

## Chapter 2

# The Group-Centered Approach

*Two students enrolled in a group-centered after-school reading program at the same time. They were both 9 years old, but neither one could read. Neither student even knew the consonant or the vowel sounds. One student had been diagnosed with dyslexia; his parents were college graduates who tried desperately to help him at home. He also received special tutoring at school for dyslexia but was still reversing letters and trying to read from right to left across the page. The student was convinced that he would never learn to read. The second student came from a low socioeconomic neighborhood, single-parent home. The parent could not read and the child was convinced that he too would never learn to read. Unfortunately, this student had been exposed to cigarette smoke, alcohol, and crack cocaine by his mother during pregnancy. The student showed cognitive processing problems typical with prenatal drug use. The Reading Orienteering Club after-school program is a year-long program. At the end of the year, the first student (diagnosed with dyslexia) was reading beginning chapter books, first-grade level, and beyond. The second student (prenatal drug exposure) could read a vowel-clustered story at the pre-primer level, but was still struggling. How could the same program, same time, same location, yield totally different results with two different students? Does it mean that there is something wrong with the program?*

Even though prevention programs measure success in terms of the degree of change that a program produces (Kulic et al. 2004), change will not always be the same for every student. This is still true for a group-centered prevention program, and it does not mean that your program is a failure. One of the major advantages of the group-centered approach is that it enables you to individualize instruction in a group setting. We must remember that students are individuals. They bring to the after-school program their own individual needs, problems, and learning styles. Some children will need more time than others to learn the same material. The group-centered approach enables you to design an after-school program which gives students the

time and support that they need in order to learn and change their behavior. The key is to make sure that every child is indeed improving, even if that improvement is sometimes much slower than others in the group.

That two students lack reading skills does not mean that they have the same learning needs or problems. No two students, not even identical twins, learn the same way or in the same time span (Segal 2000). Both of the students in our opening example definitely needed help, but they had two different learning styles and problems. The group-centered approach allows you to work with both of these students in the same after-school group without having to pull students out of your after-school program and place them in special groupings. The group-centered approach is more than just a group that meets after school. The group-centered approach creates for you an after-school program that meets the individual needs of all students.

## The Need for Individualized Instruction

Public schools offer a one-size-fits-all approach to learning. Even when they use diversified strategies and learning adjustments made for special needs, schools still only offer one method for learning (Riggs and Greenberg 2004). Students need more. The one-size-fits-all approach to learning and demand for documented change through mandated testing have destroyed teaching and learning as they should be conducted (Blaunstein and Lyon 2006). Numbers—test scores—do not always accurately measure student learning (Sternberg et al. 1997). Therefore, we want to look at individual change. We want to evaluate each student in our program as an individual learner. We do not want to compare one student's progress to another; we want to stay focused on the individual. Schools often talk about diversity and diversified learning, but I like to use the term “individualized learning” because we must continuously remind ourselves that students are distinct individuals. No two students are alike, and no two students learn or respond to learning interventions in the same way. We must not just diversify education and categorize students into groups. We must instead individualize their education.

Although research tells us that children learn how to read better when they work in small groups, I have a student who has only been able to learn new vowel sounds and vowel clusters when I work with him one on one. Yes, he is definitely benefiting from his participation in my *Reading Orienteering Club*, but he is only able to learn a new skill through a one-on-one approach. His social skills have improved from group involvement; his group behavior has totally changed for the better; his interactive skills have improved; he is much more motivated, and his ability to work with others in a group has greatly improved. Involvement in a group-centered program has significantly contributed to the student's overall improvement, but he still needs one-on-one teaching strategies to learn a new vowel sound or vowel cluster. The group-centered approach can provide this individualized learning opportunity through learning centers that include volunteer helpers at each workstation.

## Individual Learning Needs

Every single student in your after-school program is an individual. Each one has distinct learning needs. We must understand our students' specific needs and develop a way to meet each and every individual need. We cannot simply organize after-school groups and just expect learning to take place automatically. The group is our medium for change. The group-centered approach is our tool for bringing about group and individual change.

