

# **PROGRAM, RESEARCH, AND POLICY IMPLICATIONS OF EVALUATIONS OF TEENAGE PARENT PROGRAMS**

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## ***INTRODUCTION***

In this chapter we describe some of the important program, research, and policy lessons from the evaluations of the New Chance Demonstration, the Learning Earning, and Parenting (LEAP) Program, and the Teenage Parent Demonstration (TPD) Program. After a brief comparison of the program requirements and the targeted populations, we highlight the important long-term impacts of the programs, both overall and within subgroups. We then discuss implications of these results for the design of programs to serve disadvantaged teenage mothers and their implications for the design and conduct of research. Finally, we raise a number of implications for policy. Because the AFDC program was operational when the implementation and evaluation of these three programs took place, their relevance to an era of time limits, work requirements, and block grants requires careful consideration.

## ***DESCRIPTION OF TARGET POPULATIONS AND PROGRAMS***

As described throughout this book, and as outlined in Table 1, New Chance, LEAP, and TPD differ on a number of dimensions. Although each program targeted teenage mothers, participants in New Chance had given birth to a child during their teenage years; at the time of enrollment, they ranged in age from 16 and 22. In fact, one-third were aged 20 or older (Quint, Bos & Polit 1997, p. 38). In contrast, LEAP and TPD focused solely on teenagers: young women participants in LEAP were either pregnant or already had a child at the time they entered the program; in TPD they were either pregnant (in one site) or parenting.

As Table 1 shows, the three programs differed in other ways as well: New Chance was voluntary, while participation in the other two programs was required as a condition of AFDC receipt. LEAP was the only program to offer financial incentives. School enrollment would result in a bonus of \$62; an additional \$62 per month could be obtained for each month the teen remained in school. However, failure to attend school would result in a reduction in AFDC of \$62 per month. TPD offered only financial disincentives: AFDC was reduced \$160 (New Jersey) or \$166 (Chicago) for each month of non-participation. Participation in

education, job training or employment was required for 30 hours each week. In contrast, New Chance, as a voluntary program, gave teens access to a range of educational, employment, and support services. The latter (with the exception of employment services) were generally delivered on-site. Free child care was also available.

Before considering the findings, it is important to note that, on average, the young women in each of these programs were quite disadvantaged upon intake. For example, as shown in Table 1, a substantial proportion of participants in each program were school dropouts. Since dropouts were the target population in New Chance, almost all (94%) of the participants were either school dropouts or read below a 9<sup>th</sup> grade level. More than half of LEAP participants (45.3%) and one-in-four (23.6%) TPD participants had dropped out of school. However, within each program substantial variation existed in educational attainment and reading ability. The implications of this variation will be considered below.

## ***FINDINGS***

The four previous chapters summarize the key long-term findings of these evaluations. Key overall findings about the outcomes of the mothers and their children are shown in Table 2 for each of the three experiments. It is striking that while all three programs increased school attendance, only New Chance increased GED receipt. No program resulted in higher rates of high school graduation. In fact, the experimental group in New Chance was significantly less likely than the control group to receive a high school degree or college credits. None of the programs affected reading levels.

None of the three programs increased employment or wages. However, the experimental group in LEAP had both less time on AFDC as well as receiving less income than the control group (in years 3 and 4; Bos & Fellerath, 1997). There was no such effect in New Chance, or in two of the three TPD sites (Chicago was the exception, with a significant reduction in both time on AFDC and amount of support received in the experimental group).

None of the programs affected rates of pregnancy or subsequent births. The programs appear to have had mixed effects on parenting and child outcomes. While experimental and control groups in TPD did not differ significantly on such outcomes (with the exception of Newark which had some negative child impacts), New Chance appears to have had increased parental stress and worsened child behavior problems and child positive behavior, as reported by the mother.

