

The Changing Landscape of High School Equivalency in the U.S.

Options, Issues, and Improvement Strategies

MAY 2015 | BARRY SHAFFER

Introduction

For more than six decades, obtaining a General Educational Development (GED[®]) certificate was the nationally recognized and widely available high school equivalency (HSE) option. However, since January 2014, the content and process for obtaining an HSE credential in the U.S. has changed significantly. There are new state-endorsed equivalency options for individuals, and these changes, coupled with changes to the GED[®], have profound implications for persons seeking a high school equivalency credential as well as for postsecondary institutions and employers.

There have been several media reports in the past six months that raise concerns over an alarming decline in high school equivalency participation and a drop in the percentages of individuals passing HSE tests. Since a majority of out-of-school youth and adults who do not have a high school diploma are economically disadvantaged, the need to obtain high school equivalency to obtain employment or further education and training is critical.

This report identifies and explores current HSE issues that affect the Center for Law and Social Policy's (CLASP) mission of promoting economic and career success for low-income youth and adults. More specifically, this report identifies the most significant changes that have occurred in high school equivalency since 2014 and explores challenges and issues that low-income individuals face as a direct result of these HSE changes. A substantial part of this report includes findings from a state-by-state survey to identify perceptions about the implementation of new or continuing HSE options within the state.

Background

High school equivalency (HSE) is a term used to indicate that an individual has the same level of academic knowledge and skills as a person who graduates with a traditional high school diploma. Typically, attaining an HSE credential allows an individual to seek admission to postsecondary education or training or to seek employment for positions that require, at a very minimum, high school equivalency.

Prior to 2014, the GED[®] has been the dominant high school equivalency tool used in every state. Since its origin in 1942, there have been approximately 20 million GED[®] graduates. Over the past ten years the average age of GED[®] graduates has been twenty-six with slightly more males than females earning their GED[®]. The ethnic distribution of GED[®] graduates in the past ten years has been approximately 51 percent white, 21 percent Hispanic, 23 percent African American, and 5 percent other. GED[®] demographic data varies considerably by state and is available in the

Annual Statistical Reports available online by the GED® Testing Service.ⁱ

The GED® Testing Service reports that about two-thirds of all GED® candidates indicate that the reason they desire high school equivalency is either to enrol in postsecondary education or to access a better job. Postsecondary institutions and employers often use additional assessments, inventories or other screening tools that are required to further identify a candidate or applicant's knowledge, skills and abilities.

Every state has either legislation or policy which establishes that state's role and administrative processes with regard to high school equivalency endorsement, support, and the array of options available in the state. That administrative authority in a state frequently resides with the adult basic education office within state government and the governing body for that office such as a board of regents or a state board of education. In some cases the HSE function in a state is separated from the state's adult basic education office and resides within or is shared with the state's K-12 agency. All states maintain their own website which describes the options for high school equivalency available in the state as well as other client and educator HSE-related information.

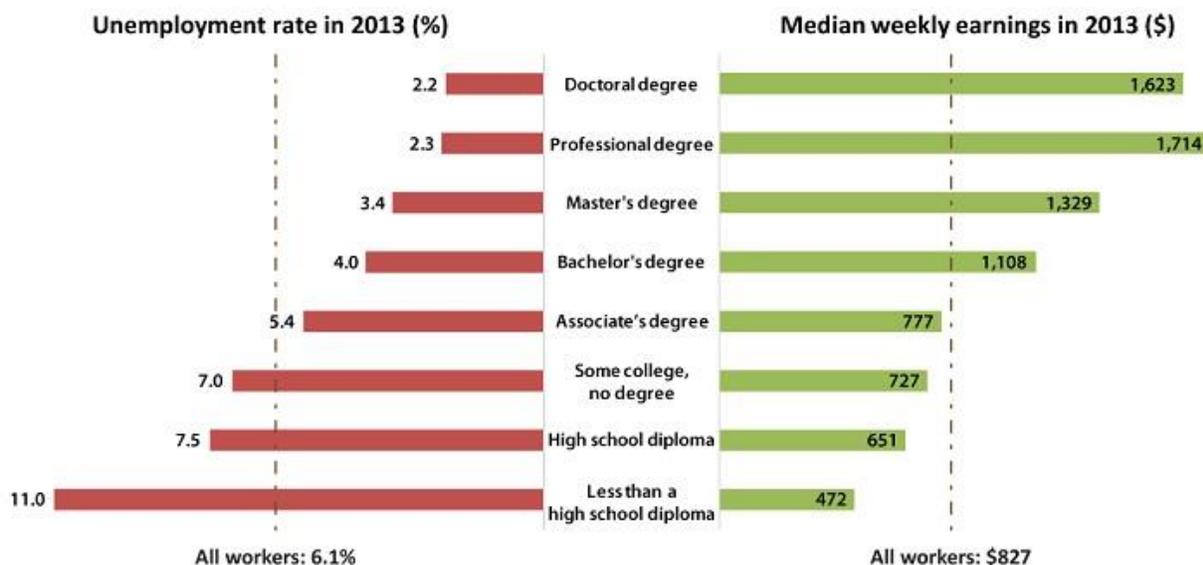
HSE NEED DEMOGRAPHICS

As reported in the 2012 American Community Survey, 25.7 million people between the ages of 18 and 64 are without a high school diploma or equivalent, representing more than 13 percent of the population.ⁱⁱ As reported by Pew Foundation research, minority students compose a smaller percentage of this dropout statistic than in previous years, although the achievement gap in standardized test performance between white and non-white populations remains a significant concern within secondary education.ⁱⁱⁱ Although the nation's public school graduation rate has increased eight percentage points to 74.7 percent in the last decade, estimates of the actual numbers of 18-24 year-olds who lack a high school credential range from five to six million individuals. Dropout rates for minority students (27 percent in 2013) are more than double those of white students (13 percent in 2013).^{iv} Also, as an impact from the 2007-2012 economic recession, many states have seen an increase in the number of older, unemployed, or underemployed adults who are accessing high school credential options as part of a plan for future employment.^v

