

Supporting Families Pilot  
Final Evaluation Report Draft  
Process & Outcome Evaluations

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**CENTRE OF RESEARCH, POLICY  
& PROGRAM DEVELOPMENT**

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SOCIETY OF ONTARIO

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## Executive Summary

This is the final evaluation report for Ottawa's Supporting Families Pilot (SFP), which began in February 2014. This report presents findings from both the process and outcome components of the evaluation.

SFP was a collaborative gang-prevention project piloted in Ottawa by a consortium of local service providers. Partners for the pilot included: John Howard Society of Ottawa; Youturn; Children's Aid Society of Ottawa; Crossroads Children's Centre; Ottawa Police Service; and Probation Services, Youth Justice Services (MCYS). The John Howard Society of Ottawa and Youturn were the two lead agencies for the pilot.

The partners developed a coordinated approach to working with families of gang members, and in particular the younger siblings at risk of gang involvement due to their exposure through an older sibling. There were 13 families involved in SFP, with two of these families receiving on-going services at the time of writing this report.

A Process and Outcome Evaluation accompanied this pilot to monitor, capture, and explain how the pilot unfolded, its effectiveness, and its impact. The Process Evaluation measured the effectiveness of the program with regards to targeting the correct population and the implementation of services. The Process Evaluation also monitored satisfaction among the partners with the collaboration, satisfaction among staff, parents, and youth. The Outcome Evaluation measured the impacts SFP had in reducing risk factors for youth, increasing the knowledge and access to supports for families, and the added benefits of the collaboration to the service delivery system. The findings for these evaluation components are summarized below.

### Process Evaluation

#### *Outreach Process*

The outreach process was effective garnering a high proportion of youth into SFP with gang involvement or with ties to individuals who are gang related. The attrition rate among families was low (13%).

#### *Implementation & Delivery*

Overall partners were satisfied with the implementation of SFP. Challenges in relation to the outreach and triage process delayed the start of the pilot. The partners worked effectively together to reach fidelity principles.

#### *Program Delivery*

The flexibility of the service plan was both a strength and limitation for SFP. A strength in the sense of empowering participants to define their level of service and for the pilot to adhere to a key fidelity principle from the Ottawa Gang Strategy. A limitation in the sense that the program interacted differently with each family, creating difficulties in capturing what precisely SFP offers and its effects in terms of dosage and duration.

#### *Service System Coordination*

The Partnerships were the strength of this pilot. The collaboration, early buy-in, and continued engagement were strengths in implementing a targeted pilot to a specific at-risk population.

## Outcome Evaluation

### *Total Risk Factors*

6 of the 7 youth who had YLS-CMI assessments completed at intake and program completion had their risk scores reduced.

### *Attitudes & Beliefs*

Considering the small sample size and the marginal shifts, no conclusions could be drawn whether SFP essentially improved the attitudes and beliefs of youth participants.

### *Peer Groups*

3 out of 7 youth had reduced their risk items in the peer relations item of the YLS-CMI.

### *Individual Level Behaviour*

All 7 of the youth who had both pre and post-test risk assessments showed decreases in negative behaviour after their involvement with SFP.

### *School/Work*

6 of the 7 youth who had both pre and post-test showed assessments showed some improvement in their school/work risk factors.

### *Family Functioning*

No concrete conclusions could be drawn from the degree of impact SFP had on improving family functioning, as there was limited data from the opinions of parents and youth, and the indicators from the YLS-CMI and Supplement Information Form revealed little to no change.

### *Service System*

The partners involved with SFP consistently showed high levels of satisfaction with the collaboration, and overwhelmingly indicated the SFP as providing benefits to the wider service delivery system.

## Challenges & Lessons Learned

- Strong governance model and communication across partners is essential for success collaborations such as SFP.
- Information sharing across partners led to an effective Outreach process, although the outreach process took longer than expected.
- Participants tend to dwindle rather than exit formally.

## Conclusion

The strength of the pilot was the collaboration between various agencies in targeting and delivering services to a hard to reach population. The high levels of satisfaction and engagement across the partners throughout the pilot fostered a strong collaborative process. While the Outcome Evaluation was limited due to the lack of program completion data, there were nonetheless some promising impacts emanating from SFP.

## Introduction

The Centre of Research, Policy & Program Development (the Centre) at the John Howard Society of Ontario was contracted to develop and execute an evaluation plan for Ottawa's Supporting Families Pilot (SFP) in February 2014. This is the final evaluation report which outlines findings from the both the process and outcome components of the evaluation. This report begins by providing an overview of the pilot's purpose and process. Second, this report describes the methodology used by the Evaluation Team to conduct both the Process and Outcome Evaluations for SFP. Third, this report presents findings from both the Process and Outcome Evaluations. Details regarding the evaluation questions and results from both the evaluation components can be found in the Evaluation Results Matrix (see Appendix A for results from the Process Evaluation, and Appendix B for results from the Outcome Evaluation). Finally, this report concludes with the challenges and lessons learned in implementing and evaluating SFP.