Overall, the two projects that measured depressive symptomatology found quite high rates. In New Chance over half of women in the experimental (52.2%) and control (55.9%) groups scored 16 or above on the Center for Epidemiologic Studies Depression (CES-D) Scale (Radloff, 1977). This cut-off has been shown to best differentiate patients diagnosed with clinical depression from those without that diagnosis (Radloff, 1977). These rates decreased somewhat in both groups over the course of the project. At 42 months, 44.6% of experimentals and 42.5% of controls scored in this range (Quint, Bos & Polit, 1997). Rates found in the TPD program at follow-up were similar (Kisker, Rangarajan & Boller, 1998).

### ***PROGRAM IMPLICATIONS***

The papers in this volume have a range of implications for the design of programs to help teenage parents.

***Need to tailor interventions*** - Although the overall impact of each program was minimal, there are important subgroup differences that give some clues as to what may work for specific groups of teenage mothers. Characteristics of mothers at time of intake appear to be critical in New Chance and LEAP. Mothers in the New Chance experimental group with high depressive symptoms on intake reported more behavior problems and fewer positive behaviors in their children compared to depressed mothers in the control group. Positive effects on the child's home environment were found among mothers with low levels of symptoms (Quint, Bos & Polit, 1997). These findings, coupled with the generally high levels of depressive symptoms in this population, suggests the importance of screening for mental health status at intake and for incorporating appropriate treatment regimens into program design.

While it is unclear from the New Chance findings whether children of depressed mothers actually have more problems than other children or whether mothers' mood colors their view of their children's behavior, there is substantial evidence in the literature for the former (for a review, see Downey & Coyne, 1990). The relevance of maternal depression for child outcomes was recently highlighted by a longitudinal study that followed children of depressed parents over ten years. In this investigation, Weissman and her colleagues (1997) found that, compared to children of non-depressed parents, those with depressed parents are three times as likely to develop major depression themselves and five times as likely to develop panic disorder and alcohol dependence.

Recent preventive intervention trials have demonstrated the value of providing mental health treatment to at-risk populations of children and youth (Durlak &

Wells, 1997a, 1997b). A meta-analytic review of 177 such programs (Durlak & Wells, 1997a) showed that they were effective in reducing mental health problems and in increasing competencies in children and adolescents. Programs specifically targeted for adolescents with high levels of depressive symptoms (e.g., Clarke et al., 1995) as well as those designed to improve the school environment (Felner, et al., 1993) resulted in substantially reduced levels of depression and, in the latter program, fewer school dropouts. Although providing mental health services may be expensive, cost analyses show that mental health programs can be cost-effective (Frank, 1993).

Another important contributor to success was school enrollment at the time of intake. In LEAP, girls who were enrolled in school at the time of intake had better school attendance and greater increase in GED receipt than girls not in school at intake. Those initially enrolled also had better employment outcomes in LEAP and TPD (Granger & Cytron, 1998). While LEAP showed very few impacts overall, consistent effects were found among young women who were enrolled in high school or a GED program at the time of intake. Compared to the control group, these teens were more likely to obtain their GED and to have spent more time in employment. They also tended to earn more, especially in the first two years of the program. No such effects were observed for those who were not in school or in a GED program at intake. In fact, there appears to be negative (but generally not statistically significant) impacts on earnings among those not in school at intake (Bos & Fellerath, 1997). Comparable results are found in New Chance, where effects of the program on GED attainment were found primarily among those reading at 8<sup>th</sup> grade or better upon intake. These young women were more likely to gain GED certification than those with poorer reading skills. As Kane observes in his review of educational outcomes, programs need to be designed to address this diversity in educational/skill attainment at intake. Students who dropped out of school and those with poor reading skills may require intensive remediation prior to school (re)enrollment.