HSE ECONOMIC BENEFITS: WHILE HIGH SCHOOL EQUIVALENCY IS A PREREQUISITE FOR ALMOST ANY POSTSECONDARY ENROLLMENT, THE ECONOMIC BENEFITS OF HSE ATTAINMENT ARE SIGNIFICANT.

The U.S. Bureau of Labor Statistics reports that personal income and employment rates are significantly correlated to educational attainment. The table below reveals that whereas the average wage earner in the U.S. makes about \$815 per week, an adult without a high school diploma or equivalent earns only \$472. In 2013, the unemployment rate for these individuals was over 11 percent. They are typically the first individuals to realize the impact of a downturn in the economy.^{vi}

Earnings and unemployment rates by educational attainment



Note: Data are for persons age 25 and over. Earnings are for full-time wage and salary workers.
 Source: Current Population Survey, U.S. Bureau of Labor Statistics, U.S. Department of Labor

Data from the table above for the high school diploma attainment category includes both standard high school diploma attainment as well as high school equivalency attainment. A 2009 U.S. Census Bureau study found that GED® graduates earn about 34 percent less than standard high school diploma graduates but an average of \$700 per month more than a dropout who completed at least ten years of high school and \$1,000 per month more than a dropout who left school with only an elementary education.^{vii}

A study by Anthony Carnevale on the 2007-2012 U.S. economic recession and recovery concluded that workers with a high school diploma or less bore the brunt of the recession’s job losses. With 78 percent of the job losses, those with no education beyond high school were more than three times as likely to lose their jobs as those with some college education or an Associate's degree. Further, job gains during the recovery were confined to those with education beyond high school.^{viii}

Not attaining a high school diploma or its equivalent results not only in challenges for the individual, but in significant costs to society at large in areas such as limited economic productivity and related tax revenue potential. Not attaining a high school equivalency also correlates to demand for public funds for supportive programs including public welfare, remedial public education, workforce services, and incarceration.^{ix}

A landmark study conducted in 2005 by the Washington State Board for Community and State Colleges, referred to as the *Tipping Point Study*, documented the connection between some postsecondary education and future success, which was defined as the ability to earn a family-sustaining wage.^x Specifically, the five-year longitudinal study of over 10,000 adult basic education students enrolled in the Washington college system revealed that the tipping point to attain economic self-sufficiency was a high school diploma or its equivalency plus at least two semesters of college credits and a recognized educational/employment credential. For most individuals, high school equivalency is an essential stepping stone to further education and/or employment.

The New HSE Landscape

CHANGES TO THE GED®

March 2011, the non-profit American Council on Education formed a public-private partnership with the for-profit Pearson Company in order to combine their collective expertise and resources to develop a new GED® test aligned with Common Core State Standards. Although major revisions of the GED® had taken place three times since 1942 (1978, 1988, and 2002), the changes for the updated 2014 GED® were substantial. In addition to the change in management and control of the GED®, other significant changes were made to test content, pricing, and administration. The most significant content change was the increased rigor as a result of the alignment to college and career readiness standards, a necessary change to ensure that the GED® measured the new Common Core standards being implemented in most states. The new pricing structure of \$120 for the full battery of four subtests was established along with the change in test administration to computer based (CBT) only. Prior to 2014, the GED® was available as a paper-pencil test and client fees were set by the participating state or local GED® testing center.

Prior to the new GED® implementation, a variety of concerns about the planned changes were expressed by educators and other stakeholders. These included:

- Would the **increased rigor** and college and career readiness alignment impact participation or pass rates and be too difficult for many students?
- Would the increased **price structure** be a barrier for many students and would the pricing structure be unstable and increase significantly over time?
- Would the shift to a **computer based testing** (CBT) format be an unfair challenge for students who had little to no digital literacy?
- Would the shift to CBT cause a reduction in **client access** and participation due to testing center changes and availability, especially in rural areas?
- How would **accommodations** for persons with disabilities be accomplished given the shift to CBT?

NEW HSE OPTIONS EMERGE

As a result of the concerns noted above, two new high school equivalency tests were developed by companies that were well-known to the adult education community and responded to the issues raised above:

- The **HiSET** (High School Equivalency Test). This test is a product of the Educational Testing Service and the Iowa Testing Program^{xi}
- The **TASC** (Test Assessing Secondary Completion). This test is a product of CTB/McGraw-Hill^{xii}

Like the 2014 GED®, both the HiSET and TASC are aligned to national college and career readiness standards and are available in a CBT format. The major differences however, include the test publisher pricing structure – HiSET and TASC publisher prices are lower than the GED® – and the format, as HiSET and TASC are both available in a paper-pencil format as well as a CBT format. It should be noted however, that the actual testing fee for the examinee on any of the HSE options varies from state to state or even within a state due to state and local policies and subsidies.