## Pilot Overview

SFP was a collaborative gang-prevention project piloted in Ottawa by a consortium of local service providers. The partners for the pilot included:

- The John Howard Society of Ottawa;
- Youturn;
- Children's Aid Society of Ottawa (CASO);
- Crossroads Children's Centre;
- Ottawa Police Service (OPS); and
- Probation Services, Youth Justice Services (MCYS).

The John Howard Society of Ottawa received funding to support the hiring of an external Project Coordinator to facilitate the development of the program and to cover the cost of the evaluation. The initial task for the partner organizations was to develop a pilot plan, under the leadership of the Project Coordinator. The plan was articulated in the Supporting Families Pilot Framework (The Framework).<sup>1</sup> The partners developed a coordinated approach to working with families of gang members, and in particular the younger siblings at risk of gang involvement due to their exposure through an older sibling. There were 13 families involved in SFP, with two of these families receiving on-going services at the time of writing this report. Youturn completed services with seven families and continues on-going services with two additional families. The John Howard Society of Ottawa worked with the remaining four families.

The need for family support was identified by parents during consultations that were part of the Ottawa Youth Gang Prevention Initiative. SFP intended to provide holistic support for families through:

- Support for parents to enhance their confidence and skills to parent the younger siblings of the gang member as well as the gang member themselves (age dependent);
- Support for younger siblings to prevent them from engaging in gang activity; and

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<sup>1</sup> John Howard Society Ottawa, Youturn et al. (June 2014). Supporting Families: Siblings at Risk Framework, Ottawa, ON.

- Support for gang members to motivate and assist them in disengaging from gang activity or at least limiting their younger siblings' exposure to gang activity.

The OPS utilized information from the Guns and Gangs Task Unit to target family members with a youth who had ties to a particular youth gang. This particular youth gang was prioritized because it was likely that members or individuals with ties to this gang were young, and therefore likely to have younger siblings to target for the pilot. If the individual with gang ties did not have a younger sibling their family was not targeted for the pilot. The OPS consulted with other agencies, including Youth Probation, CASO, and the lead agencies to verify and gather information on identifying families in need of enhanced support. Having identified gang members with younger siblings, the OPS in conjunction with CASO would attend the family's residence to inform them of the program, obtain consent, complete a short screening tool (the YLS-CMI screening version), and make a referral to a Project Case Coordinator. The Coordinator would meet at a later date and would carry out a needs assessment for the parents and the younger siblings. At this point of the program intake, the pre-test (for each family member involved) and the full YLS-CMI (for the youth involved) was completed.

Once intake was complete, the Case Coordinator determined the degree of coordinated services needed among the partnering agencies and participating families. A service plan was developed by all of the parties involved, including the family, which identified goals and the means for achieving them. This method for delivering services was intended to meet the unique needs of each family. Thus, each service plan was unique and varied in length and services provided. Nonetheless, it was anticipated that six months would be the typical time period for service delivery.

