Department of Employment Security Washington

WASHINGTON SERVICE CORPS: PROGRAM EVALUATION

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The Washington Service Corps (WSC) supports AmeriCorps members through training and technical assistance. From November 2022 through May 2023, the WSC provided an augmented training and technical assistance program to randomly selected members focusing on three areas: (1) leadership, (2) civic engagement, and (3) job readiness. The purpose of this report is to evaluate the impact of the training and technical assistance program on WSC AmeriCorps members' capacity in these three areas by answering the following questions:

1. Do WSC members who receive the augmented training experience demonstrate greater positive changes in their knowledge, attitudes, and skills related to each of the key topics of interest (i.e., leadership skills, civic engagement, and job readiness), compared to members who did not receive the training?
2. Are WSC members who receive the new training more likely to be connected to new career or education opportunities related to their service, compared with members who did not receive the training?

Information for this report was obtained by implementing a randomized controlled trial, with the treatment group participating in the augmented training program along with the standard WSC training and the control group participating in standard WSC training alone. Information was obtained from three key sources: (1) WSC data, (2) pre- and post-surveys, and (3) interviews/focus groups.

KEY FINDINGS

Key Finding #1: Feedback on the training was mixed. A slightly smaller portion of the treatment group found trainings to be useful on the pre- and post-survey (23% and 20% respectively) than the control group (36% and 45% respectively). Some of the strengths of the *augmented training* included:
- Exposure to new information.
- Opportunity to network.

Areas of weakness included:
- Communication about the trainings.
- Timing of the trainings.
- Mandatory trainings.
- Virtual trainings.

Key Finding #2: The treatment group, who participated in the augmented training program, demonstrated positive changes in their skills, attitudes, and knowledge around the three areas.
- *Leadership.* The Leadership scale sores were the lowest of the three focus areas on both the pre-survey and the post-survey; however, this area had the most growth for treatment group members over time (statistically significant).
- *Civic Engagement.* The Civic Engagement scale scores also improved over time for treatment group members (statistical trend).
- *Job Readiness.* The Job Readiness scale score was the highest for pre- and for post-, and while scores increased pre- to post-survey, the change over time was not statistically significant. This may indicate that members may have more familiarity with the topics covered in this training area, and members had other opportunities for additional job readiness training outside of this opportunity.
- There were no differences based on gender, ethnicity, number of years of service in AmeriCorps, the number of trainings attended, or whether they attended the follow-up training.

Key Finding #3: The treatment group made more improvement pre- to post-survey on skills, attitudes, and knowledge compared to the control group, although the differences were not always statistically significant.

- *Leadership.* Both the treatment group and the control group improved on the Leadership scale score from pre- to post-. Although the treatment group made more substantial improvement than the control group, the difference in growth between the groups did not reach statistical significance. On every question on the Leadership scale, except for one, the treatment group had more improvement than the control group. There were three questions where improvements were statistically greater for the treatment group compared to the control group. These included 1) conducting an effective check in, 2) distinguishing between four levels of group work, and 3) applying the four levels model to improve group outcomes.
- *Civic Engagement.* Similar to the Leadership findings, the treatment group and the control group improved on the Civic Engagement scale score from pre- to post-. Once again, the treatment group made more substantial improvement than the control group, but the difference in growth between the groups did not reach statistical significance.
- *Job Readiness.* Although the treatment group and the control group improved on the Job Readiness scale score from pre- to post-, the improvements were not statistically significant for either group.
- There were no differences based on gender, ethnicity, number of years of service in AmeriCorps, the number of trainings attended, or whether they attended the follow-up training.

Key Finding #4: WSC members who receive the augmented training were equally likely to be connected to new career or education opportunities related to their service, as the members who did not receive the training.

- Survey results show that members in the treatment and control groups believe they benefitted from being an AmeriCorps member.
- 77% of treatment group and 70% of control group members reported that they figured out their next steps in terms of career/professional goals (not significant).
- 47% of treatment group and 42% of control group members figured out their next steps in terms of educational goals (not significant).
- AmeriCorps members attributed their experience serving as an AmeriCorps member in its totality as contributing to positive changes, rather than the trainings.

Key Finding #5: Overall, WSC members were satisfied with their AmeriCorps service experience.

- 84% of treatment group and 91% of control group members were satisfied with their experience.
- 93% of treatment group members and 97% of control group members felt that they made a contribution to their community.
- 80% and 91% of treatment and control group members, respectively, felt they were part of a community.

RECOMMENDATIONS

Based on evaluation findings, we offer the following recommendations: (1) strengthen communication; 2) consider the timing of future trainings; (3) consider adding leveled content and choice; (4) improve the design of virtual trainings to encourage more engagement; and (5) consider inviting supervisors to trainings. In addition, specific programming recommendations from members are provided.

WASHINGTON SERVICE CORPS: PROGRAM EVALUATION REPORT

INTRODUCTION

The Washington Service Corps (WSC) was created in 1983 by the state legislature to provide opportunities for citizens to serve their communities. WSC AmeriCorps members serve throughout Washington State, hosted by nonprofit organizations and local government agencies, to address community needs. The WSC supports AmeriCorps members through training and technical assistance. From November 2022 through May 2023, the WSC provided an augmented training and technical assistance program to randomly selected members focusing on three areas: (1) leadership, (2) civic engagement, and (3) job readiness. The purpose of this report is to evaluate the impact of the training and technical assistance program on WSC AmeriCorps members' capacity in these three areas. This report includes a description of the evaluation design, evaluation findings, and recommendations.

EVALUATION DESIGN

We implemented a randomized, controlled-trial study to assess the extent to which the training program builds capacity around (1) leadership, (2) civic engagement, and (3) job readiness. The study utilized a pre- and post-survey to assess changes in knowledge, attitude, and skills for members that participate in the "treatment group" compared to changes for members that participate in the "control group." We also analyzed differences in general outcomes between groups on the post-survey.

RESEARCH QUESTIONS

This impact evaluation study addressed the two research questions:

1. Do WSC members who receive the augmented training experience demonstrate greater positive changes in their knowledge, attitudes, and skills related to each of the key topics of interest (i.e., leadership skills, civic engagement, and job readiness), compared to members who did not receive the training?
2. Are WSC members who receive the new training more likely to be connected to new career or education opportunities related to their service, compared with members who did not receive the training?

DATA COLLECTION METHODS

We collected data from three key sources: (1) data provided by WSC, (2) pre- and post-surveys, and (3) interviews/focus groups. Additionally, one member of the evaluation team attended each training, either live or through video, to observe the process and content of the training and to answer any questions about the surveys and interviews/focus groups. The data collection sources are described below.

WSC Data. We collected and synthesized WSC data, including WSC members' placements and demographics, attendance at augmented training and technical assistance sessions, and number of years of service. This information was used to create the treatment and control groups and was merged with survey data to control for variables that may impact survey results.

WSC Member Pre- and Post-Survey. We administered the Washington Service Corps survey, through SurveyMonkey, that included questions to measure the key outcomes of knowledge, skills, and attitudes in leadership, civic engagement, and job readiness. The survey items were developed for this study and were based on the available training curricula. We also added questions on the post-survey from the Outcomes Survey, used by the Corporation for National and Community Services (CNCS), to measure differences between groups on general outcomes.[1] Survey data were merged with WSC data to analyze group differences by attendance. In total, 185 AmeriCorps members completed the pre-survey (treatment = 83, control = 82) and 100 members completed the post-survey (treatment = 48, control = 52). Additional surveys were completed; however, some represented duplicates or members opted to not provide identifying information. We provide more information about the groups in the next section. See Appendix A for full survey results.

WSC Member and Site Supervisor/Key Program Staff Interviews. We also interviewed members and their site supervisors/key program staff post-training to learn more about the impact of the training. We selected 15 sites and invited members and their site supervisor/key program staff member to participate in separate 30-minute interviews. The sites selected were part of the treatment group and representative of the sample. One site discontinued participation with WSC prior to the interviews/focus groups. Exhibit 1 shows the sites, number of members, focus area, and location of the 14 sites asked to participate. In total, 20 members and 15 site supervisors/program staff participated in interviews/focus groups from 12 of the 14 sites asked to participate in interviews/focus groups.

Exhibit 1.
Sites Selected for Interviews

SITES SELECTED FOR INTERVIEWS			
Site	**# of Members**	**Focus Area**	**Location**
Asian Counseling and Referral Service	2	Economic Opportunity	King
WA State Employment Security Thurston	1	Economic Opportunity	Thurston
World Relief Spokane	1	Economic Opportunity	Spokane
City of Vancouver	5	Environmental	Clark
Lummi Island Heritage Trust	1	Environmental	Whatcom
Palouse Conservation District	3	Environmental	Whitman
Seattle Audubon	1	Environmental	King
USFWS Grays Harbor NWR	1	Environmental	Grays Harbor
YMCA of Greater Seattle	5	Environmental	King
Issaquah Food & Clothing Bank	1	Healthy Futures	King
Port Angeles Food Bank	3	Healthy Futures	Clallam
South Whidbey Good Cheer Food Bank	4	Healthy Futures	Island
King County Office of Emergency Management	2	Disaster Services	King
Kitsap Conservation District	4	Multiple	Kitsap

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[1] See AmeriCorps Alumni Outcomes: Summary Report, https://americorps.gov/sites/default/files/evidenceexchange/FR_CNCS_Alumni%20Outcomes%20Survey%20Report_1.pdf

ORIGINAL SAMPLE AND FINAL SAMPLES

Treatment and control groups were selected from the entire population of WSC members. A stratified random sampling method was employed to create the sample with an emphasis on having a similar number of sites and members in each group. Additionally, we wanted a similar distribution of the number of AmeriCorps members per site in each group. The next consideration was having a similar distribution of focus areas in each group. The final consideration was county, with an emphasis on having a relatively equal distribution in each group from King County. This helped to ensure other counties throughout Washington State were represented in the sample. Exhibit 2 compares the treatment group to the control group on these characteristics and shows that the two groups are similar to one another.

Exhibit 2.
Original Sample Characteristics

ORIGINAL SAMPLE CHARACTERISTICS		
Characteristics	**Treatment Group**	**Control Group**
Number of Sites	46	46
Number of Members	96	93
Average Number of Members at each Site	2	2
% of sites - Economic Opportunity	17.4%	13.0%
% of sites - Education	8.7%	13.0%
% of sites - Environmental	39.1%	39.1%
% of sites - Healthy Futures	23.9%	26.1%
% of sites - Disaster Services	4.3%	2.2%
% of sites - Multiple	6.5%	6.5%
% of sites from King County	30.4%	30.4%
% of sites from other counties	69.6%	69.6%

The response rate for the pre-survey was higher (treatment = 83, control = 82) than for the post-survey (treatment = 48, control = 52), which may have been due to some AmeriCorps members completing their service term prior to or shortly after the final trainings. Additionally, there were some treatment group members who had exited service, did not attend any trainings, or attended a particular one, but not others. Due to this issue, we created separate sample groups for each of the training areas (Leadership, Civic Engagement, and Job Readiness) and one for the Outcomes questions that were only asked on the post-survey. To be included in a particular sample group, the AmeriCorps member needed to have both pre- and post-survey data for that particular training area, and if they were a treatment member, they had to have attended the main training in that area. The four final sample groups include fewer sites and members in both the treatment and control groups compared to the original sample (see Exhibits 3 - 6). However, the treatment and control groups remained similar to each other in the number of sites, in the number of AmeriCorps members, in the average number of AmeriCorps members at each site, in the focus area distribution, and in the percentage of AmeriCorps members from King County.

Exhibit 3.
Final Sample Characteristics – Outcomes

FINAL SAMPLE CHARACTERISTICS - OUTCOMES		
Characteristics	**Treatment Group**	**Control Group**
Number of Sites	27	30
Number of Members	30	43
Average Number of Members at each Site	3	3
% of sites - Economic Opportunity	16.7%	4.7%
% of sites - Education	6.7%	9.3%
% of sites - Environmental	53.3%	44.2%
% of sites - Healthy Futures	16.7%	27.9%
% of sites - Disaster Services	3.3%	2.3%
% of sites - Multiple	3.3%	11.6%
% of sites from King County	30.0%	32.6%
% of sites from other counties	70.0%	67.4%

Exhibit 4.
Final Sample Characteristics - Leadership

FINAL SAMPLE CHARACTERISTICS - LEADERSHIP		
Characteristics	**Treatment Group**	**Control Group**
Number of Sites	25	28
Number of Members	30	39
Average Number of Members at each Site	3	3
% of sites - Economic Opportunity	10.0%	5.1%
% of sites - Education	3.3%	7.7%
% of sites - Environmental	53.3%	59.0%
% of sites - Healthy Futures	20.0%	17.9%
% of sites - Disaster Services	3.3%	2.6%
% of sites - Multiple	10.0%	7.7%
% of sites from King County	26.7%	28.2%
% of sites from other counties	73.3%	71.8%

Exhibit 5.
Final Sample Characteristics – Civic Engagement

FINAL SAMPLE CHARACTERISTICS – CIVIC ENGAGEMENT		
Characteristics	**Treatment Group**	**Control Group**
Number of Sites	23	27
Number of Members	27	36
Average Number of Members at each Site	3	3
% of sites - Economic Opportunity	11.1%	5.6%
% of sites - Education	3.7%	8.3%
% of sites - Environmental	55.6%	55.6%
% of sites - Healthy Futures	22.2%	19.4%
% of sites - Disaster Services	0.0%	2.8%
% of sites - Multiple	7.4%	8.3%
% of sites from King County	25.9%	27.8%
% of sites from other counties	74.1%	72.2%

Exhibit 6.
Final Sample Characteristics – Job Readiness

FINAL SAMPLE CHARACTERISTICS – JOB READINESS		
Characteristics	Treatment Group	Control Group
Number of Sites	25	27
Number of Members	31	36
Average Number of Members at each Site	3	3
% of sites - Economic Opportunity	9.7%	5.6%
% of sites - Education	3.2%	8.3%
% of sites - Environmental	54.8%	58.3%
% of sites - Healthy Futures	19.4%	16.7%
% of sites - Disaster Services	3.2%	2.8%
% of sites - Multiple	9.7%	8.3%
% of sites from King County	25.8%	30.6%
% of sites from other counties	74.2%	69.4%

RESULTS

The following sections provide information about the training, attendance, and strengths and weaknesses of the trainings. Following this section, we include results for the two research questions.

AUGMENTED TRAINING AND TECHNICAL ASSISTANCE PROGRAM

WSC provided all AmeriCorps members standard and ongoing training around a range of topics specific to their service such as diversity, equity, and inclusiveness; communication; conflict management; self-care; and specific focus area content. However, program leaders noted that members do not always feel connected to national service or prepared to transition from service to career. WSC program leaders hypothesized that providing an augmented training program on topics including civic engagement, leadership, and job readiness will:

- Help members feel more connected to each other and national service;
- Advance their leadership and other skills that will help them to deliver high value service to partner sites;
- Prepare them for their next job and career path; and
- Inspire them to be civically engaged beyond the service year.

In 2021-22, WSC piloted the augmented training program in two areas (Civic Engagement and Job Readiness). During the pilot, WSC program leaders obtained feedback and lessons learned to roll out the current model. For 2022-23, WSC implemented a sequence of training and technical assistance activities in three topic areas:

1. **Leadership:** This training was intended to help members develop leadership of the self. Members will demonstrate ethics and integrity, display purpose and drive, exhibit leadership stature, increase capacity to learn, increase self-awareness, and develop adaptability.
2. **Civic Engagement:** This training was intended to help members define civic responsibility locally, nationally, and globally; identify the needs and resources in the community; identify skills they have to offer and choose how to apply them in the community; draw upon local efforts to effect positive change in the community; and engage others in service.
3. **Job Readiness:** This training was intended to help members prepare for their transition to career by helping members find job postings, build a resumé, and improve oral/written communications.

Each training area was covered during a three-hour, live virtual session with a contracted trainer. The sessions were interactive, and the trainer integrated opportunities for small group discussions in breakout rooms. At the end of the training, members were given an assignment to ensure they had an actionable takeaway. For example, after the Civic Engagement training, members could select one of three options: (1) convene a community focus group, (2) write an op-ed, or (3) interview a community member. Two to three weeks after the initial training, a WSC program leader hosted a follow-up 90-minute session where members were able to share their assignments with other members. The entire augmented training included six sessions.

The overall Theory of Change suggested that member participation in the augmented training and technical assistance program would help build knowledge and skills in these key topic areas as well as improve attitudes about the importance of these concepts over the course of the training period. WSC anticipated that members participating in the training would have positive changes in their knowledge, attitudes, and skills related to each of the key topic areas, compared to members who did not receive the training. To test this model, WSC implemented a randomized controlled trial where some members were selected to participate in the augmented training program as well as the standard training program (treatment group), and others participated in the standard training program only (control group).

