the fact they are so different from each other.

In summary, the findings of student responses in the eight categories detailed above show *The RHS Environment and Its Impact on Students* as a recurrent, emergent theme. The participants on the whole describe these eight areas of DA's school

environment as all having a significant impact on them and their achievement of success.

Theme 2: Changed Student Behavior.

When asked questions regarding any change in their behaviors since attending DA, participants referred to several key elements, and the following four categories of behavior change emerged:

Changed My Behaviors

Recovery

Open and Honest. Be Myself

Improved Academics

In their pre-interview activity and the interview responses, all four of these categories were described by participants as specific areas they felt they had changed their behaviors for the better, leading them to experience success since attending DA. In this section of the chapter each of these categories is discussed below:

Category 1: Changed my Behaviors

Responses from all five participants evidenced that they feel their behaviors have changed in positive ways since attending DA. Included in this category are participant comments that describe the actions and behaviors they changed that assist them in being more successful in various ways. Participants said that they needed to make several changes in many aspects of their lives when coming to DA. All five participants agreed that they achieved success in various areas but had to change many of their behaviors to reach those improvements. The participants shared their helpful behavioral changes in a range of areas in their lives that include positive relationships,

class participation, forward thinking, and sobriety. These are evidenced in the table below.

Table 7

Theme 2: Category 1: Changed my Behaviors

Student	Verbatim Participant Responses
Grey	I used to...get in...super toxic relationships Asking more questions Voicing myself a lot more Get off drugs, which was a <i>huge</i> change
Reggie	I have a year and eight months sober Impacted the way I view things Helped me reach out and be more vulnerable I just didn't care as much as I do now I was thinking just in the now
Charlie	I have higher expectations of myself [now]
Regina	I became more open and honest I became more...able to trust school I actually have things that I'm working for and looking forward to
Kate	I really changed my behaviors and the way I act I don't ...resort to all the things I used to do to avoid

The codes in this table were all determined to collectively create an emergent category of *Changed my Behaviors* as they all are descriptors provided by the participants of how their actions or behaviors have changed since attending DA, leading them to experience success.

Category 2: Recovery

As this is a recovery high school, it came as no surprise that all five participants indicated that attending DA helped them achieve and maintain their sobriety. Included in this category are participant comments that discuss the recovery culture and assistance with recovery and sobriety that DA provides its students. Their

comments describe how the school environment in general assisted them. In some cases the comments indicated that it was the direct support of the recovery coaches that were most impactful to their success in discontinuing drug use.

Table 8

Theme 2: Category 2: Recovery

Student	Verbatim Participant Responses
Grey	So many different paths to take in recovery... [at DA] you can just form your own path...I really appreciate that Made me understand sobriety Showed me...being sober can be cool and you don't need drugs to be happy
Reggie	Communities, the best things for drug addicts and recovery Before DA, I was doing drugs and dealing. After DA...I have a year and eight months sober
Charlie	[Recovery coaches] felt like a closer relationship
Regina	I chose to come here and I'm really happy I did cuz if I didn't...I probably wouldn't even still be alive
Kate	Has really helped me with recovery The recovery coaches really inspire me Safe and comfortable way to talk about recovery Has given me this...loving feel on recovery Provides this wisdom to me about recovery

Participants reported that the recovery coaching and the school's overall supportive environment were both helpful for maintaining sobriety. The recovery coaching gave them the knowledge and wisdom from others that had been there before, and this newfound knowledge assisted them with being motivated to stay in recovery and have the knowhow to do so. Participants noted that they learned and appreciated the fact that recovery is a personal path, and they found flexibility with their chosen paths while at DA, which they also found helpful and appreciated. When asked what she felt influenced her ability to succeed overall at DA, Charlie replied that it was being in

recovery. She smiled as she illustrated that recovery could be broader in scope than just recovery from substance use:

Just, like, living a life of recovery. And having a life based around recovery because recovery can mean recovery of addiction, but it can also be recovery of bad habits or trauma, or, you know, illness—whether that be mentally or physically. But just living a life of recovery . . . is really good.

The codes and quotes above provided by participants explain how at DA they experienced the recovery culture and assistance with recovery, which resulted in new behaviors of sobriety. From this emerged the category of *Recovery*.

Category 3: Open and Honest. Be myself

Responses from three of the five participants evidenced that attendance at DA helped them to be more open and honest. Included in this category are participant comments that describe honesty both with self and others. Attendance at DA helped them to achieve this openness and honesty. As students there, participants also learned that it was a supportive and safe place for them to be their true selves. They felt very encouraged to be honest at DA. Participants explained that since DA is a safe, forgiving, and accepting environment, they did not have to mask, lie, or conform as they had done in the past. These three participants concurred that being open, honest and their true selves contributed to their achieving success.

Table 9

Theme 2: Category 3: Open and honest. Be myself

Student	Verbatim Participant Responses
Charlie	Just be who you are, and people will really appreciate that Everybody just will take you for who you are People...have a "I don't give a fuck" mindset about how people view them I've been able to open up about my trauma
Regina	I'd be like, "Oh, man I can't lie. I gotta tell you the truth" I wouldn't make up an excuse. So that is something that definitely was helpful Made me feel comfortable to be honest about academics I'm more open with my parents
Kate	I've definitely learned to be open and honest within recovery and also just with schoolwork You can come here and be exactly how you need to be I got to come into this community and open up I can be super real and open

Kate further explained the idea of being able to just be yourself at DA and how it has helped her to be more successful socially and in the classroom:

I no longer am trying to put on this mask and being two people at home and then in school. I get to, like, come to school and be the same person I am at home, and share those same experiences with kids here. And I think that I've definitely kind of beaten my social anxiety with being here and learning how to talk to people and how to be a mature adult in the situation, and to be like a mature student in the classroom, and not just sit there in the back of the classroom and goof off because I don't understand anything.

The codes and quotes in this section were all found to collectively support an *Open and Honest. Be Myself* category as they display how the participants describe being honest with others and with themselves as helping them to experience success.

Category 4: Improved Academics

All five participants in the study emphasized their success in improving their academics after attending DA as compared to their last school—and by a wide margin. Included in this category are participant comments that describe their improved academic achievement after starting at DA. This achievement may be in the form of improved grades, participation, interest, and credit attainment. Participants stated they felt this was due mostly to two things: their engagement and overall attitude towards their education and the classes themselves. Now that they attended DA, their overall engagement has changed for the better and even their attitude towards schooling has changed. Participants described how they now like their school, classmates, teachers, and classes. As Charlie explains:

I have a really big problem with math. I've never really liked math. But when I started taking math with one of our teachers [at DA], it was really like the first time I've actually been really interested in it and really like, "Oh I can't wait for this class," you know? Because rather than sitting and just having someone write on the board for like an hour, it's very interactive. And he really brings you into the lesson, rather than just teaching the lesson.

Participants revealed that their newfound interest and appreciation of school resulted in greater engagement in their classes and improved academic success.

Table 10*Theme 2: Category 4: Improved Academics*

Student	Verbatim Participant Responses
Grey	I have been a lot more successful here. I passed like two classes...at public school and I haven't failed a class since I got here I actually pay attention in class and participate
Reggie	I'm doing really well in school I've never gotten straight A's in my life, and last year I got them DA has helped me get my credits
Regina	I graduated high school
Charlie	I love math this year, which is really weird because I've never loved math
Kate	It's definitely created this importance to me that I'm in class and paying attention I really learned it's important for me to be <i>present</i> in class...so I can get this education so that I can better myself in the future I learned ...to manage my time...in class I've definitely learned to have an open mind when it comes to school and harder subjects It's really strengthened me academically

These quotes all relate to how DA helped participants improve their academic achievement, leading to their experience of success. These all were found to be the emergent category of *Improved Academics*.

To summarize, the four categories above evidence *Changed Student Behavior* as an emergent theme. The participant responses displayed the strong agreement shown that student behaviors and actions changed after attending DA, contributing to overall student success.

Theme 3: Personal Identity and Self-discovery.

When reflecting on their experiences of success since attending DA, a third theme of personal identity and self-discovery emerged. This theme emerged from reflections where participants looked internally to determine how DA impacted them on a more personal and emotional level. Participants referred to several key elements of this in the following five categories:

Feelings

Mental Health

Purpose/Future

Hard truths/Challenges Me

Changed Me/Self-realization

Participants revealed in their pre-interview and interview answers these five elements as areas where attendance at DA affected them and impacted their sense of self, leading them to experience success. In this section of the chapter each of these categories is discussed.

Category 1: Feelings

When discussing their experiences of success at DA, participants described how attending the RHS made them feel personally and emotionally. Included in this category are participant responses that described how they *felt* about their experiences of success at DA. These feelings included gratitude, happiness, and confidence. All five participants echoed this similar range of feelings about attending DA. These feelings lent themselves to students' self-discovery and clarification of their personal identity, as evidenced below:

Table 11*Theme 3: Category 1: Feelings*

Student	Verbatim Participant Responses
Grey	I feel a lot more included I'm very thankful
Reggie	Feel like I'm less alone I felt really supported and safe I'm really grateful
Charlie	Makes you feel so good...to have that validation Whenever I get to school, I'm happy For the first time ever, I've actually been excited to go to school
Regina	I slowly became more confident in myself I'm so grateful, I really am I chose to come here, and I'm really happy I did Made me feel good
Kate	I feel comfortable in the classroom It's kind of my happy escape I can still feel all the love I deserve when I walk in this building

When asked how her learning and social experiences at DA made her *feel*, Kate explained, “It definitely makes me super happy. I never really felt like . . . I have, like, this big security around me at school. You know, I’ve never felt this . . . almost, like, overwhelming feel of safeness. And it’s a very beautiful thing.” These In Vivo codes along with the holistic codes considered collectively confirm the *Feelings* category as they all describe how students *felt* about various things. Included in this category are codes of when a student described a feeling for any question in the study.

Category 2: Mental Health

All five participants also discussed the positive effects that attending DA had on their mental health. They all reported that their mental health definitely improved by a noticeable margin since attending DA. This improvement in their mental health

opened the door for their successes. Included in this category are comments made by participants in which they mentioned that their overall mental health, positive outlook, and mentally healthy habits were bolstered via attendance at the RHS. Participants' comments describing this concept are in Table 12.