In addition, most states offer high school credit recovery programming leading to a high school diploma for their out-of-school youth and adults. Credit recovery programming allows local school districts to award regular high school diplomas to individuals who make up the credits they needed (usually less than two or three courses) for their original but uncompleted high school diploma. Also, at least eleven states (California, Connecticut, Hawaii, Maryland, Minnesota, New York, Rhode Island, Vermont, Virginia, Washington, and Wisconsin) have a competency-based diploma system in place, using either a state-developed set of competencies or endorsing the competency-based National External Diploma Program.^{xiii}

STATE REACTIONS TO THE GED® CHANGES

The concerns about the 2014 GED® noted above led many states to rethink and redesign their HSE program delivery and options, while other states chose to maintain their GED® support and endorsement and address issues as they emerge. As of May 2015, the table below identifies which HSE tests are supported and endorsed by each state.

HIGH SCHOOL EQUIVALENCY OPTIONS BY STATE (as of 5-1-15)					
STATE	HSE OPTIONS	STATE	HSE OPTIONS	STATE	HSE OPTIONS
AK	GED®	LA	HiSET	OH	GED®
AL	GED®	MA	HiSET	OK	GED®
AR	GED®	MD	GED®	OR	GED®
AZ	GED®	ME	HiSET	PA	GED®
CA	GED®, HiSET, TASC	MI	GED®	RI	GED®
CO	GED®	MN	GED®	SD	GED®
CT	GED®	MO	HiSET	SC	GED®, TASC
DE	GED®	MS	GED®	TN	GED®, HiSET
FL	GED®	MT	HiSET	TX	GED®
GA	GED®	NC	GED®, HiSET, TASC	UT	GED®
HA	GED®	ND	GED®	VA	GED®
IA	HiSET	NE	GED®	VT	GED®
ID	GED®	NH	HiSET	WA	GED®
IL	GED®	NJ	GED®, HiSET, TASC	WI	GED®
IN	TASC	NM	GED®, HiSET	WV	TASC
KS	GED®	NV	GED®, HiSET, TASC	WY	GED®, HiSET, TASC
KY	GED®	NY	TASC	D.C.	GED®
STATE TOTALS: GED® = 40, HiSET = 14, TASC = 9					

Although the 2014 GED[®] remains the most commonly supported and endorsed HSE option (40 states), ten states no longer support the GED[®] as a state-endorsed credential. Also, a total of eight states offer multiple options and five of those states offer all three options. It should be noted, however, that several state HSE offices and governing authorities are in the process of considering or about to implement changes to the HSE options available in their state. For example, Illinois will soon offer the HiSET and TASC in addition to the GED[®].

In some states, the change in the GED[®] ownership and/or delivery structure required a revision of their state statutes, causing the state to rethink its HSE options and leading to some rescinding their endorsement of the GED[®]. Reasons for state decisions to endorse one HSE option over another are discussed in a later section of this report.

HSE Issues and State Responses

This section of the report describes the pre-2014 GED[®] revision history and highlights current issues surrounding HSE that have developed as states implement the 2014 GED[®] test series and other newly developed HSE options. Reactions and responses to these issues by HSE state administrators are presented for each issue.

Thirty-two states participated in interviews or submitted survey responses around HSE topics, issues and concerns during March and April 2015.^{xiv} All fifty states were contacted for the survey and provided with the option to participate in an interview process and/or submit responses to survey items via e-mail. Respondents were state government officials who have leadership and administrative authority over their state's HSE options. Typically, respondents titles' were State GED[®] (or HSE) Administrator, or the State Director of Adult Education. Responding states represented about two-thirds of the nation's population.

REASONS FOR OFFERING THE GED[®]

States that continue to offer the GED[®] as their sole option, as well as states that offer the GED[®] and additional options, indicated the following most important reasons for continuing their endorsement of the GED[®]:

The GED[®] is:

- Credible and has brand-recognition in postsecondary education, and with employers and other stakeholders
- Portable throughout the state and nation
- Aligned to college and career readiness standards
- Sufficiently rigorous to be reflective of new skills, knowledge and abilities needed today
- Equivalent to the academic skills of high school graduates
- Delivered through a CBT format – which requires the digital literacy skills important for adults in the 21st century (or conversely, that offering a paper-pencil test format is a disservice to adult students).

In addition, some states indicated that they were simply cautious about the durability and validity of newer options and did not wish to commit their state to an unproven change. A few states indicated that their staffing or administrative capacity was insufficient to switch to a new option.

REASONS FOR SELECTING THE HISET OR TASC

After the GED[®] revision announcement in 2011, many states formed work groups or committees to research all HSE options and seek information from HSE test publishers that corresponded to the state's needs. The motivation to consider other options was driven by either legislative activity, or by the governing body of the state agency

responsible for HSE. Many states went through a Request for Information (RFI) process and convened panels of stakeholders for making decisions.

The three most common reasons for switching were:

- The need to offer a pricing structure lower than the announced \$120 GED[®] fee so that more clients could afford to take it
- The need to offer a paper-pencil test format as well as a CBT format
- The desire and/or legal mandate not to contract with a for-profit vendor (Pearson) for HSE testing

For states that subsidize the client cost of an HSE test, the lower costs of the HiSET or TASC were a cost-efficient advantage. A few states indicated that they particularly liked the idea of gradually increasing over time the rigor of the test, which the HiSET and TASC publishers had promised.