ATTENDANCE

On average, AmeriCorps members selected for the treatment group attended about five out of the six possible trainings (average number of trainings attended = 4.9), with 89% of AmeriCorps members attending the three main trainings and 74% attending the follow up trainings (see Exhibit 7). More specifically, the highest percentage of AmeriCorps members attended the Leadership training (94%) and the Civic Engagement training (93%). Attendance dropped for the Job Readiness training (78%), which may have been due to it being held after some AmeriCorps members had already finished their service term or were nearing the end of their service term. The highest rate of attendance for follow-up trainings was for Civic Engagement (90%), while the Job Readiness follow-up training was only attended by a little over half of the treatment group (see Exhibit 8). The majority of the treatment group attending trainings were from the Environmental or Healthy Futures focus areas and about two-thirds were from counties other than King (see Exhibits 9 and 10).

Percent of Treatment Group Attending Trainings

- Main Trainings: 89%
- Follow-Up Trainings: 74%
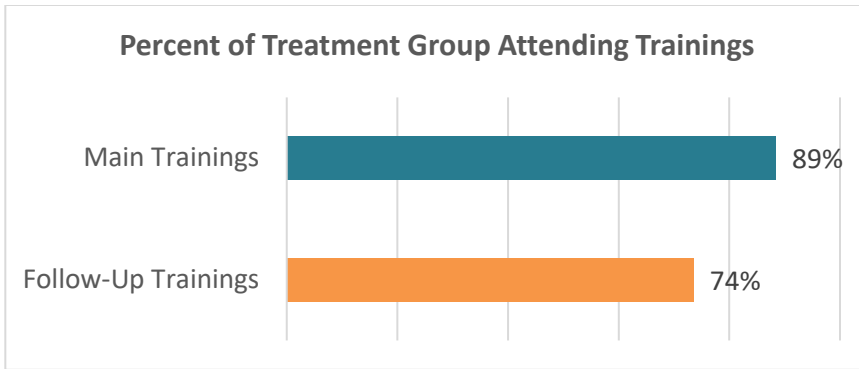
Exhibit 7. **Percent of Treatment Group Attending Trainings**

Percent of Treatment Group Attending Specific Trainings

- Leadership: 94%
- Leadership - Follow-Up: 75%
- Civic Engagement: 93%
- Civic Engagment - Follow-Up: 90%
- Job Readiness: 78%
- Job Readiness - Follow-Up: 56%
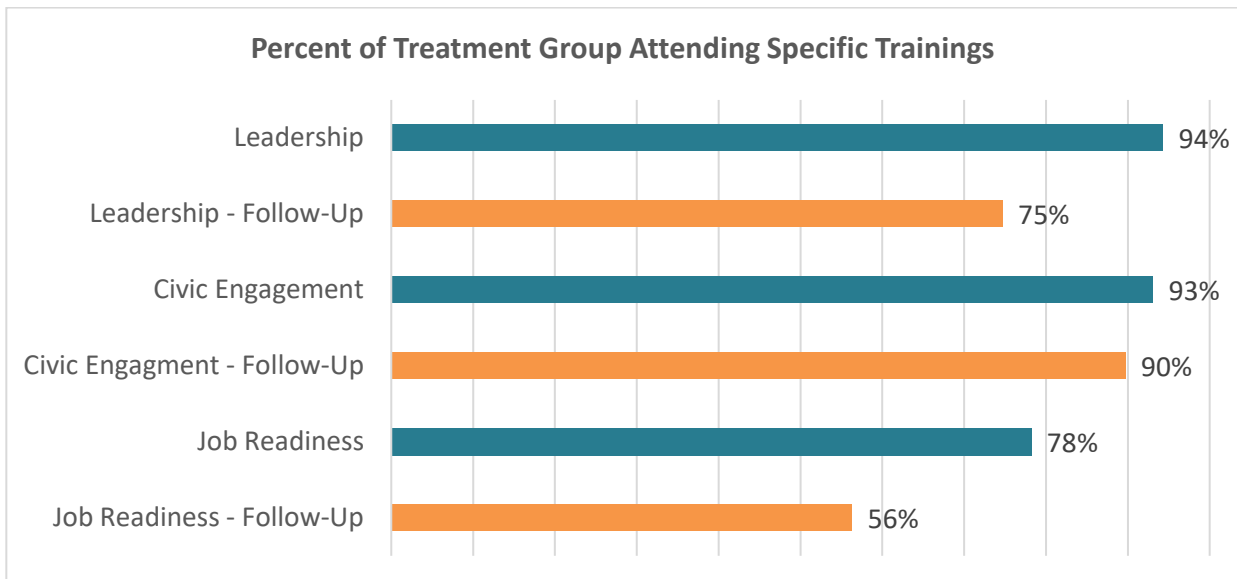
Exhibit 8. **Percent of Treatment Group Attending Specific Trainings**

Percent of Treatment Group Attending Trainings by Focus Area

- Disaster Services: 3%
- Economic Opportunity: 10%
- Education: 9%
- Environmental: 44%
- Healthy Futures: 24%
- Multiple: 9%
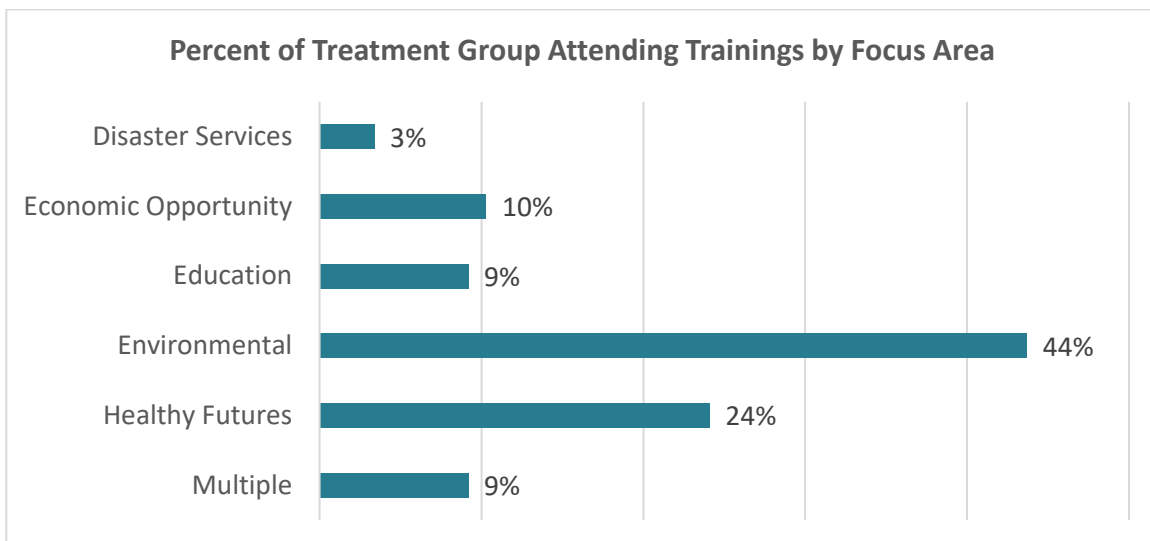
Exhibit 9. **Percent of Treatment Group Attending Trainings by Focus Area**

Percent of Treatment Group Attending in King County Compared to Other Counties

King County — 31%

Other Counties — 69%
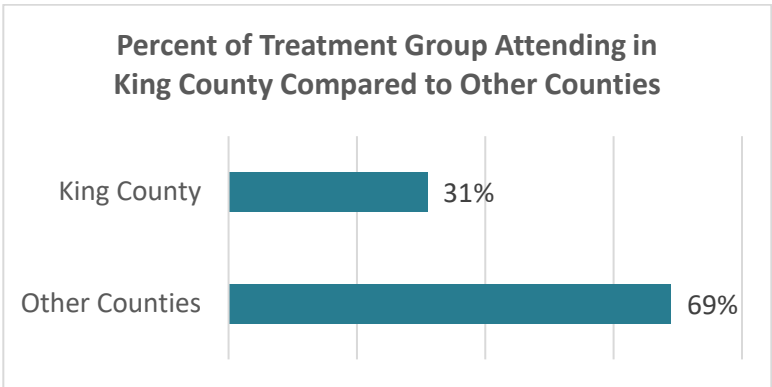
Exhibit 10. **Percent of Treatment Group Attending Trainings by County**

STENGTHS AND WEAKNESS OF THE AUGMENTED TRAINING AND TECHNICAL ASSISTANCE

Overall, general feedback about the usefulness of WSC training opportunities, in general, was mixed. Results showed that on the pre-and post-survey, the control group, who attended only the standard trainings, found trainings to be more useful on the pre- and post-survey (36% and 45% respectively) tha the treatment group (23% and 20% respectively) who attended the augmented and standard trainings (see Exhibit 11).

How useful was the WSC training in your work as a WSC member?

■ Very Useful ■ Moderately Userful ■ Slightly Useful ■ Not Useful

	Very Useful	Moderately Userful	Slightly Useful	Not Useful
Treatment Group Pre-Survey	10%	13%	53%	25%
Treatment Group Post-Survey	6%	14%	61%	18%
Control Group Pre-Survey	7%	29%	46%	18%
Control Group Post-Survey	13%	32%	33%	22%
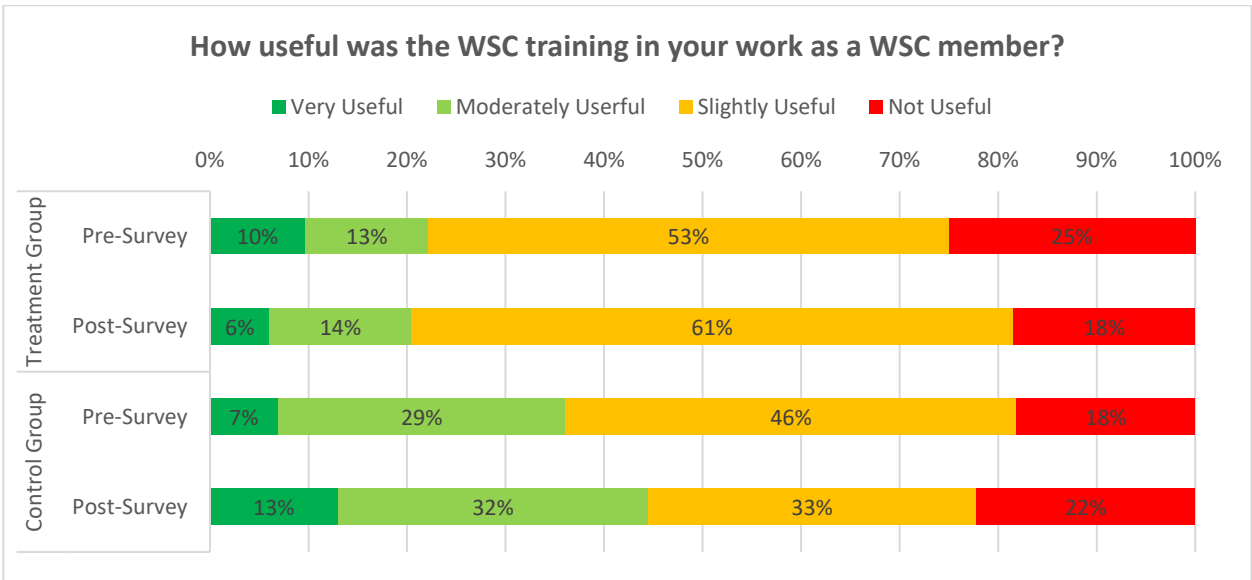
Exhibit 11. **Usefulness of WSC Training**

Interviews with members who attended the augmented training helped to provide more detail to this finding. While some members were appreciative of the opportunity and could talk at length about the content of the training, others could not recall as much, likely because of the delay of the first trainings to the timing of the interviews and focus groups. One member shared, "I don't remember a whole lot from the trainings. Personally, I didn't find them helpful, but I was happy to participate because it was

new and different information." Those who could recall the trainings were able to describe the content and how they applied the information they learned. As an example, one member shared, "I enjoyed the Civic Engagement training, and it was helpful to learn how civic engagement is falling off, what is important, and what you can gain. That tied in with AmeriCorps." Others reported that they already had the information, and it was not relevant. Also impacting the study was confusion about the "Life after AmeriCorps" training and the trainings supported through Serve WA by Basta and SkillUp. Members could not recall who provided the training, and some feedback pertained to these other trainings.

Feedback on the follow-up sessions was mixed as well. Some members agreed that the homework and follow-up sessions helped to personalize the information. A member reflected,

> They didn't require too much, and it was a reasonable amount of work. It helps cement the main ideas and allows for conversation, but also making sure they are easy and not too intensive is good. We just continued to think about how the concepts apply to ourselves.

Several people noted that developing the resumés and getting feedback was helpful as they searched for employment, and some members developed projects or engaged the community. For example, at one site, members worked together to create events, such as MLK Day of Service and Cesar Chavez Day to educate and bring awareness and education into the community. At another site, a member started an outreach program, where he put together a team to gather supplies, cards, and treats for unhoused mothers. Site supervisors and members agreed these practical experiences were helpful to the members and the site. However, several members did not find the follow-up sessions valuable. Members reported that they already had the skill in that area, that they did not have the time to complete the assignment, or that they were confused whether the assignments were required or optional. For example, one member shared, "Having an assignment felt patronizing, and it was on top of a 3-hour training and a 1.5-hour follow-up meeting. Aside from preparing your resumé, none of them were meaningful." Another commented,

> That was a great activity, but I'm busy doing service, and I didn't have time to engage with that at all. It was unclear if it was due and required or are we just going to talk about it [in the follow-up session]. Many people didn't do it. We just don't have time, as interesting as it was."

During interviews members identified the following strengths from the trainings. These included the exposure to new information and the opportunity to network.

Exposure to new information. Overall, interview participants agreed that the workshop topics were helpful for people who have not been exposed to these areas because it gave participants the opportunity to learn about and practice skills in new areas. A member shared, "It is helpful, especially for people without exposure." Another said, "On a baseline, they are helpful for people who have not had experience with those topics." However, members and site supervisors noted that the information was entry level, and that it would be helpful to have a more advanced program for members who have the foundational knowledge.

Site Supervisor Quote
"AmeriCorps nailed it. … For people who haven't had additional education, such as high school graduates, to be exposed to these programs is an opportunity to develop and practice the skills."

Opportunity to network. Members also appreciated that they had the opportunity to network with AmeriCorps members from other sites. During the trainings, they were able to talk about the content

Member Quote
"The thing I appreciated, overall, was connecting with other AmeriCorps members, hearing where other people are doing, what they are thinking. I'm the only AmeriCorps person at my site, and it helps me feel like I'm more a part of AmeriCorps."*

at hand, but they also shared information about their sites, including experiences and challenges. In a few cases, members noted that they made lasting connections, and they have continued talking with members from other sites. A member shared, "It provided an opportunity to network and share common experiences." However, some members noted that networking opportunities were lost when some members did not participate in breakout rooms. This is discussed below.

Members also identified some weaknesses or areas for improvement. These weaknesses included communication, the timing of the trainings, the mandatory nature of the trainings with limited differentiation, and a lack of engagement associated with the virtual trainings.

Communication. While members believed that communication from WSC is good, there were some concerns about communication about the augmented training program. AmeriCorps members noted that they received notice of the training late, which impacted their site. Site supervisors had more concerns. They reported that they were not informed of the training, with several noting that they learned about the training on the general calendar. Because of this, they were not able to address questions or support the training, projects, or learning. A site supervisor explained,

> They do direct communication with members, and it doesn't include me. The members told me about the training and gave me the heads-up, and I couldn't build that into the schedule until they let me know. It felt like there are not enough communications to keep this up-front. … Not having the supervisor informed was challenging, and we couldn't address questions. It would have been more efficient to loop us all in. I didn't even know if trainings were optional or required.

Timing of the trainings. The timing of the trainings was problematic for some members and sites. Members and site supervisors noted that they did not receive the dates for the trainings until shortly before they occurred, which was problematic in planning out the schedule. An AmeriCorps member shared, "We set up our schedule in October, and the trainings were on the days that I had to cover classrooms." Additionally, in some locations, such as conservation and environmental fields, spring is the busiest time of year, which makes it problematic for members to attend the training. A member commented, "It is always hard because there is only so much time, but interview and job readiness training, I wish [that] could have been earlier, like in January, so our team was not so busy at the point it was offered. Especially in the environmental field, stuff is happening in Spring." Others felt the information would have been more relevant if they had it sooner. One said, "I would say that a lot of people in breakout rooms, especially in early trainings, expressed that they wished they were sooner in their term because it feels like you have already found your place, so it feels like a step back." A site supervisor commented, "They should have been on the schedule day one. We should have known not to schedule activities, and the supervisors should have known. We have some busy times, and it was hard [for members] to be in the meetings."

Mandatory trainings. Members and site supervisors also noted that because the trainings were mandatory, some content was not relevant for everyone and some of the information was "too basic" for some members. Other members had training and experience in some areas but not others and would like to be able to choose their training. As one member said, "I went to college, and I was aware of what they were talking about. I think there should be two levels – entry and people who want more information." A site supervisor shared, "They really need a two-tier program, as this will be valuable if they had never been exposed. They should be able to choose the programs they need. Not everyone needs to attend all these trainings." Several members noted that because these trainings were mandatory, they tended to rate their overall usefulness as lower.

