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Counseling Troubled Adolescents: An Evaluation of a Statewide Training Program

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This article describes the methods and results of a training evaluation project that assessed behavioral change following training. Child welfare workers were trained in counseling methods for working with adolescents who behave in ways that challenge conventional therapeutic techniques. As part of the training, participants developed action plans, which were lists of behaviors they wanted to implement in their counseling. Training participants were interviewed by telephone two months after the training. Results indicated that a number of action items were successfully implemented and that workers found the action process to be helpful in this regard. Results also indicate that success could have been enhanced if certain supports had been included in the training or in a follow-up session.

Acting out adolescents are possibly the most difficult clientele served by child welfare and mental health staff. Many of the
foster care placements nationally are resulting from parent-adolescent conflict, chronic truancy, and other status offenses. About 10% of the clients seen at community health centers are youths between the ages of 10 and 14 whose presenting problems often take the form of behavior disorders such as truancy, substance abuse, or delinquency. Twice as many boys as girls are seen (Rothman & Kay, 1977, p. 14). Typically, these adolescents are threatened by therapy and are involuntary referrals. They confront the caseworker with anger, silence, or defiant indifference; and relationship building techniques used typically may fail miserably.

Techniques especially suited for working with resistant clients have been developed in the field of communications therapy (see for example, Jackson, 1963; Erickson, 1964; and Haley, 1963). Even though these techniques are not new, they are often missing from the educational programs of social workers. Inservice training is therefore necessary; indeed, a recent survey of departments of social services found that training in methods of working with adolescents constituted one of the most pressing training needs (Hartman, Jackson & Tomlin, 1981, pp. 32–38).

Because training funds are so scarce given recent federal, state and local funding cuts, administrators are especially concerned that staff training provide job-related knowledge and skills. Increasingly, the effectiveness of training must be proven in order to fulfill the demand for fiscal accountability. Following a brief overview of various training evaluation methods, this article describes the application of the Participant Action Planning Approach (PAPA) to evaluate the impact of statewide training on casework skills for working with troubled adolescents and their families.

Training Evaluation Methods

Training evaluation methods tend to focus on either the process of training or the outcome. Valuable information is gained from both types of evaluation. Process evaluations enable administrators to determine whether the training content was appropriate, and whether the presentation and facilities were conducive to learning. Process evaluation may focus on assessing any or all of the following: (a) learning objectives,
Training Program

(b) curriculum characteristics, (c) trainer characteristics, (d) instructional methods, and, (e) environmental characteristics of the training setting (Zober, 1980).

Outcome evaluations are becoming essential as budget restrictions increase. They provide data for documenting the value of training. There are several kinds of outcome evaluation designs, including those which test behavior change across time (Weiss, 1978; Benjamin, 1982; Smith & Schinke, 1985; Reid & Beard, 1980), behavioral differences between groups (Kirkpatrick, 1975), attitude change (Pecora, Delewski, Booth, Haapala, & Kinney, 1985), and competency development (Moore, 1984).

Most outcome evaluation methods measure training outcomes during or immediately following training. Although helpful, these evaluations often fail to measure on-the-job applications of learning. In many cases, the skills that trainees learn during training are necessarily general and have broad application. To be highly effective the skills must be tailored to the practice requirements of the job over time. Research has shown that to accomplish this transfer of learning to the workplace is extremely difficult. If training has been effective in producing learning, the critical issue becomes motivating trainees to work towards successful implementation of new skills (Mosel, 1957; Morton & Kurtz, 1984).

The Participant Action Plan Approach to Training Evaluation

The Participant Action Plan Approach (PAPA) has been shown to be an effective method for motivating and evaluating long-term application of learning (United States Office of Personnel Management, 1980; Salinger, 1979). The PAPA method involves trainees in the development of individualized "action plans" at the conclusion of training. Action plans are lists of behavior or skills which trainees plan to implement when they return to their jobs. The action plans motivate trainees to plan and implement on-the-job changes. Mail or telephone follow-up evaluations of the implementation action plan assess the extent and types of behavioral changes which actually took place following training.

The process of action planning and follow-up enables trainers to determine: (a) What job related changes were planned and
which items were actually implemented following training? (b) How on-the-job changes were related to the goals and objectives of the training? (c) What may have interfered with participant application of training content?

Since successful transfer of learning begins even before training ends, action plans are useful tools in prompting and motivating changes in work behavior. The process of developing the plan during training increases commitment and motivation to make on-the-job changes (Zober, Seipel, & Skinner, 1982), while the process of setting specific goals increases the likelihood of task completion (Locke, Shaw, Saari, & Latham, 1981). In addition, those changes that participants generate for themselves are more likely to be implemented than those imposed externally (McLagan, 1978).