Table 12

Theme 3: Category 2: Mental Health

Student	Verbatim Participant Responses
Grey	It's been very nice to just be able to relax in the classroom This school definitely helps me just have a much more positive outlook on things
Reggie	It's just a really chill environment so that definitely helps...[my] anxiety I was able to open up and then talk about it and it helped me a lot [Recovery coach] told me how to cope with some of the things I deal with...got way easier to deal with cuz of him
Charlie	Days where all I can think about is using or self-harming...[DA] can help that Getting me up and out of the house to talk with people, it's just what I need
Regina	I started to want to get out more I have been able to just kind of enjoy more things
Kate	I feel like it's not this huge stress around me I've been able to overcome that fear of social anxiety I think this school has improved my mental health so much helped me out so much emotionally

Participants attributed their improved mental health to being able to open up and talk about difficulties more, feeling comfortable in the school environment, improving their attendance, and being around people more. Reggie adds additional explanations on these points:

At my old school everyone, like, pitied me, and I thought that I was kind of the only one that was going through what . . . what I was going through. And then

I came here, and I realize that so many more people have similar stories, but also that no one has the same exact story. And it helped me, like, not only realize that I'm not the only one, but it helped me know that . . . well, yeah, by realizing I wasn't the only one, it helped me open up because I couldn't explain it to people that didn't go through it, because they just didn't understand it or thought it was weird. I was able to open up and then talk about it and it helped me a lot.

These comments and codes evidence the need for a *Mental Health* category as they describe how DA helped participants to improve their mental health, leading to their more positive outlooks.

Category 3: Purpose/Future

All five participants also discussed the positive effects attending DA had on their thoughts about their future and their personal sense of purpose. Included in this category are their comments describing improved understanding of their purpose and their future. Participants felt they were lacking in this understanding prior to attending DA. They voiced that post-enrollment they now have a purpose and know what it is. In addition, they have goals and ideas of what their futures can hold.

Table 13*Theme 3: Category 3: Purpose/Future*

Student	Verbatim Participant Responses
Grey	DA helped me see my future a little bit more clearly
Reggie	And now...I have a goal and a dream I've really been thinking about the rest of my life and what I want to do
Charlie	It gives me a little bit more, kind of like purpose...if I'm already up I can do a lot more things
Regina	I actually have a vision for what I want to do in the future and goals on what <i>I</i> wanna' do
Kate	Everyone has their unique purpose and I'm definitely finding it here at this school

These participant responses all describe how DA provided them with finding purpose in themselves and helping to guide their future as a result, producing the category of *Purpose/Future*.

Category 4: Hard Truths/Challenges Me

In describing their thoughts of how DA helped them achieve success, three participants discussed how they were given hard truths and challenges to help them make needed changes in themselves. This category contains comments of how DA assisted by giving them the truth about themselves, showing them what they need to do to improve, and challenging them to do better. Sometimes these truths and challenges from those within their RHS community were initially tough for them to hear and do, but participants reflect that it was helpful to their achieving success, learning more about themselves, and making needed improvements. Thoughts that participants shared regarding this category are in the table below.

Table 14*Theme 4: Hard Truths/Challenges Me*

Student	Verbatim Participant Responses
Grey	She was never dishonest and she always just kind of gave it to you straight, so I really appreciated that [He] kinda made me do things, even if I didn't want to do them—which is a really good friend.
Charlie	They gave me the truth. Even when sometimes I didn't want to hear it
Kate	All of the things I figured out about myself here have been so beautiful, and some of them have been really <i>hard</i> All of the [people at DA] challenge me in a way that sometimes I really hate These people are the people who can give me the hard truth that I need to hear, that sometimes my parents can't give me, or friends can't give me.

Kate expanded upon her appreciation of how being challenged and told hard truths by her recovery coach helped her to grow,

. . . he especially really challenges me in a way that sometimes I really hate.

You know, he pushes me to this extent where I'm like, "Like you really had to say that? You really had to bring that up?" and he's like, "Yeah, because you're avoiding it" or "You won't admit it." And so he definitely pushes me in a very hard way that I haven't been pushed before. And that's definitely made me realize that I can persevere through a lot of difficulty. And I just need that extra push from someone, and that person that's going to tell me the hard truth that I don't always want to hear. But he does it with a sense of just, like, love and care for everyone here and is just very inspirational.

The codes in this table were determined to justify the category of *Hard*

Truths/Challenges Me as they all are descriptors provided by the participants of how

DA helped them by giving them the truth about themselves, what they need to do, and how they need to improve. Key to this support was the staff being realistic about expectations and the effort needed to succeed.

Category 5: Changed Me/Self-Realization

All five participants agreed that DA helped them make some changes in themselves that were helpful towards achieving success. This category includes comments where participants agreed these changes occurred through their own personal self-realization they experienced since attending DA. Participants discussed how these personal changes and self-realizations helped them to “become who you want to be” and “better yourself.” This section reveals the ways the RHS helped to changed them and their thinking about themselves.

Table 15

Theme 3: Category 5: Changed Me/Self-realization

Student	Verbatim Participant Responses
Grey	I really started to give myself a chance, and that’s when things started <i>moving</i> more It’s OK to be scared or uncomfortable, as long as you’re safe. Made me see things a lot more clearly
Reggie	Realizing that I’m not alone
Charlie	This school has taught me to take into consideration <i>my</i> feelings rather than other people’s feelings more so. I don’t have a fear of my teachers and peers, more so just want to feel the love I guess, and talk to them.
Regina	Coming here, I was actually able to learn my true self It made me a lot more appreciative of life as well
Kate	This is where you’re going to find all of these unknown things about yourself It’s truly made me believe that I am this intelligent woman and that I have what it takes to be that person It’s definitely changed my view of me as a person

The codes in this table, considered in sum, resulted in the *Changed Me/Self-realization* category, as they all describe how DA changed the participants, their thinking about themselves, and fostered their self-realizations.

Taken together, these five categories of participant responses show how the idea of *Personal Identity and Self-discovery* is an emergent theme from this research. Participants shared a common view that since attending DA, their personal identities and self-discoveries surfaced and blossomed in these five category areas.

Summary

This chapter presented the findings that emerged from the analysis of participant responses collected in this study. This study used the student voice to explore their perceptions of success at the recovery high school. Through pre-interview activities and semi-structured interviews, participants were asked their perceptions of success and how they had experienced success since attending Danville Academy. Through analysis of the findings, three essential themes emerged. The first of these themes was *The RHS Environment*. This theme included aspects of the DA school environment that influenced the participants and their achievement of success. The second emergent theme was *Changed Student Behavior*. This theme displays participants' explanations of the changes they made in both their actions and behaviors and how they feel these have led them on a path to success. The third emergent theme was *Personal Identity and Self-discovery*. This theme emerged largely from participants' more internal, personal reflections of themselves that determined how DA impacted them on a more personal and emotional level. Chapter 5 provides discussion of the findings presented in this chapter based on the examination of the

results from each participant, the observed emergent themes, and the significance of the findings with recommendations for further study.

Chapter 5: Discussion

The purpose of this bound, exploratory case study was to investigate how students with ED and students with OHI for ADHD experience success at a recovery high school (RHS).

The research questions I sought to answer in this study were:

RQ1: What is it like to attend a recovery high school for students with ED and students with OHI for ADHD?

RQ2: What are the perceptions of recovery high school students and alumni with ED and those with OHI for ADHD regarding their experiences of success?

RQ3: What is the recovery high school doing to help students achieve these successes?

Analysis of pre-interview activities and interview transcripts detailed in Chapter 4 clearly indicated three emergent themes that ran throughout the participant responses. The three emergent themes from participant responses were Theme One, *The RHS Environment*; Theme Two, *Changed Student Behavior*; and Theme Three, *Personal Identity and Self-discovery*.

Findings from this study reveal participant perceptions regarding their experiences of success and how they feel the RHS helped them to achieve this success. This study also garnered descriptions from participants as to how students with ED and students with OHI for ADHD of experienced an RHS. This chapter provides an analysis of the study's findings, comparisons to the literature, implications for practice, limitations of this study, and recommendations for future research. The discussion of the research findings begins with an overview of how the findings relate to the

theoretical framework of this study, Social Cognitive Theory (SCT). Then, the chapter provides discussion organized by research question applying the lens of Social Cognitive Theory (SCT). Participant responses are also considered in the context of the literature reviewed in Chapter 2 and researcher assumptions entering into the work.

In this research, via the coding process and the emergent themes, I found that the results are clearly aligned with SCT, since the results show how factors of the environment, personal characteristics, and behaviors affect participants' experience of success. For example, many comments made by participants focused on elements of their own perceived self-efficacy, which are personal characteristics found in the SCT reciprocal triadic causation model. Participants also spoke to how environmental factors impacted their behaviors, which in turn impacted their thinking and learning, and further improved their efficacy for success. This aligns with the SCT model and clearly supports the reciprocal interactions it espouses. Based on knowledge obtained from the literature, SCT appeared to account for my own perceptions of how interactions and behaviors occurred within the RHS context and therefore seemed a logical theoretical framework to use in this study. Analysis of my results through a SCT lens could affirm, refute, or confound this framework.

Social Cognitive Theory (SCT)

Social Cognitive Theory supports the concept that learning involves internally processing observed and lived experiences, and the learner then forms a personal cognition accordingly (Bandura, 1986). The learner builds knowledge and schema via observing the modeling of others (Kay & Kibble, 2016). Regarding SCT, Bandura argues that since people are strongly influenced by others' modeling, they are greatly

influenced by their environment and personal thinking. Therefore, how one perceives what they are observing and learning greatly affects their learning process and outcomes. Using SCT, Bandura (1986) postulates human behavior and learning are based on three key factors:

- *Personal characteristics* and experiences—thinking, beliefs, self-efficacy, perceptions, feelings
- *Behavior* of self and others—effort, engagement, sobriety, achievement
- *Environmental factors* of the situation—community structure, instruction, social expectations

In addition, SCT argues a reciprocal relationship between these three key factors. SCT involves a model of causation where these three factors all mutually influence one another. This two-way interaction between personal, behavioral, and environmental factors in the learning process and its outcomes is referred to as triadic reciprocal causation (Bandura, 1986). This reciprocal relationship results in a student's opportunity for agency, or control of their actions. Though participants in this study did not directly and knowingly discuss the terms and elements of SCT, their responses appear to convey and confirm the overall tenets of the theory. Some examples of their responses that relate to and support SCT are discussed in the sections below:

Research participants discussed how modeling their peers, the staff, and the school environment at Danville Academy (DA, a pseudonym) influenced their learning. This displays the dynamic of learning from others around them due to their modeling of behaviors. Learning from others' modeling in this manner aligns with SCT. As a learner, one formulates concepts, expectations, and conclusions based on

what one observes in the behaviors of others. Learning is then acquired by observing the consequences of a model's actions (Bandura, 1986). Observing staff and peers in recovery—and the benefits they receive from that choice—leads to students learning these behaviors via modeling. In his pre-interview activity, Grey shared an example of this direct modeling of one of his peers:

Recovery is what you want it to be. Make it about you and make it your own. That was one of my friends [a classmate at DA] that said that to me. . . . Like, he kind of showed me that recovery was like—there's steps and stuff like that. There's all that. But, like, in the heart of recovery it's what you want it to be. . . . I just think it's really cool and I really appreciate that.