Virtual trainings. All trainings were virtual, which was beneficial because members could access the trainings from their site. However, members noted substantial challenges with engagement, and they raised concerns that people were not consistently participating in the breakout rooms. A member shared, "I think having trainings over Zoom is not as satisfying as connecting with people in-person. It is more rewarding to be in the same space. I have a strong preference toward in person." Additionally, many members noted that there was very little interaction in the breakout rooms, that people had their cameras off and would not engage. For example, a

Member Quote
"Some members are neurodivergent, you should have shorter trainings, captioned, and fewer breakout rooms, to make it more accessible. It is hard to stay focused in three hours when you aren't interested in what you are doing. It is hard to be social in the breakout rooms. Give people choice on if they want to participate in breakout rooms."

member shared, "The virtual side in breakout rooms was tough. So many people had their cameras off. I could be in a room of five to six [people], and only one other person was talking with me. It is frustrating. [It] makes me feel like 'why are we doing this' and like 'I'm wasting my time.'" Another acknowledged, "Online is so boring. I don't know if they realize it, but you can turn your camera off, tune out, and no one knows if you are there. I've done that through most trainings." Also, while members did make some connections through networking, because breakout rooms changed each time, it was more difficult to make long-term connections. Several members suggested not switching up groups each time or organizing groups by region or focus area. Finally, members suggested that trainings should be more accessible, with closed captioning, and be chunked into shorter timeframes.

RECOMMENDATIONS FOR FUTURE TRAININGS

Members and site supervisors made several recommendations about the trainings. Suggestions for content are included in the recommendations section. However, two general recommendations are included below.

Members and site supervisors noted that it would be helpful for site supervisors to attend the trainings with members. In this way, site supervisors can reinforce the learning, integrate the information into their own trainings, and support the homework assignments by integrating projects into the work members do at their sites. A member shared, "It would have been better if the site supervisor was involved. They don't know the information, and I'm supposed to meet with them." A site supervisor suggested, "I think including supervisors, so they know the skillsets AmeriCorps members are exploring, would be helpful. That isn't a burden, if we have some time to attend." Another shared, I don't know what was provided in the leadership training, but I set the expectation that we are all

leaders, and I did a training with them as well. I wish I could have attended the training so I could support them."

Members and site supervisors also believed that trainings would be more powerful if they connected content to members' focus area. They suggested that additional trainings could be aligned with their specific focus area (e.g., education, environmental work). They also suggested creating projects where members meet regionally to do a joint project around a specific focus area. For example, a site supervisor suggested,

> I think it would be great to have geographic cohorts. If we could have them in groups from the different sites, and make a localized cohort, they could have done a larger project. It would be great if we could make connections to their area of focus. I recognize that may not work in all communities, and it is a big lift, but it would give people a chance to connect.

EVALUATION QUESTION #1: DO WSC MEMBERS WHO RECEIVE THE AUGMENTED TRAINING EXPERIENCE DEMONSTRATE GREATER POSITIVE CHANGES IN THEIR KNOWLEDGE, ATTITUDES, AND SKILLS RELATED TO EACH OF THE KEY TOPICS OF INTEREST (I.E. LEADERSHIP SKILLS, CIVIC ENGAGEMENT, AND JOB READINESS), COMPARED TO MEMBERS WHO DID NOT RECEIVE THE TRAINING?

Although members' responses to the training, itself, was mixed, members and site supervisors were able to identify positive impacts in terms of knowledge, attitudes, and skills. Below are examples from the interviews and the surveys that describe some of the changes associated with the training.

Leadership Training. The Leadership training received mixed reviews. Some felt that the content was not applicable to their current position, whereas others were able to apply the information. For example, one member explained, "I've been to other leadership trainings, and they've covered team dynamics, valuable leadership characteristics, leadership styles, and how to tie that into civic engagement and career readiness. They covered actual skills, not just someone's business story." Whereas others shared,

Site Supervisor Quote
"[Member name] had a strong shift midway through her service term, and the shift is related to those trainings. She was reserved and unsure interacting with different people and not confident in giving direction and then this light came on, and she became comfortable and figured out what she could own while she was here. I could see the leadership training guide her in that."

> I enjoyed learning about structures and theories and getting words for what I was experiencing. Specially, the stages of development within a leadership team. I never thought about those things. I also enjoyed learning about how a meeting should run. Understanding why things happen, why start a meeting a certain way, and that those parts of the process important.

> My favorite training was group dynamics and teamwork. I found that useful to determine where I am in the program. There was a clear progression of steps of team development, and it helped explain where frustration can go. I learned that some things about group dynamics are normal.

Site supervisors also agreed that they observed changes in their members after attending this training. They noted that participants gained the tools and skills to use leadership skills with others and to approach the supervisors with an idea for a project. For example, one site supervisor observed a member implementing some of the skills from the training by making changes in the way she interacted and led people. Two site supervisors shared how members requested to implement and lead new programs, which they attributed to the training and the homework assignment.

The results show that for the treatment group, members' confidence in their leadership skills grew in every area (7 to 26 percentage points). The two largest gains were in members identifying the key characteristics of leadership styles (34 percentage-point gain) and advocating for their developmental needs with their supervisors (26 percentage-point gain). This suggests members are developing knowledge and skills in the areas of leadership covered by the training. In addition, treatment group members demonstrated gains in their confidence (percent reporting fairly and very confident) on 9 of the 12 skill areas assessed by the survey, while control group members demonstrated larger gains on only 3 of the 12 items, which suggests some important increases in confidence levels from the training (see Appendix A; Figure A-5 for all frequencies).

Civic Engagement Training. The Civic Engagement training also received mixed reviews. Members reported that they found some of the content interesting, such as discussing why civic engagement is declining and learning how to engage the community through focus groups. Some members also enjoyed the homework assignments, noting that they were able to engage the community and get feedback around issues that impacted their site. However, many also reported that the training was not necessary because they are already civically engaged. One person said, "I would consider myself a civically engaged person, having protested and being involved in civic engagement. The information was more entry level." Another shared, "We all already feel that way [committed to civic engagement] and that's why we're doing this."

Survey results show that for the treatment group, members' confidence in civic engagement grew in every component area but one (0 to 19 percentage points). The largest gains were in member's confidence to *become actively involved in an issue that affects my own community* and *work for social change in an area that matters to me* (19 percentage-point gain on both), which suggests underlying changes in attitudes, knowledge, and skills. Overall, treatment group members demonstrated gains in their confidence (percent very and fairly confident) on 7 of the 10 items, while control group members demonstrated larger gains on 2 of the 10 items assessed. One item had the same growth for both groups (see Appendix A; Figure A-6 for all frequencies).

Job Readiness Training. The Job Readiness training received the most positive reviews because, according to participants, it was practical, met immediate needs, and helped members prepare for the transition from service to a career. One member said, "I liked the job readiness training because finding a job is intimidating. I especially liked how to tailor your resume." Another shared, "The one that was universally helpful was the resumé one, because you need to do it." Members also shared how this training helped them in their current AmeriCorps position. For example, one person shared, "Part of my job is formatting resumés. I have gotten really good at that. People ask me questions, and I can help them out." Site supervisors, who also provide resumé support, observed that members had more confidence in developing a resumé.

Notably, on the survey, two of the largest gains was in participants; confidence to *identify the skills and abilities that are important to include on a resumé* and *develop a professional resume* (both a 17 percentage-point gain), indicating that they believe they have increased their skills and knowledge around resumés. When comparing pre- and post-survey results, members of the treatment group demonstrated gains in their confidence (percent very and fairly confident) on 4 of the 7 items, and the control group on 1 of the 7 items. Two items had the same growth for both groups. When thinking about future trainings, members noted that it would be helpful to include content around interviewing and developing a cover letter as well (see Appendix A; Figure A-7 for all frequencies).

To further answer this question, we examined whether there were differences between the pre- and post- survey for the treatment group. The next section examined changes over time for the treatment group compared to the control group to determine whether the amount of change differed for the two groups. For all analyses, members had to have data for both the pre- and post- survey to be included. Additionally, members of the treatment group had to have attended that particular training (i.e., Leadership, Civic Engagement, Job Readiness) to be included.

Throughout the analyses we will refer to scale scores. Scale scores were computed for survey questions by adding the numeric response for each question in a particular training area (1=Strongly Disagree, 2=Disagree, 3=Neutral, 4=Agree, and 5=Strongly Agree) and then dividing by the number of questions. For example, there were 12 questions related to Leadership, so the scores for those questions were added together and then divided by 12, resulting in a Leadership scale score. The same procedure was used for the other training areas as well.

TREATMENT GROUP CHANGES OVER TIME

We performed a series of paired samples t-tests to determine whether there were any differences for the treatment group over time. As can be seen in Exhibit 12, the scale scores for all three training areas improved for the treatment group from pre- to post-. Although the Job Readiness scale score was the highest of the three training areas for pre- and for post-, the change over time was not statistically significant. This may indicate that members may have had more familiarity with the topics covered in this training area before the training. Additionally, members in both the treatment and control groups had an opportunity to participate in other trainings from Serve WA which pertained to job readiness, and on the survey and in interviews, several members referenced other trainings, which likely impacted these results. The lowest scale scores for the three trainings were in the Leadership area; however, this area had the most growth for treatment group members over time. The difference between the pre- and post-scale scores was statistically significant for Leadership ($t = -3.30$, $p < .01$). The Civic Engagement scale scores also improved from pre- to post- (trend: $t = -2.00$, $p = .06$). No differences were found for change over time in scale scores based on gender, ethnicity, number of years of service in AmeriCorps, or based on the number of trainings attended. Additionally, there were no differences based on whether a member attended the follow-up training.

TREATMENT GROUP
Scale Scores

■ Pre- ■ Post-

Exhibit 12. Treatment Group Scale Scores

In addition to investigating changes in scale scores over time, we also looked at individual questions in each training area to determine which questions had the most growth over time. In the Leadership training area, five of the questions had a half point or greater change in mean score from pre- to post- (see Exhibit 13). The Leadership questions with the most growth typically had to do with specific knowledge gained in trainings, while questions related to leading and supervising tended to have less growth over time. Two of the questions in the Civic Engagement training area had a half point of growth or more including explaining civic infrastructure to a colleague and conducting a community focus group (see Exhibit 14). None of the questions in the Job Readiness training area reached a half point of growth (see Exhibit 15).

LEADERSHIP
Mean Differences between Pre- and Post-

Item	Value
Conduct an effective check-in through the stages of Tone-setting, Opening, Narrowing, Closing.	0.7
Identify the key characteristics of these four leadership styles: Instructing, Guiding, Mentoring, Informing.	0.63
Distinguish between four levels of group work: Structural, Group Process, Interpersonal, and Intrapersonal.	0.63
Advocate for my own developmental needs with my supervisor(s).	0.57
Apply the four levels model (Structural, Group Process, Interpersonal, and Intrapersonal) to improve a group's outcomes.	0.5
Identify an individual's developmental level within a group (enthusiastic beginner, disillusioned learner, reluctant contributor, peak performer).	0.44
Explain SMART goals to a colleague.	0.4
Lead a team.	0.3
Encourage those I lead/supervise to advocate for their developmental needs.	0.3
Provide leadership to create a shared vision.	0.24
Distinguish between directive and supportive leadership behavior.	0.17
In a leadership/supervisory position, adjust the levels of my directive behavior and supportive behavior according to the needs of those I lead.	0.07

Exhibit 13. **LEADERSHIP – Mean Differences between Pre- and Post-**

CIVIC ENGAGEMENT
Mean Differences between Pre- and Post-

Item	Value
Explain civic infrastructure to a colleague.	0.78
Conduct a community focus group.	0.56
Evaluate information about civic issues for accuracy and reliability.	0.37
Create a civic engagement tool kit.	0.3
Find sources of information about civic issues.	0.3
Become actively involved in an issue that affects my own community (geographical, social, other).	0.26
Interpret the results of a survey or poll.	0.26
Work for social change in an area that matters to me.	0.23
Maintain or increase my civic engagement after AmeriCorps.	0.11
Identify an area of social change that matters to me.	0.08

Exhibit 14. **CIVIC ENGAGEMENT – Mean Differences between Pre- and Post-**

JOB READINESS
Mean Differences between Pre- and Post-

Item	Value
Align a resume with a job description.	0.39
Identify the skills and abilities that are important to include on a resume.	0.36
Develop a professional resume.	0.32
Understand the different sections to include in a resume.	0.19
Format and use white space in a resume.	0.16
Organize a resume using a "funnel" or highlighting the most important information first (e.g., skills, experience).	0.03
Apply for a job.	0

Exhibit 15. **JOB READINESS – Mean Differences between Pre- and Post-**

TREATMENT GROUP COMPARED TO CONTROL GROUP

This section investigates each training area to determine whether changes over time differed between the treatment group and the control group.

Leadership. Both the treatment group and the control group improved on the Leadership scale score from pre- to post- (F = 10.9, p < .01). Although the treatment group started with a lower scale score compared to the control group, they ended slightly higher, indicating more substantial improvement (see Exhibit 16). However, the difference in growth between the groups did not reach statistical significance. No differences were found on the Leadership scale score based on gender, ethnicity, number of years of service in AmeriCorps, or based on the number of trainings attended. Additionally, there were no differences based on whether a member attended the follow-up training.
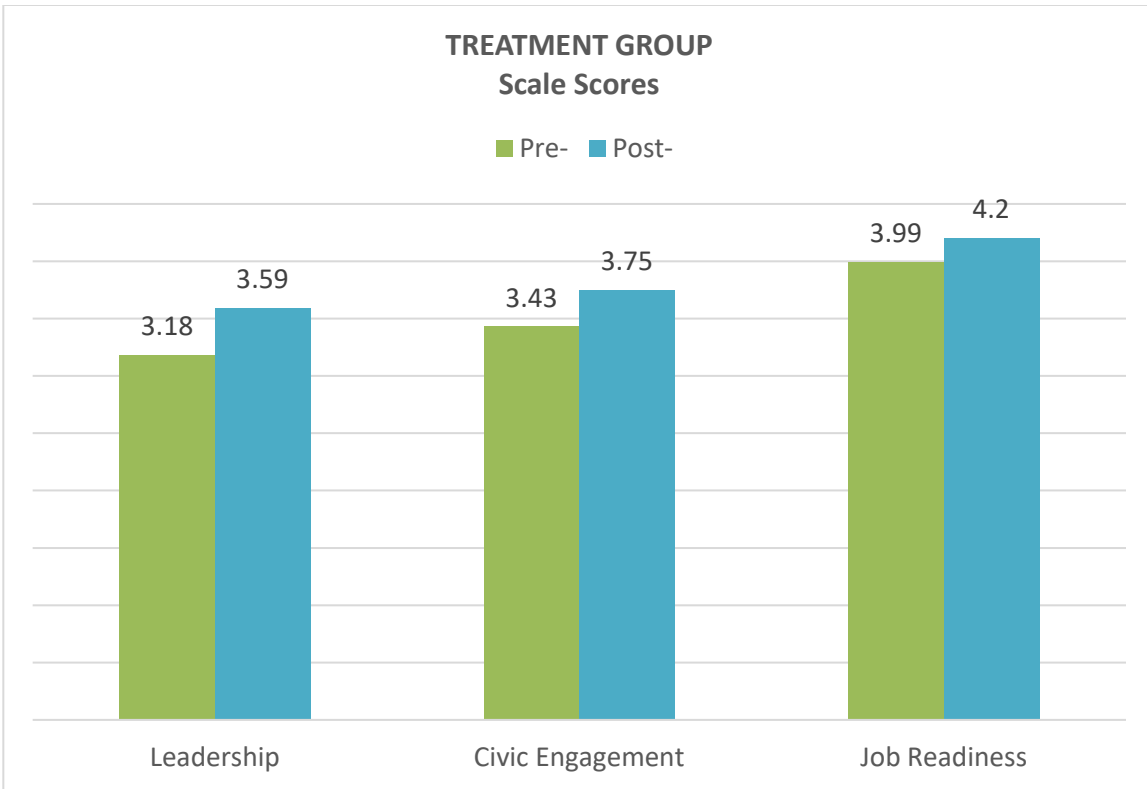

Leadership Scale Score

Pre- Post-

Treatment: 3.18 (Pre-), 3.59 (Post-)
Control: 3.41 (Pre-), 3.56 (Post-)

Exhibit 16. **Leadership Scale Score**

The mean differences between pre- and post- for each question in the Leadership training area is shown in Exhibit 17. On every question but one the treatment group had more improvement than the control group. Exhibit 18 shows the results of a series of repeated measures ANOVAs. Although many of the questions showed improvement over time for both the treatment and control groups, there were three questions where improvements were statistically greater for the treatment group. These included 1) conducting an effective check in, 2) distinguishing between four levels of group work, and 3) applying the four levels model to improve group outcomes. These are identified in red.