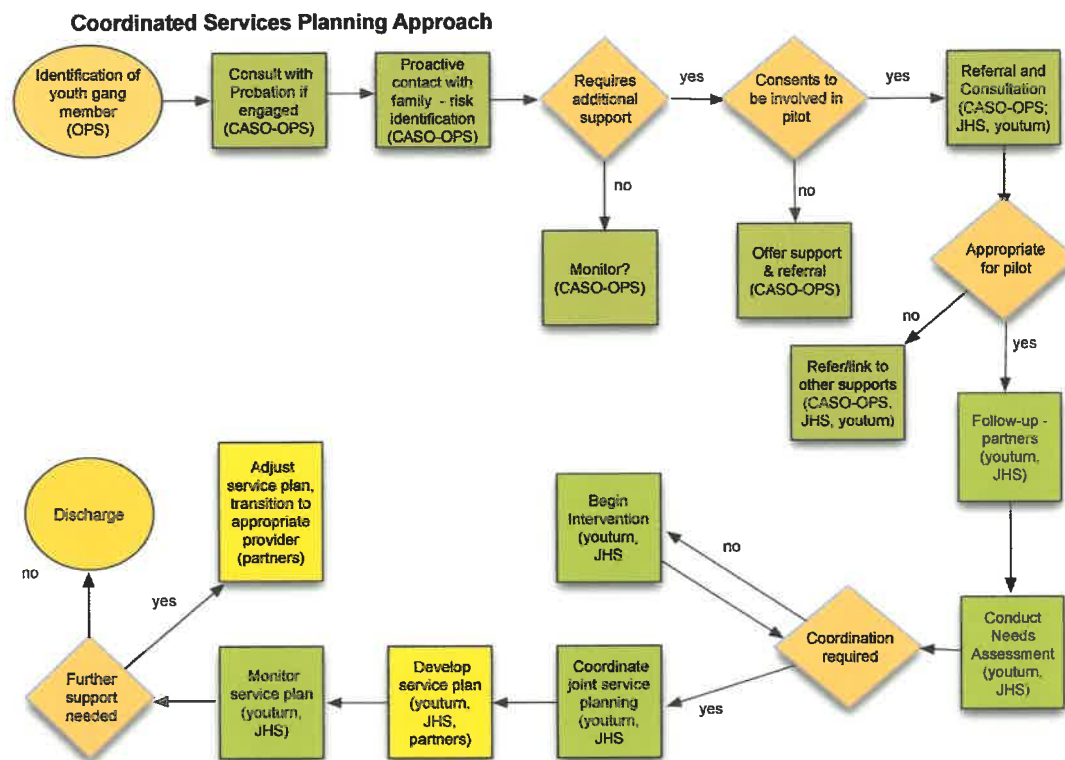
The lead agencies used a Collaborative Problem Solving (CPS) framework for service intervention.<sup>2</sup> CPS is an individualized, strength-based approach that aims to comprehensively assess specific cognitive skills that may be contributing to challenges being experienced by the families and youth. Ultimately, it is designed to impart new cognitive skills. Overall the project was guided by the Supporting Families Pilot Framework (the Framework) and principles developed by the partner agencies, which aligned with the broader Ottawa Gang Strategy.<sup>3</sup> Figure 1 on the following page provides a visual mapping out the targeted family's path from outreach to exit.

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<sup>2</sup> John Howard Society Ottawa, Youturn et al. (June 2014). Supporting Families: Siblings at Risk Framework, Ottawa, ON.

<sup>3</sup> Ottawa Gang Strategy: A Roadmap for Action (2013).

Figure 1: Intake and Planning Flow Chart



## Evaluation Methodology

The Evaluation Team utilized a mixed methods approach to employ a combination of a cross-sectional and pre/post-test measures to conduct the Process and Outcome Evaluations. For the Process Evaluation a cross-sectional design was used to capture satisfaction among participants at completion, and partners and staff opinions at each of the three phases of the pilot (planning, implementation, and completion). To measure the impact of the pilot the Evaluation Team utilized a pre/post-test design to capture the prevalence of risk factors among participants at service intake and completion. Both Process and Outcome Evaluations contained tools which utilized quantitative and qualitative methods to best capture how the pilot operated and its impact on families. The aims of both the Process and Outcome Evaluations, as well the tools used by the Evaluation Team are outlined in more detail in the following sections.

## Process Methods

The primary goals of the Process Evaluation were to track and measure the development of the pilot across four key categories. These four categories included:

- Details regarding the participants who were targeted and accepted into the pilot;
- The implementation of the pilot and partnerships;

- Whether the programs and services were delivered as intended; and
- How involved the partners were in the service system coordination.

Tracking measures within these four categories would help to provide a detailed picture of SFP evolved over the course of the pilot, and whether it was implemented successfully by the partners. Detailed evaluation questions for the Process Evaluation can be found in the Process Evaluation Results Matrix (see Appendix A).

The following tools were utilized by the Evaluation Team to answer the Process Evaluation questions noted in Appendix A.

#### *Fidelity Checklist*

This form consisted of 7 categories encapsulating a total 13 questions all of which reflected the principles of the Ottawa Gang Strategy. The 7 categories measured the degree to which the program was youth-centred, engaged youth, engaged families, community based, evidence based, collaborating partnerships, and shared information. This checklist was administered once towards pilot completion to one Manager and two Supervisors from the lead agencies, as they could provide the best overall picture of how the pilot unfolded. The Manager and Supervisors were provided an opportunity to explain their responses if they selected 'partial' or 'limited/none' to any one of the 13 questions capturing a principle reflected in the Ottawa Gang Strategy.

#### *Consent Forms*

Two kinds of consent were sought from both family/parents and youth project participants:

- Consent to participate in the SFP, and
- Consent to participate in the evaluation.

Both kinds of consent were recorded on a single form. For all youth (gang-involved or sibling) under the age of 16, consent were required both from the youth and from a parent or guardian. The Evaluation Team received copies of the Consent Forms for each of the participants in SFP.