Along with motivating change, action plans encourage workers to implement changes. Action planning encourages participants to think through how the training will be relevant to their jobs and to select the most applicable and useful goals. Participants gain a better understanding of the course content and its possible applications to their own work setting through the development of action plans. Most importantly, participants who have developed action plans leave the training with clear ideas of types of problems they may encounter in applying the training and possible methods to overcome those problems. They are better able to prepare for, and overcome, barriers to on-the-job changes. Finally, knowing that a follow-up evaluation will take place, on-the-job changes are encouraged (Salinger, 1979).

Supervisors and administrators find that the PAPA method helps document on-the-job changes by providing qualitative evidence for transfer of learning from classroom to workplace. Action plan approaches have been utilized to evaluate child protective services training, (Delewski, Pecora, Smith & Smith, 1986), supervisory training, (Austin & Pecora, 1985), and social services staff training (Mueller, 1985; Zober, Seipel & Skinner, 1982). Many of these applications have used a mailed questionnaire to gather the follow-up data. The method and results of an evaluation using phone interviews with 21 training participants are reported below.
Method

Training Format and Content

The PAPA evaluation method was applied to two separate workshops involving state child welfare workers. The training format employed for the workshops used role-playing techniques and small group interaction to develop clinical practice skills. Communication and systems theories and related techniques were presented as tools to understand and productively engage resistant clients in individual and family counseling sessions. The goal of the training was to help workers develop specific plans for interviewing and treating adolescent clients in their current caseloads.

The workshops provided 12 hours of training in two days. Working with adolescents who are withdrawn, disinterested, or oppositional was emphasized. Each workshop began with a presentation of the principles of communication theory (e.g., Watzlawick, Beavin, & Jackson, 1967). Counseling techniques were demonstrated through roleplays, and trainees were subsequently paired to practice the techniques. The techniques included reframing, the use of statements and stories as alternatives to asking questions, and the use of nonverbal communication.

Part of the workshop was devoted to family therapy techniques. Systems theory was introduced as a way to understand family dynamics. Related techniques, such as circular questioning, were again demonstrated through roleplaying and practiced in small groups. Throughout the workshops, trainees were encouraged to ask questions and provide case examples so that the trainer could demonstrate the applications to actual cases.

Development of Action Plans

The action plan process and its objectives were described to participants at the beginning of training. They were informed that a follow-up telephone interview would take place approximately two months after the completion of training. Participants were given a written set of guidelines for developing action plan goals. Time was set aside during the workshops for participants to jot down ideas for action plan items. At the conclusion of the worship, each participant prepared his or her written plan.
Participants turned in one copy of the action plan and kept one copy for themselves. Participants were encouraged to share their plans with their supervisors. Supervisors were informed that their staff would return from the workshop with action plans and that there would be a follow-up evaluation.

Follow Up Procedures

Fifty-four child welfare workers attended the workshops and 21 participated in the action plan evaluation process. Thirty-three did not participate because of partial attendance, staff turnover, or shifts in job responsibilities. Of the 19 participants who were educated in social work, one had a doctorate, 11 had a master's degree, and 7 had a baccalaureate degree. Two participants had master's degrees in education. The group represented various agencies and work responsibilities including state child protective services and foster care workers, juvenile corrections staff, and group home workers. Three administrators and supervisors also attended the workshop. Both rural and urban work sites were represented.

Prior to the follow-up interview, two reminder letters were sent to the trainees. A letter was sent to all participants one week following training, thanking them for their participation and reminding them of the follow-up in two months. Another letter was sent approximately six weeks later, stating that they would be contacted within a week or two to schedule follow-up interviews. This letter also reviewed the purpose of the follow-up, and the rights of participants, including voluntary participation and confidential recording of their responses.

Telephone interviews averaging 20 minutes in length were conducted by two social work graduate students. A standardized format was followed which included forced-choice and open-ended questions in the following areas: (a) the extent to which the plan was completed, (b) impact (positive or negative) of implementing the goal, (c) obstacles encountered, (d) methods used to overcome obstacles, (e) other on-the-job changes since the training and, (f) other comments about the training.

Most participants developed between one and three action items and these participants were interviewed regarding all of their action items. Those who developed more than three action
items were interviewed on three randomly selected action items in order to maintain comparability and to ensure that the interview was kept to a reasonable length.

