



## **FROM INTENTION TO ACTION (FIT: Action)**

September 2012 to April 2013<sup>1</sup>

Submitted by: John Meissner and Andrea Thompson, September 26, 2013

### **Executive Summary**

#### **FIT: Action Program Overview**

The FIT:Action program was created and implemented by the Paul Menton Centre for Students with Disabilities (PMC), and sponsored by the office of the Associate Vice-President (Students and Enrolment) and the Carleton University Registrar. The program is based on the idea that the same interventions that have been found to successfully reduce attrition rates among students with learning disabilities (LD) could also reduce attrition rates among students at academic risk. It has been argued that, like LD students, students at academic risk often fail or quit university programs for reasons unrelated to their academic potential, such as poor motivation, ineffective study habits, mental health concerns, or procrastination. As such, the FIT:Action program is designed to provide these students with vocational, personality and study skill screening, as well as educational testing to identify academic strengths and weaknesses. The FIT: Action program also provides follow-up with Coordinators who develop rapport with students as they work together weekly for one academic year (September to April).

These assumptions have been supported in research conducted over the last two years (see July 2012 FIT: Action Pilot Summary.) This study showed significant improvements in Major and Overall grade point average in FIT:Action students when compared with an equal number of students on Academic Warning.

#### **Target Populations:**

FIT: Action was initially aimed at students who met criteria for Academic Warning (AW). These are students who failed to meet the minimum Overall GPA (OGPA) or Major GPA (MGPA) requirements of their respective programs. Students on AW are required to undergo an Academic Performance Evaluation (APE) at the conclusion of the academic year, at which time failure to reach the minimum OGPA and MGPA levels would result in a one-year suspension from the university. As

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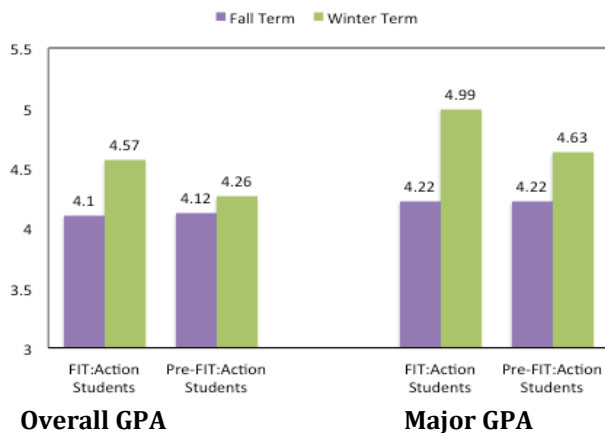
<sup>1</sup> Excerpted from "FIT: Action Final Report 2011-2012 & "FIT: Action Final Report 2012-2013" by Andy Thompson

such, these students are considered to be highly at-risk for attrition. A previous study conducted through the Registrar’s Office showed that Carleton Students on AW have a slightly better than 50% chance of graduation in the seven years following receipt of Academic Warning status.

In 2012-2013, this target group was expanded to provide supports for students who self-identified as being “overwhelmed” (OW) and were willing to make a commitment for a week-to-week supportive program. The goal of advertising to this group was to provide services to the most vulnerable students who saw themselves as being in need of help and who had not accessed other services or felt that they required more support than they were receiving on campus.

With the expansion of this program to self-referred overwhelmed (OW) students FIT:Action program goals had been expanded. For those students who were suffering from a poor quality of life due to mental health problems, such as low-moods and anxiety, our goal was to provide supportive counseling to improve students’ well-being. For students experiencing problems with academic achievement, we wanted to ensure that they moved towards meeting the minimum requirements of their degree and major programs. Therefore, program success is also indicated by the number of probationary students on Academic Warning (AW) who either meet the minimum requirements of their degree program at the end of the 2011-12 academic year or who are able to continue in their studies without being suspended as a result of their academic performance appraisal.

**Table 1 -Pilot Year: 2011-12 AW FIT: Action Students**



Last year a study was conducted with 62 FIT:Action students who were matched by grade and program with an equal number of AW students who attended Carleton University the *year prior* to the development of FIT:Action. FIT:Action students significantly increased their overall grade point average while the comparison group, matched for grade and program, did not. Significant improvements were seen in Major Grade Point Average for the FIT:Action students ( $p < .05$ ) while the comparison group showed a trend towards improvement. In this study, *none of the students in the FIT:Action group were suspended at the end of the year while 22.6 % of the matched comparison group were either suspended or debarred by Carleton University.*

We had wondered about the transferability of this program as we moved to expand the program from one to three sites (the Paul Menton Centre, the Student Academic Success Centre, and Career Services at Carleton University), with new staff, and a different cohort of graduate students seeing more than half of the FIT:Action students, and new incoming students.