#### *Referral Form*

Basic information was recorded at the point of intake utilizing this form, developed by the Ottawa SFP partners.

#### *Youth Level of Service -Case Management Inventory (YLS-CMI) and Gang/Strength Supplement Screeners*

The initial determination of eligibility for the program involved the application of three screeners. The first based on the YLS-CMI tool used in the youth justice system, the second a supplementary screener for gang involvement, and the third based on the strength factors of the YLS-CMI tool. This screener was only conducted once, and was used for the purposes of the Process Evaluation to evaluate whether the target group was reached through the pilot.

#### *Exit Survey*

This form was designed to be completed by SFP staff in conjunction with the family and/or youth if they dropped out of the program early. It asked for details around program experience, including why the individual left and how the program could have more effectively met their needs. Unfortunately, none of the participants which dropped out of SFP completed the Exit Survey. This occurred in part because program exit was not clearly defined, and more on this is elaborated in the Process Evaluation piece of this report. The Evaluation Team supplemented information from the case notes to determine why participants left or refused to participate in SFP.

#### *Partner Satisfaction Survey (Planning, Implementation, Completion)*

Three different Satisfaction Surveys were completed by the partners through the course of the pilot. One at end of the planning phase, the second at the end of the implementation phase, and a third at the pilot completion phase. In these surveys partners were asked to rate such variables as their level of engagement in the framework development process and the level of support from their organization. They were also asked to rate the way the project was structured in terms of efficiency, competency, governance, etc. The survey administered during the implementation phase also asked staff more detailed questions relating to their positions, and their satisfaction with service delivery. Using open-ended questions, project partners were asked to comment on the best aspects of working with the SFP as well as their least favourite aspects and to provide their suggestions for improvement.

Broad questions relating to the overall satisfaction with SFP were asked in each of the three surveys. However, each survey was meant to intentionally capture the lessons learned at a particular phase of the pilot. Hence, this survey was used as both a repeated measures capacity and cross sectional design to answer the Process Evaluation questions.

#### *Focus Groups/Interviews*

Focus groups were held in person and by phone to probe and obtain added detail on issues identified in the Partner Satisfaction surveys. The focus groups garnered details regarding three separate phases of the pilot: the outreach and referral, the program implementation and partner collaboration, and finally outcomes noted by the staff and partners.

#### *Parent Satisfaction Survey*

The parents/guardians participating in the program were surveyed upon program completion. Questions looked to solicit their views on the program/project, the effect it had on them, what they learned, and its impact on relationships among family members as well as how the program could be improved.

#### *Youth Satisfaction Survey*

At the end of the program involvement, youth participants were asked to complete a satisfaction survey. Similar to the Parent Satisfaction Survey, this instrument included multiple choice items regarding their satisfaction with the program, including satisfaction with their involvement with the program, what they learned, how it affected their family dynamic, etc. Open-ended questions asked participants what aspects of the project they liked best and least and their suggestions for improvement.

### **Outcome Methods**

The primary goals of the Outcome Evaluation were to:

- o identify the impact of the project on the family and youth participants;
- o identify the impact of the project on service delivery; and
- o identify areas where changes could be made to improve the project's effectiveness.

Detailed evaluation questions specific to the Outcome Evaluation can be found in the Outcome Evaluation Results Matrix (see Appendix B). The following tools were used by the Evaluation Team to measure the aforementioned outcomes.

#### *Youth Level of Service -Case Management Inventory (YLS-CMI) 2.0*

The YLS-CMI was identified as the primary tool to assess the risk level of participants. The instrument required data collection through individual interviews that take approximately 30-45 minutes to complete. The tool both assessed program referrals to ensure that the project reached the appropriate target group – applicable to Process Evaluation – and also tracked risk factors and levels over time for the Outcome Evaluation. The full YLS-CMI assessment was conducted by the lead agency (JHS Ottawa or Youturn) for each youth participant. For the Outcome Evaluation it was utilized as pre/post-test measure, as it was administered at intake and program completion.

#### *Child and Adolescent Needs and Strengths (CANS)*

Developed by the Children's Hospital of Eastern Ontario, this instrument is designed for use with children under the age of 12. For younger siblings, the instrument took the place of the YLS-CMI. It was designed to be administered at intake and at the completion of the program.

#### *Thinking Skills Inventory (TSI)*

The CPS approach to intervention is accompanied by the Thinking Skills Inventory (TSI). This tool was meant to act as a living document to track cognitive and behavioural changes among the youth participants. The evaluation aimed to administer this tool at intake, every three months and at program completion. However, in practice this tool was administered more commonly as a pre/post-test measure, once at intake and once at program completion.