LEADERSHIP
Mean Differences between Pre- and Post-

■ Treatment   ■ Control

Item	Treatment	Control
Conduct an effective check-in through the stages of Tone-setting, Opening, Narrowing, Closing.	0.7	-0.03
Identify the key characteristics of these four leadership styles: Instructing, Guiding, Mentoring, Informing.	0.63	0.41
Distinguish between four levels of group work: Structural, Group Process, Interpersonal, and Intrapersonal.	0.63	-0.05
Advocate for my own developmental needs with my supervisor(s).	0.57	0.31
Apply the four levels model (Structural, Group Process, Interpersonal, and Intrapersonal) to improve a group's outcomes.	0.5	-0.03
Identify an individual's developmental level within a group (enthusiastic beginner, disillusioned learner, reluctant contributor, peak performer).	0.44	0.15
Explain SMART goals to a colleague.	0.4	0.1
Lead a team.	0.3	0.21
Encourage those I lead/supervise to advocate for their developmental needs.	0.3	0.05
Provide leadership to create a shared vision.	0.24	0.23
Distinguish between directive and supportive leadership behavior.	0.17	0.16
In a leadership/supervisory position, adjust the levels of my directive behavior and supportive behavior according to the needs of those I lead.	0.07	0.28

Exhibit 17. **LEADERSHIP – Mean Differences between Pre- and Post-**

Exhibit 18.
Pre- and Post-Survey Means by Group - Leadership

Question	Group	Pre-Survey Mean	Post-Survey Mean	Pre-Post-Difference	Statistical Significance
PRE- AND POST- SURVEY MEANS BY GROUP - LEADERSHIP					
Identify an individual's developmental level within a group (enthusiastic beginner, disillusioned learner, reluctant contributor, peak performer).	Treatment	3.23	3.67	+.44	Trend for time F=3.9 (p=.05)
	Control	3.59	3.74	+.15	
Distinguish between directive and supportive leadership behavior.	Treatment	3.53	3.70	+.17	
	Control	3.79	3.95	+.16	
Identify the key characteristics of these four leadership styles: Instructing, Guiding, Mentoring, Informing.	Treatment	2.87	3.50	+.63	Sign. for time F=16.2 (p<.001)
	Control	3.33	3.74	+.41	
Lead a team.	Treatment	3.77	4.07	+.30	Sign. for time F=5.3 (p<.05)
	Control	3.74	3.95	+.21	
In a leadership/supervisory position, adjust the levels of my directive behavior and supportive behavior according to the needs of those I lead.	Treatment	3.70	3.77	+.07	
	Control	3.44	3.72	+.28	
Encourage those I lead/supervise to advocate for their developmental needs.	Treatment	3.63	3.93	+.30	
	Control	3.77	3.82	+.05	
Advocate for my own developmental needs with my supervisor(s).	Treatment	3.53	4.10	+.57	Sign. for time F=11.2 (p<.01)
	Control	3.72	4.03	+.31	
Explain SMART goals to a colleague.	Treatment	3.07	3.47	+.40	Trend for time F=3.7 (p=.06)
	Control	3.03	3.13	+.10	
Conduct an effective check-in through the stages of Tone-setting, Opening, Narrowing, Closing.	Treatment	2.50	3.20	+.70	Sign. for time*group F=6.9 (p<.05)
	Control	3.03	3.00	-.03	
Distinguish between four levels of group work: Structural, Group Process, Interpersonal, and Intrapersonal.	Treatment	2.50	3.13	+.63	Sign. for time*group F= 4.3 (p<.05)
	Control	3.00	2.95	-.05	
Apply the four levels model (Structural, Group Process, Interpersonal, and Intrapersonal) to improve a group's outcomes.	Treatment	2.30	2.80	+.50	Trend. for time*group F= 3.1 (p=.08)
	Control	2.85	2.82	-0.03	
Provide leadership to create a shared vision.	Treatment	3.53	3.77	+.24	Sign. for time F=4.3 (p<.05)
	Control	3.67	3.90	+.23	

Civic Engagement. Similar to the Leadership findings, the treatment group and the control group improved on the Civic Engagement scale score from pre- to post- (F = 4.09, p < .05). Once again, although the treatment group started with a lower scale score compared to the control group, they ended higher, indicating more substantial improvement (see Exhibit 19). However, the difference in

growth between the groups did not reach statistical significance. No differences were found on the Civic Engagement scale score based on gender, ethnicity, number of years of service in AmeriCorps, or based on the number of trainings attended. Additionally, there were no differences based on whether a member attended the follow-up training.
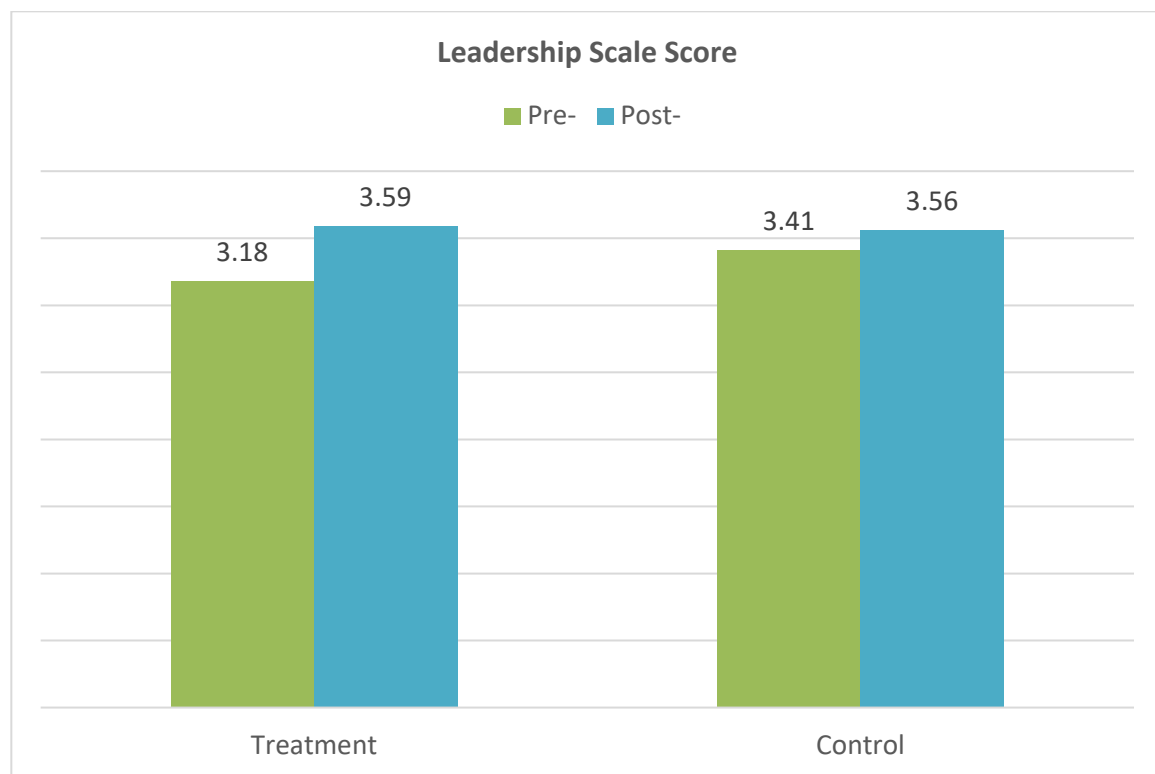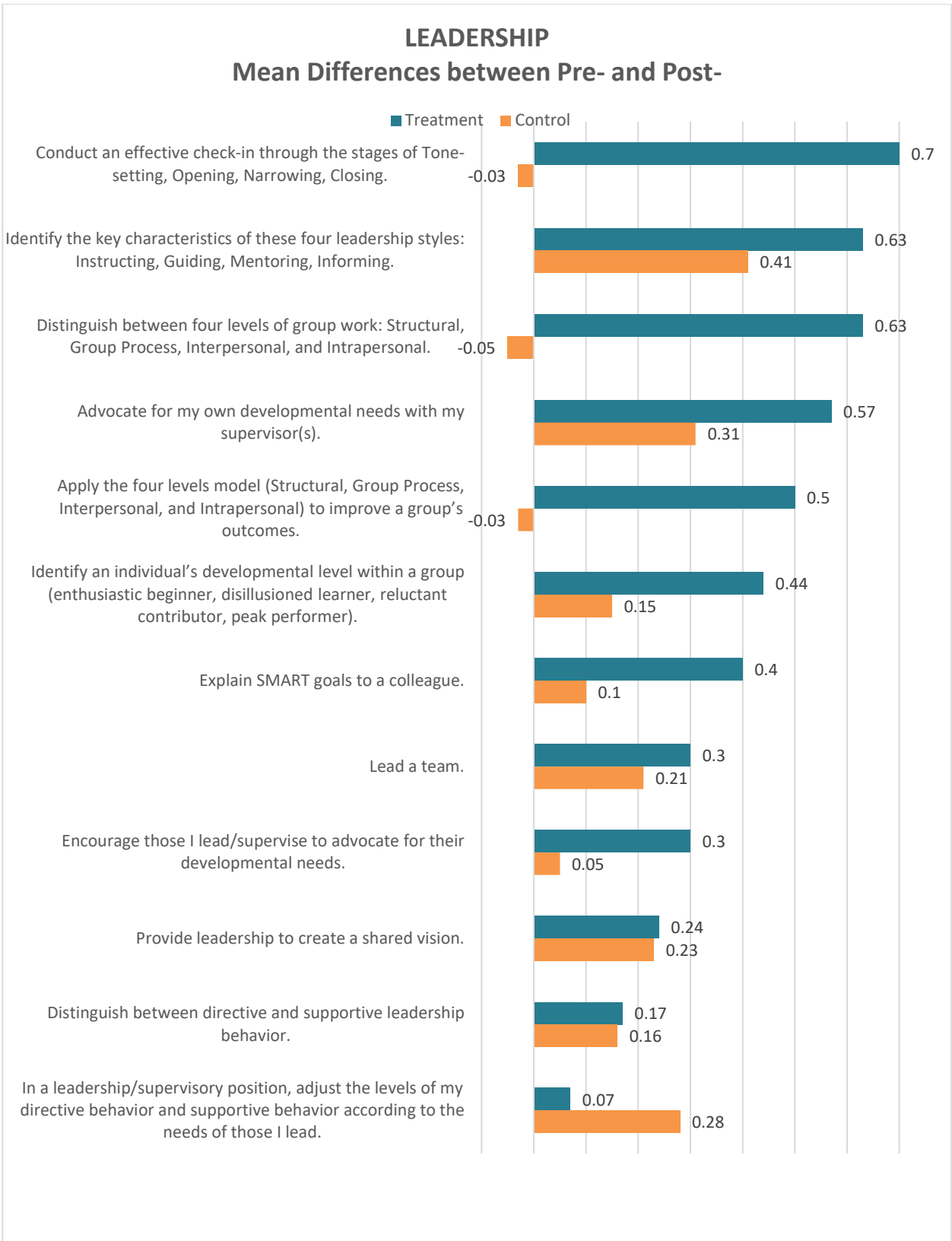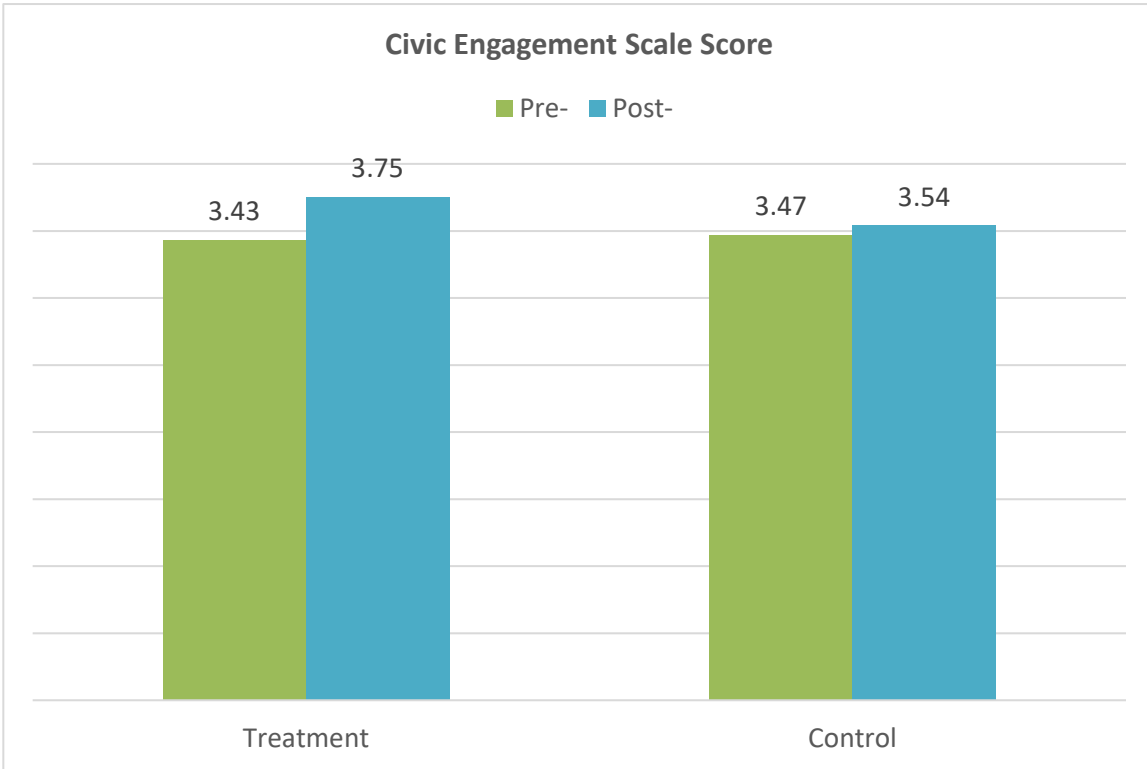

Exhibit 19. **Civic Engagement Scale Score**

The mean differences between pre- and post- for each question in the Civic Engagement training area is shown in Exhibit 20. On every question but one the treatment group had more improvement than the control group. Exhibit 21 shows the results of a series of repeated measures ANOVAs, none of the questions showed more substantial improvement for the treatment group compared to the control group, though many of the questions showed improvement over time for both groups.

CIVIC ENGAGEMENT
Mean Differences between Pre- and Post-

■ Treatment ■ Control

	Treatment	Control
Explain civic infrastructure to a colleague.	0.78	0.59
Conduct a community focus group.	0.56	0.16
Evaluate information about civic issues for accuracy and reliability.	0.37	0.11
Create a civic engagement tool kit.	0.3	0.19
Find sources of information about civic issues.	0.3	0.2
Become actively involved in an issue that affects my own community (geographical, social, other).	0.26	0.28
Interpret the results of a survey or poll.	0.26	-0.19
Work for social change in an area that matters to me.	0.23	-0.11
Maintain or increase my civic engagement after AmeriCorps.	0.11	-0.28
Identify an area of social change that matters to me.	0.08	-0.19

Exhibit 20. **CIVIC ENGAGEMENT – Mean Differences between Pre- and Post-**

Exhibit 21.
Pre- and Post-Survey Means by Group – Civic Engagement

Question	Group	Pre-Survey Mean	Post-Survey Mean	Pre-Post-Difference	Statistical Significance
PRE- AND POST- SURVEY MEANS BY GROUP – CIVIC ENGAGEMENT					
Explain civic infrastructure to a colleague.	Treatment	2.26	3.04	+.78	Sign. for time *F*=19.9 (*p*=.001)
	Control	2.22	2.81	+.59	
Find sources of information about civic issues.	Treatment	3.37	3.67	+.30	Trend for time *F*=3.3 (*p*=.08)
	Control	3.36	3.56	+.20	
Evaluate information about civic issues for accuracy and reliability.	Treatment	3.41	3.78	+.37	Trend for time *F*=3.3 (*p*=.08)
	Control	3.28	3.39	+.11	
Interpret the results of a survey or poll.	Treatment	4.00	4.26	+.26	
	Control	4.19	4.00	-.19	
Identify an area of social change that matters to me.	Treatment	4.22	4.30	+.08	
	Control	4.58	4.39	-.19	
Work for social change in an area that matters to me.	Treatment	3.96	4.19	+.23	
	Control	4.33	4.22	-.11	
Create a civic engagement tool kit.	Treatment	2.63	2.93	+.30	
	Control	2.50	2.69	+.19	
Conduct a community focus group.	Treatment	2.63	3.19	+.56	Sign. for time *F*=4.2 (*p*<.05)
	Control	2.53	2.69	+.16	
Become actively involved in an issue that affects my own community (geographical, social, other).	Treatment	3.85	4.11	+.26	
	Control	3.75	4.03	+.28	
Maintain or increase my civic engagement after AmeriCorps.	Treatment	3.93	4.04	+.11	
	Control	3.92	3.64	-.28	