We found that the model held up well with the new incoming (AW) students making even greater gains with respect to Major and Overall grade point average ( $p < .01$ ) than in the previous year. Returning FIT:Action students who had begun the program in 2011-2012 came in with a higher grade point average, at a level that guaranteed meeting general degree requirements, and this group made significant improvements in OGPA, but not MGPA in their second year with FIT:Action at Carleton University.

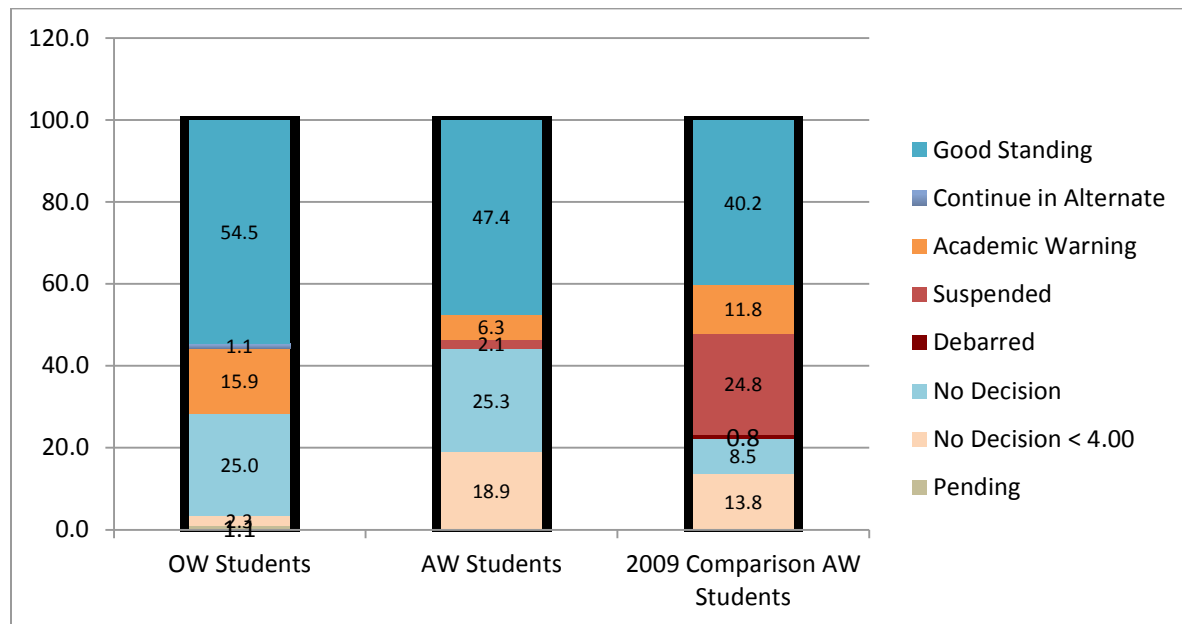
Our self-referred (OW) students came in with higher grades than the AW group and made nominal, but not statistically significant improvements in grades. This group differed from the AW group in having significantly higher (problematic) scores on the BASC2 “Emotional Symptoms Index” and on the Mental Health Composite of the SF-36. More information is presented on this.

**Table 2: Current Year Comparisons of students MGPA and OGPA by Group and Year of Enrollment (with Mean (s.d.))**

<u>FIT: Action Students</u>	<u>2012 OGPA</u>	<u>2013 OGPA</u>	<u>MGPA 2012</u>	<u>MGPA 2013</u>
New Students (AW)	3.82 (1.27)	4.41 (1.33)**	3.63 (1.66)	4.52 (1.73) **
Returning FITA (AW)	4.94 (0.96)	5.49 (.98)**	5.26 (1.75)	5.62 (1.78) n.s.
New/Returning Combined (AW)	4.13 (1.29)	4.71 (1.29)***	4.08 (1.83)	4.87 (1.81) ***
Overwhelmed (OW)	6.40 (2.28)	6.63 (2.13)n.s.	6.24 (2.91)	6.40 (2.78) n.s.