Kate also explained how learning from others' modeling at DA helped her to learn. In the reflection below, she discusses how the modeling of teachers and peers in class led to self-realization, a change in her thinking, realizing self-efficacy, and changing her behaviors for the better. This mutual, reciprocal chain of events helped her to achieve success in school.

I need this visual aspect of learning. And then watching my teachers come in and, like, do these examples on the board for everyone. And hearing everyone be like, "Oh, that really helped me too" definitely created this thought in my head of, like, "I can be this successful and smart human and I don't have to resort to all the things that I used to do to avoid having to speak up for myself and ask. And say that I need help."

When asked in the pre-interview activity about interactions at DA that helped her succeed, another participant, Charlie, revealed how modeling in the school

environment via an affirmation circle exercise led her to understand how a tight-knit group could still have room to let a new person in.

We had this group. . . . We did this thing called the compliment circle and everybody in our school went around for each person. So, everybody in school would say something positive about me or something that they like about me. And that was just, like, so good for everybody. But also, like, when you're the person that's being complemented you get people being authentic [with you]. Even . . . for the people at our school they didn't like, they still gave the compliments. And they still tried to say something authentic about the person. . . . Which, you know, can be a really *good* thing. And that was just the way that our school and everybody at our school, how everybody is so like tightly knit but can always, like, open up for other people to come in.

As students and staff model these kinds of behaviors, they create a positive and close-knit school environment based on newly acquired personal thinking that results in the learning of new skills for the students. This dynamic displays SCT's triadic reciprocal causation in action.

Triadic Reciprocal Causation and Self-Efficacy

All participants in this study conveyed they felt DA provided an impactful environment that led to their personal self-discoveries and supported them in experiencing success. They reported that being in this supportive environment made them feel safe enough to open their minds to new ways of thinking (personal) and doing (behaviors). Their personal relationships and the social structure of the school (environment) influenced their thinking, which then affected their behaviors. Reggie

described, “Well, I think the relationships I’ve made here have, like, impacted the way I view things. And I feel . . . like it helped me reach out and be more vulnerable. For sure.”

Reggie gives another example of triadic reciprocal causation in his learning and success since attending DA. He tells of the environment at DA (promoting recovery) leading to his changed thinking (enjoying new hobbies), leading to changed behaviors (doing well in school):

Before DA, [I was] doing drugs. And dealing. Bad relationships: like yelling with my family, dangerous situations, lying, and failing school. But then, after DA, I got into, like, a lot of hobbies and things I like to fill my time. I’m starting to . . . I’m doing really well in school. I have good relationships and I have a year and eight months sober too.

In their responses to the pre-interview and interview questions, participants repeatedly discussed how their own thinking about themselves changed for the better, helping them to achieve success. Participants conveyed their feeling that DA helped them to gain more self-confidence (self-efficacy) as they experienced success and saw that they have the ability to be a good student. As Kate explained:

When I heard back from my parents after a parent teacher conference, it was the first ever response I’ve gotten from a teacher of like, “Your kid is so smart and understands what we’re doing”. And . . . when I went to other schools before Danville it was like, “She’s never in class blah blah. Like, always gone or doing something else.” I think now it’s like, “She’s present in class. She is this successful, smart student.” And I definitely have a lot of self-doubt within

myself academically, so I think that hearing and getting that positive report back definitely kind of like made me wake up a little bit. And I was like, “Oh. I am this smart person and other people see this. . . .” And so I think it’s *truly* made me believe that I am this intelligent woman and that I have what it takes.

Personal influences such as beliefs and self-efficacy affect one’s expectations of outcomes (Bandura, 1986). When students come to believe they can expect a positive outcome, they are more likely to achieve one.

Social Cognitive Theory depicts self-efficacy as playing a pivotal role in shaping a student’s ability to adapt and change. When someone believes they can succeed and be the cause of their success, then they are more likely to put forth the effort as they believe they can persevere in the task (Bandura, 1986). This new cognitive thinking the participants acquired while attending DA led them to their belief in themselves and their abilities, their self-efficacy. Charlie described it further:

I have higher expectations of myself. But I got, like, this session reports slip or whatever. And I got all B’s but one C. And for some people that’s really bad, but for me, you know, I used to get, like, all pretty much D’s and F’s. And if I even got a C, that was a blessing. So, I think that, like, seeing that I can get those grades if I really do try makes me want to try harder.

This newfound self-efficacy held great influence in determining participants’ motivation and future actions, leading to their experiences of success.

Discussion

This discussion section looks at how participant responses answered the original research questions. These responses confirm that the school environment

played an influential role in their experience of success. Responses also display how participants' thinking changed (personal factor) which led to their change in behaviors, again examples that affirm the presence of SCT's triadic reciprocal causation model. In this case of students in special education, specifically students with ED and students with OHI for ADHD, attending an RHS, student responses describe what it is like to attend such a school and their perceptions of how the school helped them to experience success. The discussion of each research question below will reference the three themes that emerged from the analysis.

Research Question 1

This research question sought the student voice and input to address RQ1: What is it like to attend a recovery high school for students with ED and students with OHI for ADHD? In answering this question, participant responses conveyed answers that fit within all three themes that emerged from this study, Theme One, *The RHS Environment*; Theme Two, *Changed Student Behavior*; and Theme Three, *Personal Identity and Self-discovery*.

Connections/Relationships

In responding to the pre-interview activities and interview questions, participants conveyed that DA is a safe place for them socially, allowing them to build good, positive connections and relationships with the staff and students and contributing to their overall success. When describing a drawing she completed for her pre-interview activity, Regina shared how much better her relationships were since attending DA:

It's a picture of me and other people with me [at DA] and I labeled it "Friends" because that's real friends and they're saying, "you're not alone" and that "we love you" and I'm smiling because I have *real* friends and *real* support.

In contrast, Regina described her relationships at her old school as "really hurtful. And, like, I had these friends that I thought were my friends, but, like, they wouldn't actually ever *do* anything with me. Like they'd all hang out together without me. And I was like, damn." She expressed how she was so much happier now at DA, largely due to the friendships and positive relationships she'd been able to develop there. She and other participants said that this climate of close relationships at DA helped them to be successful. As students with ED and students with OHI for ADHD are found to have lagging skills in building and maintaining positive relationships (Barkley, 2015; Lane et al., 2006; Wagner et al., 2005), this finding displays how their experience at DA has allowed them to overcome what was a barrier for them in their past.

Participants conveyed that the environment at DA was a safe one, where they could be themselves as they were still accepted by others as their true self. Kate expressed:

I think my social experiences here have been so much better than anywhere else. I think that this has . . . created such a safe community that, like, anyone can come in here and be like, "Guys, I'm having a really awful day and really need people to talk to."

Participants expressed how this helped them to feel safe to take social risks, leading to more social connections and better relationships than they had been able to achieve in the past. Again, this is another example of SCT's triadic reciprocal causation, where

the environment influenced participants' personal thinking, leading to changes in their behavior.

All five participants described DA as a community of close relationships. They described it as “tight-knit,” supportive, and with emotional connections—not just with their schoolmates, but with the staff as well. Participants were very happy that the social environment at DA allowed them to build good relationships and feel connected to everyone. These comments from participants about how the environment influenced them and in turn influenced their behavior—social connections leading them to want to engage with the environment and those around them—is evidence of SCT in action influencing their success. Participants discussed how the connections and positive relationships at DA provided them with motivation to attend school and to try to succeed. This finding supports the research of Kelly and Shogren (2014) that said students have an increased desire for engagement in school if they can develop and maintain positive relationships with their peers and teachers.

Open and Honest. Be Myself

In relation to Theme Two, participants described DA as a place where they could now be open and honest, more so than in their past schools. As Regina said:

So, when I came to Danville Academy, like, I actually was starting to be honest about things like, you know, “Oh, did you do your homework?” And usually before I’d be like, “Oh. No.” And make up an excuse or whatever. . . . But then here at DA it’s like, “Oh, why didn’t you?” And I’d be like, “Oh, man. I can’t lie. I got to tell you the truth.” I became more honest about *my* academics and also, like, being able to kind of like *trust* the school. Like before

when I went to the big high school, I didn't really trust the school. I was like, "Do you reallyyyy???" I didn't trust them, so I didn't want to, like, you know, *actually* tell them what was going on and why I didn't do something. . . . When I came here, like, they actually worked with me and I was like, "You know, I didn't do it because I just really didn't want to do it." And I wouldn't make up an excuse, you know? So, that is something that definitely was helpful [laughs].

This exhibits how their personal thinking, in this case trust, affected their outcomes.

The newfound thinking of trusting the school and being in a trusting environment, led to the new behavior of being honest, another example of these factors mutually influencing each other as described by SCT.

Participants described DA as a school where they not only could be themselves but also learn how to be their *true* selves. They discussed how DA is a place where they could be open, honest, and real with others. Participants said they felt appreciated at DA even when they were their true self, no longer needing to hide who they really were. As Kate explains, "and so I think that the school provides a lot of success in the way of, like, you can come here and be exactly how you need to be." Participants described DA as a place they could be themselves, allowing them to focus on schooling and improving themselves, rather than spending time on fitting in and being accepted as they had to do elsewhere in the past. When talking about success, participants said being socially accepted as their true selves by others at DA helped them. This emphasis on the importance of social acceptance by participants is supported by the research, as students with ED and students with OHI for ADHD are

found to be quite social (Lipscomb et al., 2017). They describe DA as a place that allows them to be successful socially as their true selves.

Feelings

Relating to Theme Three and their achieving success, participants described DA as a positive, encouraging, safe place. At DA participants said they felt included, less alone, and validated. Reggie describes, “I think DA . . . has helped me through a lot, and finding people that have the same struggles and that I can relate to makes me feel like I’m less alone.” All five participants described DA as a place that left them with gratitude to be there, largely due to the positive environment and relationships they found at DA. This could help to explain their success since attending DA, as students who feel a sense of connection and care from people at their school are less likely to drop out of school and experience more positive school and personal outcomes (Lane et al., 2006). Their caring, positive relationships make them feel happy to be at school. Kate: “I get to come to school and, like, it’s kind of my happy escape and I’m like, ‘Yes, I finally get to go and hang out with all these people all day,’ which I definitely never felt throughout any other schools I’ve been to.” The finding that participants had positive feelings about attending DA helps to explain why they were willing to engage and find success there.