*Learning disabilities.* Ten percent of children in the United States have a learning disability. A learning disability is neither a form of mental retardation nor an emotional disorder. A learning disability is a neurobiological disorder marked by how the brain processes and stores information. Low socioeconomic status, poverty, environmental influences, or cultural and/or acculturation problems do not cause learning disabilities. We do not know the exact cause of learning disabilities. We do know that learning disabilities are not caused by laziness or a lack of intelligence. Such famous people as Albert Einstein and Walt Disney were said to have learning disabilities. There seems to be a genetic or a hereditary link with learning disabilities, and there is a definite link between learning disabilities and how the brain develops. Most children with learning disabilities can succeed if they get proper instruction. Neither direct instruction in the classroom nor even computer-based learning seems to be effective with many students who struggle with learning disabilities (Slavin 2002). Hands-on learning and positive interactive groups seem to work better (Graham and Harris 2003). Students with learning disabilities need a program that can help them reorganize, retrain, and in some instances, as research has shown, generate new brain cells through intensive skill-building training sessions (Draganski et al. 2006). The group-centered approach allows you to individualize your teaching strategies to meet the specific needs of each student.

*Prenatal drug effects.* It has been estimated that about 475,000 newborn babies born every year have been exposed to crack cocaine; such exposure causes a variety of developmental deficits (Goldschmidt et al. 2008). The brain begins to form almost from the minute of conception. By the fourth week, the brain makes up almost 50 % of the embryo's total size. By week five, the brain has brain waves and produces about 100,000 neurons every minute (Nelson and Bosquet 2000). An infant is born with between 100 and 200 billion neurons. Such neurons and the connections between these neurons are what enable the child to learn (Merzenich 2001). Anything and everything consumed by the mother during pregnancy affects the development of these neurons and their connections. Any kind of aspirin or ibuprofen taken during pregnancy affects the development of the neurons in the unborn child's brain. Any kind of drugs or medications, even birth control pills taken by the mother before she realizes that she's pregnant, can have a harmful effect. Illegal drugs are even more dangerous because we do not know the strength, purity, or substances with which they are mixed. "Crack" cocaine, for example, can cause a lower IQ level, leading to problems with language development, and cause

difficulties in comprehension, expressing ideas, hearing, and attention (Lewis et al. 2004). Any amount of alcohol, even as little as one ounce of wine or beer, can damage the unborn fetus's brain, particularly affecting verbal skills, attention, and cognitive processing (Cornelius et al. 2002). Nicotine reduces oxygen levels, and even secondhand smoke can damage the unborn child. Marijuana usage during pregnancy can cause the child to have problems later in spelling, reading, and comprehension (Goldschmidt et al. 2004). I call it simply SAD, because smoking, alcohol, and drugs make many children start life and school with a disadvantage, and it truly is SAD when you remember that prenatal drug damage can be completely prevented. This is as true for wealthy suburban neighborhoods as for low socioeconomic communities.

*Autism.* Autism spectrum disorder (ASD) is actually a complex range of neurodevelopmental disorders. A milder form of ASD known as Asperger's syndrome is more common among students identified by the schools. Most students with ASD have some degree of social impairment (trouble communicating, especially with others in a group) and sometimes show signs of repetitive or stereotypical type behaviors (Ozsivadjian and Knott 2011). We do not know what causes autism. ASD seems to affect more males than females, but there is not a cultural, ethnic, or socioeconomic link. The needs of students with ASD will vary greatly; therefore, it is impossible to prescribe a specific program or treatment. Structured group involvement does seem to help improve social skills (Koegel et al. 2012). For example, when a student diagnosed with ASD first arrived at my after-school program, he would not sit with the other students, did not want to work in the same room as other students, and would not let anyone touch him—not even to put on a name tag. After a few months in the program, he was moving from learning center to learning center, sitting in a chair beside others at the table, and even giving hugs to the staff when he arrived. After 2 years in the program, he began making friends, talking with other children. He has applied more effort to the task of reading. He even completed, without special assistance, a pop-up book about traveling to the moon. He traveled around the room to all eight workstations and completed each task. To make his pop-up book, he had to cut out and decorate a paper rocket with captured words, write two sentences on facts that he learned about the moon, and then write a story to go with his book. The project also includes fine motor skill development because the children are required to trace patterns and cut out the pieces for their pop-up book. Fine motor skill development is one of this student's major problems; so completion of this project was a gigantic step forward for this student. Today, his actions in a group are much different than when we first met. He even talks about "his friends." A group-centered structure helped to reduce this student's anxiety, enabling him to begin learning to work with others. Such changes in group behavior would not have been possible in a one-on-one tutoring situation; a group-centered structure was essential.