#### *Youth Assessment & Screening Instrument (YASI) and Service Provision Instrument (SPIn)*

The YASI is an assessment tool used by JHS Ottawa for youth aged 12 – 17 years. The SPIn was used for youth 18 and older. These tools captured data relevant to both youth and family participant outcomes.

#### *Information Supplement Forms*

The Information Supplement Form included measures from the YASI and SPIn instruments on family opportunity and the penchant for the youth to use violence to solve problems. This supplement form was administered where these measures were not reflected in the other instruments used by staff. This tool was also administered through a pre/post-test design, once at intake and once program completion.

The next sections of this report delve into the findings from both the Process and Outcome evaluations. Considering SFP has not entirely wrapped up at the time of writing this report, as well as some of the challenges described in the Process Evaluation, the findings from the Outcome Evaluation are limited. Nonetheless, wherever possible the Evaluation Team have noted areas where SFP showed promise in producing impacts.

## Process Evaluation Results

As noted above, the Process Evaluation was designed to track the development of the SFP from inception to operation through to completion. The Process Evaluation aimed at capturing key features of how the pilot developed and whether this occurred as effectively possible. One of these features the Process Evaluation assessed was whether the outreach was effective in targeting the intended population for the

pilot. A second feature the Process Evaluation measured was whether the pilot was implemented as it was intended by the partners, this includes program fidelity, the referral and intake process, as well as the service provision and exit strategy of the program. Finally, the Process Evaluation tracked whether the service system coordination among the various partners worked collaboratively and effectively, as it was intended in the Supporting Families Framework. Each of these components are analyzed in further detail below.

### Pilot Participants

This section of the report outlines the degree to which SFP enrolled the planned number of participants, reached its target group, and whether this target group was engaged throughout the course of the pilot. The following paragraphs provide a brief narrative of the outreach and attrition which occurred over the course of the pilot, and highlights how SFP was able to reach its target population despite the two families who did not participate. Finally, the latter part of this section provides an overall picture of the engagement and duration among participants in SFP.

#### *Outreach & Attrition*

15 families in total in total signed consents forms to participate in SFP. These consents to participate were signed at an outreach meeting attended by the CASO Liaison Worker and OPS Officer. These 15 families produced a total of 56 potential youth participants to work with through the course of the pilot. Furthermore, attrition was defined as participants who had signed consents to be involved with SFP but received no services because they disengaged.

Unfortunately two of these families disengaged from SFP early on, prior to the start of the gateway meeting and triage process. From the two families which dropped out of SFP, one family disengaged early in the process. The reasons for this lack of engagement from this family are unknown as staff were unable to contact the family. The second family which disengaged noted they were too busy to schedule in time for services and did not provide any availability. The front-line service workers involved in connecting services to the second family noted that they presented several different options for service provision, as well as a variety of scheduling hours to accommodate but the family did not seem interested in participating in SFP. These two families thus received no services through SFP. As these two families disengaged early, a total of 7 youth were immediately dropped from receiving services and formed part of the attrition group.

This attrition meant the pilot to provided services to 13 families with the potential of working with 49 young persons if all of the members of each family participated in SFP. After the first referral and consent meeting an additional gateway meeting and triage process was completed. During this process it was the needs and requests of the family were determined. From this triage and gateway model 22 youth were screened out from requiring services or were never engaged for service. The case notes revealed that reasons why these youth were not engaged varied, with the most common reasons being that the parents felt the youth did not have unmet needs, the youth was already engaged in other programs/services, or no contact could be made with the youth because he or she did not live in the house. Consequently, attempts were made to engage and provide services to 27 youth from 13 different families. Unfortunately, 5 youth did not engage in services from the 27 youth staff attempted to contact.

Four of these youth disengaged from services early on, while one youth signed consents to participate but contact was lost once he was transferred to an adult custody facility.

In total 12 youth formed part of attrition group for SFP from a sample of 34 youth. The 34 youth sample size is derived from the 22 youth who were deemed appropriate for service through the triage process, plus 7 youth who disengaged from two families prior to the triage process, and 5 who were targeted for services after the triage process but disengaged. This leaves an attrition rate of 35% amongst participants who were targeted for service but did not engage with SFP. 6 of the 12 youth who disengaged early were 20 years or older. Unfortunately, there is not enough detail to know why these older participants disengaged, however, the emphasis on targeting younger siblings may mean the program did not appeal or cater as well to older participants as it did to younger participants.

#### *Participant Characteristics*

The outreach therefore produced a total of 22 youth who were provided services through SFP. Of the 22 youth, 9 received services by Youturn with an additional 5 youth receiving on-going services from Youturn at the time of writing this report, and the remaining 8 were serviced by the John Howard Society of Ottawa throughout the course of the pilot.

