DROP-OUTS FROM AN AMERICAN INDIAN RESERVATION SCHOOL: A POSSIBLE PREVENTION PROGRAM*

JOHN L. DELK

The University of Arkansas Medical Center

GERALD URBANCIK, CECIL WILLIAMS, GREG BERG AND MARVIN W. KAHN

The University of Arizona

PROBLEM

A study in progress is being conducted by members of the Papago Psychology Service, a rather unique community mental health center on the Papago Indian Reservation. The Papago Psychology Service was developed by faculty and students of the Department of Psychology, University of Arizona, in close cooperation with the Papago tribe and the Indian Health Service. From its inception, the Papago Psychology Service has stressed the importance of using Papago consultants in defining disturbed behavior, using Papagos as advisors and coordinators in the program, and using Papago personnel (including medicine men) in providing mental health services to the Indian community. One such cooperative effort is aimed at investigating the variables underlying the high rate of school drop-outs among Indians.

METHOD

The design of the study allowed the investigators to compare Papago students who had dropped out of the Indian Oasis School (located at Sells, Ariz., one of the reservation's larger settlements) with students who had remained in school. Comparison was made through intensive study of certain characteristics of home life and school performance.

The names and permanent school records of 7 students who had dropped out of Indian Oasis High School were obtained from the school counselors. A second group of 7 students, referred to as the continuing group, was selected from the school body on the basis of similarity to the drop-out group in age, sex, and grade level. The drop-outs' ages and grades at the time they left school were matched with the then current ages and grades of the continuing group.

Various methods were employed to obtain information about the 14 Ss. The permanent school records revealed data relating to academic achievement and such matters as attendance and teacher relations. B. I. A. Social Services was consulted for information regarding arrests, marriages, pregnancies, sibling delinquency, or other family difficulties of the students. Most importantly, interviews were conducted with the mothers (or guardians) of the students to obtain pertinent personal and home information. These interviews followed a written outline and were conducted at the homes of the students by one psychology graduate student and one Papago Mental Health Worker. Interviewing was conducted in the native Papago language when necessary. Questions asked covered the areas of individual behavior, habits, physical problems, life goals, attitudes, peer and teacher relations and family relations.

RESULTS

The findings clearly point to certain home and family patterns as a primary factor in the backgrounds of drop-outs, but not in those of the continuing students. These results are quite similar to the major findings of a national survey by Bachman, et al. In particular, lack of parental control was found to be characteristic of 5 of 7 of the drop-outs (p < .01), but was not a factor in any of the continuing students. Similarly, 4 out of 5 drop-outs had a history of arrests for intoxication (p < .05), 3 females had children born out of wedlock, 2 drop-outs were married.

*This study is based on the suggestions and preliminary planning of the Mental Health Advisory Committee of the Health Planning System of the Tucson office of the Indian Health Service.
had siblings who were delinquent, and one drop-out had an alcoholic father. None of these Home and Family factors were present in any of the continuing students.

The school data are not as discriminating between drop-outs and continuing students as are the home and family data. The school data that discriminate best are truancy (4 of 7 drop-outs, \( p < .05 \)), mild mental retardation (3 of the 7 drop-outs), desire to leave school (3 of 7 drop-outs), aggressive behavior (2 of 7 drop-outs), withdrawal from peers (1 of 7 drop-outs), and being two or more years older than peers (1 of 7 drop-outs). None of these School factors were present in any of the continuing students. However, other School data reveal that continuing students had some school difficulties (low G. E. scores, repeating one or more grades, reading problems, etc.) but to a lesser degree than the drop-outs.

**Summary**

Two primary factors underlying dropping out of school were found — lack of parental control and mild mental retardation. Based upon these findings a program to prevent dropping out of school was developed by the Papago Psychology Service which involved the identification of those students with intellectual deficiency for special education and tutoring, the counseling of parents in regard to their role in maintaining control over the student’s behavior, and establishing group psychotherapy programs for potential drop-outs. Preliminary data after one year’s follow-up indicate a decline in delinquent behaviors and no new school drop-outs among the target group.

**References**


---

**AUDIENCE REACTIONS TO THE SUICIDE PLAY QUIET CRIES**

**ERWIN D. JACKSON AND CHARLES R. POTKAY**

**Western Illinois University**

**Problem**

*Quiet Cries* (QC)\(^1\) is a one-act stage play about suicide that has been viewed by a number of audiences. Recent research demonstrating the facilitating influence of social models on aggressive behavior suggests some precautionary need for evaluating QC’s effects on audiences. However, no empirical studies have been reported. The purpose of this study was (a) to measure QC effects on audience depression, suicide potential, and suicide connotations, and (b) to evaluate possible effects due to media presentation.

\(^{*}\)The authors wish to acknowledge the assistance of Drs. Eric Ward and Peter Neidig. Thanks also are given to Dr. James McTeague, Chairman, Western Illinois University Drama Department; Joy Sample, director of the play; and the cast Dave Chadderdon, Kathy Clemens, Pam Saunders, Pete Wehle, Clark Wilson, and Jim Wolgamot.