Research Question 2

In seeking to answer RQ2—What are the perceptions of recovery high school students and alumni with ED and those with OHI for ADHD regarding their experiences of success?—participant responses clearly conveyed answers that fit within two themes, Theme One: *The RHS environment*, and Theme Two: *Changed*

Student Behavior. Within these themes, the participants answered this research question as they spoke of how, in their perception, many aspects of their school and personal lives improved as they changed their behaviors—and this led to their experiences of success. Garnering the student voice in this case was important, as that is how their perceptions were determined.

Areas of Improvement Leading to Success

All participants in this study reported their perceptions of areas where they had improved since attending DA. Participants talked about their improvements and success in sobriety, school attendance and engagement, improved academics, and progress towards graduation (e.g., passing classes and earning credits). These findings corroborate the results of many previous studies on students attending RHSs (Finch et al., 2014; Finch et al., 2018; Moberg & Finch, 2008; Weimer et al., 2019), which found improvements in these same areas. Participants at DA also reported a higher level of overall life satisfaction since attending the school. This supports the research of Glaude et al. (2019) that found that RHS students reported a higher level of life satisfaction, which includes areas such as relationships and school performance.

Participants reflected on their improved relationships since attending DA. All five participants reported that they had more friends and better relationships with friends and family. Regina explained: “They [the DA staff] were able to get us to communicate in effective way, and so my relationship with my parents is a lot better.” She added that while attending DA, “It was actually a, ‘We’re going to work with you on this.’ And so that made me feel comfortable to be honest . . . that did apply also with my family. So, like, now I’m pretty open and honest with them.” This is an

interesting finding because students with ED and students with OHI for ADHD have been found to have weak social and communication skills (Barkley, 2015; Wagner et al., 2005). Yet these participants all report they have forged positive relationships at DA. Kate shared: “I think it’s a very supportive community, and I think that the relationships I’ve built will continue to go on because of how strong they are.”

Participants reflected on how grateful they were to have such positive relationships, as this was something they had struggled with greatly at their old schools. They revealed how these positive relationships amongst the community at DA make them feel so much more comfortable and led to their higher levels of school attendance and engagement. As Kate explains further:

I didn’t get to experience, like, any real sense of community in high school until I came here. And so I think that *I* really learned it’s really important for me to be *present* in class so that I can get, you know. It’s not just about good grades, but so I can get this education so that I can better myself in the future.

This finding of good relationships positively affecting school attendance and engagement is also reported by Kelly and Shogren (2014).

All five participants also shared their sense that their mental health greatly improved since attending DA. A similar finding was also reported in studies by Moberg and Finch (2008) and Tanner-Smith et al. (2019). This research of students in recovery from substance use found that students’ mental health had improved after attending a recovery high school.

Participants in this work reported that their improved school attendance and sense of belonging at school helped them overcome some of their symptoms of social anxiety and depression. As Reggie described it:

Learning is really good because there's obviously not many people here, and that makes it so it's easy to have one on one time with the teachers. . . . You can get a lot closer to them and it's more of like, more bonding than a normal school. . . . It's just a really chill environment so that helps me because I get anxiety when I have schoolwork and stuff, especially before DA—and that definitely helps.

Participants further discussed how their improved mental health helped them achieve success as they could now be more comfortable in school and be their true self, not having to hide aspects of themselves as they felt they had to do at other schools.

Charlie shared her example of not having to hide her struggles in school at DA, which had helped to improve her mental health.

If I am just, like, having one of those days where all I can think about is using or self-harming, and that can be really *hard*. Nobody talks about that [elsewhere]. But at our school, we do. And there's ways that we can help that.

As participants were able to improve their mental health in attending DA, they were then able to experience success.

Influences on Improvement and Success

In alignment with emergent Theme One, all five participants in this research expressed that the “chill” school environment influenced them and helped lead to their successes. The impact of the school environment was the most often mentioned factor

for student success in this study. Participants repeatedly pointed out that DA's tight-knit school community, positive social environment, understanding teachers, and classes at their academic level all were key influences and contributors to what they perceived as a positive, welcoming, nurturing environment that allowed for their overall success. They also reflected upon how the community environment at DA was inclusive of everyone, no matter one's past, current difficulties, appearance, or social skillset. Grey explained: "I have a great experience with my social time here because everyone's kind of in the same boat. So, we all relate to each other. It's cool." Participants all conveyed their feeling of belonging at DA, thanks to their inclusive community environment. This finding is consistent with that of Finn (1989), who found that students have higher levels of school engagement when they feel a sense of belonging with their school.

Research Question 3

The third research question—What is the recovery high school doing to help students achieve these successes?—again sought the student perspective to determine what the RHS is doing to assist students. In answering this research question, participant responses conveyed answers that fit within all three themes that emerged from this study, Theme One: *The RHS Environment*; Theme Two: *Changed Student Behavior*; and Theme Three: *Personal Identity and Self-discovery*.

The School Community Environment

Within Theme One, the most mentioned element by participants as having impact on their successes was the school community environment. Repeatedly, all five

participants discussed how the overall environment at DA contributed to their experience of success. As Regina explained:

Here, it's just one community, like all of us. Instead of, you know, A versus B, or whatever. . . . It's just one big community. You know, it's not super segregated and there's a lot of communication between students and staff so that helps a lot.

As noted in the literature review, RHSs are thought to be “a good fit” for students in special education, since the school is structured to provide a therapeutic and academic balance (Finch, 2005). When discussing factors that led to their success, all five participants mentioned the supportive school environment as being a key influence. This finding is consistent with those of the Hennessy et al. (2017) study, where the professional practitioners interviewed voiced their opinion that providing students with a supportive environment is key to student success. In this current research at DA, elements that participants discussed they found supportive were the positive, welcoming social environment where they know they have friends and are close with people, the fact that you can be yourself and you are accepted for who you are, the ample amount of positive communication, and people showing they care about each other. As Grey explained further:

Overall, just, the teachers have a more positive outlook on things. Like they're a lot more, it seems a lot more like they want to be here, you know? They're much more positive people. And they just actually care. And they aren't like here to just make money. Like I've asked teachers here before and some of them have been like, “Yeah, I'd work here for free.”

Charlie also described how they were positively influenced by the school community environment at DA:

They just really have listened and, like, been there and actually cared. And showed me that they're happy to see me and talk to me and included me. Also, like, gave me the truth. Even when sometimes I didn't want to hear it.

This finding that the school environment includes caring people and the importance given to this personal attribute by participants should be noted as it contributes to student's perceived self-efficacy and increased school attendance, leading to their success. The research of Lane et al. (2006) found that a caring environment and caring people results in higher student engagement in school, and increased school achievement.

Similar People who Support and Understand Me

Participants also pointed out how helpful it was that the DA school community supports and understands them. They reported that this support and understanding provided an environment where they could be comfortable trying new things, more positive things that they were afraid to try in the past. Grey shared something he learned at DA: "Be open. Try new things even if you don't want to. It's OK to be scared or uncomfortable as long as you're safe." Participants gave examples of their comfort of trying new things in class including asking questions in class, taking social risks, and showing their true selves.

Participants also mentioned how helpful it was for their success that their peers and many of the staff had in common "the struggle." This included things like being in recovery, and many at school had a background of anxiety, depression, or trauma.

Participants voiced that they felt this commonality helped the DA community to have more empathy and understanding for them and their difficulties. Reggie shared how helpful it was when a recovery coach shared their own story of similar struggles with him:

[A recovery coach] told me about, like, his story . . . and he told me how to cope with some of the things that I deal with. And it helped me. Like, the stuff that I'm dealing with didn't get better but it got way easier to deal with because of him, and because of talking about it, and realizing that I'm not alone. And that's something that, like, it's stuff that I might be dealing with the rest of my life. And that, like, could have changed the way I see it for the rest of my life. So, I'm really grateful for that.

This finding aligns with that of Finch and Frieden (2014) who found that students in the like-minded environment provided by an RHS sets students up for building self-efficacy. Being with staff and students who can relate to them and what they are going through is very helpful to the students at an RHS. Students who feel they are surrounded and supported by others that are similar and relatable gives them confidence, reassurance, and perseverance to better themselves.

Perseverance to Keep Going

Participants also discussed how their peers and staff at DA were “inspirational,” which was very helpful for their success. They discussed having like-minded peers at their side and how seeing them go through and experience similar trials as their own helped them to persevere and keep trying, even after experiencing some failures. Grey shared:

[My DA friend] was someone who just kind of made me do things . . . even if I didn't want to do them, which is a really good friend. But he always made sure that, like, I could say no if I wanted to. But I kind of never said no just because I was like, "What's the point of saying no? What am I going to do? Go home and lie in bed? I have nothing else better to do," so I just did it.

Participants described how this encouragement to try and to persevere, combined with their newly acquired feelings of self-efficacy, helped them to persist in their schooling as they noted that those around them at DA "stayed connected" with them and would continue to check in on them and encourage them. This perseverance has been found to be a key element to a student achieving success and staying in school. The Darling-Hammond et al. (2006) study concurred that low self-determination and low perseverance leads to a higher school dropout rate. As students at an RHS can connect with others in school and accept the encouragement to stay and persevere, they are more likely to achieve success and not drop out.

Teachers and Classes

Also, within Theme One, all five participants conveyed that the teachers and classes at DA helped support them to achieve success. The participants described how they felt more comfortable in classes and that the people and the environment were overall very supportive of them. Grey pointed out, "The workload: like, they actually understand students here and they don't just dump homework on them every single night." Participants mentioned the support of small class sizes, caring people, close connections, and the increased amount of direct help they received as helpful to their achieving success. Grey said, "the classrooms here are small so teachers can kind of

work more one on one.” Regina appreciated that staff took the time to explain things to her, so she understood the purpose of what she was asked to do in school. This helped her to see the purpose of things and become more motivated to achieve success.

It was nice that they [the staff at DA] kind of like, they actually explained to me what was going on with, like, *what* I needed and, like, *how* I needed it. So, it was nice to actually be explained to, as to why I needed to do it or why I should, you know? So, it was nice to actually, you know, *know* why I had to take those classes, or whatever, to graduate.

Participants expressed appreciation of how the staff at DA understood them and their learning styles and created a classroom environment that made them more comfortable to take risks and make mistakes. Grey explained:

I have a lot better time here because I feel like I have a lot better of an emotional connection with teachers here. Like, teachers don’t just feel like teachers here. They sometimes, they’ll feel like my friends because I just, like . . . I’m capable of just joking around with them and saying stupid shit with them which is *really* cool with me. And I don’t know, I just . . . I think it’s really cool just because I never had that connection with any teacher ever until I got here. So, it’s been very nice to just be able to relax in the classroom and actually feel like I can be myself.