Job Readiness. Although the treatment group and the control group improved on the Job Readiness scale score from pre- to post-, the improvements were not statistically significant for either group (see Exhibit 22). No differences were found on the Job Readiness scale score based on gender, ethnicity, number of years of service in AmeriCorps, or based on the number of trainings attended. Additionally, there were no differences based on whether a member attended the follow-up training.
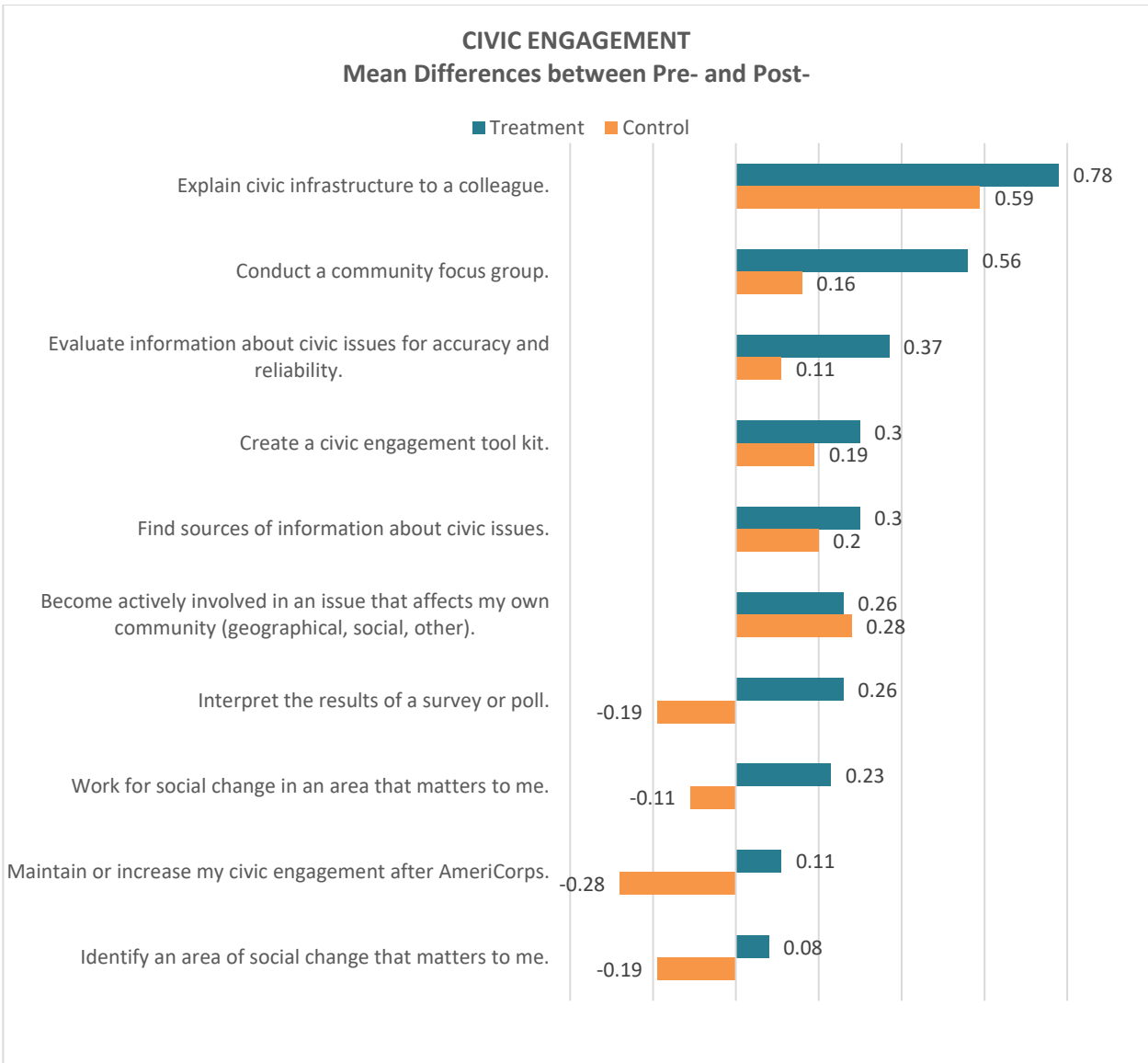
Job Readiness Scale Score

Pre- ■ Post-

| Treatment | | Control | |
| 3.99 | 4.2 | 4.14 | 4.25 |

Exhibit 22. **Job Readiness Scale Score**

The mean differences between pre- and post- for each question in the Job Readiness training area are shown in Exhibit 23. On four out of the seven questions the treatment group had more improvement than the control group. Exhibit 24 shows the results of a series of repeated measures ANOVAs. None of the questions showed more substantial improvement for the treatment group compared to the control group, though many of the questions showed improvement over time for both groups.

JOB READINESS
Mean Differences between Pre- and Post-

■ Treatment ■ Control

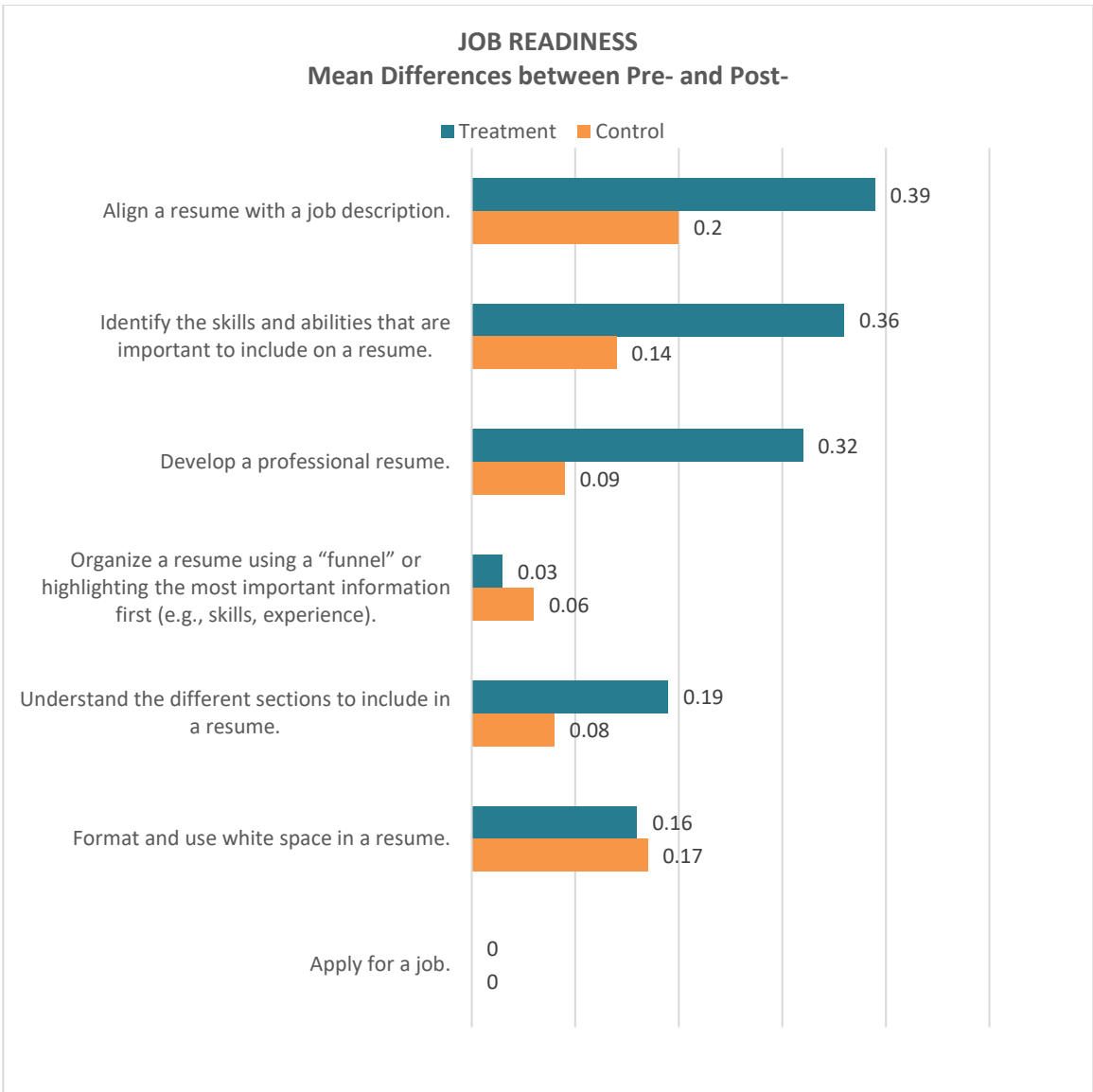| Category	Treatment	Control
Align a resume with a job description.	0.39	0.2
Identify the skills and abilities that are important to include on a resume.	0.36	0.14
Develop a professional resume.	0.32	0.09
Organize a resume using a "funnel" or highlighting the most important information first (e.g., skills, experience).	0.03	0.06
Understand the different sections to include in a resume.	0.19	0.08
Format and use white space in a resume.	0.16	0.17
Apply for a job.	0	0

Exhibit 23. **JOB READINESS – Mean Differences between Pre- and Post-**

Exhibit 24.
Pre- and Post-Survey Means by Group – Job Readiness

Question	Group	Pre-Survey Mean	Post-Survey Mean	Pre-Post-Difference	Statistical Significance
Develop a professional resume.	Treatment	4.03	4.35	+.32	Sign. for time $F=4.8$ ($p<.05$)
	Control	4.22	4.31	+.09	
Align a resume with a job description.	Treatment	3.90	4.29	+.39	Sign. for time $F=6.4$ ($p<.05$)
	Control	4.13	4.33	+.20	
Identify the skills and abilities that are important to include on a resume.	Treatment	4.06	4.42	+.36	Trend for time $F=3.8$ ($p=.06$)
	Control	4.17	4.31	+.14	
Organize a resume using a "funnel" or highlighting the most important information first (e.g., skills, experience).	Treatment	3.87	3.90	+.03	
	Control	3.94	4.00	+.06	
Understand the different sections to include in a resume.	Treatment	4.03	4.22	+.19	
	Control	4.25	4.33	+.08	
Format and use white space in a resume.	Treatment	3.81	3.97	+.16	
	Control	3.94	4.11	+.17	
Apply for a job.	Treatment	4.23	4.23	.00	
	Control	4.33	4.33	.00	

SUMMARY

Treatment group changes over time. Scale scores for Leadership, Civic Engagement, and Job Readiness improved for the treatment group from pre- to post-survey.
- Although the Job Readiness scale score was the highest for pre- and for post-, the change over time was not statistically significant. This may indicate that members had more familiarity with the topics covered in this training area prior to the training.
- The lowest scale scores were for the Leadership area; however, this area had the most growth for treatment group members over time.
- The Civic Engagement scale scores also improved over time (statistical trend).
- No differences were found for change over time based on gender, ethnicity, number of years of service in AmeriCorps, or based on the number of trainings attended.
- There were no differences based on whether a member attended the follow-up training.

Treatment group compared to control group.
- *Leadership.* Both the treatment group and the control group improved on the Leadership scale score from pre- to post-survey. Although the treatment group made more substantial improvement than the control group, the difference in growth between the groups did not reach statistical significance. On every question on the Leadership scale, except for one, the treatment group had more improvement than the control group. There were three questions where improvements were statistically greater for the treatment group compared to the control group.

These included 1) conducting an effective check in, 2) distinguishing between four levels of group work, and 3) applying the four levels model to improve group outcomes.

- *Civic Engagement.* Similar to the Leadership findings, the treatment group and the control group improved on the Civic Engagement scale score from pre- to post-. Once again, the treatment group made more substantial improvement than the control group, but the difference in growth between the groups did not reach statistical significance.
- *Job Readiness.* Although the treatment group and the control group improved on the Job Readiness scale score from pre- to post-, the improvements were not statistically significant for either group.
- No differences were found for any of the scale scores based on gender, ethnicity, number of years of service in AmeriCorps, or based on the number of trainings attended.
- There were no differences based on whether a member attended the follow-up training.

EVALUATION QUESTION #2: ARE WSC MEMBERS WHO RECEIVE THE NEW TRAINING MORE LIKELY TO BE CONNECTED TO NEW CAREER OR EDUCATION OPPORTUNITIES RELATED TO THEIR SERVICE, COMPARED WITH MEMBERS WHO DID NOT RECEIVE THE TRAINING?

Survey results are very positive and show that members in the treatment and control group were satisfied with their AmeriCorps experience, with the control group slightly more satisfied (91%) than members in the treatment group (84%) (see Exhibit 25). They also believe they benefitted from being an AmeriCorps member. Notably 93% of treatment group members and 97% of control group members felt that they made a contribution to their community, and 80% and 91% of treatment and control group members, respectively, felt they were part of a community. Related to career and education goals, 77% of treatment group and 70% of control group members reported that they figured out their next steps in terms of career/professional goals, and 47% and 42% of treatment and control group member, respectively, figured out their next steps in terms of educational goals.

All things considered, how do you feel about your overall AmeriCorps service experience?

■ Very satisfied ■ Satisfied ■ Neither Dissatisfied or Satisfied ■ Dissatisfied ■ Very Dissatisfied

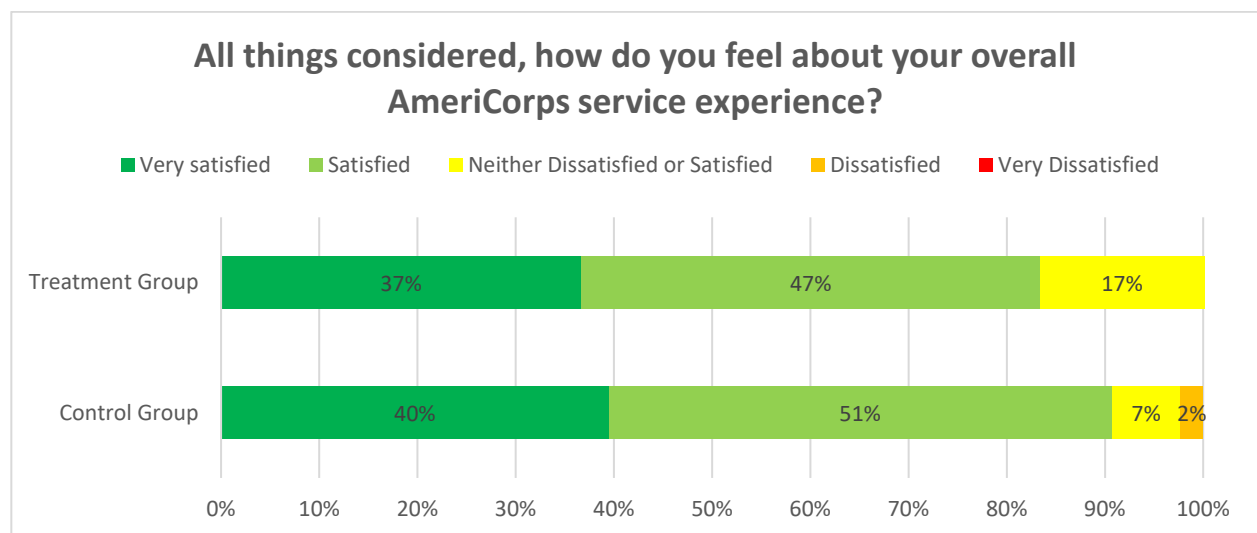| Group	Very satisfied	Satisfied	Neither	Dissatisfied
Treatment Group	37%	47%	17%	
Control Group	40%	51%	7%	2%

Exhibit 25. **Satisfaction with AmeriCorps**

Although these results are positive, AmeriCorps members attributed their experience serving as an AmeriCorps member in its totality as contributing to the changes, rather than the trainings. For example, when asked how the trainings prepared them for their transition from service to career or future education. Some members shared:

> The answer is that [the trainings] did not prepare me at all. But it is because of *all* of the stuff I get out of this work. [The] past 8.5 months [were] interesting and engaging and I have learned so much here, but nothing against the trainings.

> WSC allowed me the opportunity to serve my community and gain experience in the education field. My mentor was extremely helpful and guided me in the right direction. My service core partner was also a joy to work with, and I gained a lifelong friend. I can't recommend this opportunity to enough people. My time at [organization] solidified my choice as an elementary education major, and I gained the skills necessary to be successful in this field. I am disappointed that my time here is coming to an end but I look forward to the future, knowing that WSC has helped prepare me for the next steps!

OUTCOMES

AmeriCorps members in both the treatment group and the control group were asked 17 questions on the post-survey related to outcomes from their service term. Four of the questions were worded in the negative (higher responses indicate a more negative perspective) so we reverse coded those questions so that higher responses indicate a more positive perspective. Similar to the questions related to specific trainings, we created an Outcomes scale score by adding up the numeric responses for each question and dividing by 17.

No statistically significant difference existed between the treatment group and the control group on the Outcomes scale score (see Exhibit 26). No differences were found on the Outcomes scale score based on gender, ethnicity, number of years of service in AmeriCorps, or based on the number of trainings attended.