The data were grouped in various ways to analyze the interview responses. First, because some participants developed plans made up of several action items, each action item was treated individually. Second, some action items were not attempted as planned, or were not completed to a sufficient extent to enable responses to all of the interview questions. Two response categories were created for these data, one for action items that had been at least partially completed and one for items that had not been completed to any significant extent. The interview results are reported for each completion category.

Results

Types of Action Plan Items

Each participant developed between one and six action items. A total of 50 action items were developed, and these items were summarized in five categories (see Table 1). Most participants (19, 90%) chose to work on clinical skills application; however, seven workers (33%) planned to share workshop skills with coworkers and to continue personal development of knowledge or skills in relation to various training topics.

Goal Completion

During the follow-up interviews, participants reported the degree to which they had accomplished each of their goals. Of the 50 action items, 78% (39) were reported to be at least partially complete.

There did not appear to be differences in the types of goals which were completed versus those not completed. However, differences in goal completion rates were noted between the two workshop sites. This could have been caused, in part, by the nature of the training site. The more comfortable training site had higher process evaluation ratings and higher rates of goal accomplishment (39% accomplished "most" or "all" of their action items) compared to the second training site which was crowded and unable to be rearranged for easy group interaction. The success rate for its participants was 18%.
Table 1

Action Items and Behaviors Implemented by Participants and Their Outcomes

<table>
<thead>
<tr>
<th>Action Item Categories</th>
<th>Number of Participants Attempting to Implement Item</th>
<th>Total Number of Action Items by Category</th>
<th>Number of Specific Behaviors and Their Degree of Completion</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>None</td>
</tr>
<tr>
<td>1. Utilize reframing</td>
<td>15</td>
<td>21</td>
<td>4</td>
</tr>
<tr>
<td>2. Share Concepts with co-workers</td>
<td>5</td>
<td>9</td>
<td>0</td>
</tr>
<tr>
<td>3. Utilize neurolinguistic programming methods</td>
<td>7</td>
<td>9</td>
<td>3</td>
</tr>
<tr>
<td>4. Utilize communications theory and methods (other than reframing)</td>
<td>8</td>
<td>9</td>
<td>3</td>
</tr>
<tr>
<td>5. Continue personal exploration of workshop topics</td>
<td>2</td>
<td>2</td>
<td>0</td>
</tr>
</tbody>
</table>

|     | 37*                                                                 | 50                                                                 |

*Total is larger than participant group size because many workers included more than one action item in their plans.
Description of Action Items That Were Completed

Nineteen of the participants (90%) completed at least part of their action plans, involving a total of 39 action items. Workers were asked to indicate whether working on an action item produced benefits in certain areas of overall job performance. These performance areas and the number of action items that were linked to these improvements are: (a) overall job effectiveness (90%, n = 35), (b) working with certain clients (92%, n = 36), (c) managing job/workload related stress (79%, n = 31), and (d) working with community resources (38%, n = 15).

Participants spontaneously reported additional positive effects as a result of working on the action items. Improvements in direct practice skills were noted in the areas of improving relationship building by lowering resistance (n = 5), and using humor (n = 1). Improvements were also reported by 11 participants in the area of more personal casework skills. These action items included stress management (3), increased flexibility and/or increased options in casework (6), improved confidence (6) and fewer inhibitions in interviewing adolescents (3). No training participant reported negative consequences as a result of implementing any action items.

Obstacles to Goal Accomplishment

The participants who completed at least some part of their action plans identified obstacles that had interfered with the full completion of their goals. Limited practice with the techniques (17 or 89% of the respondents) and a shortage of time to implement the plans (12, 63%) were the most frequently reported obstacles. Suggestions were made to extend the scope of the training to include follow up supervision to help trainees integrate what had been learned.

While the strength of this evaluation method lies in its ability to motivate and facilitate efforts to apply learning on the job, a few trainees (7, 37%) reported having difficulty implementing their action plans because of personal obstacles such as forgetting the plan, inadequate organization, low motivation, and difficulty breaking old habit patterns.
Description of Action Items That Were Not Implemented

Eleven action items (22%) were not implemented at all. This involved seven participants, and of these, three stated that they needed more help from others. Two stated that they needed more time in order to complete their plans. Three participants stated that they needed more skills, and five trainees required more practice. Three of these participants felt that the workshops could be improved by additional skill demonstration, possibly through use of videotapes and more role playing. Despite the obstacles, most of these respondents were still interested in working on their goals.

