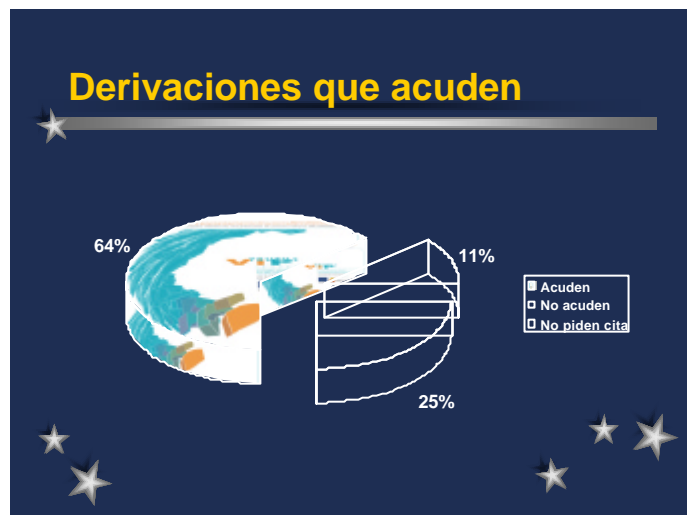


#### 4.4 ANALYSIS OF REFERRALS RECEIVED

Characteristics of the students who have been referred and treated as part of the Hippokrates Program 2003  
Assessment of progress made

In keeping with the analysis carried out in the previous document, 64% of the 28 referrals were made by teachers who participated in the program during 2003. In each case, the teacher making the referral filled out the referral form. We analyzed the data on these sheets and prepared a free form report which included all relevant information.

Before the end of the academic year, and in spite of the fact that many of the students had just begun their participation in the program, the teachers who had made the referrals assessed the progress made. Results will be provided later in this paper.



## MATERIALS AND METHODS

In this section we analyze the contents of the referral sheets for the 18 students who participated in the program. We used the following procedure:

1) First, we compiled the responses in each section and presented the information gathered in graphs when appropriate. In some cases, the answers were compiled and results presented in a question by question table.

The image shows a referral form titled 'Programa Hipócrates II' from the 'Unidad de Atención a la Familia'. The form includes contact information (phone: 965 93 91 58, fax: 965 65 53 20, email: ecomany@ip-alicante.es) and a logo on the left. The main title is 'Programa Hipócrates II' with the subtitle 'Identificación /Intervención sobre conductas de riesgo.'. Below this are fields for 'Nombre del alumno:', 'Edad: \_\_\_ Sexo: V M', and 'Instituto: \_\_\_\_\_ Curso: \_\_\_\_\_'. A section titled 'Conductas problema identificadas:' contains two columns of radio button options: 'Insultar a compañeros.', 'Provocar el enfado o la ira.', 'Discriminar.', 'Romper cosas.', 'Alcohol, drogas.', 'Agresión física, pegar.', 'Otras (describir):.....', 'Insultar a profesores.', 'Alborotar, fastidiar, molestar,...', 'Quitar cosas.', 'Amenazar y "meter miedo".', and 'Acoso sexual de palabra.'. Below this is a section for 'Breve descripción de la situación de riesgo identificada y de su evolución:', followed by 'Intervenciones intentadas para solucionarla:' and '¿qué debería de conseguirse para que se considerara una mejoría?'. A section for 'Citaciones a la familia:' includes questions about when and how many times the family was contacted, who they were, if they were offered the program, and if they accepted. At the bottom, there are fields for 'Nombre:', 'Teléfono de contacto:', and 'e-mail de contacto:'. A footer box contains the text: 'Para citar en la Unidad de Atención a la Familia: 965 93 91 58 (de 8 a 15 horas) Enviar este hoja por fax: 965 65 53 20 o e-mail: ecomany@ip-alicante.es'.

- 1) The results were analyzed and summarized, first by several of the teachers and then by an independent health care technician. The results are presented at the end of this document.
- 2) The results were then presented as a base document to the consensus group of professors from the Timoneda Association for discussion. This document can be seen in the following research section of this paper.

## RESULTS

The following graph shows the distribution of participants in the Hipokrates 2003 program by age and sex. All students for whom a referral was completed and who had at least an initial interview with the therapy team are included.



As regards the schools and teachers who made the referrals, those who made the most referrals also had the lowest rate of compliance.



A small group of 6 teachers referred several students, while the rest of the teachers referred only one.

In the graph below, we see the distribution of the frequencies of the behaviors that had been previously identified by the Timoneda teachers as “at risk” for violence.



And in the following graph we show these behaviors and their frequency, including and differentiating students who finally participated in the programs (indicated in blue) and those who did not.