Outcomes Scale Score

■ Treatment ■ Control

Treatment: 3.99 Control: 4.11
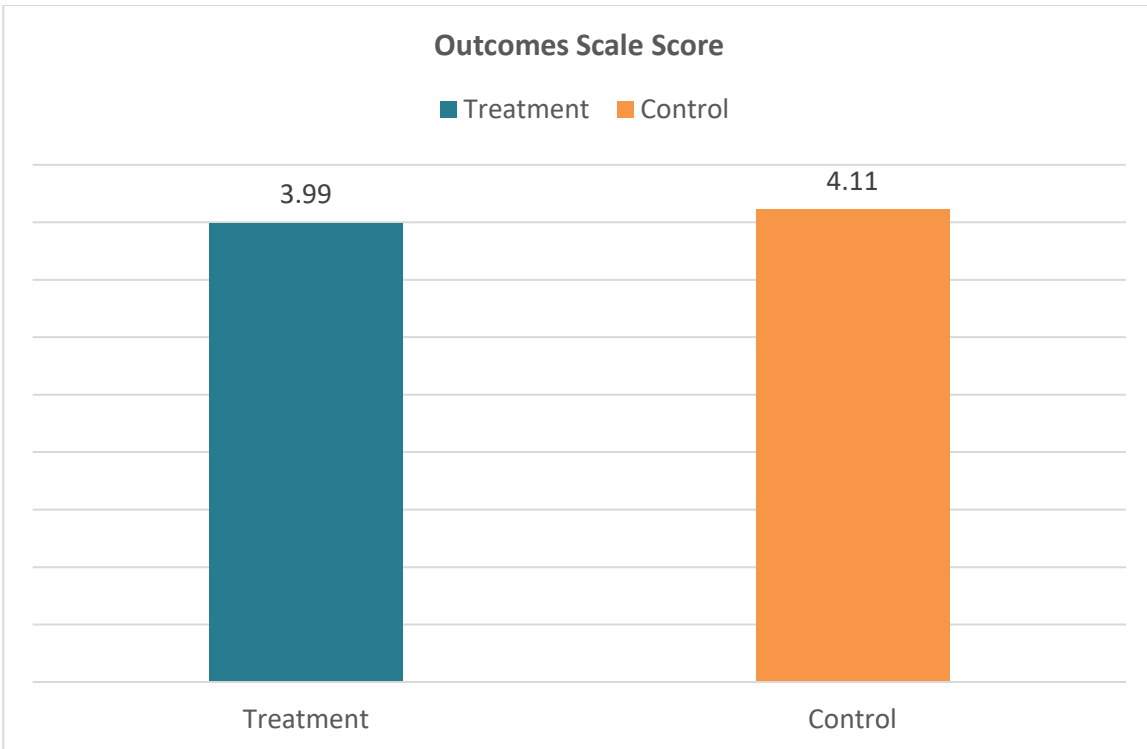
Exhibit 26. **Outcomes Scale Score**

The majority of Outcomes questions for both groups had mean scores close to four or higher, indicating high levels of agreement with most of the questions by both groups (see Exhibit 27). Exhibit 28 shows the results of a series of ANOVAs in which two of the questions, marked in red, showed a higher mean score for the control group compared to the treatment group: 1) The majority of my work did not make a difference in the community (reverse coded) and 2) I did things I never thought I could do.

OUTCOMES
Mean Scores

■ Treatment ■ Control

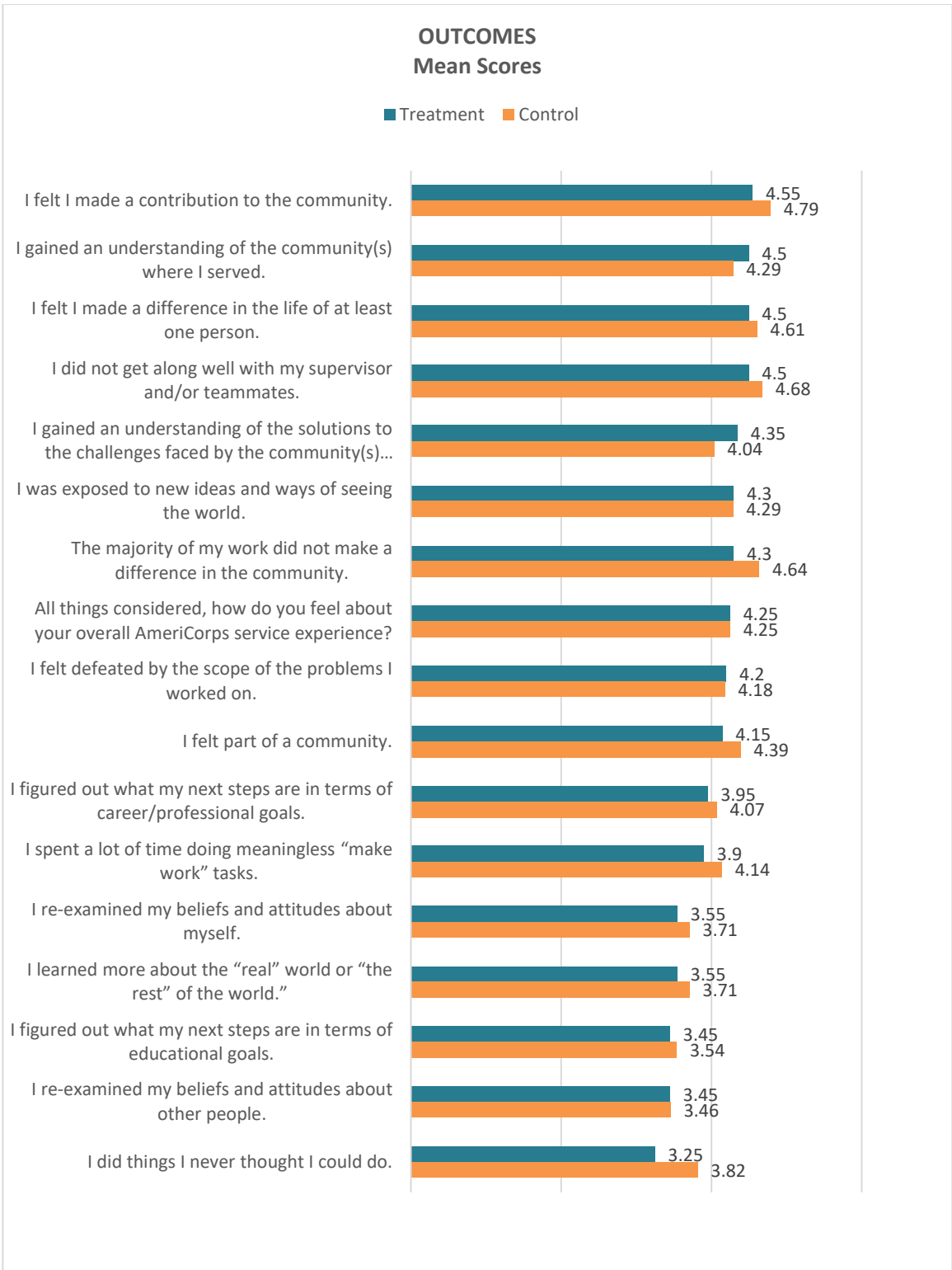| Outcome	Treatment	Control
I felt I made a contribution to the community.	4.55	4.79
I gained an understanding of the community(s) where I served.	4.5	4.29
I felt I made a difference in the life of at least one person.	4.5	4.61
I did not get along well with my supervisor and/or teammates.	4.5	4.68
I gained an understanding of the solutions to the challenges faced by the community(s)…	4.35	4.04
I was exposed to new ideas and ways of seeing the world.	4.3	4.29
The majority of my work did not make a difference in the community.	4.3	4.64
All things considered, how do you feel about your overall AmeriCorps service experience?	4.25	4.25
I felt defeated by the scope of the problems I worked on.	4.2	4.18
I felt part of a community.	4.15	4.39
I figured out what my next steps are in terms of career/professional goals.	3.95	4.07
I spent a lot of time doing meaningless "make work" tasks.	3.9	4.14
I re-examined my beliefs and attitudes about myself.	3.55	3.71
I learned more about the "real" world or "the rest" of the world."	3.55	3.71
I figured out what my next steps are in terms of educational goals.	3.45	3.54
I re-examined my beliefs and attitudes about other people.	3.45	3.46
I did things I never thought I could do.	3.25	3.82

Exhibit 27. **Outcomes - Mean Scores**

Exhibit 28.
Post-Survey Means by Group - Outcomes

PRE- AND POST- SURVEY MEANS BY GROUP - OUTCOMES			
Question	**Group**	**Post-Survey Mean**	**Statistical Significance**
I felt I made a contribution to the community.	Treatment	4.55	
	Control	4.79	
I re-examined my beliefs and attitudes about myself.	Treatment	3.55	
	Control	3.71	
I was exposed to new ideas and ways of seeing the world.	Treatment	4.30	
	Control	4.29	
I felt part of a community.	Treatment	4.15	
	Control	4.39	
I learned more about the "real" world or "the rest" of the world."	Treatment	3.55	
	Control	3.71	
I gained an understanding of the community(s) where I served.	Treatment	4.50	
	Control	4.29	
I gained an understanding of the solutions to the challenges faced by the community(s).	Treatment	4.35	
	Control	4.04	
I spent a lot of time doing meaningless "make work" tasks. (reverse coded)	Treatment	3.90	
	Control	4.14	
The majority of my work did not make a difference in the community. (reverse coded)	Treatment	4.30	Sign. for group F=4.3 (p<.05)
	Control	4.64	
I felt I made a difference in the life of at least one person.	Treatment	4.50	
	Control	4.61	
I did things I never thought I could do.	Treatment	3.25	Sign. for group F=5.9 (p<.05)
	Control	3.82	
I did not get along well with my supervisor and/or teammates. (reverse coded)	Treatment	4.50	
	Control	4.68	
I figured out what my next steps are in terms of educational goals.	Treatment	3.45	
	Control	3.54	
I figured out what my next steps are in terms of career/professional goals.	Treatment	3.95	
	Control	4.07	
I felt defeated by the scope of the problems I worked on. (reverse coded)	Treatment	4.20	
	Control	4.18	
I re-examined my beliefs and attitudes about other people.	Treatment	3.45	
	Control	3.46	
All things considered, how do you feel about your overall AmeriCorps service experience?	Treatment	4.25	
	Control	4.25	

SUMMARY

AmeriCorps members in both the treatment group and the control group were asked 17 questions on the post-survey related to outcomes from their service term. We found no difference between the treatment group and control group on the Outcomes scale score. The majority of Outcomes questions for both groups had mean scores close to four or higher, indicating high levels of agreement with most of the questions by both groups.

This section covers program-level recommendations based on evaluation findings, followed by a short list of specific programming recommendations offered by members.

Strengthen communication. Site supervisors and members said communication was fairly effective, but not everyone received complete communication. Notably, site supervisors often did not receive information about the trainings, which hindered their ability to support their members' learning or projects. Additionally, while members had been informed of the training, they learned of the specific dates a few weeks prior, which impacted their sites. The success of program implementation relies heavily on the awareness of site supervisors' and participants' of the opportunities and requirements. Communication about future trainings should go to site supervisors first, so they can address members' questions. Additionally, communication should include attendance requirements, and the dates for the training should be sent out early so sites can plan around those dates and ensure coverage.

Consider the timing of future trainings. Site supervisors and members reported that training in the spring is problematic. For many fields, spring is busier than other periods, and it is harder for members to be pulled away from their service. Additionally, members are well into their service term, and training late in their term feels less relevant. Because of these issues, site supervisors and members recommended that the trainings occur in the fall and are completed by the end of February.

The timing of the trainings also impacted this study. Many of the results favored the treatment group, and we believe more results would have been significant if there was a larger sample. However, the last training ended mid-May, and by that time some members ended their service or were near the end of their team, and they were less likely to respond to the survey, resulting in a smaller sample. Having the trainings earlier in the year likely would have yielded a better response rate.

Consider adding leveled content and choice. Some members reported that trainings were not useful if they covered skills they had already acquired, and some members felt they benefited from some trainings and not others. Providing different levels of training would help meet the needs of the diverse membership described by Serve WA. Additionally, adding choice would allow members to attend the trainings that meet their needs.

Improve the design of virtual trainings to encourage more engagement. Collectively, members requested in-person trainings either statewide or regionally. However, if trainings continue to be done virtually, consider making some changes to ensure more active engagement. First, it would be helpful to set clear expectations for when the camera can be on or off and how people engage in the break-out rooms at the onset of each training. Because engagement in the breakout rooms was difficult, with some having limited participation, it would be helpful to either have a facilitator, potentially a service member, for each breakout room and/or identify a deliverable or reporting requirement to increase accountability for participation. Finally, members really appreciated the opportunity to network. To increase these opportunities, consider having the same group of people work together in each breakout room for a specific training or create breakout rooms with like groups, such as people who work in the same region or in the same focus area.

Consider inviting site supervisors to training. If both members and site supervisors attend the trainings, site supervisors can reinforce the learning, integrate the information into their own trainings, and support the homework assignments by integrating projects into the work members do at their sites. If this cannot be done, at the minimum, site supervisors would like information on the content covered, so they can review this with members during their meeting and training sessions.

Specific programming recommendations from members. The following list includes recommendations for training content and activities that were offered by AmeriCorps members during interviews and on the survey.

- Information relevant to specific focus areas
- Preparation for life after completing AmeriCorps service
- Tips and strategies to successfully live on the stipend
- Cultural responsiveness
- Diversity, equity, and inclusion
- Computer skills
- Professional communication
- Grant writing
- Working with non-profits
- Community building
- Other possible fields, outside their focus area, the AmeriCorps member could consider pursuing, based on their degree, experiences, and skills
- Networking to talk about their projects and AmeriCorps experiences
- Job-shadowing opportunities

The Washington Service Corps Survey was administered through SurveyMonkey. The pre-survey was administered from November 13 to November 29, 2022, and the post-survey was administered from May 30 to July 17, 2023. Weekly reminders were sent to non-respondents to complete the survey. In total, there were 201 pre-survey responses and 109 post-survey responses. However, several members completed the survey twice, and some did not include their email address so information could be matched. Because of this, a total of 185 pre-surveys (treatment = 83, control =82) and 100 post-surveys (treatment = 48, control = 52) could be matched. Fewer post-surveys were completed because some members exited their term before or around the time the post-survey was administered. Exhibit A-1 shows the demographics of the treatment and control groups for all respondents regardless of the training they attended. The two groups are similar, with some minor fluctuations.

Exhibit A-1.
Demographics of Survey Respondents

DEMOGRAPHICS OF SURVEY RESPONDENT BY GROUP		
Demographic	**Treatment Group**	**Control Group**
Years Served		
1 Year	78.8%	82.3%
2 Years	18.8%	16.5%
3 Years	1.2%	1.3%
4 Years	1.2%	--
Gender		
Female	63.2%	65.2%
Male	22.1%	26.1%
Non-binary	5.9%	5.8%
Transgender	1.5%	--
Prefer not to answer	5.9%	2.9%
Race		
American Indian/Alaskan Native	--	2.9%
Asian	5.9%	2.9%
Black/African American	4.4%	4.3%
Native Hawaiian/Pacific Islander	2.9%	--
White	76.5%	75.4%
Two or more races	5.9%	8.7%
Other	--	1.4%
Prefer not to answer	4.4%	4.3%
Ethnicity		
Hispanic or Latina/o	7.7%	8.7%
Not Hispanic or Latina/o	83.1%	88.4%
Prefer not to answer	9.2%	2.9%
Education		
GED Certificate	1.5%	1.4%
High School Diploma	5.9%	5.7%
Some College	13.2%	11.4%
Technical or Vocational Certificate	--	1.4%
Associate Degree	8.8%	7.1%
Bachelor's Degree	66.2%	67.1%
Master's or Doctoral Degree	2.9%	4.3%
Prefer not to Answer	1.5%	1.4%

AmeriCorps members were asked to rate the overall usefulness of AmeriCorps trainings. The pre-survey was administered after the onboarding trainings at the beginning of the service term, so both treatment and control groups participated in those standard trainings. The post-survey was administered after the treatment group participated in the augmented trainings; however, both groups also had training throughout the year that was offered by their sites and WSC. This analysis included all WSC members in the treatment and control group, regardless of which trainings they attended. Results showed that the control group found trainings to be more useful on the pre- and post-survey (36% and 45% respectively) than the treatment group (23% and 20% respectively).
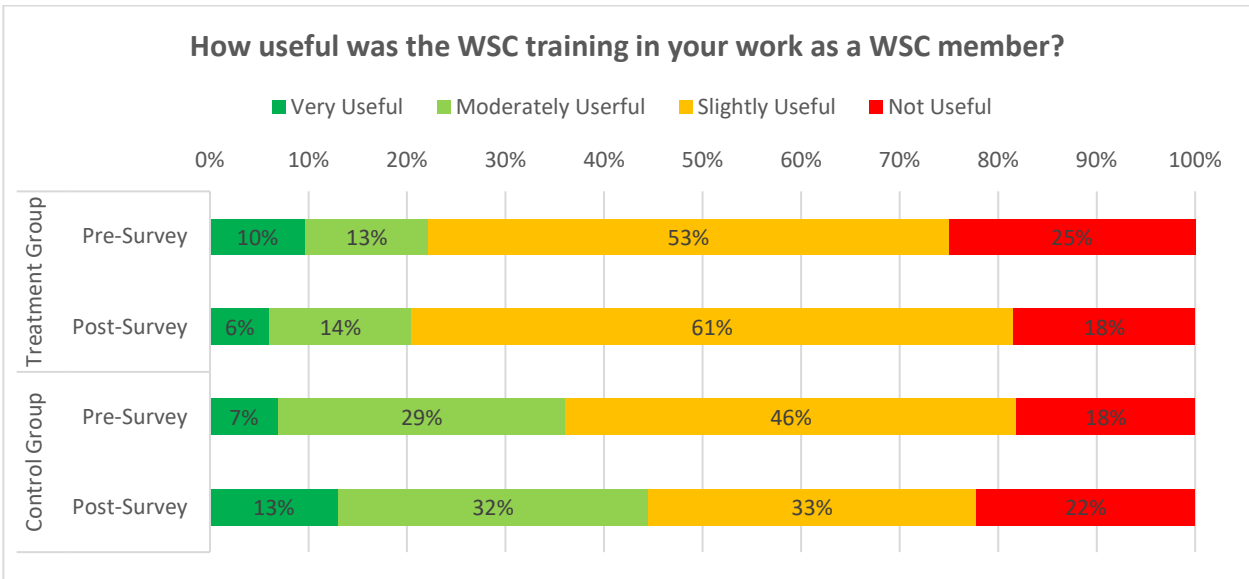
Exhibit A-2. Usefulness of WSC Training

AmeriCorps members were asked to write in responses to three questions about the content areas that were the most useful, recommendations for improvement, and additional training needs. Overall, responses were similar across groups, but some treatment group members provided some feedback about the augmented training. Below, we provide the top findings for the three questions. Responses were generally the same across groups on both the pre- and post-surveys, though information about the augmented training was on the post survey only.