The evidence from these demonstrations is that depressed, extremely educationally disadvantaged and out-of-school teenage parents do not respond positively to the current “one-size-fits all” program strategies. In fact, the standard form of these demonstrations may do more harm than good for the highest risk teenage parents and their children. On the other hand, instituting individualized programs presents numerous administrative and implementation challenges. We suggest a middle ground approach, one that identifies a small number of the most important risk factors and devises program variations to address the unique challenge faced by just a few subgroups of the highest risk teenage parents. New subgroup-targeted interventions should be evaluated both for their efficacy with the highest

risk subgroups and cost-effectiveness since the costs of such targeted efforts may still outweigh the benefits.

***Reevaluate educational goals*** - One striking finding in New Chance was the lack of employment or earnings impacts from the increase in educational attainment. Kane's paper convincingly demonstrates a statistical rationale for this, in that the experiment did not include enough participants to detect statistically significant differences in employment or earnings. Another possibility emerges from recent research showing that a GED may not result in wages that are much higher than for those who do not complete high school. The findings in New Chance and TPD that acquisition of the GED did not result in an increase in reading scores suggests that the program's focus on providing access to high school equivalency training, rather than on obtaining a high school diploma, may be misplaced. Whether GED training does not increase skill levels or whether employers discriminate against holders of the GED, it appears to be a poor substitute for high school completion.

Although evidence about the value of the GED is mixed, the GED increasingly substitutes for high school graduation. In 1988, 4.2% of the population used an alternative method of high school completion; by 1996 this rate more than doubled, to 9.8% (McMillen & Kaufman, 1997). This trend was accompanied by a decline in high school graduation rates, from 80.3% to 76.4%. Results of the teenage parents program evaluations, and research questioning the value of the GED (Cameron & Heckman, 1993; Coa, Stromsdorfer & Weeks, 1996), suggest that programs ought to focus on high school graduation rather than GED receipt. One promising initiative was instituted recently in the LEAP program in response to its failure to increase school completion: a monetary bonus (\$62) for each year of high school completed has been added to the incentive structure.

In addition to reconsidering the value of the GED, careful consideration must be given to the value of high school completion as a final educational goal. The real wages of female high school graduates were stagnant between 1980 and 1990 (Decker, et al., 1997) and since then have shown a decline, following a trend that has been characteristic of males for a longer time period. Since better paying jobs generally require higher levels of skills than are obtained in many high schools, programs should consider providing incentives to encourage post-secondary education.

***Importance of child outcomes*** - While LEAP was not designed to have a direct impact on children, New Chance and, to a lesser extent, TPD were. As Reichman and McLanahan point out, neither intervention should have been

expected to improve child outcomes perhaps because neither incorporated child-focused components and intensive center-based high quality care or regular home visiting.

The apparent negative effects of New Chance and the Newark site of TPD on children's behavior and other outcomes require careful consideration, even though the magnitudes of the individual effects were small. Reichman and McLanahan suggest that activities that take the mother outside the home when her children are very young may be detrimental to children's well-being. An alternative explanation, offered by Granger & Cytron (1998), is that New Chance raised expectations which were disappointed, leaving the most vulnerable women feeling stressed, depressed, and overwhelmed about their parental responsibilities. However, the fact that negative child outcomes are found primarily among women who were depressed at intake and the fact that mothers' reports of children's behavioral problems do not parallel teachers' reports suggest that depressed mothers may experience motherhood and child rearing as more difficult than do other mothers.

Perhaps of more pressing concern than the small negative effects of these programs on children, is the overall picture of poor child outcomes in both TPD and New Chance. In each of these experiments, children of both experimentals and controls score low on many indicators of development. For example, New Chance children scored at the 15<sup>th</sup> percentile of school readiness, compared to a national sample. This suggests the importance of the types of interventions outlined by Reichman and McLanahan, which are designed to affect children directly. These intensive center-based and nurse home visiting programs have shown impressive impacts on child cognitive and emotional development (e.g., Berrueta-Clement et al., 1984, Brooks-Gunn et al., 1993, 1994; Kitzman et al., 1997; McCarton et al., 1997; Olds et al., 1997).