MORE CHANGES AHEAD

Just over half of the states (18) interviewed responded that they would be open to changing their HSE options in the future. Five states indicated that they had begun preliminary steps to consider additional options. Respondents revealed that the motivation for adding additional HSE options in a state may come from multiple sources, i.e., within the governing agency, from the state legislature, from local adult educators or programs, or from other adult education stakeholders. Also, most states have written contracts with their currently selected HSE publishers (typically 3 years in duration), and as those contracts approach expiration, states will need to consider and evaluate all available options.

HSE PARTICIPATION AND PASS RATES

Prior to the 2014 GED[®] revision, the GED[®] Testing Service last revised its test in 2002. The table below illustrates changes in participation and the virtually unchanged pass rate for the final two years of the 1988-2002 GED[®] and the first two years of the 2002-2014 GED[®].

	Old GED [®]		Revised GED [®]	
	2000	2001	2002	2003
Test takers taking full battery – PARTICIPATION <i>(numbers in thousands)</i>	699	927	467	552
Test takers passing full battery – PASS RATE <i>(numbers in thousands)</i>	484	651	330	387
Pass Rate Percentage	69.2%	70.2%	70.7%	70.1%

Source: GED[®] Testing Service 2005 Annual Statistical Report: <http://www.gedtesting.com/educators/historical-testing-data>

As expected by HSE preparation providers and the GED® Testing Service, there was a surge in participation during 2001 as clients were anxious to complete their GED® prior to the revision. This upward spike in participation was likely due to the policy that if an examinee had completed and passed some but not all of the five subtests prior to 2002, they would need to retake all the tests in the new battery.

In 2001, 927,474 clients completed their GED® (took all subtests), compared with 699,368 in 2000 – an increase of 33 percent. Also as expected, there was a significant drop in participation in 2002 (a 50 percent drop) after the revised GED® was implemented. That is, 467,332 clients took the GED® in 2002, which was a decrease of 33 percent from 2000, a typical year for that version of the GED®. Following the 2002 drop in participation, the number of test takers increased each year and peaked in 2009 at 683,519, a participation amount similar to the 2000 level. The pattern of significant spike in participation prior to a GED® test revision followed by a sharp decline with the revised test implementation, are consistent with prior revisions of the GED®. Pass rates for the 2000 through 2003 conversion years remained remarkably consistent with prior year pass rates. It could be speculated that this consistency in pass rates may be attributed in part to a comparable level of difficulty or rigor between the 1998-2002 GED® and the revised 2002-2014 GED®.

The table below summarizes the 2010 – 2014 participation and pass rates for the GED® and the newly available HiSET and TASC in 2014.

	GED®			HiSET			TASC			TOTAL		
	No. of Takers	No. of Passers	Pass Rate %	No. of Takers	No. of Passers	Pass Rate %	No. of Takers	No. of Passers	Pass Rate %	No. of Takers	No. of Passers	Pass Rate %
	<i>in thousands</i>			<i>in thousands</i>			<i>in thousands</i>			<i>in thousands</i>		
2010	622	451	73%	N/A			N/A			655	474	73%
2011	601	434	72%							631	454	72%
2012	581	401	69%							607	418	69%
2013	713	540	76%							743	560	76%
2014*	223	140	63%	43	25	59%	50	31	62%	316	196	62%

* Estimates only - 2014 data is not finalized by GED®, HiSET or TASC. The 2014 GED® data is for the updated version. Source: GED® Testing Service 2013 statistical report; HiSET and TASC estimates from the “Decennial Scurry” report of the National Council of State Directors of Adult Education, March 2015

Similar to the 2000-2003 data noted above, there is a significant spike in GED® participation in 2013. Probable motivations for this spike include GED® candidates who were fearful that the 2014 GED® would be more difficult to pass, and examinees who already had passed some GED® subtests needed to finish all their subtests in 2013 and would have been required to pass the full battery in 2014.^{xv} There was a significant drop, about 60 percent, in the number of participants taking the GED® in 2014 compared to the rush-to-complete year, 2013. The two new HSE

tests accounted for an additional estimated 93,000 participants. However, the total of all three HSE tests for 2014 remains about 48 percent below the more typical 2012 HSE participation year. This decline in HSE participation overall is significantly larger than the 33 percent decline in participation that occurred for the GED[®] during the 2001-2002 revision period.

The estimated pass rate of 63 percent for the 2014 GED[®] is a moderately significant decline from a 2010-2013 average of 72 percent. The 2014 estimated pass rates for the HiSET and TASC are similar to the GED[®] pass rate. According to the 2014 estimated participation count, the GED[®] has a share of about 70 percent of the participants, followed by HiSET with 16 percent and TASC with 14 percent. To date, the GED[®] remains the dominant provider among the HSE options.

As demonstrated in the 2010- 2014 HSE participation and pass rate table above, state HSE respondents indicated their participation rates for the GED[®] fell significantly in 2014, but all states reported slight increases in monthly participation during late 2014 and early 2015. Similarly, states that have implemented the HiSET and TASC for 12 months or more report slightly higher participation during late 2014 and early 2015. Despite this progress, most states are not completely satisfied with the level or rate of increase in participation, and are taking actions such as reducing or discounting test fees and developing recruitment marketing campaigns.

Most responding states had preliminary or estimated 2014 pass rate data. Pass rates varied considerably from state to state, regardless of which HSE test they supported. For all GED[®] states, pass rates dropped (either slightly or significantly) with the launch of the 2014 GED[®]. All GED[®] states reported an increase in their pass rate during the most recent 2015 time period. Although many GED[®] states have not attained a pass rate comparable to a typical pre-2014 year, respondents were uniformly positive about the trend. Respondents attributed this increased pass rate to a number of causes including increased teacher experience and skill delivering difficult content areas (especially in math).