Usefulness of Training

General Training – Treatment and Control Groups
- **Meeting other members/collaboration:** WSC members enjoyed opportunities to meet other members and to discuss issues related to their role and experience as an AmeriCorps member.
- **Learning about benefits, stipends, insurance, and other resources:** Members appreciated the opportunity to learn about the benefits associated with their service and how to better use the resources.

- **Learning about mental health and time management techniques:** Given the nature of the work, AmeriCorps members appreciated that self-care techniques were integrated into the training.
- **Learning about WSC policies, rules, requirements, and time tracker:** Members appreciated learning more about the policies, requirements, and tools they would use in their position.

Augmented Training – Treatment Group only
- **Leadership, Civic Engagement, and Job Readiness Training:** On the post-surveys, some members identified these trainings as the most helpful. In the comments, they discussed the content and how they used the training.

Recommendations to Improve Training

General Training – Treatment and Control Groups
- **Offer trainings in-person:** Across groups, members requested in-person trainings. They reported that online trainings made it more difficult to engage, and it was more difficult to apply the learning. Additionally, participation in breakout rooms varied greatly, with some off-topic or non-participative.
- **Opportunities to network:** Members requested opportunities to network with members across the state or working in their same focus area.
- **Shorten trainings and consider timing:** Members reported that the trainings were often too long and/or conflicted with other site responsibilities. Later in their service term, they reported more difficulties attending the training.
- **Differentiate training content and levels for members:** Members reported that having general trainings for everyone was not as useful. For example, members who are in their second year did not need some of the introductory information. Additionally, high school graduates and mid-career members had different training needs.
- **Contract with trainers who understand AmeriCorps:** Though not a frequent response, several members noted that some trainers were difficult to connect with because they had little understanding of AmeriCorps or the experience of AmeriCorps members. They appreciated it, particularly, when trainers had been AmeriCorps members.
- **Provide more training pertaining to the focus areas:** Members requested more training and opportunities for certification related to their focus area.

Augmented Training – Treatment Group only
- **Identify training dates at the beginning of service:** Members from the treatment group noted they struggled with getting dates for mandatory trainings late in their service term. They reported this was a hardship for their site.

Recommendations for Future Training

General Training – Treatment and Control Groups
- **Information relevant to specific focus area:** Members wanted more specific training related to their area of focus.
- **Preparation for life after completing service:** Members requested additional support to find a career, such as resumé building, interviewing, and marketing their service experience. This was predominately identified as a theme in the pre-survey.

- **Tips and strategies to successfully live on the stipend:** Members wanted more ideas and support to live off the stipend, such as how to effectively budget.
- **Other content specific training:** AmeriCorps members identified other trainings they would like, such as diversity, equity, and inclusion training, computer skills, working with non-profits, and grant writing.

Exhibit A-3 includes some quotes obtained from the survey questions. We have also included whether the quote came from a treatment or control group member.

Exhibit A-4.
Sample Qualitative Data

Sample Qualitative Quotes
What content areas or experiences during the training were the most useful?
"The discussion of WSC benefits and resources was informative. It enhanced my understanding of the existing system of resources available to service members during their tenure." – Treatment Group
"Everything is still very new to me, so all the information during the training was helpful." – Control Group
"Meeting other members and hearing their ideas." – Treatment Group
"It was more useful to get a refresher on the AmeriCorps benefits. Some things that were especially useful were the explanation of how our stipend worked, especially in regard to state services like SNAP. I wouldn't have been able to utilize that benefit without the training." – Control Group
"Leadership training, setting boundaries and learning what my strengths are when it comes to a team." – Treatment Group
"I enjoyed the civics report portion: I was able to deep dive on a subject with a growing concern for our community, which allowed me to become more aware of the situation at hand." – Treatment Group
"The life after AmeriCorps training where we had to make a resume was useful because it stopped me from procrastinating that." – Treatment Group
What recommendations do you have to improve training?
"It was incredibly hard to focus with the online format. I think it could have benefited from more activities or if possible being in person. I also felt like the content wasn't very relevant to me, I have heard this over and over again from other jobs and programs, and I also felt that I have seen it done in a more engaging way. The first day we were just talked at for hours. It was hard to focus and I appreciate people taking time to be with us, but I was bored and felt I didn't learn much. In giving us tips on how to take care of ourselves you never had us practice like it would have been more engaging I'd you had us practice something or do something. Being neurodivergent and sitting at a screen for that long was agony." – Treatment Group
"It would be helpful to have the training in person if possible for future years. It is difficult to network online and stay engaged." – Control Group
"It's hard to encourage active participation in virtual trainings, but I felt that the break rooms were not the best use of time as often folks had their cameras off and mics off so I felt like I was talking to an empty room." – Treatment Group
"If the trainings could make more of an effort to connect AmeriCorps members based on their location in Washington, I think people might have an easier time making friends since they live closer together and there is a higher likelihood of people spending time together and connecting beyond just the training sessions." – Control Group
"The same amount of information could probably be conveyed in half the time, especially in an online format." – Treatment Group
"The trainings were way too long. By the end of the 3rd day there was silence in the discussion rooms because everyone was so burnt out. Keep the secondary trainings to 1 hr max." – Control Group
"Training targeted for mid-career members. Almost all of the training I attended seemed to be geared towards members who are just finishing school and have little to no professional experience. – Treatment Group

"Having a separate training with new information, or an abridged version, would be great for returning members. Sitting through all the same sessions as I did the first year, I learned very little and felt my time would have been better spent serving at my site." – Control Group
"Pick keynote speakers who are more in touch with the realities of working for a nonprofit with extremely low pay. Hearing about someone's second home in another country and traveling recommended as "self-care" was tone-deaf. Most service members don't come from money and do this work because they can personally relate to needing these supports and services." – Control Group
"Tailor trainings for focus area (e.g., disaster response, education, environmental services, social services). Each field will have different challenges and generic training is not relevant for everything." – Treatment Group
"Role Specific Trainings, this has been my first year as an environmental educator and I really would've liked to see some specific trainings towards this, like curriculum development, Behavior management in the classroom and outside, Grant writing, and Building working relationships with teachers." – Treatment Group
"Having set dates for the trainings at the beginning of the year would be nice so that we can work around them. Many of the training times conflicted with events at my service." – Treatment Group

LEADERSHIP

Exhibit A-5 shows pre- and post-survey responses to questions designed to assess members' confidence in their knowledge, attitudes, and skills around leadership. On the pre-survey, the treatment group typically reported less confidence than the control group, but on the post-survey the treatment group showed more overall improvement. The results show that for the treatment group, members' confidence in their leadership skills grew in every area (7 to 26 percentage points). The two largest gains were in *members identifying the key characteristics of leadership styles* (34 percentage-point gain) and *advocating for their developmental needs with their supervisors* (26 percentage-point gain). In contrast, results for members in the control group varied, with increases, no change, and decreases across the items (-5 to 16 percentage points). The largest increase for the control group was also *advocating for their developmental needs with supervisors* (16 percentage-point gain). Overall, treatment group members demonstrated gains in their confidence on 9 of the 12 items, while control group members demonstrated larger gains than the treatment group on 3 of the 12 items.

Leadership: How do you rate your confidence level in the following areas? (Very & Fairly Confident)

Legend:
- ■ Treatment Group Pre-Survey
- ■ Treatment Group Post-Survey
- ■ Control Group Pre-Survey
- ■ Control Group Post-Survey

Lead a team.
- 67%
- 77%
- 77%
- 72%

In a leadership/supervisory position, adjust the levels of my directive behavior and supportive behavior according to the needs of those I lead.
- 63%
- 70%
- 59%
- 69%

Encourage those I lead/supervise to advocate for their developmental needs.
- 60%
- 73%
- 69%
- 64%

Advocate for my own developmental needs with my supervisor(s).
- 57%
- 83%
- 64%
- 80%

Provide leadership to create a shared vision.
- 53%
- 63%
- 74%
- 72%

Identify an individual's developmental level within a group (enthusiastic beginner, disillusioned learner, reluctant contributor, peak performer).
- 53%
- 63%
- 56%
- 72%

Distinguish between directive and supportive leadership behavior.
- 50%
- 67%
- 72%
- 72%

Explain SMART goals to a colleague.
- 40%
- 47%
- 41%
- 51%

Identify the key characteristics of these four leadership styles: Instructing, Guiding, Mentoring, Informing.
- 23%
- 57%
- 51%
- 64%

Conduct an effective check-in through the stages of Tone-setting, Opening, Narrowing, Closing.
- 20%
- 37%
- 44%
- 39%

Distinguish between four levels of group work: Structural, Group Process, Interpersonal, and Intrapersonal.
- 17%
- 37%
- 36%
- 36%

Apply the four levels model (Structural, Group Process, Interpersonal, and Intrapersonal) to improve a group's outcomes.
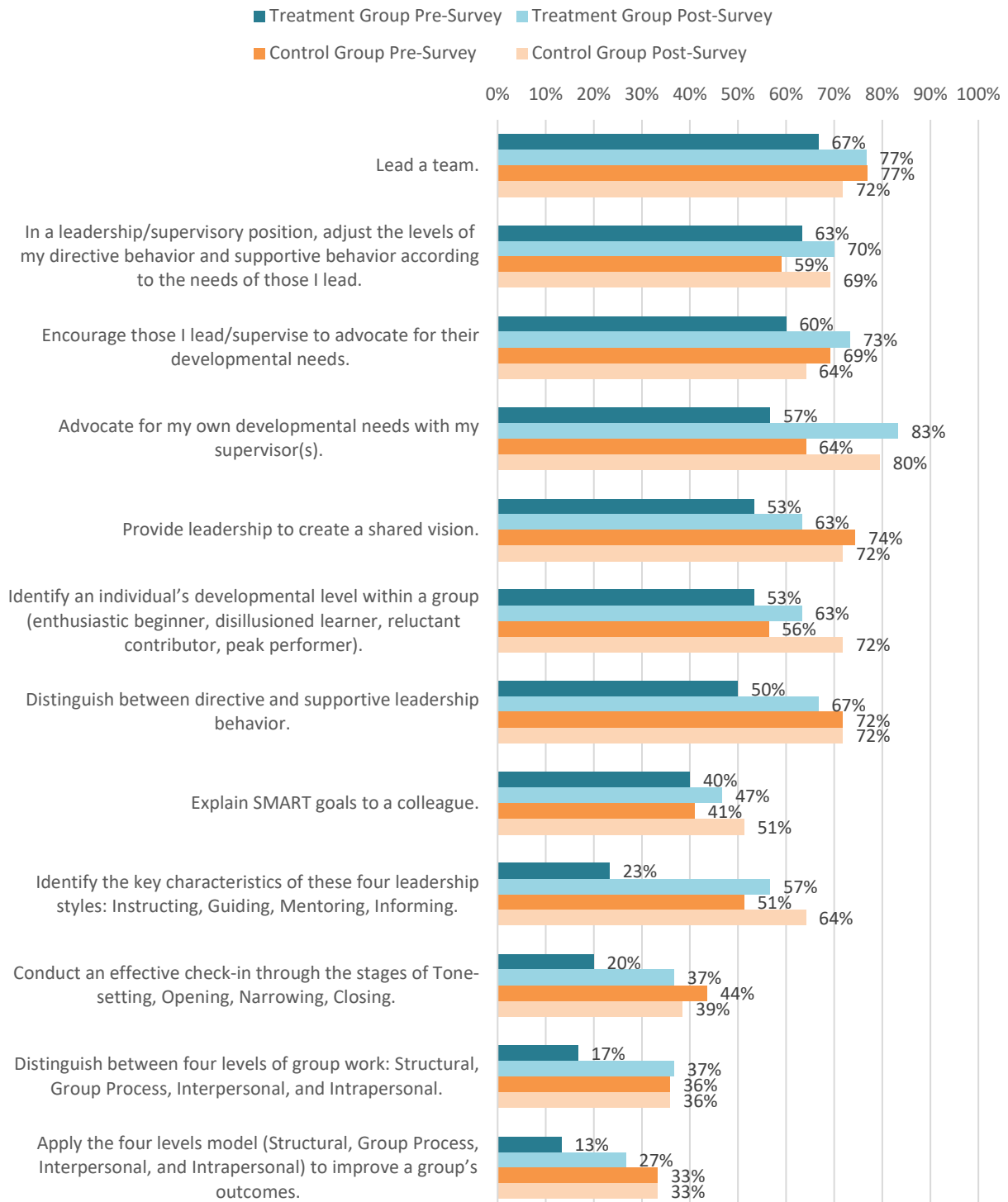- 13%
- 27%
- 33%
- 33%

Exhibit A-5. **Leadership (Very and Fairly Confident)**

CIVIC ENGAGEMENT

Exhibit A-6 shows pre- and post-survey responses to questions designed to assess members' confidence in their knowledge, attitudes, and skills around civic engagement. On the pre-survey, the treatment group typically reported less confidence than the control group, but on the post-survey the treatment group showed more overall improvement. The results show that for the treatment group, members' confidence in civic engagement grew in every area but one (0 to 19 percentage points). The largest gains were *become actively involved in an issue that affects my own community* and *work for social change in an area that matters to me* (19 percentage-point gain on both). In contrast, results for members in the control group varied, with items increasing, decreasing, or staying the same (-8 to 28 percentage points). The largest increase for the control group *was explain civic infrastructure to a colleague* (28 percentage point gain). Overall, treatment group members demonstrated gains in their confidence on 7 of the 10 items, while control group members demonstrated larger gains than the treatment group in 2 of the 10 items. One item had the same growth for both groups.

Civic Engagement: How do you rate your confidence level in the following areas? (Very & Fairly Confident)

Legend:
- Treatment Group Pre-Survey
- Treatment Group Post-Survey
- Control Group Pre-Survey
- Control Group Post-Survey

Identify an area of social change that matters to me.
- 82%
- 89%
- 94%
- 86%

Work for social change in an area that matters to me.
- 70%
- 89%
- 86%
- 83%

Interpret the results of a survey or poll.
- 70%
- 78%
- 83%
- 75%

Maintain or increase my civic engagement after AmeriCorps.
- 67%
- 82%
- 75%
- 67%

Become actively involved in an issue that affects my own community (geographical, social, other).
- 63%
- 82%
- 67%
- 81%

Evaluate information about civic issues for accuracy and reliability.
- 56%
- 56%
- 56%
- 56%

Find sources of information about civic issues.
- 48%
- 56%
- 58%
- 67%

Conduct a community focus group.
- 26%
- 37%
- 25%
- 33%

Create a civic engagement tool kit.
- 22%
- 30%
- 25%
- 28%

Explain civic infrastructure to a colleague.
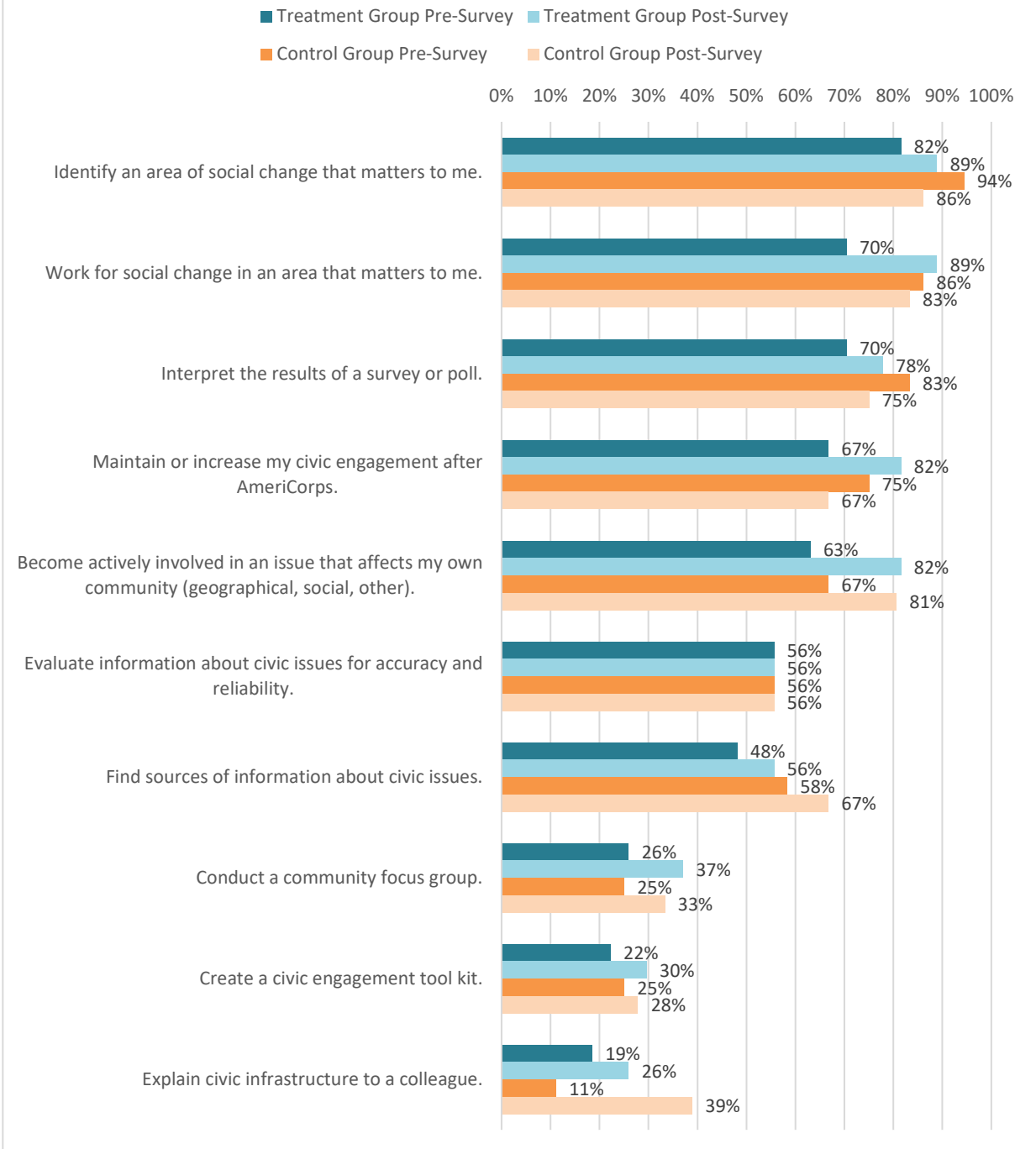- 19%
- 26%
- 11%
- 39%