The average age of the 22 youth who received some services was 16, with the ages ranging between 10 to 23. Figure 2 below provides a breakdown of the demographic characteristics of the participants.

Figure 2: Pilot Participant Demographics		
Ages	Male	Female
10 to 11	2	1
12 to 17	11	3
18+	3	2
Total	16	6

Out of the 22 youth who received services through SFP, 15 completed a YLS-CMI and Gang Supplement Screener. From the 15 youth who completed the screener, 13 youth were between the ages of 12 to 18 the appropriate age for the YLS-CMI, while an additional two were ten years old at the time of the screener. Figure 3 below illustrates the findings from the YLS-CMI Screener for the youth who received services.

Figure 3: YLS-CMI Screener (n=15)								
History of Conduct Disorder	Current School or Employment Problems	Some Anti-social Friends	Alcohol/ Drugs Problem	Leisure/ Recreation Issues	Personality/ Behaviour Problems	Family Circumstances	Attitudes/ Orientation Problems	Average # of Risk Factors
7 (47%)	7 (47%)	8 (53%)	0 (0%)	9 (60%)	7 (47%)	3 (20%)	6 (40%)	3.3

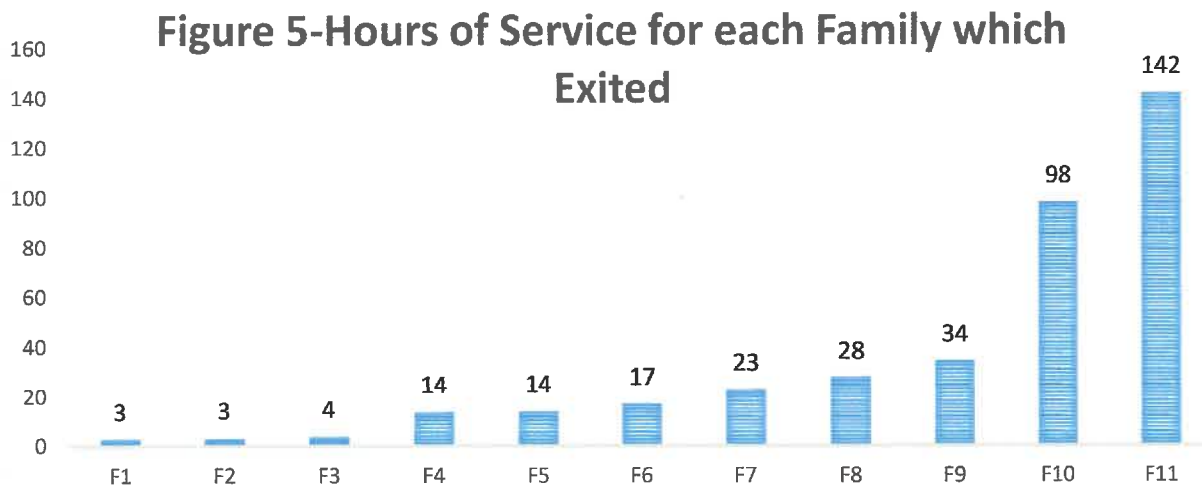
The average number of risk items per referred youth was 3.3 out of a possible 8 factors, which may seem low. However, when looking at the specific risk factors from the screener it is clear that a substantial number of youth referred to SFP had issues with regards to how they spent their free time (leisure/recreation issues), having ties to antisocial friends, and had a history of a conduct disorder. This brief screener broadly outlines the characteristics of youth who may be vulnerable to gang involvement, particularly since these youth already had an older sibling who was gang-involved. To dig deeper into the risk of gang involvement an additional screener was utilized, and the results from this screener are presented below in figure 4.

Figure 4- Risk for Gang Membership Supplement (n=15)					
Family member was a gang member in the past	Family member is currently a gang member	Is friends/acquaintances with a gang member	There are known gangs in the youth's school/neighbourhood	Lives in a community where gangs actively recruit	Youth has expressed in joining a gang
13 (87%)	9 (60%)	8 (53%)	7 (47%)	7 (47%)	5 (33%)

Although figure 3 highlighted that the youth who were referred had a seemingly low number of risk items overall (mean=3.3), the results in figure 4 justify why youth with lower overall risk scores were targeted for SFP, as their risk for gang involvement was high. This aligns with the target population who were the younger siblings of individuals with ties to gangs. The younger siblings would not necessarily have the same risk factors as their older gang involved sibling(s) who was often not living in the same residence. Nearly all of the youth who were screened and received services either had a family member who was a gang member in the past, or currently was one. This high proportion reflects the successful Outreach process in targeting the specific population which SFP aimed to target. Not only were the youth who were referred to SFP a risk for future gang involvement due to their family ties, but also through connections with their friends and acquaintances. Furthermore, once a full YLS-CMI was completed it was revealed that two of the 22 youth who received services were noted as having gang involvement as well. Thus, participants of SFP fit the risk profile the pilot was designed and implemented to target.