All states were aware of the increased rigor of the 2014 GED[®] and the alignment with more demanding college and career readiness standards for the GED[®], HiSET, and TASC. States developed many strategies to address this test difficulty and new content issue including increased professional development for teachers; increased student access to official practice tests (including testing fee cost reductions), instructor forums, and webinars; and, increased attention to diagnostic student performance data.

The pass rate for the 2014 GED[®] was well below previous “normal years” of GED[®] implementation. Although of concern to state HSE administrators, this decline was not a surprise given the changes in rigor and the new CBT testing format. State HSE administrators reported that it has taken considerable time for teachers to acquire new instructional materials and teaching strategies that reflect the more rigorous college and career readiness content in the new HSE tests. Similar to the participation finding, state HSE administrators are striving to find ways to increase pass rates. Those strategies are included in the report recommendations.

COST ISSUES

The correlation between adults without a high school diploma or equivalency and poverty or low-income has been well established. Responding states were uniformly concerned about the cost impacts for HSE tests. The GED[®] Testing Service requires a \$120 fee for the full battery of tests. Six of the GED[®] responding states add a \$10-\$30 fee to cover administrative and test center costs. Many states allow their authorized testing centers to set their own

testing fee, but upper limits are typically imposed. However, twelve responding states charge less than the GED[®] standard fee as a result of state-provided subsidies. Three states reported reducing their HSE fees temporarily, to encourage greater participation. And two states - Connecticut and New York - subsidize the full cost of the GED[®].

Although research data on the correlation of HSE test cost with the pass rate is not available, anecdotal evidence from Connecticut and New York shows that offering the HSE for free yields a lower-than-average pass rate. This could be explained subjectively as the result of more students attempting the HSE test without the financial commitment and in effect, little to lose upon failure to pass. Similar to the GED[®], pricing for the HiSET and TASC are determined by the state or the local testing center. However, the test publisher receives a fixed amount per battery for each administration or practice test. States charge an average of \$50 - \$60 for the full battery of the HiSET and TASC, about 50 percent less than the GED[®].

For most states that terminated their endorsement of the GED[®], pricing issues were a dominant reason for the decision. It should be noted that many respondents from GED[®]-only states share a view that the \$120 client fee is not a significant barrier, given the importance and economic advantage of the HSE credential, as well as the fact that low-income clients, for whom that fee may be a barrier, are frequently subsidized through a wide variety of public and private means. Also, some state GED[®] administrators reported that the fee results in a greater student commitment to prepare for and pass the test, especially when considering there are fees for retaking the test.

TEST RIGOR

While it is clear that the revised GED[®] is more rigorous than the previous version, state HSE administrators reported that increased rigor and alignment to college and career readiness standards was necessary. The HiSET and TASC also developed their tests to be aligned to college and career readiness standards. The HiSET made two changes to increase its rigor during 2014 and 2015 and the TASC is gradually adding more difficulty to its test items over time. In addition, the GED[®] and HiSET have designated performance levels that indicate if the examinee has passed at a level of general high school equivalency or has passed at a level of college and career readiness.

To maintain credibility as a high school equivalent option, any HSE test must parallel the standards being used by the nation's high schools. States appear comfortable with this attention to rigor and have taken an array of actions to ensure that teachers are equipped to deliver quality instruction to support that rigor.

ACCESS TO HSE TESTING CENTERS

An early concern prior to the 2014 GED[®] launch was the fear that the shift to a computer-based testing format would create barriers to client access due to the need and expense of converting existing HSE testing centers to the new format or establishing entirely new centers. The survey found that all states began to address the geographical access issue well before the 2014 GED[®] launch, and that currently 21 of the 32 states surveyed reported they now had more testing centers than with the previous GED[®]; the remaining ten states have the same level of test center access as pre-2014.

Many respondents noted that the shift to CBT increased the testing center's flexibility to offer multiple forms of the test and to offer any of the subject area subtests at any time. With paper-pencil testing, flexibility was limited to the paper-pencil test forms and subtests that the center or the examiner had on hand. In addition, test takers can now schedule an HSE test among a broader array of test center locations, dates and times.

Another access concern under the 2014 GED[®], is the necessity of being computer literate to take the exam. All states surveyed stated that they offer digital literacy instruction for GED[®] participants. However, for states that decided to use the HiSET or TASC, the concern about having a paper-pencil test format available was a major factor in their decision. Some state HSE administrators reported that they supported having multiple HSE options so that they could maximize their potential to accommodate as many HSE candidates as possible. Survey respondents in GED[®]-only states reported that paper-pencil access is not of concern for several reasons, including the increased availability of digital literacy instruction and the workforce pressure for individuals to be computer literate in the 21st century. Individuals with documented disabilities do have access to certain accommodations, but a paper-pencil format of the GED[®] is not one of those accommodations.

OTHER RELATED OBSERVATIONS AND FINDINGS

DIPLOMA OR CERTIFICATE

The survey elicited a number of other interesting HSE observations and findings. Twenty of the states responding to the survey officially title their HSE credential a “Diploma.” For example, a GED[®] graduate in Kentucky would receive a document called the “Commonwealth of Kentucky High School Equivalency Diploma.” The remaining 11 states title their credential a “High School Equivalency Certificate.” It is unclear whether using the term “certificate” versus “diploma” has any impact on how the credential is viewed by postsecondary institutions or employers. All HSE graduates however, also receive or have access to detailed transcripts that include the name of the HSE test and subtest scores at a minimum.