*Attention deficit hyperactivity disorder (ADHD).* ADHD is the most common neurobehavioral disorder diagnosed for children (Castle et al. 2007). The number of children diagnosed and prescriptions for stimulant medications are increasing

daily (Bryant et al. 2003). In your after-school program, you will most likely have several children who have been diagnosed by the schools as having ADHD. I will not, in this book, enter the debate on whether medical or nonmedical intervention is best. All engaged in the treatment of ADHD support the need for nonmedical interventions to improve impulsive and distractive behavior in the classroom, interactions with peers, reading and math failure, and parent and family relations (DuPaul and Weyandt 2006). I strongly encourage parents to try structured non-medical interventions before trying medication. Every child is different, but with all drug therapies there are risks. To me, it makes sense to try nonmedical interventions first. Children diagnosed with ADHD need programs that emphasize step-by-step procedures and active hands-on learning (Jensen et al. 2007; Trout et al. 2007). Working in a group gives children diagnosed with ADHD the opportunity to learn and test new behaviors in a supportive group (Strayhorn 2002). The group-centered approach provides the structure, cohesive support group, and active hands-on learning interventions needed by children who have difficulty controlling their actions.

## **How the Group-Centered Approach Meets Individual Learning Needs**

A group-centered prevention program stresses improving group behavior, enhancing peer and group interactions, and reducing academic failure. The group-centered approach can provide a strong supportive learning environment in which students can work and learn without the fear of rejection, but your after-school program must also teach organizational skills, problem-solving, and ways to deal with frustration. It must help children foresee the consequence of their actions and learn ways to control impulsivity, deal with distractions, acquire group skills, and change behavioral problems while incorporating new approaches to learning (Chard et al. 2002; Simonsen et al. 2010). Learning centers in a group-centered structure can help bring all of these variables together.

An example can be taken from the *Reading Orienteering Club*. This hands-on program encourages children to organize and assemble projects using a step-by-step process. The value of step-by-step instruction is well documented (DuPaul and Stoner 2004). For example, the children travel around to each learning center making and collecting word strips for the words learned that day. These reading strips are then attached as legs to a paper *Andy the Ant* puppet. The children organize and keep track of the pieces for their puppet as they travel from station to station. This is an important task for all children but especially children who struggle with distractibility and organization. They follow the step-by-step procedures to assemble their puppet. This lets the children practice personal organizational skills and group problem-solving as they figure out how to put the puppet together. They get lots of practice coping with frustration and controlling impulsive actions. Children are also able to see the consequences of their actions when they try to jump ahead and not

follow directions correctly. Once the puppet is assembled, the children work together in teams to present a puppet play using their puppets. This type of hands-on learning center project provides practice with group skills and opportunities to monitor individual behavior. Children learn the vowel cluster and phoneme awareness skills they need in order to improve in reading and the social skills needed to work successfully with others in a group through one single project. This is the group-centered approach: focusing on individual needs while working together in a group and taking advantage of the therapeutic power of group process. Your program must meet the needs of all participants, not just a few. It is not easy to design a program that meets everyone's needs, but the group-centered approach for after-school programming can help you attain this goal.

## **How to Set Up and Develop a Group-Centered After-School Program**

Designing or selecting the curriculum for your after-school program is one of the most important steps in the program development process. As explained earlier, simply buying an evidence-based program will not guarantee your success; therefore, we will focus on writing our own group-centered program. A group-centered program combines learning and counseling, but at this point in the design process, we will focus on developing the academic focus first. We will discuss how to incorporate the therapeutic aspect in Chap. 3. It is important to learn the group-centered approach one step at a time so that we do not delete any of the essential components of the group-centered method.

We'll begin by examining the problem that you selected in Step 1: *What type of problem will you seek to change?* As already discussed, I chose reading and will therefore use reading as my example.

The group-centered approach uses only program packets. Instead of having an outline for the program or a list of objectives, a program packet provides exactly what is said or done in the program. Everything is included in the program packet. The director of the after-school program simply opens the packet and lays out the booklets when they're ready to use the program. The packet includes learning center instructions, games, stories, patterns, and puppet plays, everything that is needed to run the program. The person in charge of the after-school program does not have to interpret the program or create materials for the program. The packet is complete. Using a ready-to-use program packet helps to ensure that both the hands-on at-risk teaching methods and the motivational group counseling techniques are used correctly because they are written into the learning center workstation booklets.