Exhibit A-6. **Civic Engagement (Very and Fairly Confident)**

JOB READINESS

Exhibit A-7 shows pre- and post-survey responses to questions designed to assess members' confidence in their knowledge, attitudes, and skills around job readiness. On the pre-survey, the treatment group typically reported less confidence than the control group, but on the post-survey the treatment group showed more overall improvement. The results show that for the treatment group, members' confidence in job readiness grew in every item but one (-3 to 17 percentage points). The largest gains were on *identify the skills and abilities that are important to include on a resumé* and *develop a professional resumé* (both a 17 percentage-point gain). Developing a resumé was also a homework assignment, so members of the treatment group gained practical experience. Results for the control group decreased, stayed the same, or increased, but the gains were less (-3 to 6 percentage points). The largest increase for the control group was *identify the skills and abilities that are important to include on a resumé* (6 percentage point gain). Overall, treatment group members demonstrated gains in their confidence on 4 of the 7 items, and the control group on 1 of the 7 items. Two items had the same growth for both groups.
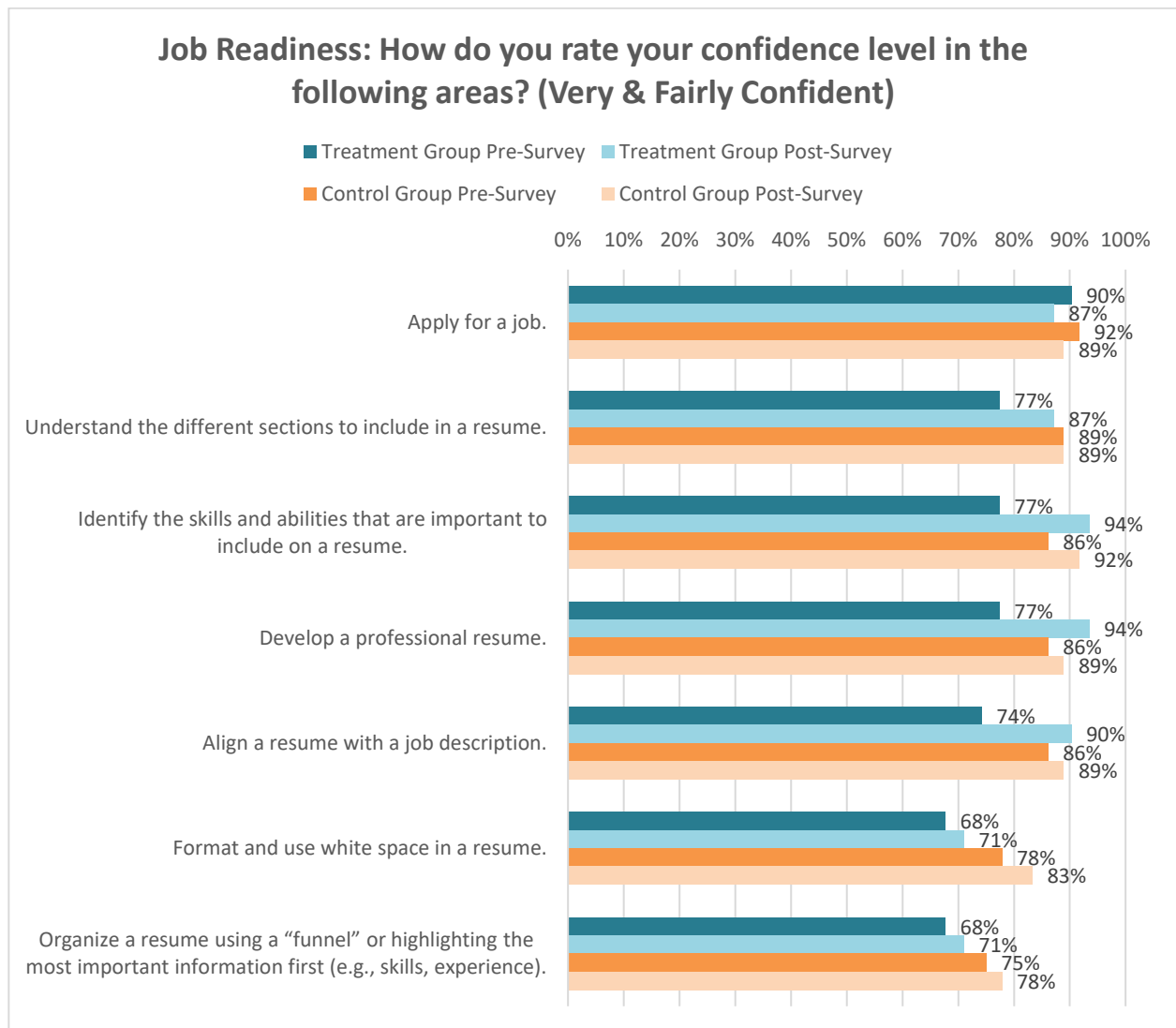

Job Readiness: How do you rate your confidence level in the following areas? (Very & Fairly Confident)

OUTCOMES

Exhibit A-8 shows the treatment and control groups overall satisfaction with their AmeriCorps experience. Overall, both groups were satisfied with their AmeriCorps experience, with the control group slightly more satisfied (91%) than members in the treatment group (84%).
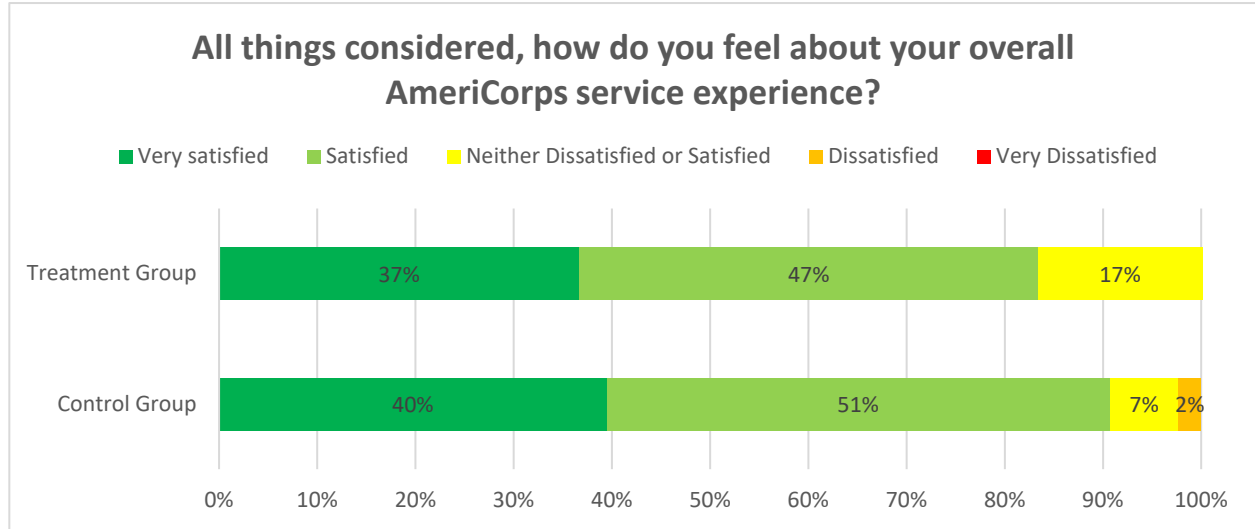

All things considered, how do you feel about your overall AmeriCorps service experience?

Legend: ■ Very satisfied ■ Satisfied ■ Neither Dissatisfied or Satisfied ■ Dissatisfied ■ Very Dissatisfied

Treatment Group: 37% Very satisfied, 47% Satisfied, 17% Neither

Control Group: 40% Very satisfied, 51% Satisfied, 7% Neither, 2% Dissatisfied

Exhibit A-8. **Satisfaction with AmeriCorps Experience**

AmeriCorps members were asked to describe the reasons for their level of satisfaction. Overall, for both groups, AmeriCorps members were satisfied with their experience because they gained relevant job experience and were able to provide community service. Across both groups, the amount of the stipend was the biggest deterrent. In addition, the treatment group identified too many mandatory trainings as an issue, as well. Exhibit A-9 shows some quotes from the survey. We have also included whether the quote came from a treatment or control group member.

Exhibit A-9.
Sample Qualitative Data

Sample Qualitative Quotes
Contributed to Satisfaction
"My team has been great and the work I have done made me reexamine my career and life goals, this year was a time of change for me and I learned many things about how the world works, and how people work." – Treatment Group
"I feel as though I got very lucky with my service site and the community that I found here. I am grateful for the experience and what it has provided me since it opened up so many doors and opportunities I never thought I would have!" – Control Group
"I thought I managed to expand my horizons and make a difference in the community while I developed valuable skills and experience." – Treatment Group
"I got to be really hands-on in the kitchen to also being the face of serving the seniors in my community. It was a great experience knowing I was fully engaged with my community where I grew up as a kid." – Control Group

Decreased Satisfaction
"It's been a great experience! Lots of learning. I just wish I were paid more. The WSC stipend has been by far the greatest challenge." – Treatment Group
"I loved my site, supervisors, and other AmeriCorps members I worked with. It was the best job and team I have ever had, and I really enjoyed my year. That being said, the reason I did not put "very satisfied" is because the AmeriCorps side of the position was very hard for me and the other member at my site. The lack of days off and lack of pay was very tough. Finding affordable housing was very hard on the stipend." – Control Group
"I feel that the experience itself was great, but the trainings were kind of unnecessary as some points." – Treatment Group
"I appreciated the opportunity to work at a non-profit that wouldn't otherwise have the capability to hire entry-level people and I valued the time to do PD opportunities. But I would not do AmeriCorps again because I didn't feel my time and effort was valued because of the amount of pay and because there were no benefits, overtime, or paid time off. The mandatory trainings and assignments also took up a lot of time from my service duties and were not helpful to me." – Treatment Group

Exhibit A-10 shows post-survey responses to questions designed to assess outcomes members may experience as a result of participating in the AmeriCorps program. Please note, the last four items are reversed, and responses closer to 0% are positive. The largest difference between groups was on the item: "I did things I never thought I could do" (43% treatment group; 61% control group). Overall, the control group's responses were slightly more positive. The control group scored higher on 7 of the 16 items, and the treatment group scores higher on 5 of the 16 items. On four items, the groups scored the same.

Outcomes: How do you agree or disagree with each of the following statements as it relates to your own AmeriCorps experience? (Agree & Strongly Agree)
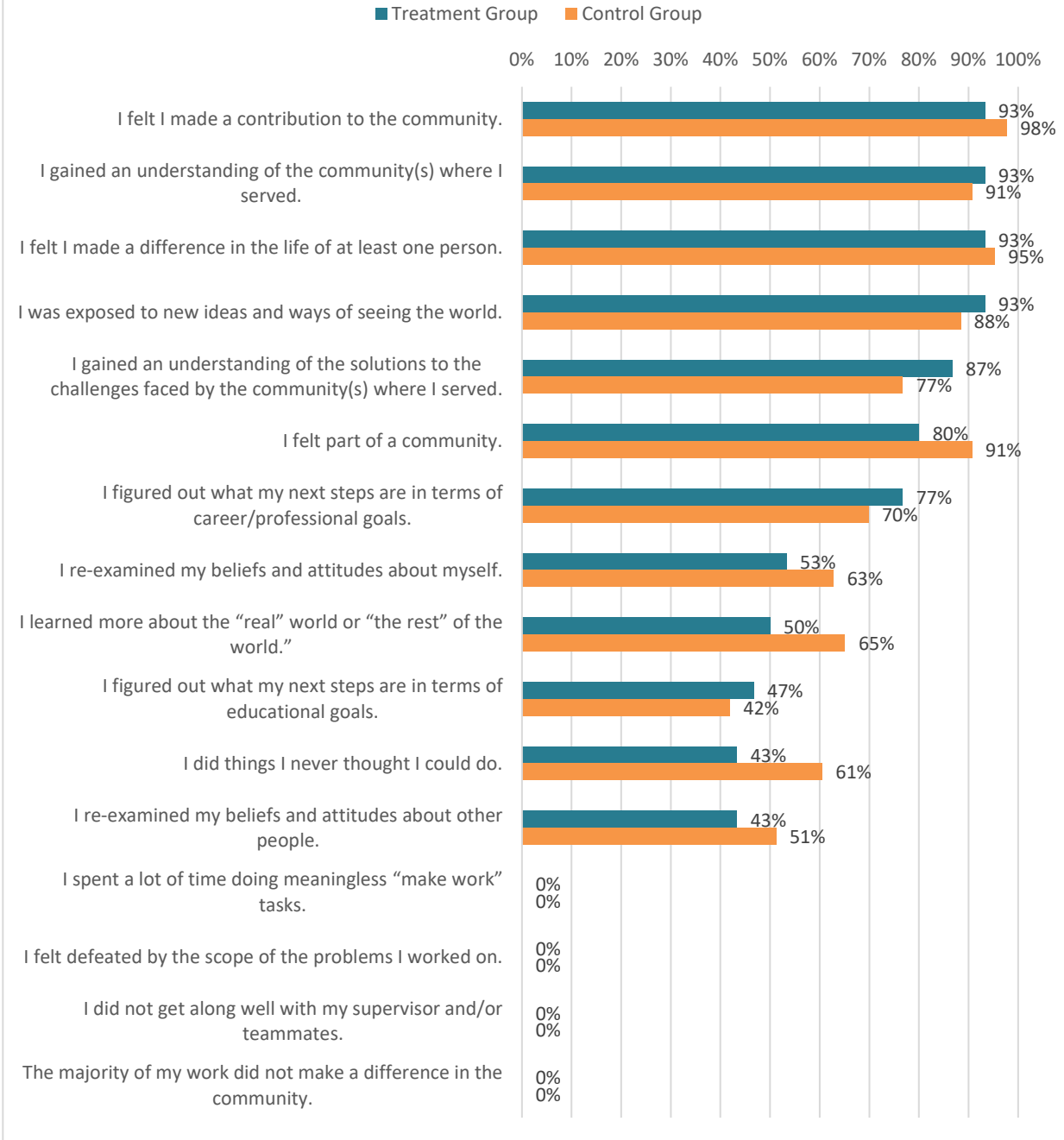
■ Treatment Group   ■ Control Group

Statement	Treatment Group	Control Group
I felt I made a contribution to the community.	93%	98%
I gained an understanding of the community(s) where I served.	93%	91%
I felt I made a difference in the life of at least one person.	93%	95%
I was exposed to new ideas and ways of seeing the world.	93%	88%
I gained an understanding of the solutions to the challenges faced by the community(s) where I served.	87%	77%
I felt part of a community.	80%	91%
I figured out what my next steps are in terms of career/professional goals.	77%	70%
I re-examined my beliefs and attitudes about myself.	53%	63%
I learned more about the "real" world or "the rest" of the world."	50%	65%
I figured out what my next steps are in terms of educational goals.	47%	42%
I did things I never thought I could do.	43%	61%
I re-examined my beliefs and attitudes about other people.	43%	51%
I spent a lot of time doing meaningless "make work" tasks.	0%	0%
I felt defeated by the scope of the problems I worked on.	0%	0%
I did not get along well with my supervisor and/or teammates.	0%	0%
The majority of my work did not make a difference in the community.	0%	0%

Exhibit A-10. **Outcomes (Agree & Strongly Agree)**