PROMOTING CREDIBILITY

Concerns were raised by GED[®]-only state respondents about the possible lack of recognition of the HiSET and TASC by postsecondary institutions and employers. States using these two newer options reported considerable success with marketing and communications to colleges, employers and their organizations, and to other stakeholders. In April 2014, the U.S. Department of Education issued guidance to postsecondary institutions to clarify which high school equivalency tests would qualify as a recognized HSE exam for purposes of federal student aid eligibility. The letter validates the eligibility of individuals who have earned a GED[®] or any HSE exam that the issuing state has “officially recognized.” In addition to the GED[®], the HiSET and TASC are cited as examples of HSE exams that have recently received official state endorsements.^{xvi}

DISCOURAGED CLIENTS

Some GED[®]-only state respondents indicated that while the decline in pass rate was of concern, it appeared in their state that adult education teachers, as opposed to GED[®] students, were the most vocal about the difficulty of the new GED[®]. These respondents indicated that if teachers are criticizing the GED[®] for being too rigorous, it could have a discouraging impact on students. State GED[®] administrators believe this situation can be ameliorated over time through increased professional development on the more rigorous college and career readiness content as well as local program and staff acceptance regarding the importance of high school compatible rigor for adult HSE candidates.

HSE CLIENT MOBILITY

Survey respondents reported that problems may arise with HiSET or TASC graduates seeking employment in GED®-only states, resulting in confusion in the marketplace. That is, employers may not recognize another state's HSE test option endorsement. In this situation, employers may contact the HiSET or TASC issuing state to discuss the test credibility or specifics. Also, HSE students may move from a GED®-only state, for example, to a HiSET-only state and wish to have their two passed GED® tests count toward their HiSET requirement. State administrators are handling these situations on a case-by-case basis, but in general, clients would be asked to complete and pass all of the subtests of the new test.

PREREQUISITES

Also of note is the issue of requiring prerequisites before a client can take any subtest of an HSE test. All surveyed states have prerequisites for out-of-school youth within a certain age range (e.g., 17-18 year olds) and these prerequisites typically include attaining passing scores on the official practice tests. The requirement to pass a practice test has shown to yield higher pass rates on the actual HSE exam. Many local adult education providers either require or highly encourage all of their HSE students to take and pass the official practice tests. Practice tests have a cost attached to them which is either paid by the student, or subsidized through a variety of ways.

ADDITIONAL CONTENT REQUIREMENT

Prompted by a new law in Arizona, two states reported that they are considering a requirement for both their high school and HSE graduates to pass the U.S. Citizenship Test (civics portion). Respondents reported that this requirement would add additional time and expense to the HSE fulfillment process and therefore may be a barrier for some students.

Conclusions

To be an advocate for promoting career and economic success for low-income youth and adults means, in part, to support and enhance their efforts to have access to and attain high school equivalency. This report examined perceived barriers to the HSE process across the nation and offers the following conclusions:

- **THE RECENT DECLINE IN HSE PARTICIPATION AND PASS RATE IS VALID BUT REVERSING.**

Although HSE participation and pass rates dipped significantly during 2014, states reported improving numbers on both participation and pass rates for 2015. This survey of state HSE administrators found that many states are at or close to their pre-2013 state averages for participation and pass rates. Also, states feel that they are in touch with their needs regarding these issues and are taking action to deliver increased participation and pass rates in most states.

- **PARTICIPANT ACCESS TO HSE TESTING LOCATIONS IS ADEQUATE.**

The potential barrier related to sufficient client access to HSE testing centers is not a concern. That is, states perceive that they have sufficiently addressed the geographic issue of maintaining or increasing test center locations, hours of operation and flexibility.

- **COST IS NOT A SIGNIFICANT BARRIER TO HSE PARTICIPANTS DUE TO SUBSIDIES AND OTHER STATE ACTIONS.**

The cost of taking an HSE test will remain a serious issue for low-income individuals. However, for a number of reasons, it does not currently appear to be a significant barrier to HSE participants. That is, states and local adult education providers have found numerous ways to subsidize HSE fees for those most in need, or, in the cases of Connecticut and New York, make the tests free for all first-time HSE participants. The statements by many state HSE administrators and others that a degree of financial commitment when taking an HSE exam is necessary, and boosts a person's likelihood to pass, have considerable merit.

- **THE PAPER-PENCIL OPTION AVAILABLE IN TASC AND HISET STATES IS HELPFUL FOR A LIMITED NUMBER OF PARTICIPANTS AND COMPUTER SKILL CBT TRAINING IS HELPFUL FOR GED®-ONLY STATES.**

The access to paper-pencil versions of an HSE test are not an issue for states that use the HiSET or TASC. For GED®-only states where paper-pencil tests are not available, local programs and the state have additional responsibility to prepare HSE candidates for the CBT format. This is of particular concern in local programs that serve large numbers of low-income clients who have little access to or experience with computers. In general, GED®-only states have implemented significant instructional programming to deliver the necessary computer skills, both for test taking and for college and career readiness.