If you are using learning centers as we are in our program design in this book, your program packet will be your collection of learning center workstation directions and information for participants. Therefore, our next step is to learn how to write and set up a group-centered learning center.

## **Step 2: Designing a Learning Center to Bring About Academic Improvement**

Identify the academic problem you wish to change. Why is the academic problem important for your students?

How will you bring about change? How will you use a group-centered approach?

How will you measure change?

What group techniques will you use?

What teaching strategies will you implement?

What kind of motivational strategies will you use?

Will you include communication strategies to help improve oral and written communication?

How will you implement your program?

What are the advantages of your program plan? What are the disadvantages?

What kind of curriculum will you use? What are the advantages of writing your own curriculum?

How often would your program meet?

Do you have a theme for your program? How will that theme be incorporated throughout the year-long program?

Develop a format for your learning center workstations. Be consistent. Develop a format that can be used throughout the year so that the students become familiar with the format that you are using.

## Step 2, Design Example

*Academic problem.* Reading failure is the problem that I have chosen to change through the *Reading Orienteering Club* after-school group-centered prevention program. Reading is an important academic concern because learning to read is essential for success in life. Sixty percent of children in the United States have trouble reading, 20–30 % say reading is the most difficult task they must learn in school, and 38–40 % never learn to read (Lyon 1998). According to the *Nation's Report Card*, 40 % of all fourth-grade children read below grade level (National Assessment of Educational Progress 2009). This is not a new problem, and there has not been a significant improvement in reading scores in 2011 (National Center for Education Statistics 2011). Reading failure is rampant and continually unchecked. Children struggling to read in the first grade begin to show a decline in self-efficacy (belief that they can read) by the middle of the year, but 90–95 % improve if effective instruction begins before the end of first grade (Lyon 1998). Unfortunately, without effective instruction, 75 % of the children who fail to learn to read in first grade never learn to read (Lyon 1998). Research supports four causes for this failure: lack



of phoneme awareness, low comprehension, lack of motivation, and the classroom teaching approach (Lyon 2002).

*Plan for bringing about change.* My design will emphasize the group-centered approach incorporating individualized instruction through a therapeutic group setting. Working in a group can be an excellent way to help children who have trouble controlling their actions learn to work in a group environment. I used a group painting session to help teach individual and group control. Everyone sat around the table in a circle with the painting in the center. Everyone was allowed to paint but only one person at a time; no one was left out, but children were called on to paint (flowers or trees) by how well they modeled the desired behavior of waiting quietly for a turn. No reprimands or punishments were issued, only praise as each child took a turn. This soon became an accepted routine and even the most fidgety students soon learned to sit quietly for a turn. Sometimes the children received specific assignments of what to paint: six blades of grass, three trees, or a specific flower. Each simple painting skill was demonstrated for each child.

Skill in painting was not the objective. The goal was to make a puppet stage of which the children could be proud. Some children might find it difficult to control their actions while painting without an enforced group structure, and the group-centered approach proved helpful for developing group control strategies. The day ended with free time after the structured painting session. Members could paint whatever they chose as long as they shared with others. Free time helped to release stress after the controlled activity.

*Measuring change.* As I gather together the students who will participate in my after-school program, I need to conduct a pretest to determine their skills and abilities at the start of my program. I also need to learn more about their background: What brain development problems and cognitive processing problems might students be bringing to the program? Are there any diagnosed problems or concerns? Student improvement must go beyond the after-school program to transfer back to the classroom (Duckworth et al. 2007), continuing into lifetime change (Obiakor 2001). It is important that the students are able to see and understand that they are improving. Pretesting, periodic follow-up testing, and a posttest at the end of the year are essential components of my after-school program. This is not so I can match a standardized test score or give a grade, which are negative measures of what the student has or has not attained. Instead, I want to chart improvement, regardless whether the improvement is slow or a huge leap.

*Group techniques.* I decided to create a fun, hands-on learning environment because the climate of a group is extremely important (Ogrodniczuk and Piper 2003), especially in a year-long after-school group (Nastasi et al. 2004). I definitely want to incorporate the therapeutic power of group process (Vacha-Haase and Thompson 2004), and I want the real-world environment where children problem-solve, test ideas, and incorporate new ways of interacting together (Finn et al. 2005). The group structure will also provide a setting in which at-risk children can resolve the everyday problems of childhood, such as seeking acceptance,

coping with peer pressure, and learning to handle teasing and bullying (Gullotta et al. 2009).