Earlier studies of programs that combined family support and early education appeared to have positive effects on both mother and child outcomes (Yoshikawa, 1995). But recent efforts to provide either a broad range of comprehensive services (LaPierre et al., 1997) or services to parents in hopes that they would have (indirect) trickle-down effects on their young children (TPD, New Chance), do not seem to help children much (Aber, Brooks-Gunn, and Maynard, 1995). Perhaps combining targeted intensive (rather than broad and comprehensive) services to both generations, mother and child, like the earlier efforts reviewed by Yoshikawa (1995), is the best approach.

***Implementation*** - Each of these interventions was hampered by problems

that arose in implementation. For example, in LEAP the delivery of sanctions or incentives typically took three months. Such delays in the timing of sanctions and incentives may reduce their impact on behavior. New Chance also faced problems with implementation. The experimental group actually obtained fewer, less intensive services, of shorter duration, than anticipated while the control group obtained more services than expected. Absenteeism was a significant problem as well in this voluntary program. As a result, the difference in 'treatment' between these groups was much smaller than planned.

Each of the three experiments obtained early gains in employment and educational outcomes that waned once the programs ended, suggesting that gains might be maintained and possibly increased with longer lasting programs. Furstenberg observed that teen mothers eventually catch up with those who did not give birth as teenagers but not until the women reached their forties. Providing services for a longer period of time when women are still young might accelerate this process, improving outcomes at earlier ages.

As noted above, Reichman and McLanahan's review emphasizes the importance of intensive two-generation programs. Such programs are not only beneficial for children; they also improve maternal educational and employment outcomes. In addition, nurse home visiting services reduce fertility and extend the average time elapsed before the birth of another child (Kitzman, et al., 1997). These outcomes are impressive and suggest a general strategy for helping teenage mothers. This involves establishing long-term, consistent, and trusting relationships with an authoritative, knowledgeable adult who provides information and advice to young women as they move from pregnancy to early child rearing (Olds, et al., 1997). Within this context, educational and mental health assessments could be implemented, with appropriate remediation and treatment efforts reinforced by the home visitor. Incentives and sanctions may strengthen the impact of such a program, insuring adherence to program requirements.

***Importance of prevention*** - While it is possible to identify strategies to assist teen mothers, a strategy to delay teenage childbearing is likely to have better overall outcomes. Such a strategy should involve many of the same elements as those aimed at teen parents: it should provide early assessments with appropriate treatments; it would emphasize education and training; and it would provide supportive services, delivered in the context of a long-term relationship. One successful program, the Teen Outreach Program, suggests the importance of preventative efforts focused on late childhood and early adolescence (Allen et al., 1994, 1997). Frankin and colleagues, (1997), in their meta-analysis of adolescent pregnancy programs, indicate that some programs are successful in increasing

contraceptive use and decreasing pregnancy. However, the quality of the research showing the largest effects was generally judged to be poor, reducing confidence in the findings.

The difficulty of reducing teenage childbearing should not be underestimated. As Furstenberg points out, the non-rational elements of teenage sexual activity and a more general societal taboo against teenage sexual activity mean that it is difficult to influence teen's decision-making about fertility. Further reason for pessimism is given in Levine and Whitmore's review of literature that suggests that, even if teenage birth could be prevented, the difficulties experienced by these young women may not be reduced. Rather, multiple disadvantages that predate childbirth in this population, including poverty, low cognitive skills, and mental health problems, contribute to poor educational and occupational outcomes.

Prevention of school dropout should also be a priority. Research indicates that a substantial minority of teenage parents had dropped out of school prior to becoming pregnant (Manlove, 1998). Similarly, low levels of school achievement (Moore, et al., 1998) and low levels of school engagement (Manlove, 1998) are associated with increased risk of teenage pregnancy. Thus, it is important that states and localities create more effective incentives for educational investments among youth at risk for teen pregnancy and parenting. Programs, such as the Teen Outreach Program targeting middle school children can be effective in preventing both school dropout and teenage pregnancy. The School Transitional Environment Project (STEP), another program shown to be effective in preventing school dropout (Felner, et al., 1993), was also associated with reduced levels of depression.