\* $p < .05$ ; \*\* $p < .01$ ; \*\*\* $p < .001$ ; n.s. not significant

**Table 3 - Academic Performance Evaluations of 2013 AW & OW FIT: Action Students with Pre-FIT:Action AW Students**

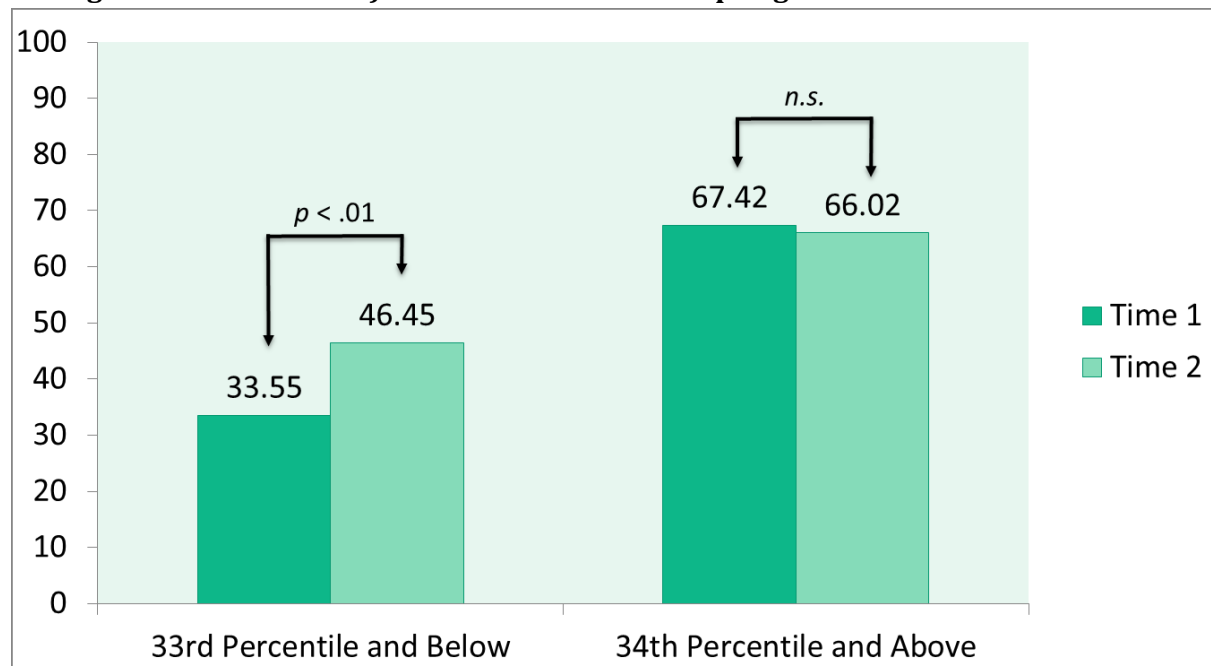


In terms of academic success both the AW and OW groups demonstrated more resilience than did the comparison group in terms of the Academic Performance Evaluation (APE) conducted by the Registrar’s Office. As can be seen in the Table 3 (above), 54% of OW and 47% of AW FIT:Action students received an APE decision of Good Standing or better. This is compared to approximately 40% of pre-FIT: Action students that had similar APE decisions. While over 30% of the pre-FIT: Action students received negative APE decisions (Academic Warning, Suspended, or Debarred) only 15.9% of OW and 8.4% of AW FIT: Action students were given these negative decisions. Although a higher percentage of FIT:Action students were listed as No Decision than the comparison group, most of these students had an OGPA of 4.00 or greater, and thus would have been given a decision of Good Standing if there had been a performance appraisal. Almost a quarter (24.8%) of students in the comparison group were suspended while the suspension rate of FIT:Action students was at 2.1% for AW students.

**Mental Health:**

Student health was measured with the Short-Form Health Survey (SF-36). The SF-36 is one of the most widely used (Turner-Bowker, Bartley, & Ware, 2002) and evaluated generic measure of health and quality of life. The Mental Health Composite of this measure correlates highly with measures of depression that made it an effective screening tool in university students (Kristjansdotter, *et al*; 2010) . Most, more than two-thirds of the students, in the FIT:Action program scored in the normal range or higher on this measure indicating few mental health difficulties. Approximately one-third scored below the average range when first seen in the first semester. By the end of the second semester these scores improved to the mid-average range.