*Teaching strategies.* I will use learning centers with step-by-step directions so that each student may work at their own individual pace and spend more time where they need the most help. There will be challenge steps at each learning center for those ready to tackle harder problems, and one-on-one guided tutoring for those needing extra help. I will stress interaction and cognitive skill-building (Granger 2010; Hirsch et al. 2010; Smith et al. 2010) to gain the most benefit from my group structure and my hands-on skill-building interventions. Word recognition is the first step to successful reading (Morris 1999); therefore, I want to stress word recognition skills and how words are composed by letter sounds. Such skills will help motivate students and also serve a protective function as we work step by step to rebuild their self-efficacy (Coie et al. 1993).

I adopted a vowel clustering approach for teaching beginning reading skills (Clanton Harpine 2010b). Decoding is said by many to be the most important skill needed for reading. My learning centers will stress encoding and decoding skills so that the children will learn how words are composed. Therefore, I will incorporate reading, writing, and spelling into my skill-building sessions. This will help students with learning disabilities and cognitive processing problems, because students with learning disabilities have trouble with phonological decoding, encoding, and fluency (Bryck and Fisher 2012).

Students with prenatal drug abuse show a definite need for intensive cognitive processing training. Research shows that the gray matter of the brain (where processing occurs) can be changed through skill acquisition (Torgesen et al. 2001). Neuroimaging studies also show that the white matter (the wiring or the connections in the brain which allow communication to, from, and within the gray matter) can be changed for poor readers through intensive instruction with phonological decoding skills (Draganski et al. 2006; Keller and Just 2009). Intensive instruction in encoding improves expressive writing (Gersten and Baker 2001). The white matter helps the brain to learn, but simply learning to read and write is not enough. Intense skills training can increase the connectivity or organization of fibers within the brain (Keller and Just 2009) and help at-risk students learn (Meyler et al. 2008). Therefore, I stress phonological awareness, encoding and decoding, vowel clustering, reading, writing, spelling, and comprehension.

*Motivators.* Intrinsic motivation, a positive atmosphere, and active hands-on learning will combine to create a fun, active, but also a very intensive skill-building program. Hands-on projects and themes will serve as motivators. My program will not use any kind of prize or reward system. My design will instead stress intrinsic motivation (internal desire not based on rewards or incentives), active hands-on learning, structured skill-building, anger management, cooperation, social skills, and group process with emphasis on interaction and cohesion. I will go into more detail on why I stress intrinsic (internal) rather than extrinsic (rewards) motivators in Chap. 4; my program plan will not include any form of extrinsic reward, food, candy, or prizes. I will use only intrinsic motivators.

*Communication strategies.* Action stories, puppet plays, group painting projects, and a pretend TV show will help the children practice oral communication skills. Structured skill-building activities, social skills training, step-by-step instructions for each task, cognitive processing skills necessary for learning to read, phonetic decoding skills, and group process techniques stressing interaction and cohesion at the learning center workstations will also stress small group work. The children will have an opportunity to work individually, in small groups, and as a total group. The variety of writing assignments (stories, pop-up books, and puppet plays) will also help students develop their writing skills.

*Implementation.* Regardless of how well designed a program may be, the outcomes will be less than intended if the program is poorly implemented (Durlak and Dupre 2008); therefore, I wanted to develop a means for enhancing implementation. I will use program packets (Clanton Harpine 2011a, b). A program packet contains ready-to-use hands-on learning center booklets which have step-by-step instructions for students and those directing the program. The benefits to ready-to-use program packets are obvious. Ready-to-use packets will insure that the programs are used as intended because workers and students will be reading directly from the learning center instructions. Program packets will also reduce preparation time for my volunteer after-school staff conducting the program.

*Advantages and disadvantages of my program plan.* Reading failure and retention increase the likelihood that a student will drop out of school before graduation (Nastasi et al. 2004). Reading failure has also been directly linked with classroom discipline problems, bullying and aggressive school violence, delinquency, adolescent substance abuse, and the development of depression and anxiety (Catalano et al. 2003; Greenberg et al. 2001). Dropping out of school increases the likelihood of turning to crime (Snowden 2005) and not being able to maintain adequate adult employment (Nelson et al. 2003). Reading failure is a lifelong problem. By reducing reading failure, I will help to prevent these problems from occurring with my students. Helping to change a student's life and improve their chances of attaining a better way of life as an adult is a definite advantage. One of the disadvantages is that group-centered program packets take time to write, but, once I have written the program packet, I can use it at multiple sites and for several years without the need to rewrite. Program packets also alleviate one of the major staff concerns with present-day after-school programs. Researchers have identified recruitment and retention of staff as a major concern. Many after-school programs have high staff turnover (Sheldon et al. 2010). My volunteers change every semester and sometimes every session. Program packets enable my after-school program to stay the same regardless of the staff working on a particular day. This will be particularly important in my program because I use volunteer college students.

