

Program: HOSPITAL YOUTH MENTORING PROGRAM

Population Served:

Size 10 to 80 students per hospital, for a total of 515 students
 Age: 14-22 (age varies by hospital—some target middle school students; others target high school only)
 Other Characteristics: At risk of failing in school; programs partnered with a local school or district

Program Components:

<u>Component</u>	<u>Provided by</u>	<u>Duration</u>	<u>Description</u>
Mentoring	Hospital employees	About 1 year	
Employment*	Hospital	About 1 year	Paid and unpaid
Academic skills*	Schools	About 1 year	
College preparation*	Schools	About 1 year	
Interface with schools*	Schools and hospitals	About 1 year	

*The presence of these activities varies by hospital

Program Objectives/Goals:

Information; technical and academic skills: To help at-risk students complete high school and move on to postsecondary education or employment

Study:

McClanahan, W. (1998). *Relationships in a career mentoring program: Lessons learned from the Hospital Youth Mentoring Program*. Philadelphia: Public/Private Ventures.

Study Objectives and Measurements:

Objective:

Examine the nature and content of the relationships that developed between mentors and students involved in the program.

Measurement instrument:

Telephone interviews with program coordinators
 A survey of students' and mentors' perceptions of the mentoring relationship
 A review of historical program documents
 Scales measuring time engaged in work activities, social activities, and college preparatory activities

Evaluation:

Type: Qualitative and quantitative; nonexperimental

Statistical techniques: Correlations. Significance level = .10

Population evaluated: 380 at-risk youth and their mentors from 13 hospitals (73 percent age 16-18; others were both younger and older)

Outcomes:

Mentors in HYMP on average achieved all three components of a successful mentoring relationship: Students felt that their mentors considered their opinions, were flexible and caring, and were supportive. Mentors with more training have longer relationships with their mentees. Each hospital either adopted a mentoring model that focused on social activities, or a non-social approach in which youth spent most of their time on hospital work and hospital-based career development activities. Despite the approach, students and mentors in both models report giving and receiving a lot of career guidance in their mentoring relationships.

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Other Information:

Some hospitals focus on social interaction between mentor and mentee; others direct mentors to focus on career activities.