## ***RESEARCH IMPLICATIONS***

The three evaluations have a number of implications for research into the causes and consequences of teenage parenting. Three are highlighted here: the contribution of implementation research, the need to monitor broad social trends, and the importance of new experimental approaches.

***Contribution of implementation research*** - Each of these evaluations contained an implementation or process study. The results from these studies were invaluable both in understanding the impact results and in suggesting mid-course corrections. For example, the implementation study in LEAP showed that not all of the sanctions or bonuses requested by staff were processed by income maintenance workers, especially in the early months of program implementation (Bloom et al., 1993). This information was critical in Kane's analysis of the

effect of incentives in LEAP. When he calculated the actual financial incentive that was likely to have been received (in contrast to the incentive planned), Kane concluded that, given this level of investment, the school enrollment gains in LEAP were actually quite large.

The need for high quality implementation research is especially apparent in the era of devolution. With an increasing diversity of approaches taken by states and counties, it is important to understand how new income security and other social programs are being implemented. In order to understand the impact of welfare reform, more generally, it will be critical to carefully assess the implementation process at both state and local levels.

***Monitor social trends*** - There have been a number of broad social and economic changes in the past decade that shape the context in which teen parenting occurs. Most strikingly, there has been a decline in childbirth to teen mothers. It will be important to understand the broader social forces (such as the AIDS epidemic and resultant increase in condom use) that may have contributed to this decline in order to develop strategies for programs to further reduce these rates of teen childbirth.

The changing occupational structure and shortage of decent jobs for individuals with low levels of skills will also shape the context for the development of programs and policies for teenage parents. Increasingly, jobs that are available to this population are those that have few benefits, little chance for advancement, and irregular or inflexible hours. It will be important to understand labor market trends that shape opportunities for employment and the availability of benefits, including health insurance. Moreover, an understanding of the availability, flexibility, and quality of child care will be critical in assessing job retention possibilities.

In a similar vein, research on the value of GEDs and high school diplomas in the labor market is needed in order to establish appropriate educational goals for programs. Moreover, careful attention needs to be paid to the economic and educational status of young men. As Furstenberg argues, any understanding of teen parenting needs to incorporate the prospects of young fathers, as well as mothers.

***New approaches to social experimentation*** - The three evaluations were each designed with AFDC as the 'control' condition. Devolution has changed the environment in which current and future interventions for teenage parents will take place. Under the Personal Responsibility and Work Opportunity

Reconciliation Act (PRWORA) of 1996, a lifetime five-year time limit on the receipt of public assistance is imposed. Special provisions for teenage parents are also mandated by PRWORA. Custodial parents under age 18 who do not have a GED or high school degree are required to be enrolled in school and to live with a parent or other responsible adult. With the exception of this school attendance requirement, the emphasis in the new legislation is on obtaining jobs. Recipients are permitted only two consecutive years of benefit receipt: they are required to become employed after that time.

Within these broad program mandates, states and localities have substantial discretion in selecting program requirements. In this environment, it will be difficult to develop interventions similar to the three that are the subject of this volume. Rather than having a consistent control condition (AFDC), evaluators are faced with a diversity of state and local programs. Thus, 'control' regimens may vary from site-to-site. In this context, evaluators will need to carefully consider the counterfactual conditions.

Rather than setting up comprehensive experimental programs, evaluators ought to consider focusing on manipulating specific program components. For example, recipients may be randomly assigned to a program with intensive support services for job retention and advancement. The control group would be subject to the TANF provisions in that state (or locality) but not have access to these job support services. Or, pregnant teens might be required to participate in intensive services targeted to both mother and child and compared to a control group for whom such services are not mandated. It will be necessary to develop targeted and intensive interventions, designed to have clear impacts. Experimental manipulation of well-timed financial incentives and sanctions could be incorporated into these interventions to assess their impact. Issues of statistical power are critical as is developing experiments whose results will be generalizable to other states and locations.