In the following tables, we show the answers that were given in the three sections of the referral sheet that included open-ended questions. In the first, we see the compilation of all of the information gathered, and in the second, the final summary of results obtained.

## BRIEF DESCRIPTION OF THE "AT RISK" SITUATION AND ITS EVOLUTION

[He] is not able to control himself in certain situations; he throws tables and chairs, hits the doors, insults everyone ...

He is often absent. This student is from Madrid. He often missed class there. He lives with his aunt and uncle and is very behind in school. He doesn't like to study and gets in a lot of trouble. Nevertheless, he is able to listen and reason. He realizes that he is making mistakes.

[He] doesn't meet the objectives set in most subjects and he doesn't really care. He is bored in class and so bothers his classmates, the teacher and so on.

From the beginning of the year, [he] has shown a lack of respect for all adults and for his classmates. He is confrontational whenever he is warned about his behavior. The most serious incident happened after one of the teacher's keys had been stolen. A disciplinary file was opened for this student and temporary suspension from school was recommended. His attendance to class has improved recently as has his attitude towards his school work in some subjects.

[He] attacked a classmate so badly that the student's mother filed a complaint with the police against him and against some of the other students in the class who were copying his bad example.

This student has a record of misbehaving but a willingness to change. However, his friends pull him down. One of his extended family members is a very bad influence but his mother has gotten out of the situation. The father is in jail. One of the mother's friends wants to help but I don't believe he has sufficient resources to do so.

\* He constantly disrupts class.. \* He is unorganized.. \* He doesn't study. \* He verbally and physically attacks his classmates. \* He inappropriately touched one of the girls . \* He threatened one female student with a knife. \* He "takes" things (school materials, money)

See the attached document.

Progressive deterioration of the relationship between Antonio and school.

[He] sometimes takes a leadership role among his peers and incites them to be rebellious, unmotivated, and unproductive in school. He is constantly fooling around and tells obscene jokes which are in very bad taste.

This student suffered severe childhood trauma in his family situation, specifically with his father.

He is very mischievous in class. He misbehaves but is then able to admit his misdeeds and ask forgiveness. He blames his behavior on the fact that he is bored at school, doesn't want to study and doesn't want to be there.

This student exhibits frequent mood swings. His lack of interest in learning translates into behavior to get his teachers' and classmates' attention.

Cesar was transferred to this school in the 2001-2002 school year due to a family move. His home situation is complicated and destructured. He has difficulty dealing with adults (parents and teachers), He tends not to obey rules and resists any attempt made to get close to him or offer help. His behavior and output at school have improved recently, and he seems to have matured.

[He] began to attack and insult his classmates, and his family thinks he might have begun to experiment with drugs given the brusque change for the worse in his behavior.

Aggressive and disruptive behavior at home, especially towards the grandmother.

[He] continually runs away from school and does not want to come.
Nerea is considered a "tough" girl. She always threatens and frightens her classmates, superiors and family. She says that this is one way to protect herself. She has recently been through a very difficult personal experience. She sometimes recognizes that this attitude will get her nowhere, but at other times, she insists on behaving this way and encourages her friends to follow her.
This student took a classmate's cell phone and that student's mother filed a police complaint.
* Won't obey the rules. * Always interrupts class work. * Provokes tense situations.
Often takes a defiant attitude towards the teachers and students, especially females.
He feels harrassed any time anyone talks to him. When asked what is bothering him, what he wants to do, how he is, his answer is always "I don't know" or "so what?" He has done poorly at school. He goes to school because his parents make him. (He attends less now.) He only likes to watch television and play with the game-boy. He doesn't like to do anything else.
This student has stopped attending early morning classes. Her mother has followed her without the daughter knowing it, and has seen her go to the house of a boy whose family seems to have a history of drug abuse and recruiting minors. The mother says she has seen letters in which the boy threatens her daughter saying that "if you don't belong to me, you won't belong to anyone." The mother thinks that this family is being nice to her daughter so that she will leave home and go with them. She thinks that they want to take advantage of her. The letters make her think that her daughter might leave at any time and that she will lose her forever. Her daughter does not deny any of this and says thaa her mother is crazy and harrasses her. The student showed aggressive tendencies towards her mother during the interview that we had with both of them at school.