*Curriculum.* The year-long *Reading Orienteering Club* curriculum is distributed as a program packet (Clanton Harpine 2013a). The curriculum consists of eight learning centers which can be used in any classroom or cluster of rooms with no prior

setup. Everything is contained in eight workstation notebooks (program packet). All you need is the program packet with the learning center notebooks, basic school craft supplies (scissors, glue, paper), and a volunteer staff of at least ten people (eight learning center workers and two codirectors who float from room to room offering assistance where needed). The volunteers do not need special training because the teaching strategies and counseling interventions are written into the learning center instructions. The program packet contains ready-to-use booklets, not a manual, but the actual program, complete with learning center instructions. University undergraduate students and community volunteers (even middle school and high school students) serve as reading tutors in my program to assist the children at the workstations. Program packets make staffing my program easier because the university helpers are often drawn from several different college classes, and are not the same every week. The university students and community helpers are able to sit down, read over the instructions, and start to work with the children. I need a curriculum (program packets) that volunteers can literally walk in and use.

*Schedule.* My program will meet twice a week for 2-hour sessions after school. My program could easily meet 5 days a week, but our budget at this time will not support a 5-day program. The program packet is written to accommodate any combination of after-school sessions: twice a week or 5 days a week.

*Theme.* The first step in writing a ready-to-use program packet is to develop a theme. My theme for the *Reading Orienteering Club* is that of an explorer using a compass to chart their way through *tricky words*. I have North, East, South, and West compass signs in the hallway to direct the children to the different learning centers. I use *vowel clustering* throughout the year to take the children from the *short A vowel sound* at the beginning of the year to compound and multi-syllable words at the end of the year. There are *Word Master* projects which help the children master each vowel sound, and there are 12-session themes which help focus and motivate students to learn more about a particular subject, such as the ocean or outer space exploration. The children read stories and learn about the *ocean* while they are practicing the vowel sounds for the letter O. They paint a coral reef puppet stage and make an *Ollie Octopus* pop-up book. The story themes are fun and help the children apply the principles of *vowel clustering*. The learning center workstations teach the children each vowel sound, stressing encoding and decoding in order to help the children learn to read, spell, and write correctly. Students work at their own pace. Everyone starts at Step 1, and there is always a *Challenge Step* to encourage those who are ready to try something new.

*Format.* I continue using the compass points for the eight learning center workstations: North, Northwest, Northeast, East, Southeast, South, Southwest, and West. Since I use a cluster of rooms, I mark the rooms in the hallway with compass poles: North, East, South, and West. Everything is portable in my program because the rooms are used by other groups throughout the week. I distribute 3-ring notebooks to the rooms with corresponding compass designations. Craft supplies are

distributed as needed or placed on a rolling craft cart for workers to gather. I use step-by-step instructions for each learning center and always include a challenge step. The children must choose to take the challenge step; it is not required. An example of my format page for each learning center station is as follows:

### **NORTH**

*Step 1:*

*Step 2:*

*Step 3:*

### **ARE YOU READY FOR A CHALLENGE?**

*Challenge Step:*

## **Real-World Applications**

### ***Observational Extensions***

Go to the classroom, and observe students working on the academic problem that you wish to include in your after-school program. Do not go with the intention of copying what the teacher is doing. You want your program to be totally different from what the children do all day in school. Do take note though of what works with the children and what does not. Remember you are developing a hands-on program.

### ***Troubleshooting Checklists for Organizing a New After-School Program***

1. How many learning centers will you use?
2. Will you have a helper at each learning center?
3. Have you taken learning disabilities into account? How will your program design meet the needs of these students?
4. Are you working with children who have prenatal drug exposure? How will your design meet the needs of these students?
5. Will you administer a pretest? How will you measure progress throughout the year?