**Table 4 : Changes in SF-36 Mental Health Composite Scores (between below average and average or better Students) between Fall 2012 and Spring 2013**



Not only did the more vulnerable students show improvement in their quality of life as assessed on the SF-36 Mental Health Composite, but this was seen as “dose related” in that students who met with coordinators for ten or more sessions improved significantly while those seen for four to nine sessions did not. Thus the most vulnerable students were able to receive the most benefit in terms of their quality of life in terms of mental health. This is with the proviso that they attended a sufficient number of meetings to reap the benefits of support. It may be that more distressed students were more likely to attend meetings as their needs had been identified at intake, and they were receiving interventions by coordinators who recognized their needs. The SF-36 mental health composite scores are seen as providing a good, albeit brief, screening indicator for disorders reflecting low mood, such as depression. Improvements in these scores reflect greater well-being and support the view that interventions had a preventive element regarding the further development of mental health disorders.

**Table 5: Differences in SF-36 Mental Health Composite Scores Broken Down by Sessions and Scores**

<b>Group</b>	<b>N</b>	<b>Fall Semester M (SD)</b>	<b>Winter Semester M (SD)</b>	<b>F</b>
<b>Number of Sessions</b>				
<b>4-9</b>	35	55.86 (20.77)	57.43 (21.91)	1.33
<b>10 or more</b>	54	57.22 (18.52)	62.13 (22.23)	6.34*
<b>Mental Health Scores</b>				
33 <sup>rd</sup> Percentile and under	31	33.55 (9.68)	46.45 (19.71)	5.78*
34 <sup>rd</sup> Percentile and Above	64	67.42 (11.30)	66.02 (19.80)	0.13

Student ratings of FIT: Action Coordinators indicate strong alliances:

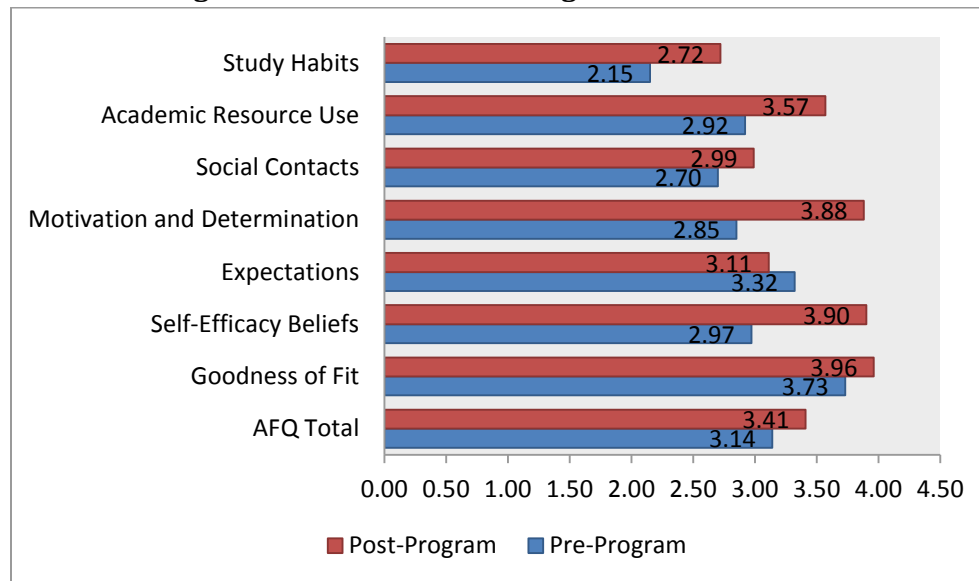
On qualitative measures, students reported a high level of confidence in and connection to their Coordinators who supported the goal of developing a therapeutic alliance. In mid-year responses, FIT: Action students provided the following anonymous ratings (From a 1 (“strongly disagree”) to 5 (“strongly agree”) scale with 2011-2012 scores in brackets and 2012-2013 scores in bold type. These ratings were stable across the pilot and subsequent years. The means of the six program areas indicate that students were, in general, engaged and pleased with the main services of the program. The one area that received the lowest scores, Appropriateness of Academic Courses, is somewhat expected. Part of the FIT: Action program includes counseling students to select courses and majors that best fit with their aptitudes and interests. As such, some students may come to see their current course selections to be unsuitable.