Similar to participants who completed their action items, five out of these seven participants encountered personal obstacles such as forgetting to work on the plan, procrastination, or not acting upon their plan out of fear of failure.

Discussion

Study Limitations

A major limitation of the PAPA method is its total reliance on trainee self-report measures. While supervisory reports are valuable supplements, they cannot supply data on all types of action items and they do not wholly substitute for more rigorous pre-post tests or performance evaluations.

Another study limitation has to do with the timing of the follow-up interview. For some participants, the interview may have taken place too early or too late to detect changes. It is also possible that participants revert to old work patterns after an initial period of change. The follow-up procedure, as currently constructed, is unable to monitor these particular shifts.

Finally, the nature of the goals themselves may be a limiting factor. In spite of the guidelines provided, some participants developed more behaviorally specific goals than others. Some action items were also more complicated than others, or involved more steps to complete. Some goals were written to include a specific task, while others dealt with being "more aware" of a topic or skill. These variations were not calculated separately in the follow-up evaluation, yet they may have had an impact on the extent and results of implementation.
Strengths of The Participant Action Plan Process

Fourteen (66%) of the PAPA participants, including those who did and did not complete their action plans, felt that the action plan process was helpful to them in two significant ways: the ability to focus on and attempt positive applications of training material to their work (8,57%), and the ability to apply skills (6,43%). These responses highlight the ability of the PAPA evaluation method to facilitate the transfer of learning to the workplace by specifying the behaviors to be performed and by encouraging workers to attempt new practice behaviors or achieve new practice goals.

Recommendations for Using the PAPA method

Based on the experiences of the adult services training and other applications of the PAPA method, the following practice suggestions are recommended.

Use a phone interview follow-up method. Many training evaluation projects utilize questionnaires as the follow-up tool. It has been suggested that telephone follow-up yields higher participation rates (Austin & Pecora, 1985). Many adolescent therapists are burdened by paperwork requirements and are reluctant to complete surveys, however short they may be. Personal phone interviews yield higher response rates and are often viewed as a helpful follow-up and break from the routine.

Allow sufficient time for action plan development. The PAPA method can be seriously compromised if there is inadequate time during the workshop to develop action items. It is important for participants to think through how they will apply the training and to consider ahead of time obstacles which may prevent implementation. In sharing action items at the end of training, some participants gain new ideas for on-the-job applications which they had not thought of previously.

Allow sufficient time for practice of skills. The PAPA method encourages trainees to apply new skills on-the-job. Unless adequate time has been included in the training to plan and prepare for future work applications, participants may become frustrated in their attempts to implement their action plans. By emphasizing in training the practice of skills, the strength of the
PAPA method to facilitate the transfer of learning, would be enhanced.

*Use reminder letters.* Follow-up methods utilizing "reminder" letters appear to produce high response rates. Some participants felt that sending another copy of their action plan along with the second letter would have been helpful, too.

*Promote supervisory involvement.* Even though participants were encouraged to share their plans with supervisors and supervisors were notified of the action plan process, sharing did not occur as often as expected. Some participants reported that their pain seemed too "personal" or that they didn't want to take up more of their supervisor's time. If trainers want to strengthen supervisory involvement and support, then strategies for promoting more effective linkages will need to be explored.

*Provide follow-up supervision.* Some participants reported that as they implemented their action plans, questions arose as to how to "fine-tune" the application of skills learned during training. They believed that they could have been even more successful if follow-up supervision had been provided, possibly through short review meetings or phone consultation with the trainer. Another possibility that would have the added benefit of promoting supervisory involvement, would be to train supervisors in the skills so that they could monitor and assist the participants as they implemented their action plan.

*Extend the evaluation period.* On-the-job implementation of training skills is a complex task. It demands planning, testing, and refinement of work behavior over an extended period of time. The PAPA evaluation method may be able to show greater overall behavioral change and provide insight into the process of behavioral change by incorporating follow-up evaluations at various times following training. It may be more effective to use two or four-month follow-up contacts, depending on the nature of the training.

**Conclusion**

The Participant Action Plan Approach has been useful in enabling caseworkers to focus on positive applications of the training material to their work with adolescent clients and in prompting and reinforcing on-the-job changes. It has also been
useful in providing on-going feedback on the relevancy of communications theory to the realities of clinical work with adolescents, and in actively involving participants in the evaluation process. When used as an integral component of evaluation procedures, participant action planning is an effective approach for motivating and measuring change. Its simplicity, wide applicability, and flexibility make it a good choice for social service administrators and trainers seeking new approaches to evaluating the impact of training.

References