## **A Ready-to-Use Group-Centered Learning Center Intervention, An Example of How to Build Teaching Strategies into a Learning Center Format: I Am Happy**

This is an example of an easy-to-use learning center workstation that stresses phoneme awareness, comprehension, intrinsic motivation, and a hands-on teaching approach. Everything needed is included at the workstation. The sentence is written on sentence strips, ready to lay out on a table or the floor, and included in the packet. The stack of cards distributed to the children are also printed on card stock and included in the packet. The word cards include apple, slice, cat, ice, sat, it, and take. The letters are intentionally not the same as in the sentence because I want the children to concentrate on the letter sound. They have practiced this in previous sessions; therefore, it would not be a new concept to them, just more practice. For example, *apple* could be matched to *am*, *happy*, or *have*. Each word uses the *short a vowel sound*, but uses different letters to create that sound. *Take* may not be matched to *have*, even though it uses *silent E*, because it uses a totally different vowel sound.

By playing the game, the children are being taught to read and analyze how words are composed—encoding and decoding. Matching letter sounds teaches phoneme awareness. All the volunteer worker needs to do is help the children read the directions and play the game. Giving an open-ended response to a question requires comprehension and assimilation of what that question means to the child. The fun nature of the game is intrinsically motivating. Hands-on teaching strategies not only teach phoneme awareness but also reinforce positive actions toward others (counseling) and teach proper group behavior (counseling) as the children work together to play the game. You will notice that the game requires children to list friendship traits, not names. You never want to have the children play favorites by identifying who they like as a friend. It's like choosing teams; someone is always left out or the last one to be mentioned. That is not what you want at all. Therefore, make sure that you do not write your learning center workstation directions in such a way that children could embarrass someone and could have one person chosen over another, that someone might laugh at someone else, or that someone in any way might hurt another's feelings.

I always include a challenge step, but the child must choose to take the challenge. Some children may not be ready for the challenge; for those who struggle with the initial vowel task, reshuffle the first cards and let them use the first deck of playing cards and match a different word. For those who want to take the challenge, help them work with the words or do the words together as a group: caterpillar, hideout, action, acrobat, interesting, and iodine. This learning center station teaches phoneme awareness, motivates children to learn, requires comprehension and understanding, and uses group interaction and hands-on teaching strategies. The children also practice working together as a group, reading out loud, and stressing positive thoughts and actions. This is an example of the group-centered approach. Volunteers really can walk in with the children, sit down, and use the learning center instructions in the packet to teach both academic and counseling strategies.

## I AM HAPPY

*Step 1:* We have been working on vowel sounds for the letters A and I. Today, we want to play a game together using these two vowel sounds. The first rule is to remember that we are a team, and we always work together and include everyone in our game. No one is ever left out or laughed at. We work together and help each other.

*Step 2:* The second rule to remember is that we're matching vowel sounds, not letters. Remember to watch out for silent E. Sometimes it changes the preceding vowel sound and sometimes it does not. So be careful.

*Step 3:* The third rule in our game is that everyone reads the sentence, lays down a card next to the vowel sound it matches, and then fills in the blank with a positive friendship trait. For example, I would read the sentence: "I am happy to have a nice friend \_\_\_\_\_." I could fill in the blank by saying, "who shows they care, who smiles, who helps me, who is always kind, who likes to work together, who shares fairly," or something positive of that nature. Then, I'd match my card. If I had drawn the card with the word *apple* on it, I would match *apple* to *have* in the sentence. The word *apple* and *have* both use the same *short a vowel sound*. Remember, we are matching vowel sounds, not letters.

*Step 4:* Now that we know how to play the game, let's get started. Take the sentence strips from the packet and lay them either on a table or on the floor, wherever there is space. Make sure that the sentence reads: I am happy to have a nice friend \_\_\_\_\_.

*Step 5:* Place the word cards upside down and have everyone draw a card, just one. No, you may not trade cards. Once you have drawn a card that is the card you are to play the game with. Go around the circle; make sure that everyone gets a turn. And remember, there's a time to be funny and there's a time to share serious thoughts. This is a time to share serious thoughts; something you really feel. Only positive friendship traits count in this game. Work the challenge step or go to the next station. Thanks for playing the game nicely with others.

## ARE YOU READY FOR A CHALLENGE?

*Challenge Step:* If you are ready for a challenge, take the challenge cards from the packet. The challenge cards contain multi-syllable words. Each challenge card matches a word in the sentence, but they are very tricky. Be careful. Work together. Help each other. Remember, we are a team, and we always help each other.

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