Participants reported that personal connections such as these led to more academic success and passed classes. In line with other RHSs approach to balancing achievement and culture (Moberg et al., 2014), Danville Academy makes it a point to offer a therapeutic and academic balance at their school to assist students in

experiencing academic success and achieving high school graduation. The findings of this study also support those of Kelly and Shogren (2014) that found that students who have a closer relationship with their teachers are more motivated and have a high desire for engagement in school. When teachers provide a classroom environment where students can feel comfortable, safe, and competent, students are more likely to engage in their education, step out of their comfort zone academically, and thrive as a student to achieve success.

Success in Recovery

In relation to Theme Two and changed behaviors since attending DA, all five participants discussed how the school helped them in their recovery from substance use. They mentioned that they learned about recovery, which was helpful to maintaining a recovery lifestyle. Grey said that DA

made me understand sobriety. Like I didn't even know what NA [Narcotics Anonymous] meant when I first got to this school. I didn't know what the term "recovery" was, and stuff like that. So, I learned a lot about just recovery in general and kind of more in depth, like the way your brain works when you're on drugs, what happens to your brain long-term after you start using drugs—and stop. But, you know, I've learned so many different things here.

Participants discussed how the recovery coaches on staff were instrumental in walking them through their recovery and how their "close relationship" with them made that easier to accomplish. They also described how being in a community of recovery was helpful and very supportive for them, as their school peers and many staff had experienced or were going through similar things. Reggie said, "Communities [are],

like, the best thing for drug addicts and recovery. It just, I don't know anyone that can just recover on their *own*." Participants said their fellow DA peers played an instrumental role in their experiencing success in recovery. Their school peers encouraged recovery behaviors and that "being sober can be cool." This aligns with the research study of Karakos (2014) that found that students attending recovery high schools and surrounded by like-minded peers have higher sobriety rates than their peers at non-RHSs. The environment of recovery and direct recovery support provided to students at DA greatly contributes to their success in maintaining sobriety.

Personal Identity and Self-discovery

Related to Theme Three, *Personal Identity and Self-discovery*, participants discussed how DA supported their success by helping them look inward and learn about themselves. Participants commented how DA helped them to achieve success on a more personal and emotional level. Participants shared how through this process of self-discovery, they developed a new personal identity, one of a sober, successful person. As a result, they said they gained increased self-efficacy and enjoyment of life. As Regina explained:

Coming here I was able to, like, actually learn my true self, because before it was all around drugs and stuff. But here, like, I was able to actually learn who I really am I guess. Because it's, like, elsewhere you have to be very fake or have your true self around other things. But here, they kind of just cracked me open. And I was able to become more confident with myself. And with being able to be more confident with myself, I have been able to just kind of enjoy more things I guess. Like before, before I just kind of didn't think I could live

life sober or, you know, outside of those kinds of things. But then coming here, like, “Woah.” I’m starting to figure out who I am. And, “Wow! Look!” Like, I can have so much fun. And, like, I can meet really good people. And I don’t have to be fake about it, you know. So, and I think it made me a lot more appreciative of life as well.

This participant described self-efficacy as being helpful to experiencing success, changing her personal thinking and behaviors. This aligns with the triadic reciprocal causation model of SCT. Participants reflected on how they achieved elements of their personal success, at least in part, with help from attending DA. They said their RHS helped them to accomplish self-discovery and personal identity by encouraging them with care, challenging them, and telling them the “hard truths” about themselves.

Hard Truths/Challenges Me

Three of the participants reflected on the idea that staff members at DA “give it to you straight,” even when the truth might be difficult to hear. They revealed that though they did not always want to hear the truth—about themselves or what needed to be done—they appreciated the honest feedback, which helped them make needed changes and grow as a person, helping to reach their goals. As Charlie described, “They gave me the truth, even when sometimes I didn’t want to hear it.” Charlie’s comment is indicative of other comments where the participants made clear their desire to hear the truth even if it challenged them. They described how their close relationship with staff allowed this feedback to take place effectively. These participant comments show how students appreciated and became motivated by the honest feedback received while attending DA. This is in alignment with another

component of SCT, “the influence of goals with performance feedback heightens motivation substantially” (Bandura, 1991, p. 261). Indeed, participants found that their motivation increased after attending DA, and people there providing feedback, sometimes in the form of hard truths, made a substantial improvement in their experience of success.

Changed Me/Self Realization

All five participants reflected that DA helped them to achieve self-realization and make needed changes in themselves, which led to experiencing success.

Participants described how attending DA has helped them to see things more clearly, leading them to learn more about their true selves. They discussed overcoming fears and learning to give themselves grace. Participants noted how these self-realizations helped to bring about changes in themselves. Much change came from participants seeing and agreeing to the need for change and finally feeling they were in a safe enough environment to take the risk of making changes in themselves. When asked how he’s changed since attending DA Reggie said:

I just didn’t care as much as I do now. And now that I have a goal and a dream, like, to become a therapist, that is encouraging me to get school done. Because I’ve really been thinking about the rest of my life, and what I want to do.

This comment is indicative of what participants stated regarding how DA led them to self-realization and change in themselves. Kate also explained how DA helped students to realize their true selves, and this led to the understanding of her purpose and future. Staff said to her, “you also have this purpose that you need to be here. And this is where you’re going to find all of these unknown things about yourself.” This

learning about yourself, this self-realization, also aligns with SCT's self-efficacy—as people learn that they have abilities, a purpose in their future, they are more likely to realize agency of their actions and situations and more likely to expect and experience positive outcomes (Bandura, 1986).

Purpose/Future

All five participants also revealed that attending DA helped them realize their purpose in life. They discussed the realization of their “unique purpose” and how that led to their being able to set goals for their future. Four of the five participants conveyed surprise that they actually made this progress of being able to think about and comprise goals for their future. Participants said that prior to attending DA they did not think much about the future. Reggie pointed out:

I was thinking just in the now. . . . If you asked me two years ago, I would never thought that I would, like, graduate and become a therapist. Like, that wasn't even in the picture. I didn't even *think* about it. . . . Like, making it past 18. Like I didn't. It wasn't even in my mindset.

Reggie's comment illustrates that participants did not feel they had any purpose or future prior to attending DA. For Regina, she shared that the programming at DA resulted in her feeling like she had a purpose and a future. She stated:

By this time I thought I'd either be dead or, like, in prison, and I'm neither of those things. So, like, I actually have a vision for what I want to do in the future, and goals on what *I* wanna do. Instead of, you know, thinking I'm just gonna be in a cell or something. Yeah, like I actually have visions of where I *want* to go instead of where I think I would go or something, you know? Like I

actually want to work and achieve things. And I want, I want to help people and stuff. So, like, I actually have a vision! Of doing *things* that are not in jail. Yeah. So that's nice because it's, like, I actually have things that I'm working for, and looking forward to. So nice.

This comment by Regina was also reflected by other participants who conveyed their surprise and delight that, since attending DA, they have a purpose, goals, and positive, productive things they want to achieve such as graduation, a career, and happiness. These participants clearly displayed in their comments their motivation to succeed now that they had discovered a purpose and future for themselves. This also affirms SCT's claim that having goals for one's future provides motivation to achieve them (Bandura, 1991).

Unanticipated Findings

This research provided some findings that I did not anticipate based on my personal practice as an educator working with populations of students similar to these and the review of the literature. The unanticipated findings fall within three areas: what participants described as their path to success, the absence of participants discussing special education services, and the participants' personal definitions of success.

Participants' Path to Success

When reflecting on their perceptions of success since attending DA, all five participants happily and gratefully agreed that they had experienced great success. Their reflections also showed the general path they took on their journey to success: building positive lasting relationships, gaining self-realization, changing their

behaviors, and realizing their purpose. This path resulted in their making big changes towards building positive futures for themselves. I had not anticipated this finding based on the review of the literature, which did not address a particular path for student success.

Participants agreed their path to success started with the welcoming environment at DA. This left them feeling safe, comfortable, and supported in building relationships there and building trust with others. These positive relationships provoked a change in their thinking. As a student at DA, they now trusted their fellow classmates and school staff, who were continuously influencing, challenging, and guiding them towards changes in their thinking. The participants commented on how they would allow the people in the DA community to positively influence them and help change their thinking since they held a trusting relationship with them. This was something they had largely not experienced in their past schools. This new more positive thinking also manifested as improved self-efficacy and improved mental health. Participants shared that this new thinking of theirs included being willing to try more things and engage in school more fully.

As participants changed their thinking in this way, they could now make positive changes in their behaviors. Now that they were engaged and trying, they were experiencing success in school, relationships, and recovery and finding that they did “have what it takes” to succeed. This they found motivating, leading them to realize their abilities, potential, and purpose. They expressed that once they realized these things, they now had the know-how, motivation, and support around them to continue working towards a successful future.

Special Education

Though all five of the participants received special education services at DA and have Individual Education Programs (IEPs), when asked about experiencing success at DA and things that helped them to do so, only one student specifically mentioned special education and the services they received while at DA. Kate explained:

I have never felt confident in school with my dyslexia and ADHD and so, you know, [my old public school] provides, like, their sped [special education] classes and things like that, but they don't really help you with what you need when you just have like dyslexia and ADHD. You know, they just kind of throw you in this big classroom of kids and expect you to figure it out and just ask questions on your own. And asking for help is super hard for me. And so I think the teachers at DA have an amazing way of, like, kinda like studying the students on what they need. Like when I first came here, they were like, "OK. Do you have an IEP? How can *we* help you? And how can, like, you graduate this school with what *you* need?" And it was a very, like, I get to voice what I really need, and it wasn't someone else deciding for me. And so that's really helped me academically. And now, like, I'm not failing classes anymore because I have the resources to ask for help now and to feel comfortable in the classroom asking for help.

Clearly, she speaks of how DA has helped her achieve success academically, especially compared to her previous school. She speaks of getting to decide for herself, personal agency, as being a differentiator and so helpful. This again shows alignment

with SCT, which says that when a student feels they have personal agency of their behaviors they expect more positive outcomes, increasing their motivation to continue the work (Bandura, 2001).