#### *Engagement/Dosage*

Each of the 13 families who participated in SFP received some degree services, however the duration of each family's level of service varied from a low 2.5 hours for a single family to a high of 140 hours for a single family. This enormous variation across service duration means the average is not a very a useful statistic for describing engagement in SFP. Moreover, two the 13 families are receiving on-going services at time of writing this report, and are excluded from the analysis on dosage since their participation began very recently. The most effective way of categorizing the duration of the program is by ranking the 11 families who exited services by the lowest to highest number of service hours they received. This also provides a range in relation to the intensity of the services families received, and helps to gauge the impact of dosage for the Outcome Evaluation in the latter sections of this report. Figure 5 below provides a visualization of this distribution.



As noted above, figure 5 visually highlights the variation in service engagement experienced across the 11 families. Considering SFP's service model for developing and implementing service delivery this discrepancy is an expected component of the pilot. In fact, the flexibility and family defined service provision was intentionally elicited in this pilot, and therefore service provision was expected to vary across the families. The flexibility in service was one of many components which underpinned the service delivery model for SFP. The following sections expand on how effectively SFP was in adhering to its guiding principles and implementing the service provision.

### Implementation

This section of the Process Evaluation presents a narrative account assessing how effectively services were delivered in SFP. More explicitly, the sections in this report assess how well the pilot was implemented, and whether it was delivered as intended. The Process Evaluation Results Matrix in Appendix A provides concise and detailed presentation of the findings narrated here. This section of the report begins by outlining the degree to which the pilot adhered the principles of the Ottawa Gang Strategy. Second, this section of the report details the effectiveness of the delivery of services from the targeting and outreach process, through to delivery of services, and participant exit. This component of the Process Evaluation highlights the successes and challenges in operationalizing the pilot. While these success and challenges will be noted in this section of the Process Evaluation, a deeper discussion regarding the lessons learned from the pilot as a whole is reserved for the end of the evaluation report.

### Program Fidelity

As noted in the Pilot Overview and Methodology sections of this report, a fidelity checklist was administered at the end of the pilot to capture where there were challenges in implementing principles from the Ottawa Gang Strategy. This checklist was administered as a learning tool, rather than a conventional fidelity measure of programming. Considering the pilot was developed on the basis of the Ottawa Gang Strategy, it was important to note where a gang reduction program such as SFP experienced

successes and limitations in implementing best practices. The results from the fidelity checklist are shown in figure 6 below.

Figure 6: Fidelity Checklist	
<b>All Supervisors &amp; Case Manager Selected 'Full'</b>	
<i>Youth-centered  </i>	<ul style="list-style-type: none"> <li>Applied a needs-based approach focused on the needs and strengths of the children and youth at risk.</li> </ul>
<i>Family engagement  </i>	<ul style="list-style-type: none"> <li>Family and youth/child perspectives were intentionally elicited and prioritized during all phases of the process.</li> </ul>
<i>Community-based  </i>	<ul style="list-style-type: none"> <li>The coordinated service team implemented service and support strategies that took place in the most inclusive, most responsive, most accessible, and least restrictive settings possible.</li> </ul>
<i>Evidence-based/risk-based  </i>	<ul style="list-style-type: none"> <li>Proven initiatives and successes were adapted to the community's needs.</li> <li>Based on shared assessment tools for criminogenic risk by the various partners.</li> </ul>
<i>Integration, collaboration and partnerships  </i>	<ul style="list-style-type: none"> <li>Addressed broad youth issues such as mental health, addiction, and child welfare.</li> </ul>
<i>Information Sharing  </i>	<ul style="list-style-type: none"> <li>The service delivery model fostered an openness to lawful and appropriate sharing of information between individuals and organizations in a timely and accurately manner.</li> </ul>
<b>At least 1 Supervisor or Case Manager Selected 'Partial'</b>	
<i>Youth engagement  </i>	<ul style="list-style-type: none"> <li>Ensured that youth were given opportunities to provide their perspective on the issues that faced them.</li> </ul>
<i>Family engagement  </i>	<ul style="list-style-type: none"> <li>Staff strived to provide options and choices such that the plan reflected family values and preferences.</li> </ul>
<i>Community-based  </i>	<ul style="list-style-type: none"> <li>Service delivery was culturally sensitive.</li> </ul>
<i>Integration, collaboration and partnerships  </i>	<ul style="list-style-type: none"> <li>Service providers worked co-operatively and shared responsibility for developing, implementing, monitoring, and evaluating a single case plan.</li> <li>The plan reflected a blend of team members' perspectives, mandates, and resources.</li> </ul>
<b>At least 1 Supervisor or Case Manager Selected 'Limited/None'</b>	
<i>Youth engagement  </i>	<ul style="list-style-type: none"> <li>They were empowered to take a leadership role in shaping the services that best suited their needs (i.e. they had a voice in the service planning process).</li> </ul>