## INTERVENTIONS THAT WERE TRIED AS POSSIBLE SOLUTIONS

<p>Psychological treatment once a week.. We have tried to talk to him many times in order to find a solution to the problem (at school). Disciplinary file opened.</p>
<p>Individual interview with the student. Inteview with the student's advisor. Meetings with school directors. Individual follow-up on a daily basis of attendance and class performance. Support classes.</p>
<p>[This student] goes to supplemental classes in basic subjects (math and language classes) Several interviews with the student's advisor (to try to find a compromise solution, but with no luck.) Interviews with the school psychologist, the Dean of Students and the Director</p>
<p>Individual interview. Progress report which includes notes on the student's behavior and the work done in each class.</p>
<p>Teachers, advisor and Dean of Students have talked with this student several times. Currently has a disciplinary file open. Last year was even worse and that is when the disciplinary file was opened.</p>
<p>Speak with the student. Come to agreements and commitments.</p>
<p>Individualized support by teachers and support staff. Daily follow-up. Give affection in and outside of the classroom.</p>
<p>Several contacts with the family but with no success at getting the student to change his behavior. A recommendation was made for him to stay at home for a few days to calm down.</p>
<p>Sanctions were implemented. Expulsion and suspensions.</p>
<p>We talked to the student and his parents. The parents say they are unable to control their son.</p>
<p>Private talks with the student's advisor, his grandfather, his mother and with the student himself. The grandfather promises to take charge of his grandson, but Jairo remains unmotivated.</p>
<p>Personal interview with the mother and the student. Both promise to change their attitude and the mother will try to control her son a little better. This doesn't happen and the student spends a lot of time alone.</p>
<p>An interview is held with the student and his mother. An attempt is made to find ways to monitor the student daily and make sure he does his school work, but the plan is not followed.</p>
<p>Individual interview with the student by teachers and advisors. Interview with current family in order to establish common rules for intervention and action. Attempts to establishe affective-emotional ties.</p>
<p>Written warnings given to student. A file is opened due to threats and aggressive behavior at school. His family has tried everything, both positive and negative measures.</p>
<p>Individual psychological help has been sought on two occasions.. Rules are set up at home, but this tactic has not worked.</p>
<p>Try to make the student see the good side of being in school and try to get him into a small class, which will make it easier to follow his progress.</p>
<p>Class activities (group techniques). Reflections on activities designed to prevent conflict. Individual counselling.</p>
<p>Consults with the counselor, school psychologist and dean of students. Interview with the student's mother.</p>
<p>Interview with the mother and the student.</p>
<p>Interviews (student, parents). Plan to do daily monitoring of class work. Support class with a special teacher.</p>
<p>Meetings with the student and his mother. Meetings with the counselor and dean of students. He often doesn't follow orders.</p>
<p>He had previously been enrolled at Jorge Juan High School where he was recommended for the special education program even though his parents didn't think it was necessary. At our school, last year we recommended personal therapy, but he also rejected that idea. He was only taken to a psychologist in order to demonstrate that his IQ was normal. We have had several personal inteviews with him this year and three with his parents. One incident took place during class, but after changing approach, there has been remarkable improvement since the beginning of the year. All positive behaviors are being reinforced and non/threatening language is being used.</p>
<p>The counselor and director have tried to mediate by speaking with both parties separately, but it seems that specialists in the field will have to be called in since the situation is becoming unbearable for everyone involved. The mother shows up at school almost every day to check if her daughter is in class. She follows her around and we haven't been able to get her to stop suffocating her.</p>

## WHAT WOULD CONSTITUTE IMPROVEMENT?

Learning to control himself when faced with the things that make him angry.
Being a normal student in class even with his shortcomings Accepting commitments and responsibility Doing assigned work
Improving the student's self esteem Improving her social integration (respecting rules both at school and outside of school) Improving her relationship with adults and classmates Respecting other people's property
His parents don't know what else to do. His mother's name is Gloria Pareja.
A better self concept and being able to get out of or confront dangerous situations. He is in a lot of danger as regards drugs.
A decrease in his disruptive and aggressive behavior.
Integration in the school system.
A change in attitude, especially more interest in learning and passing his subjects.
Being more academically motivated.
Parents must monitor the student's daily activities more. He should be busy doing something all of the time.
A change in behavior in the classroom with a more positive attitude towards his work both at school and at home.
Cesar must verbalize his feelings, trust other people, especially the adults around him, and improve his self-esteem and respect for his family.
<u>Patient</u> : "I should behave."
<u>Mother</u> .- He should respect other people, but I am not very optimistic.
Improved self-esteem.
A total change in his role as a negative leader who tries to influence his friends to be threatening and get involved in fights.
He is really a good kid, but he has some kind of problem that we don't understand and don't know how to deal with.
Accepting rules. Being able to work independently. Being able to organize his school materials. Being more motivated to study.
A change in attitude towards everyone at school.
In order to improve he should continue therapy which is helping him integrate and have a social life. If he doesn't continue coming to school (next year), we could forfeit all of the progress we have made with him up until now.
We think the mother should be less obsessive and the daughter a little more understanding with her mother. Some kind of specialized, outside help is needed.