As participants were asked about elements of the DA experience they found helpful and influential for achieving success, it is not known why only one student brought up the special education services they received while at DA. It could be because this is a small sample size of five participants and if there were more it would have been a more frequent answer. Participants described it as helpful that DA provided elements such as small class sizes, individualized attention, and a comfortable, safe class environment for all students. Another explanation for participants not mentioning special education services as helpful could be that these elements provide ample support for students on IEPs at an RHS to achieve success. Another possible explanation for why only one student mentioned the special education services they received while at DA is that participants may have stopped thinking of themselves as special education students due to the large impact of the RHS environment and their newfound feeling of self-efficacy.

Defining Success

This research investigates the student voice and the participants' view of success. Participants answered the interview question, "How do *you* define success, and do you think it is the same for everyone? What does it mean to be successful?" In answering this question, participants shared their perceptions of what success actually is *to them*. It was important to ask this question to further investigate the student voice, particularly within this population of students with ED and students with OHI for

ADHD, of how they personally define success and what it means to them. Table 16 contains responses to this question.

Table 16

The Meaning of Success

Student	Verbatim Participant Responses
Grey	Doing . . . something that I love, and I just want to be happy Doing something that I want to do, I don't care how much money I make
Reggie	Something that makes you happy, but something that's making a difference in either the world or yourself Doing something you feel good about I think it's something that you achieve that you've been working for, and that's hard to do. It doesn't just <i>come</i> Success I don't think looks the same in any scenario
Charlie	Making simple goals for yourself and then following through with them. If you feel like you showed up as who you are, and you tried your hardest, then that's a success Just live. And learn your lessons Success is what it's like in <i>your</i> (own) mind I think success... looks like just trying.
Regina	It's all about... your feelings and how <i>you</i> feel about your life You're happy and you have the people around you that you love Feeling supported and getting that support if you need to, and working on yourself as well
Kate	Finally becoming who you want to be and finding that happiness within yourself Doing good in my classes, but also healing as a human

Participants provided additional in-depth explanations to the question of success, expressing their thoughts on its meaning and definition. Participants' thoughts on success included things like being happy and feeling accomplished. All five participants agreed that success is personal and means different things for different people. They described how success for them is not necessarily how others define

success. These additional explanations are provided from all five participants in the following quotes:

Grey explained his feeling that success for him has a lot to do with achieving happiness.

I'd rather make minimum wage doing what I love than make a hundred bucks an hour doing something I absolutely hate. . . . I mean, a large majority of our lives is taken up by work. So, why not have *fun* while you're working, you know? I'd rather do something I love. I just want to love what I'm doing and not hate what I'm doing. As long as I'm happy. Even if I'm living in a one-bedroom apartment where the kitchen is like two feet away from my bed, like *I don't care*, I'll be happy. As long as I'm doing what I love.

Reggie described success as something that is both difficult and immeasurable.

I don't think it's like a thing you can measure—like it's quantifiable, or like, set. But I think it just varies a lot . . . it's like anything you're doing to better yourself and put out for the world that's hard. Like success doesn't really just come easy.

Charlie shared their idea that success should include both challenges and personal fulfillment. It is personal and not necessarily how others define success.

. . . if you really get to the root of it, it doesn't matter what your parents say is success or what your friends say is success, or what your idols say is success. If you feel like you challenged yourself and you got the perspective that you need, and you feel accomplished and fulfilled.

Regina added her idea that success is different things for different people.

I don't think that there's only one way to success. I think the most common one that people think of is like, graduate high school. You go to college. Blah blah blah. And it's like, no. You don't need any of that really to be successful . . . some people might graduate high school, go to university and get a quote "good job," you know? Like cool, that's success for them. But, some other people might want to go to trade school, some people might get their GED, some people might not even graduate. It's about doing what you want to do and also having the right people around you that make you happy and make you feel good.

In her description of success, Kate elaborated not only on her personal definition but also that everyone at DA affects each other in their experiences of success.

I think that I'm really finding that within this school . . . I can be this successful person if I'm the real authentic me. And I think that I definitely always thought being successful was like being this straight A student, and going to college, and figuring out my life exactly, you know? When I graduate high school, and all these things. And I'm starting to realize that being successful is still trying to figure out what I need to do, and still trying to persevere through all the difficulty in life, but still finding that happiness. I think that's the biggest success to me. [It] isn't like academic success or, like all this structural success. It's like a within-me type of success. And I think that when I'm most happy is when I'm most successful and can bring everything that I have to offer to the table. And I think I see that with everyone at this school too . . . we are a group of super successful humans who've been through

this crazy life journey at such an early age, but we're surrounded by each other. And I think that creates the most success within all of us, whether, like, we think about it or not.

Participants agreed that success is personal and different things for different people. Still, in their responses they repeatedly convey the sentiment that their definition of success includes doing something that one feels is important and that makes one happy. This is important information to consider for those working with students in RHSs and those working in special education. Having this information on what the students themselves feel success is can help educators to design programming and goals that are more motivating for this population of students if we are more understanding of their perceptions and desires around success.

Implications

This study overlaps two populations, as it investigated the experiences of success for students who attend an RHS and for students with ED and students with OHI for ADHD in special education. Therefore, the findings of this study can have implications for students, staff, leadership, and stakeholders in the two areas of recovery high schools and special education in non-RHS school environments. The implications that resulted from this study reveal key elements of leading these students at an RHS to success. First, build and provide a positive school environment and, second, guide students to self-realization to assist them in making positive behavioral changes.

Build and Provide a Positive School Environment

Participant experiences as voiced in their interviews lead to the understanding that students can be greatly influenced by their school environment; this aligns with social cognitive theory and all three elements of the triadic reciprocal causation model. The environment, as interpreted through each student's personal circumstances, influenced their behavior, which in turn influenced their level of self-efficacy and their experience of the recovery high school. This reinforces the importance of taking into consideration the benefits of a positive, supportive school environment to assist students with achieving success. Providing a smaller, relaxed, inviting school environment was perceived by students in this study as beneficial, helping them to feel welcome, safe, and comfortable. This is important to provide for students from the very beginning of school enrollment, so they can feel connected and willing to engage. Participants pointed out that a welcoming school environment allows students to feel they can be themselves and an included member of their school community, important factors for their continued engagement. Student engagement is an important area of focus for schools when helping students achieve success as research has found that students with ED and students with OHI for ADHD typically have lower levels of engagement in school (Marsh et al., 2019), which results in lower school achievement levels (Cardichon et al., 2017).

Participants made it clear that a school must offer a welcoming school environment that can lead students to success in building positive relationships that are real and long lasting. The school environment should help students focus on building supportive, encouraging relationships as these are important for students to achieve

success. This study found that a “tight-knit community” made up of “real friends and real support” is effective in helping these students engage in school and be motivated “to try” and put forth effort to succeed. Participants articulated that caring school relationships, both with staff and peers, played a significant role in their feeling like they wanted to engage in school, motivating their continued attendance and efforts.

The analysis of findings from participants in this study makes it clear, three additional elements should be provided as part of the school environment to assist with successful student outcomes:

1. Staff and teachers should understand what individual student needs are and reach out to offer support proactively, not just waiting for them to ask.
2. Encourage students to voice their individual needs so staff can serve them more effectively.
3. Provide a non-judgmental environment where students feel safe and comfortable, leaving them feeling like they are not alone and accepted as who they truly are.

Schools including these elements will find it helpful to building and providing a positive school environment for students, which will help students to achieve success.

Guide Students to Self-realizations to Assist with Positive Behavioral Changes

Participants also felt that being in a positive, supportive school environment led them to self-realization and a willingness to change their behaviors and experience success. When a school teaches and provides instruction, students should also be taught about themselves. Schools, both through direct instruction and indirect modeling, should teach and encourage self-discovery. Participants in this study said

that thanks to the close, trusting relationships they had built at school, they were willing to open their minds, listen to feedback from others, and accept and learn even the “hard truths” about themselves. This, they said, led them to thinking more about the future and realizing their own purpose in life.

Participants in this study reflected on how the school community helped them toward self-realization, helping them to see the need for changes in their behaviors and actions. Learning more about themselves, their abilities, and needed areas for personal change all led to their ability to “think differently.” Helping students to change their inaccurate thinking about themselves, including their abilities and needs, could create large-scale changes in behaviors of students, as it did at this RHS. As a school helps students to realize their personal self-efficacy and practice new skills, the students are more likely to realize the personal agency of their behaviors and expect positive outcomes—resulting in motivation to continue (Bandura, 2001). When staff can effectively lead students to self-realizations, students are more likely to change their behaviors. This leads to more positive outcomes and student success.

Student Success

Students in special education at a recovery high school are seldom researched (Tanner-Smith et al., 2018). This study helped to bridge that research gap, leading to better understanding of how this student population at an RHS achieves success. Using student voice, this research describes various ways that students with ED and students with OHI for ADHD have achieved success at an RHS. Students described their newfound ability to engage in school, build and maintain positive relationships, improve their mental health, achieve self-discovery, maintain sobriety, establish

personal goals, and pursue a positive future for themselves. The students described three key elements provided by the RHS that lead to their success: the RHS environment, changing student behaviors, and personal identity and self-discovery. Thanks to this research, professionals and stakeholders working to support this population of students now know to focus their educational programming efforts in these three areas to assist these students in achieving success.

Policy Implications

This research shows how recovery high schools effectively impact students with ED and students with OHI for ADHD and lead them to success. This is a great lesson for education and policy leaders to understand that RHSs make a significant difference for students, allowing them not just to achieve, but to flourish well beyond their levels of attainment in their past, non-RHS schools. As education and policy leaders work to determine the cost and benefits of RHSs, this research shows how recovery high schools are clearly effective not only in leading students to improvements in education and recovery, but much more. The participants in this study revealed the vital role their RHS played in improving themselves academically, socially, and emotionally. The RHS lead them to success not only as a student, but also as a whole person; a whole person with newfound goals, purpose, and a future. Investing in an RHS is an investment in student success.

Future Research

The participant responses to the pre-interview activity and interview questions led to the discoveries discussed in this chapter. As this study researched the perspective of a specific population: students with ED and students with OHI for

ADHD, at a specific school, I suggest that additional populations and additional school locations are studied in the future for comparison of results and to help determine if the findings of this study are found in additional populations and additional RHSs. Three distinct opportunities for further research arose as a result of completing this study. Opportunities include: to repeat this study with students in general education; to repeat this research at other RHSs; and to research the perceptions of the parents or guardians of these students as they experience success at an RHS.

Repeat this Study with Students in General Education as the Participants

The first recommendation for future research is to follow the methodology of this study for RHS students in general education. All participants in this study were students with ED and students with OHI for ADHD in special education. Completing this same research with a sample of students from general education at an RHS would allow researchers to determine if the perspectives of the participants in this study were unique to the specific population of this study or whether these findings would result when investigating the general education population at an RHS. Including general education students would allow for broader application of the findings and to determine whether general education students and students in special education—specifically students with ED and students with OHI for ADHD—have the same, similar, or differing perspectives of their experiences of success at an RHS.