	<b><u>2011-2012</u></b>	<b><u>2012-2013</u></b>
<i>Interactions with Coordinators:</i> “I was treated with respect by the FIT: Action members.”	4.72	<b>4.72</b>
<i>Quality of Information Received:</i> “I trusted the information I received.”	4.61	<b>4.60</b>
<i>Academic Self-Awareness:</i> “I am more aware of my strengths and weaknesses.”	4.2	<b>4.12</b>

<i>Program Involvement</i> "I have attended meetings with my counselor."	4.11	<b>4.72</b>
<i>Appropriateness of Academic Courses</i> "I am taking appropriate courses for my major."	3.79	<b>3.62</b>

Academic Functioning Questionnaire results show *improved study skills on pre-post measures*: The Academic Functioning Questionnaire (AFQ) was designed to assess factors that have been associated with a likelihood of staying enrolled in post-secondary studies. This measure was used again with the 2012-2013 subset of FIT:Action students. Pre- and post-program AFQ data was available for 72 students (40 AW, 32 OW). These students had all been enrolled during the 2012-2013 academic year and had attended four or more sessions with their Coordinator. Pre-program scores were subtracted from post-program scores so that positive t-scores represent an improvement in functioning. Results indicated that, on average, FIT: Action students' had improved scores on Study Habits, Academic Resource Use, Social Contacts, Motivation and Determination, and Self-Efficacy Beliefs. However, no improvements were seen on the other two subtests. These results suggest that, on average, students viewed themselves as having better study skills and making greater use of faculty and peer resources by the end of the academic year, than they had done upon entering the program.

**Table 6: Changes in Academic Functioning Scores at Intake and End of Year Exit Interview**



***Qualitative information obtained on exit questionnaires revealed that students enrolled in the program found it to be a positive and useful experience:***

Almost all (98%) of the students reported that they would recommend FIT: Action to a friend. The vast majority also indicated that they believe FIT: Action helps students graduate. Qualitative analysis of participants' open-ended responses suggested that students perceive several important benefits to participating in the program, including developing academic skills (overcoming procrastination, better study strategies, better understanding of course material), feelings of

increased accountability, having someone to provide support, reduced stress, and a change in attitude towards their own learning.

### **Open-ended Questions**

The students were also asked a series of open-ended questions on the questionnaire. These included questions that allowed them to elaborate on their overall experiences with the program.

#### *Most helpful aspects of FIT: Action.*

Students were asked to describe what was most helpful about the program. The most common responses described *help with planning and meeting deadlines* as the more helpful aspect of the program. The second most popular response was related to *having someone* to meet with regularly who would motivate them and hold them accountable for meeting deadlines. For some students *having someone* to share their achievements and successes with was also helpful.

#### *Least helpful aspects of FIT: Action.*

Most respondents chose to not respond to this question or indicated that there was nothing that was not helpful about the program. 3.1 % of student on Academic Warning and 6.0 % of students in the OW group reported that the program, on the whole, did not meet their expectations. These students typically described an aspect of the program or coordinator relationship that they felt was lacking in quality or effectiveness. Other students found aspects of the *assessment* to be the least helpful, because these assessments were seen as unnecessary or irrelevant to their current situation.

### **Conclusion:**

The FIT: Action program is having a positive impact on the academic and more general functioning of students taking part in the program. Significant improvements were seen in AW students' OGPA and MGPA scores over and above those seen in matched-group of students on Academic Warning the year before FIT: Action was first implemented. Positive changes were seen in FIT: Action students' study skills, the amount of time they spent on school work, and their ability to connect with professors, TAs, and peers. Clear evidence of a strong therapeutic alliance between students and Coordinators was apparent in students' evaluations. Although the grade improvements were not seen for the OW students, they did show health-related gains consistent with the goals of the program. Those students who initially reported lower levels of psychological well-being on the SF-36 quality of life measure demonstrated significant improvements if they had attended 10 or more sessions. These results indicate that FIT: Action can help underperforming students improve academically as shown by grades and Academic Performance Evaluations, and distressed students can obtain a greater sense of psychological well-being over time.