## SUMMARY OF COMPILED SECTIONS

*Section:*

### **Brief description of the “at risk” situations and their evolution:**

*The most frequently mentioned are:*

- family problems, and
- students who are disruptive, interrupt class, provoke others and create a tense atmosphere in class

*Others that are frequently cited include:*

- Students who are bored and unmotivated
- Absenteeism
- Students who misbehave and do not obey the rules
- Students who lack respect for and have poor relationships with teachers and other educators

*Those that are mentioned less frequently (even though they are more specific):*

- Verbal aggressiveness and threats
- Not meeting objectives/ poor academic performance
- Stealing, drugs
- Low self-esteem

*Section:*

### **Attempted Solutions**

It seems that most interventions begin and are based on talking with:

- the problematic student (9 cases)
- the advisor (8), school directors (5) and/or the counselling department (3)
- and most of all with the family (11),  
→ in 64% of the cases, only the mother was involved.

Interventions included daily monitoring (4) and/or supplementary support classes (3), opening a disciplinary file or

expulsion from school in 4 cases and outside psychological support on 2 occasions.

Other solutions that were tried less frequently were: attempting to establish affective ties (2), recommending special education programs (1) and using group techniques (1).

*Section:*

**What constitutes improvement?**

The most frequently cited were controlling or self-controlling behavior (6), completing assigned academic tasks (4), improving self-esteem (4) and social relationships (4) and an increased interest in studying and passing (3).

Other expectations that were mentioned include: decreasing aggressive behavior (1), respecting property (1), accepting responsibility (1), trusting other people with one's feelings (1) and getting outside help (1).

In every case except one, the teacher had asked the family to come in for a conference, and in most cases, many requests for a conference were made (see graph).



**EVALUATION OF PROGRESS MADE**

An evaluation of progress form was designed and given to the teachers who had referred a student. The evaluation consisted of one sheet of paper which asked for a subjective evaluation of the progress made by the referred student which was to be attached to a photocopy of the referral sheet itself.



Estimado compañero XXXXXX XXXXXXXXXXXX XXXXXXXXXXXX

Te adjuntamos una fotocopia de la hoja de derivación al programa Hippocrates II de tu alumno@ XXXXXX XXXXXX XXXXXX del que te pedimos algunos comentarios.

***¿Qué te ha parecido su evolución desde el momento de su derivación respecto a la situación que nos comentabas en la hoja de derivación?***

***¿Cuál te parece que ha sido el cambio más relevante ocurrido?***

Te rogamos que nos des tu valoración subjetiva del cambio que se pudiera haber producido en la siguiente escala de 10 puntos que va de peor a mejor. El punto central es el de ningún cambio. MUCHAS GRACIAS!!.

Mucho Igual Mucho  
**Peor** -5 --- -4 --- -3 --- -2 --- -1 --- 0 --- 1 --- 2 --- 3 --- 4 --- 5 **Mejor**

Given it was the end of the academic year, it was sometimes difficult to locate the teachers. Twelve evaluation sheets were received and eleven were considered valid. The first comments that were collected are listed below:

<b>¿How would you describe the progress the student has made from the time you referred him/her as regards the situation you described in the original referral sheet?</b>
There has been a slight improvement. This past month he has shown more desire to work to pass the course and get his secondary school degree.
Nerea's attitude in school is conflictive. We might say that she has begun to improve because she shows signs of wanting to.
Lorena has improved since beginning to go to the FSU. Her self-esteem has improved and her integration in class has too.
The referral was made at the end of the year and there hasn't been enough time to observe any change. It seems as if he has had only one appointment which was to gather information and assess the situation. This student, who was in his final year of secondary school in a special ed program, did receive his secondary school degree.
I cannot answer because he only came once at the end of the year. He has another appointment on July 22. He is not in my class and I have not been able to contact his advisor to get any further information. Given that the appointment came so late in the year, I doubt that any change has been observed.
The changes we have observed at school have not been for the better. They have been for the worse.
No progress has been made because the problems here surpass the scope of treatment of this unit. (psychiatric problems)
No changes have been observed because the student has only gone to one interview which is irrelevant. Stephanie left home, then returned, then left school and we have lost contact with her.
No change has been observed. The mother continues to deny that there is any problem at all and the son has not changed his attitude.
The situation has not changed.

<b>What do you think has been the most significant change that has taken place?</b>
His behavior at school has improved and he is trying harder academically.
This student seems to be happier.
Positive progress has been made and perhaps the most important change was that the father agreed to go to the Family Services Unit.
Most importantly, the student has been referred to the Children's Psychiatric Services. This was recommended last school year by the counselling department but the mother refused. Now it seems she has agreed.

In spite of the fact that many teachers reported that students began the program late in the school year, only one student's progress was reported by teachers to be negative. In four cases (36.4%), teachers felt it was too early to observe progress and in another four, a positive evolution was observed.