Repeat this Research at Other RHSs

In addition, replicating this research at other RHSs is recommended. This would help to determine whether students in RHSs other than DA would exhibit the

same or different student perspectives as was discovered in this research. This additional research could also determine whether the overall findings of this research would be similar to what was found in this study. As this study was completed at just one RHS, this additional research would help to determine if there is contrast or consistency in the student experience in various RHSs across the nation.

Research the perceptions of the parents or guardians of these students as they experience success at an RHS

Lastly, an investigation into the perceptions of parents and guardians of their student's experience of success at the RHS is recommended. This study focused on the student perception and their experiences of success. Obtaining the parent/guardian perspective of their student's experience of success at the RHS would provide a deeper, broader understanding of this topic. A study of this kind could determine if students and their parents or guardians are seeing the same things and feeling the same way with any consistency. Understanding consistencies and differences in the perceptions of these two populations would assist RHS staff and the parents or guardians in further supporting RHS students as they work to help them experience success.

Limitations

Bias is both anticipated and acknowledged in qualitative research (Creswell & Poth, 2018). Actions are taken to limit its impact on the analysis and subsequent discussion of results. Measures were taken in this work to limit researcher bias and strengthen the validity of this study, including reflexive journal entries, bracketing of assumptions, and analytic memos. However, there are still some limitations inherent in this kind of work. The design of the research was to gather data from the student

perspective. Student responses were based on their interpretations of their personal experiences. The pre-interview activity and the interviews solicited self-reporting information from the participants. Therefore, the research results only represent the degree of honesty and depth of disclosure the participants provided when expressing their perspectives and beliefs. Given student perceptions were the focus of this study, the perceptions of the recovery high school's staff, parents, guardians, or the district administration were not sought. As a result, the picture of the recovery high school experience is still incomplete and requires on-going study to capture the perceptions of these other stakeholders.

Another limit of this study is the sample size. Though the data provided was thorough and in-depth, it was limited to the five subjects at a single RHS. While still meaningful, the sample size will inhibit the generalizability of the work. A larger sample, while still self-reporting, would strengthen the understandings gleaned.

The purpose of this study was to explore the experiences of success for students with ED and students with OHI for ADHD at an RHS. All participants were of these two special education eligibilities at one school site. Therefore, no comparison is offered in this study, and it cannot be assumed that this perspective is unique to this population without a comparison group. The results of this research do not determine whether the participants' status as students in special education affects their perceptions of their experiences at this RHS. Given this research was exploratory and designed to build a rich understanding of the phenomenon, no effort was made to imply causality or correlation. Rather, it looked to simply build the narratives and understandings that may lead to future work.

My role as a researcher could also be a limitation of this study. Through my 15 years of work as a special education teacher, I have been committed to assisting and advocating for students—commonly students with ED and students with OHI for ADHD. Based on my experiences in education, in both the general and special education fields, I have personal assumptions about how students with ED and students with OHI for ADHD experience success. As I know the participants from working at the school, there may be some power dynamics inherent in our relationship. This could have affected what they may or may not report in their pre-interview activity and interview.

Conclusion

The purpose of this bound, exploratory case study was to investigate how students with ED and students with OHI for ADHD experience success at a recovery high school. Through their pre-interview activities and their responses in semi-structured interviews, it was evident that participants in this study perceived that they achieved increased success while attending DA, their RHS.

This research provides two important implications for practice for helping students experience success in school: first, build and provide a positive school environment, and, second, guide students to self-realization to assist them in making positive behavioral changes. Participants of this study discussed how important the provision of a positive school environment was for their success. Without this component, as was often the case in their past schools, they were not set up to experience success. When staff guides students into self-realization, this leads the way for students to have the skills and motivation to change their behaviors for the better.

These self-realizations and behavior changes are needed for these students to experience success.

Participant reflections in this research made evident the elements contained in their path to success: building positive lasting relationships, gaining self-realizations, changing their behaviors, and realizing their purpose. This path resulted in their making significant changes towards building positive futures for themselves and showed the importance of these elements in their path to success. Therefore, these elements should be areas of skill building focus for students when developing programming in RHSs and for those in special education. Helping students follow this path to success could help them break some of the barriers to achievement they have experienced in their educational past.

Participant responses in this research exhibited the notion of SCT's triadic reciprocal causation and how it helps students to achieve success at the RHS. Triadic reciprocal causation reflects the mutually influenced relationship among personal, behavioral, and environmental factors (Bandura, 1986). As evidenced by this research, if educational programs, such as RHSs and any others that service students in special education, provide an education that strongly considers and incorporates these three factors of SCT to support students, then this population of students is more likely to experience success. This RHS case provides educational programming an example of how to help and support students in special education achieve success. Kate's explanation of her newfound ability to experience success provides a fitting and meaningful conclusion to this study:

I think that it's important to be successful in the classroom. I don't think I ever thought about that before DA. I didn't get to experience, like, any real sense of community in high school until I came here. . . . I really learned it's really important for me to be present in class. . . . It's not just about good grades, but so I can get this education so that I can better myself in the future.

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Appendix A:**Forms****Parent/Guardian/Alumni Consent Form and Student/Alumni****Assent Form****Parent/Guardian/Alumni Consent Form****Adult Consent Form for Minors—Research Participant****Research study at Danville Academy about student****success at a recovery high school****GUARDIAN AUTHORIZATION:**

Dear,

Your student is invited to participate in a research study I am conducting through the University of Portland School of Education as part of my doctoral dissertation. You may already know me as the TOSA for *** School District who is at Danville Academy once a week or so supporting staff and students there. Some of you may also know me from an IEP meeting as well. From my research, I hope to better understand how students eligible for special education services experience success at recovery high schools. Your student was selected as a possible participant in this study because they are a student at a recovery high school.

If you decide to allow your student to participate, they will complete a questionnaire and be interviewed this fall semester about their experiences of success at Danville Academy. Their responses to the questionnaire and interview questions will help provide understanding of how recovery high schools foster various successes among its students. Interview questions will include items about their experiences, their successes, and the recovery high school environment in regards to their perceived successes.

All participant data used by the researcher will remain confidential and kept in a password-protected computer data base. Any information that is obtained in

connection with this study that can be identified with your student will remain confidential. Subject identities will be kept confidential; each student will be assigned a code number that will be kept separate from his or her identity. All data will be reported with no personally identifiable data reported.

This research will occur as a questionnaire and a semi-structured interview; there are not foreseen risks to your student. The data gathered will help inform educators, stakeholders, and the research community on how to better support students in achieving student success; however, we cannot guarantee that your student will receive any benefits from this research.

Your student's participation is voluntary. Your decision whether or not to allow your student to participate will not affect you or your child's relationship with myself, the school district, or Danville Academy. If you decide to allow your student to participate, you and/or your student are free to withdraw consent and discontinue participation at any time without penalty.

If you have any questions about the study, please feel free to contact me, Elizabeth (Libby) Kelly, at ***@up.edu or Dr. Deirdre Katz, ***@up.edu, ***-***-****. If you have questions regarding your rights as a research subject, please contact the IRB (irb@up.edu). You will be offered a copy of this form to keep.

Your signature indicates that you have read and understand the information provided above, that you willingly agree to allow your student to participate, that you and/or your student may withdraw consent at any time and discontinue participation without penalty, that you will receive a copy of this form, and that you are not waiving any legal claims.

Student name for who you are granting consent to participate:

Signature

Date _____

Student/Alumni Assent Form

Written Information Sheet

Dear,

My name is Elizabeth (Libby) Kelly and I would like to invite you to participate in my research study conducted as part of the University of Portland School

of Education doctoral program. You likely already know me as the TOSA for *** School District who is at Danville Academy once a week or so. Some of you may also know me from an IEP meeting as well. I am inviting you to participate in a research study I am doing of some students at a recovery high school.

In this study I hope to learn how students receiving special education services in a recovery high school experience success. There are no foreseeable risks associated with this study. There are no costs associated with this project either. I cannot guarantee that you will personally receive any benefits from this research. However, I can guarantee that all information will remain confidential.

Also, this study will be conducted in the hopes that it contributes to a body of research that helps inform student participation in a recovery high school. I will be surveying and interviewing multiple students for this research study. Any information that is obtained in connection with this study and that can be identified with you or your school will remain confidential and will be disclosed only with your permission or as required by law. Your participation is completely voluntary. Your decision whether or not to participate in this study will not affect your or your school's relationship with the University of Portland or myself.

If you decide to participate, you and/or your parents/guardians are free to withdraw your consent and discontinue use of your data at any time without penalty. Likewise, you are not required to answer any questions that you feel uncomfortable answering - you can communicate this during the survey and interview at any time.

If you have any questions about the study, please feel free to contact me at ***@up.edu or Dr. Deirdre Katz, ***@up.edu, ***-***-****. If you have any questions regarding your rights as a research participant, please contact the University of Portland Institutional Review Board at irb@up.edu. You will be offered a copy of this form to keep for your records.

Your signature indicates that you have read and understand the information provided above, that you willingly agree to participate, that you and/or your school may withdraw consent at any time and discontinue participation and use of your data without penalty, that you will receive a copy of this form, and that you are not waiving any legal claims.

Name _____

Signature _____

Date _____

Appendix B

Pre-Interview Activity

Thank you for volunteering to participate in this research. All of your responses are anonymous to anyone other than myself, the researcher at University of Portland.

Below are four options of activities to complete. Please *choose and complete just one*.

- A. Draw a timeline of your future goals. Mark on the timeline the dates and titles of critical events and accomplishments you are striving to achieve.
- B. Draw a diagram of your current support systems that you find most helpful to you.
- C. Draw a diagram that would illustrate your experience as a student at DA.
- D. Make a collage, using magazine or online photos, words, etc. that illustrates what it is like for you to attend a recovery high school.
- E. Draw two pictures, one which shows your life before attending DA, and the other showing your life after attending DA.
- F. Write short answers to the following three prompts: (handwritten or a Word/Google doc is fine)
 - List three things that you experienced at DA that are most helpful for you.
 - Describe two or more things you've learned at DA that you plan to use in the future.
 - How does the environment at DA affect your learning and success?

When done with your activity, please do the following:

1. Email a photo of your finished product (poster, timeline, short answers, etc.) or send it to me in a Word or Google document. ***@up.edu
2. Also, bring your original finished product to your in-person interview. I will be asking you to tell me more about it as part of the interview.

Thank you!

Please feel free to contact me with any questions.

