APPENDIX G

A More Detailed Response to the Issues Raised Regarding the Costs & Feasibility of the Interventions

At least one of the reviewers was concerned with the costs and feasibility of our universal interventions. In this appendix we provide a more detailed discussion of these issues. In doing so, we hope to allay the concerns of the reviewers and to demonstrate the advantages of a public health perspective in the design of preventive interventions, particularly with respect to affordability, feasibility and acceptability.

In line with our public health perspective, one way we sought to defray the costs of the interventions and to insure their acceptability was to enter into a partnership with the existing, public institution mandated by the city, county and state to socialize and educate Baltimore City’s children—the Baltimore City Public School System (BCPS). The JHU PIRC’s partnership with the BCPS had evolved over the last 12 years to the point that members of the JHU PIRC team were integrated into the BCPS’s curriculum, parent involvement, special education and mental health services planning committees. Consequently, the first grade interventions implemented in the latest JHU PIRC field trial represented not only what the BCPS thought was affordable and feasible, but the directions in which the BCPS was going in terms of new initiatives in the areas of curriculum, parent involvement efforts and mental health services. As was noted in our letter of response, each element of the Classroom-Centered (CC) and Family-School Partnership (FSP) interventions reflected the thinking of the BCPS Superintendent, his administrators, principals, and teachers. Moreover, in accord with the superintendent, each element of the interventions were piloted and feedback solicited from not only principals, teachers and school social workers/psychologists, but parents and children as well.

Besides reflecting the philosophy and goals of the BCPS and its parents and children, the CC and FSP interventions had to come within the cost parameters set by the BCPS, given we were part of their planning structure and had to abide by their funding constraints. That is, we were not allowed to implement an intervention that the BCPS could not afford once the research funds were no longer available. As a result, we took advantage of existing BCPS initiatives in the areas of curriculum, parent involvement, and mental health and special education services. With respect to the CC intervention and the choice of the Mimosa mathematics curriculum and the enhancements to the reading curriculum (which cost approximately $1,200/classroom), we took advantage of the fact that BCPS was evaluating each of them in a small number of elementary schools as part of a planned revision of the existing K-3 curricula. Moreover, they appeared quite pleased with the results and were planning on phasing in these components over a three-year period. Consequently, though not inexpensive, the costs of the major curricula components of the CC intervention were in line with what BCPS was able to afford. Now while the $1,200/classroom cost of revising the curriculum may sound...
prohibitive, one must consider that this is a long-term investment. That is, the curriculum should be in place for a number of years and would serve at least 4 or 5 cohorts of elementary school children. Estimating that the life of the curriculum material is 5 years and that the average first grade classroom includes 25 children, the average cost per child for the Mimosa and reading curricula enhancements is about $9.60. Importantly, most school systems will revise existing curricula or replace them completely over 3 to 5 year cycles. One major reason is that the curricula materials may become dated or just wear out. Consequently, most school systems will allocate funds in their operating budgets for curricula purchases. Thus, the $9.60/student cost cited above for the CC intervention curricula costs was already built into the BCPS budget.

One must also consider in evaluating the costs of our interventions that most school systems will provide at least minimal training and mentorship to their teachers and school psychologists/social workers on a regular basis. More specifically, BCPS typically requires that teachers and school psychologists/social workers return to work a week before the start of the school year. During this week they receive training in curricula practices, behavior management, and parent involvement as well as updates on administrative matters. Moreover, during the school year, 2 day/month is allotted for further training and mentorship. Since our interventions were designed in conjunction with the BCPS, we were able to take advantage of these training/mentorship days in training and supervising the teachers and school social workers/psychologists in the use of the CC and FSP intervention components. Given the BCPS is a financially strapped school district, and has had to threaten to sue the state of Maryland for more funds for education, our guess is that other urban school systems could also integrate the CC and FSP components into their normal training and mentorship programs, thus, making them affordable and feasible to implement. The bottom line is that most teachers and school social workers/psychologists will receive some training and supervision from their school systems. Consequently, this is an excellent point of entry for preventive intervention efforts such as ours. One last point in this regard, while supervision represents a perpetual cost, the costs of training are usually time-limited. That is, once you train a teacher, you don’t have to retrain that teacher again next year. Thus, the per child training costs associated with interventions such as ours must be computed over the life time of the intervener as opposed to one calendar year. This is in line with the per child curriculum costs outlined above, which take into account the life of the curriculum in estimating costs per student.