- **THE CONCERN THAT THE GED® IN PARTICULAR - AND THE HISET AND TASC TO A LESSER EXTENT - ARE TOO RIGOROUS, IS EDUCATIONALLY AND PRACTICALLY NOT VALID**

High school equivalency tests must parallel the academic rigor of standard high school, and therefore need to include college and career readiness standards and content. Anecdotes about prospective students being fearful to attempt the HSE test due to rumors about its difficulty cause a serious issue for those individuals. However, states have well-established and effective adult education services in place to assist individuals in attaining the necessary skills and overcoming their testing fears. It is very likely that individuals who are extremely fearful of the difficulty of an HSE test may need instruction at significantly lower levels of basic skills education.

- **ALTHOUGH STATE PERSPECTIVES DIFFER ON WHICH HSE OPTION OR OPTIONS ARE MOST EFFECTIVE FOR THEIR CLIENTELE, STATES ARE GENERALLY SATISFIED WITH THEIR OPTION ENDORSEMENTS.**

States have three distinctly different philosophies about the selection of HSE options for their state. These differences are:

STRONG GED® SUPPORTER

State X prefers the GED® as its sole HSE option for reasons such as the GED® credibility, portability, rigor, alignment to college and career readiness standards, administrative efficiency to implement and manage

one test rather than multiple tests, cautiousness to implement a new HSE test with no long-term history, and the belief that an array of options may be too confusing for providers and for clients.

ANTI-GED® PERCEPTIONS

State Y believes there are problems with the GED®, which may include its higher cost, CBT-only format, and/or its for-profit ownership. Therefore, State Y has selected either the HiSET or TASC because it offers a lower cost pricing and is available in both CBT and paper-pencil format. State Y also believes their choice to be sufficiently rigorous, aligned to standards, and credible.

CHOICE IS BEST

State Z prefers to offer multiple HSE options (any two or all three) in order to provide programs and clients with the opportunity to choose which HSE test better meets their needs.

Although these three points of view may be somewhat contradictory, states are satisfied that their selection of HSE options are working well for their clients including those most in need (low-income, low-skilled clients). As states gain more experience and history with their selected HSE process, they will have more information about their success and will be able to make changes, if necessary, in their HSE options or processes.

Recommendations for State HSE Administrators and Policy Makers

MONITOR AND FIND WAYS TO INCREASE THE HSE PARTICIPATION AND PASS RATE

It is recommended that states design specific strategies to increase HSE participation and improve the state HSE pass rate. Although the participation and pass rate may be trending upward in a state, the need to prepare a greater number of individuals for postsecondary education or employment in family-sustaining jobs is also increasing.

STRATEGIES TO INCREASE HSE PARTICIPATION

States have implemented many strategies and actions through state policy or regular programming that have demonstrated success to increase HSE participation. For example:

- ✓ Establish population-specific targeted marketing and recruitment campaigns (especially targeting clients in areas of poverty and limited resources).
- ✓ Incentivize local HSE preparation program expansions or collaborations at new locations or venues.
- ✓ Increase participation data monitoring and analysis at the state and local program level.
- ✓ Establish and monitor state and local participation goals or targets.
- ✓ Incentivize local HSE program flexible scheduling and distance learning capacity.
- ✓ Fund local HSE program pilot/innovative programs to increase participation.
- ✓ Expand or target bridge programming and career pathway opportunities for low-income clients who do not have HSE.
- ✓ Develop and promote college tuition reduction policies for low-income, recent HSE graduates.

STRATEGIES TO INCREASE HSE PASS RATES

States have implemented many strategies and actions through state policy or regular programming that have demonstrated success to increase HSE pass rates. For example:

- ✓ Offer reduced test fees for clients that score well on practice tests.
- ✓ Increase professional development around retention and persistence strategies.
- ✓ Document and record professional development institutes, seminars and other training and make recordings available to adult educators who could not attend the live sessions.
- ✓ Develop policies requiring HSE clients that attend state sponsored preparation programs to attain passing scores on official practice tests.
- ✓ Establish and monitor pass rate goals or targets.
- ✓ Research and adopt or promote instructional materials and curricula that are more closely aligned to the state HSE content.
- ✓ Encourage and support teachers to increase their use of HSE data analytics for program accountability and pass rate improvement.
- ✓ Establish local HSE provider pilot programs to implement innovative strategies to increase their pass rate.
- ✓ Develop an HSE master teacher program, mentoring strategy, or train the trainer professional development delivery model.

ENSURE THAT TEST FEES ARE NOT A BARRIER FOR LOW-INCOME HSE CANDIDATES

States and HSE testing centers should find ways to ensure that no HSE candidate is prevented from accessing HSE tests due to their inability to pay the required testing fee. States and/or local programs have taken the following actions to reduce or eliminate testing fees for low-income clients:

- ✓ Establish a considerable (up to 100 percent) state subsidy policy that requires passing the HSE practice tests prior to reduced or free HSE testing.
- ✓ Build strong collaborations with other government programs (e.g., TANF, WIOA, Perkins, SNAP, etc.) to identify any and all client subsidy opportunities and communicate and promote those opportunities to local HSE providers.
- ✓ Encourage partnerships with philanthropic or local community organizations that have the capacity and desire to target funds for hardship candidate HSE participation.
- ✓ Develop a sliding scale fee structure.
- ✓ Collect feedback from and/or conduct focus groups of HSE students and HSE-eligible non-participants for purposes of identifying cost or other barriers.

ENSURE HSE CANDIDATES ARE SUFFICIENTLY COMPUTER AND CBT LITERATE

In the 32 states that offer only the GED[®], being able to manage a CBT format is essential for clients. The need to provide digital literacy training and CBT practice would be of special importance to the many low-income individuals who have had little or no experience with a computer. States and local programs could:

- ✓ Develop state policy for adult education programs to provide digital literacy instruction and CBT practice for all HSE eligible candidates enrolled in adult state authorized education programs.
- ✓ Provide professional development on digital literacy instruction to teachers.