Appendix C

Interview Questions

1. Tell me about your ... (pre-interview activity item).
2. Tell me about your learning and social experiences as a student at Danville Academy. Prompt: How did that make you feel?
3. How has your attendance at Danville Academy impacted you as a person?
Prompt: Is there a specific event or situation that best represents that impact for you?
4. How do you define success? What does it mean to be successful?
Prompt: In your view, is success the same for everyone? Explain.
5. Have you achieved academic success since attending Danville Academy? How do you know?
6. What are you doing now (since starting at DA) that you didn't before? What did you do that you aren't doing now?
7. Are there any specific Danville Academy classroom activities, relationships with other students, staff behaviors, events, etc., that contributed to the change?
8. What happens at school can sometimes cause people to change their behaviors, attitudes, or understandings. How, if at all, has attendance at Danville Academy changed how you view your future, your decision-making, or yourself as a person?
9. Have you been influenced by any particular person(s) or activity in school?
Who? In what ways?

10. Are there other things we have not addressed yet that you feel influenced your ability to succeed at Danville Academy? Please tell me about them.

Appendix D

School Board Approval for the Research

----- Forwarded message ----- From: *** *****
<*****@oregonrecoveryschools.org> Date: Wed, Aug 4, 2021 at 3:02 PM
Subject: Re: DA IRB Info To: Elizabeth (Libby) Kelly <***** up.edu>

Hello Libby,

This is to confirm our discussion from earlier this summer.

I've consulted with our Board executive team, and we support you moving forward as you've planned. I've also included *** (DA school principal) in this email for their awareness and support of your efforts.

I hope this email finds you well.

*** ***** (DA School Board Chair)

www.oregonrecoveryschools.org

Appendix E

The Pre-interview Activity Drawings

Below are the participant responses to Pre-Interview Activity C, selected by two participants, Regina and Reggie.

Activity C drawing prompt: Create a before and after picture or diagram that shows your life before attending Danville Academy, and your life after attending Danville Academy.

Regina's Drawing (the first drawing shown below):

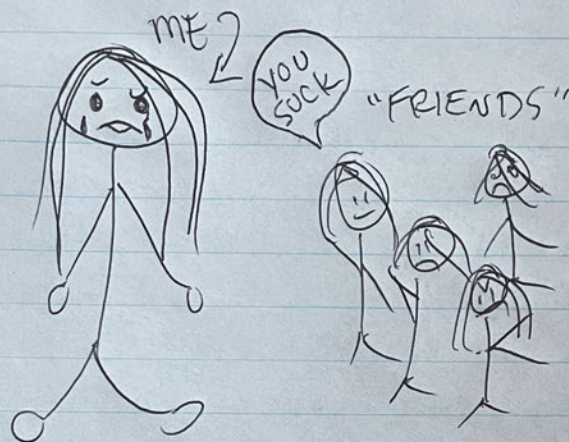
It shows that before attending DA, she had a friend group that wasn't genuine and in reality, did not treat her well. After attending DA, she now had real friends and real support.

Reggie's Drawing (the second drawing shown below):

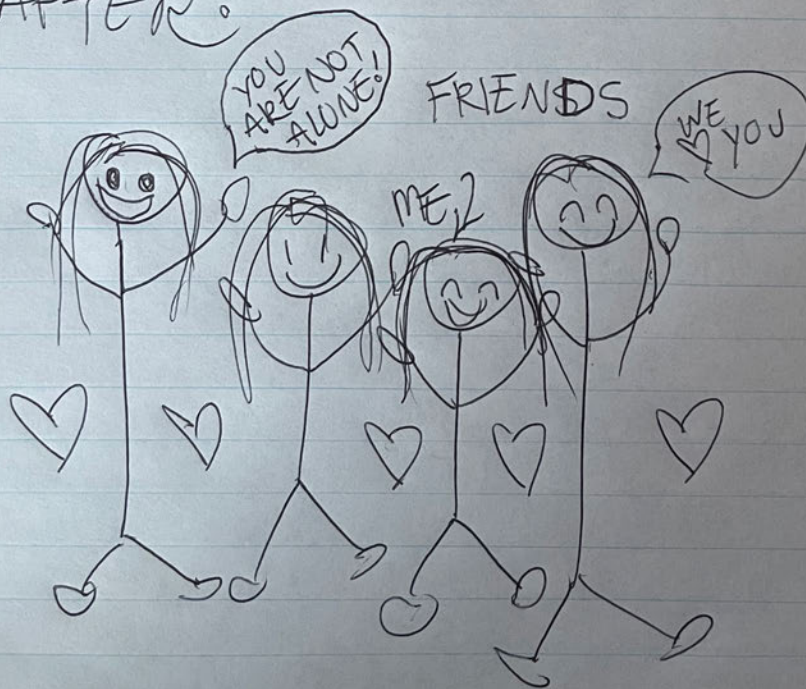
Shows things he was doing before attending DA such as using and dealing drugs, having bad relationships, being in dangerous situations, lying, and failing in school. Whereas after attending DA, he found lots of hobbies and productive things to fill his time, did well in school, had good relationships, and sobriety.

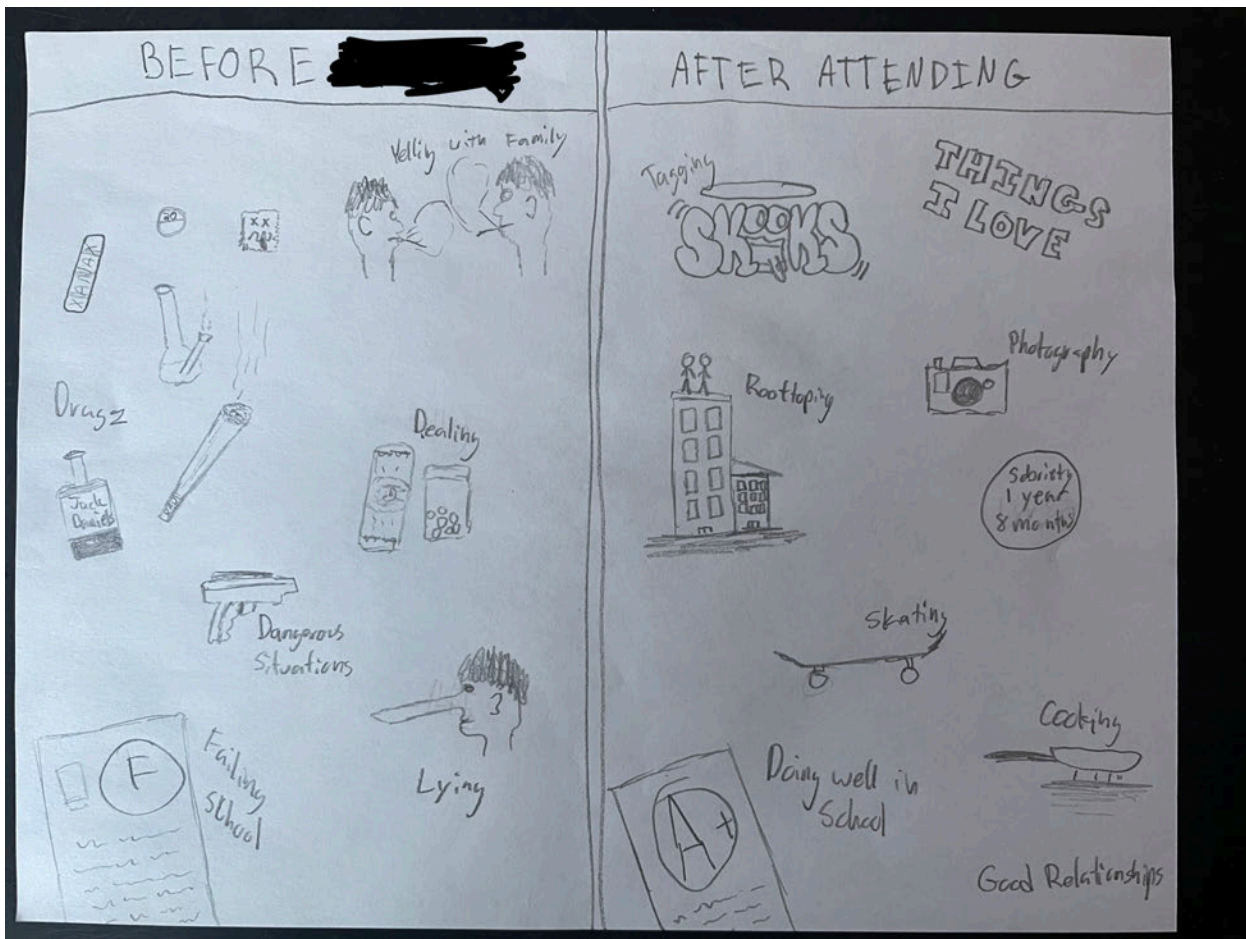
REGINA ☺

BEFORE:



AFTER:





Appendix F

Interview Protocol

Start Time:

_____ 1 Received signed consent/assent form

_____ 2 Introductory:

Welcome Introductory Remarks My background – my interest in the topic

Assure confidentiality
-preferred pseudonym?

Voluntary and may stop at any time

Ask questions at any time

Permission to Record

You may find some questions difficult to answer, but there are no right or wrong answers. Just do your best.

_____ 3 Pre-Interview: completed

_____ RECORD

_____ BACK-UP Record

_____ 4 Interview Questions

_____ 5 Thank you! How do I contact you if I have more Q's – need to reach you in the future? (cell #?, via email, etc.?)

_____ Gift card: What store? How can I get it to you?

End Time:

Location of interview:

Interview Questions:

1. Tell me about your ... (pre-interview activity item).
2. Tell me about your learning and social experiences as a student at Danville Academy. Prompt: How did that make you feel?
3. How has your attendance at Danville Academy impacted you as a person?
Prompt: Is there a specific event or situation that best represents that impact for you?
4. How do you define success? What does it mean to be successful?
Prompt: In your view, is success the same for everyone? Explain.
5. Have you achieved academic success since attending Danville Academy? How do you know?
6. What are you doing now (since starting at DA) that you didn't before? What did you do that you aren't doing now?
7. Are there any specific Danville Academy classroom activities, relationships with other students, staff behaviors, events, etc., that contributed to the change?
8. What happens at school can sometimes cause people to change their behaviors, attitudes, or understandings. How, if at all, has attendance at Danville Academy changed how you view your future, your decision-making, or yourself as a person?
9. Have you been influenced by any particular person(s) or activity in school?
Who? In what ways?
10. Are there other things we have not addressed yet that you feel influenced your ability to succeed at Danville Academy? Please tell me about them.