Among the costs of the CC intervention was a consulting teacher, who was available 10-hours per week to assist the CC teacher in implementing the intervention and dealing with children in need of additional help either in terms of achievement or behavior. The consulting teacher concept represented another BCPS initiative we built upon in terms our CC intervention. When we began our interventions in 1993, the consulting teacher initiative was also being evaluated by the BCPS in a small number of schools along with the reading and math curricula enhancements that were incorporated into the CC intervention. The idea of the consulting teacher sprung out of the informal practice in a great number of schools, where principals rely on seasoned teachers to mentor more junior teachers. In Baltimore, the consulting
teacher initiative represented an attempt on the part of the school system to simply formalize that role, by taking these seasoned teachers out of their own classrooms so that they could mentor less experienced teachers. Now in the typical BCPS elementary school with upwards of 18 classrooms from K-5 (3 classes at each grade level), this typically entails adding at least one senior teacher to the annual budget at a cost of approximately $65,000 (salary + benefits). This is undoubtedly a significant outlay, but only represents adding one additional (although senior) teacher to an 18-teacher staff. BCPS began this initiative with the hope that the availability of the consulting teacher would cut down on the number of referrals to special education and thereby save the system the costs of special education assessments and services.

**Turning to the FSP intervention, there is little doubt that the costs of the FSP intervention in terms of parent workshops, child care, meals, lotteries, etc. are over and above what is typically allotted for in most elementary school budgets. But like with the CC intervention, we took advantage of a number of existing mechanisms and structures for defraying the costs of such an endeavor.** First, as we indicated in our letter of response, the workshop leaders were the first grade teachers themselves and either the school psychologist or social worker assigned to the elementary school involved in the trial. Thus, there were no additional costs in terms of the workshops leaders. Moreover, the training and supervision for the teachers and school social worker/psychologists were largely incorporated into the existing BCPS training and supervision schedule. We also took advantage of the fact that most schools had back to school nights and quarterly parent-teacher conferences. In addition, the school system was instituting a policy of allotting teachers a 1/4-day early release per month for meeting with parents. Thus, most schools had allotted teacher time and a modest amount of resources for child care and refreshments in their budgets for parent meetings. In terms of the *Warm Line* that we instituted, most of the elementary schools had voice mail for the main school telephone line. Consequently, the only additional costs incurred were those associated with adding mailboxes for the intervention teacher and the school social worker/psychologist. This added approximately $4/month to the schools operating budget. Of course, if in a school with 18 teachers, a school psychologist, and a social worker, each were provided a mailbox, the cost would reach about $80 per month.

We discussed how we defrayed the costs of the parent lending library, math kits and the Webster-Stratton materials in our letter of response, so we will not go into that here. Nevertheless, the one cost that might concern other elementary schools interested in implementing the FSP intervention centers around the necessary staffing for recruiting and maintaining parent participation. Regarding ways of subsidizing the parent involvement efforts, Chapter 1 schools (those receiving federal funds for serving socioeconomically disadvantaged populations) in Baltimore typically hire a Parent Liaison who is in charge of parent involvement. As such the costs of the parent involvement effort can be defrayed in such instances. Alternatively, some schools have highly organized Parent-Teacher Organizations (PTOs), which may provide the person power for recruiting parents and providing child care. Undoubtedly, while no easy task, an ever increasing number of elementary schools in Baltimore
have managed to mobilize parent volunteers and neighborhood merchants/businesses to support parent involvement efforts. Thus, we do feel family-school partnership programs such as ours are not outside of the realm of possibility even in poor, urban school districts. Nevertheless, such efforts will require a sustained and a highly organized effort aimed at identifying the necessary resources and using them in a cost-effective way.

One final point with regard to the feasibility and acceptability of the universal interventions we evaluated. The 32-site National Head Start/Public School Transition Demonstration program funded jointly by the Department of Education and the Administration on Children, Youth, and Families reflects the federal government’s support for making our public schools more Head Start-like. That is, the DOE and ACYF are seeking to redesign our public schools to foster strong family-school partnerships, wherein teachers and parents together develop the necessary skills for nurturing children’s cognitive, social, and behavioral development, and where access to needed social and mental health services is facilitated. Our universal interventions evolved out of the same literature that pointed the DOE and ACYF to the need for greater parent-teacher collaboration, more developmentally appropriate curricula, more and improved training for parents and teachers in behavior management and teaching practices, and more systematic efforts aimed at facilitating the identification and referral of children and families in need of social and mental health services. The fact the federal government has invested nearly 75-million dollars in Head Start/Public School Transition programs in 32-states suggests that this is a direction it will continue to follow and support financially. Consequently, efforts such as ours here in Baltimore may prove quite feasible and acceptable given the support at the federal, state, and local levels for the Head Start/Public School Transition Demonstration program.
APPENDIX G

COSTS & FEASIBILITY OF THE INTERVENTIONS