A final research issue raised by the comparative research summarized in this volume is the role of evaluation research in guiding program and policy development on behalf of teen parents and their children. Over the last decade during which these studies were designed, conducted and completed, the field of evaluation of complex social experiments has witnessed several important advances as demonstrated by these studies. First, such demonstrations are increasingly perceived as potentially affecting two generations, so that the inclusion of child outcome measures is more common. Secondly, there is fuller collaboration between community-based programs, state governments, policy research firms, and university-based researchers. All four parties are needed to

design and mount the best possible research demonstrations. Thirdly, there is more frequent use of comparable theories and measures in the evaluation, which will permit over time the more rapid accumulation of general knowledge about what works for teenage parents and their children.

But as these three projects also illustrate, there is much room to improve the research to make it even more policy relevant. Some improvements are simply incremental, for example, developing better measures of family processes and child outcomes for inclusion in such studies. Some improvements however, may require a more dramatic change in the culture of evaluation researchers and their program and government partners. For instance, a major constraint on the usefulness of the current evaluations is that the program and policy world has changed so fast that the results were unavailable at the time major policy decisions about welfare reform were being made by the federal government. While the results are available for state governments as they continue to debate implementation options, they are seen as less relevant because the control groups received AFDC, not TANF.

Certainly, evaluations of complex social experiments must always take a longer view than the one available to policymakers and program directors who are on the front line. But is it unreasonable to design both the experiments and their analysis and reporting schedules so that preliminary findings can be available sooner and hence might leave a greater chance to influence mid-course corrections? Our hope is that the experience of conducting and reviewing these demonstration research projects will foster in both the research community and the program and policy communities a renewed commitment to better and more timely research to inform our nation's efforts to improve the life chances of teenage parents and their children.

### ***POLICY IMPLICATIONS***

The three demonstrations underscore the difficulties that disadvantaged teenage parents face in completing high school and obtaining and retaining jobs. Levine and Whitmore suggest that these difficulties preceded the birth of the child. Many of these have been described by Quint and her colleagues (1994) in their qualitative research on New Chance participants. A substantial number of these young women do not have the social and psychological resources to manage their child care, employment, schooling, and home life. While access to support services is essential, they need to be adapted to the needs faced by these young women. Furstenberg suggests that making programs flexible, adaptable, and available over the long-term will insure their use by young mothers.

Even with these services, however, wages may not be sufficient to move mothers out of poverty. Thus, policies need to attend to raising the minimum wage, enhancing the earned income tax credit (EITC), and perhaps, developing income disregard programs that do not count toward the 5 year lifetime time limit for welfare receipt. Illinois, for example, has funded its earnings disregard with state money to exempt participants from the time limit.

Given the difficulties in influencing education, employment, and pregnancy outcomes, which these three projects document, policymakers are confronted with complicated options. First of all, prevention of teenage pregnancy must continue to be promoted. Policies that support the current downward trends in teenage pregnancy rates may produce far greater impacts than any interventions which can be developed for teenage mothers.

Second, the findings highlight the risks attached to school dropout and the difficulties in re-engaging teens once dropout has occurred. Thus, education policy should support monitoring of school attendance and school performance to identify students at risk of dropout during their latency and adolescent years. The development of alternative school programs for youngsters who need special educational assistance is also needed.

Third, the studies document the need to create job opportunities and to provide appropriate links for teenage parents. The Center for Employment and Training (CET) model within the Minority Female Single Parent Demonstration project (Gordon & Burghardt, 1990) may be especially relevant. To enhance income, the EITC and child support enforcement should be maximized.

Finally, in light of the educational and emotional problems of teen mothers, a focus on their children must obviously be our greatest concern. Providing health care, home visiting, and early childhood programs for the children of TANF participants may produce the most impressive results for the future.