- ✓ Analyze the specific CBT computer skills necessary for the HSE test and develop training modules for online dissemination to teachers and prospective HSE candidates.
- ✓ Collect and act on feedback from HSE test center staff regarding any CBT format issues that students have experienced.

DEVELOP ALTERNATIVE STRATEGIES FOR UNSUCCESSFUL HSE CLIENTS

The degree of difficulty (rigor) of the new GED[®] has clearly increased in comparison to the 2002-2014 GED[®], in alignment with current high school level skills and college and career readiness standards. The HiSET and TASC appear equally rigorous. As HSE pass rates are never 100 percent, unsuccessful clients need immediate and targeted assistance to attain their goal. States and local programs could:

- ✓ Require individualized intervention plans for unsuccessful clients to be implemented by local adult education programs.
- ✓ Increase the use of HSE test diagnostic data to identify weaknesses and target instruction for remediation.
- ✓ Explore and develop alternative, state-endorsed HSE programs such as competency-based systems that place the emphasis on task completion and performance as opposed to test scores.
- ✓ Build HSE options into career pathway models in order to offer HSE instruction that is contextualized with the postsecondary career content.
- ✓ Provide encouragement, motivation and follow-up actions (phone calls, pep-talks, etc.) to unsuccessful clients. Emphasize the positive accomplishments of the student and the future personal, educational, and economic benefits of HSE.
- ✓ Ensure that there is a positive climate for learning within HSE preparation programs.

EVALUATE ALL HSE OPTION(S)

The availability of multiple HSE options is relatively new. State policy makers and HSE administrators should look closely at the overall performance of their current options from a variety of perspectives. Those considerations should include at a minimum participation and pass rate expectations; client barrier analysis and satisfaction, especially with regard to low-income and other high need populations; postsecondary perceptions and HSE graduate performance at colleges; employer perceptions and experiences with HSE graduates; and, local HSE preparation provider feedback. Formal and informal discussions with colleagues in other states that use different HSE options would also be helpful.

PROACTIVELY ADDRESS CHALLENGES AND ISSUES

As evidenced by the number of national and local media reports highlighting perceived issues and challenges, there is a need for states to develop “talking points” and a clear, consistent, positive message about their HSE decisions. States should use a variety of public forums and media to proactively describe the merits and successes of their HSE work, as well as be transparent about any issues or challenges that their HSE efforts may be experiencing.

Endnotes

The dream of achieving a high school equivalency is going unfulfilled for too many Americans. The array of options to attain one's HSE credential has never been more varied – and perhaps more confusing. However, across the nation, public systems of adult education are eagerly and effectively facilitating student learning toward an HSE.

The author wishes to thank the thirty-two state HSE administrators who graciously elected to participate in the survey that formed the basis for this report. Their passion and dedication to the betterment of the lives of thousands of individuals is highly respected and appreciated.

ⁱ GED® testing Service. *Annual Statistical Reports*. <http://www.gedtestingservice.com/educators/historical-testing-data>

ⁱⁱ [American Community Survey Fact Finder – Educational Attainment](#)

ⁱⁱⁱ [Pew Foundation research](#). *Hispanic and Black High School Dropout Rates Lowest on Record*. October 2014

^{iv} Young, Kathryn. *Dropout Recovery is National Recovery: How Federal Policies Can Support the Spread of Back on Track Through College Pathways*. Jobs for the Future Policy report. November 2011

^v Clymer, Carol. *Preparing for the New GED® Test*. Policy Brief: The Working Poor Families Project. Fall 2012.

^{vi} US Bureau of Labor. *Earnings and Unemployment Rates by Educational Attainment*. April 2015

^{vii} US Census Bureau. *GED Recipients Have Lower Earnings, are Less Likely to Enter College*. February 2012

<http://blogs.census.gov/2012/02/27/ged-recipients-have-lower-earnings-are-less-likely-to-enter-college/>

^{viii} Carnevale, Anthony. *The College Advantage: Weathering the Economic Storm*. Georgetown University, Center on Education and the Workforce. August 2012

^{ix} Alliance for Excellent Education. *The High Cost of High School Dropouts: What the Nation Pays for Inadequate High Schools*. November 2011

^x Jenkins, Davis. *CCRC Research Tools No. 3: A Short Guide to "Tipping Point" Analyses of Community College Student Labor Market Outcomes*. April 2008

^{xi} Educational Testing Service. *The HiSET* <http://hiset.ets.org/>

^{xii} CTB/McGraw-Hill. *The TASC* <http://www.tasctest.com/>

^{xiii} CASAS. *The National External Diploma Program* <https://www.casas.org/nedp>

^{xiv} States responding to the survey: AL, AZ, CT, FL, GA, IA, ID, IL, IN, KY, MA, ME, MI, MN, MO, MS, MT, NV, ND, NH, NJ, NY, OH, OR, RI, SD, TX, VA, VT, WA, , WI, WY. Survey conducted in March and April 2015

^{xv} For a brief window of time, some states did allow the 'grandfathering' of 2002 completed subtests to count as completed subtests in the 2014 GED® battery.

^{xvi} US Department of Education Guidance Letter – DCL ID: GEN-14-06 <http://www.ifap.ed.gov/dpccletters/GEN1406.html>