The Supervisors and Case Manager for SFP all selected 'full' compliance on 7 of the 13 questions reflecting fidelity to the principles of the Ottawa Gang Strategy. The Supervisors and Case Manager from both of the lead agencies, John Howard Society of Ottawa and Youturn, felt the pilot largely operated in a manner which reflected the evidence based best practices outlined in the Ottawa Gang Strategy.

In 5 of the 13 questions reflecting fidelity, at least one Supervisor or Case Manager noted 'partial' compliance. For youth engagement, one Supervisor or Case Manager selected 'partial' with respect to whether SFP 'ensured that youth were given opportunities to provide their perspective on the issues that faced them.' The other two participants to the checklist selected 'full' compliance with regards to this question, and no qualitative response was offered as to why the respondent selected partial compliance. With regards to family engagement, one Supervisor or Case Manager selected 'partial' compliance to 'staff strived to provide options and choices such that the plan reflected family values and preferences,' while two respondents selected full compliance to this question. The lone respondent who selected partial explained that the CPS model employed was difficult for some families to integrate with their own values and preferences. Two of the three respondents selected partial with regards to service delivery being culturally sensitive. One Supervisor or Case Manager noted that ongoing learning was necessary with regards culturally responsive services and felt the Steering Committee did not reflect individuals from diverse cultural backgrounds. The other respondent noted the CPS model underlying the service delivery can conflict with culturally held values held by the families SFP served. Lastly, one Supervisor or Case Manager noted partial to two of the three questions relating to integration, collaboration and partnerships. When asked to elaborate the respondent noted highlighting one service model for delivery over the expense of others as a factor which reduced integration with regards to service frameworks.

None of the three respondents selected full compliance with respect to empowering youth to take a leadership role in shaping the services. Two respondents selected partial and the remaining selected 'limited/none' compliance to this question. When asked to elaborate the respondents noted that youth were active in planning their own cases but not in the development of the service itself. The respondent who noted 'limited/none' did so because he or she felt there was no youth leader on the Steering Committee.

Overall, the Supervisors and Case Manager overwhelmingly felt SFP operated in a manner which reflected the principles laid out in the Ottawa Gang Strategy. Where they did note partial compliance, it most often had to do with the limitations of utilizing the CPS model. Although this evaluation was unable to measure the implementation or effectiveness of the CPS model, future evaluations or iterations of the pilot should evaluate the strengths and weaknesses of the approach with regards to cultural sensitivity and collaboration.

The next sections of the report begin to examine deeper the granular elements of implementing SFP. In evaluating the effectiveness of the SFP's service provision model the next sections discuss findings relate to the referral, intake, programming, and exit strategy for participating.

### Service Provision

Three separate processes were examined to measure the effectiveness of the service provision conducted through SFP. The first process examined in the paragraphs below relates to the referral and intake process, and how effectively this was accomplished. The second process examined below relates to whether the appropriate program inputs were in place to operate SFP. Finally, the Evaluation Team examined the effectiveness of the exit strategy for participants involved in SFP. The Partner Satisfaction Surveys, alongside the Focus Groups were the primary sources for assessing the effectiveness of these processes and service provision overall.

### *Referral Process*

The process of targeting and conducting outreach with the youth was the primary role of CASO and OPS. As noted in the Pilot Overview and Pilot Participants section, CASO and OPS' role in gathering and verifying screening information was a key component in SFP's ability to target the youth population at-risk of gang involvement. This effectiveness was affirmed overall by the partners in the Implementation Phase Report.

In the Implementation Phase report, it was noted that the majority (9 out of 14) of the respondents were satisfied with the referral process as a whole. All of the respondents who were familiar with the project outreach done by OPS and CASO were either 'satisfied' or 'very satisfied' by their efforts. When offered the opportunity to elaborate, one respondent noted the 'CASO Liaison has been instrumental in making this pilot function.' All of the respondents were also asked how effectively they felt the project is targeting at-risk youth and/or their families. 11 of the 13 respondents who answered this question either selected 'effectively' ( $n=10$ ) or 'very effectively' ( $n=1$ ), the remaining two selected 'not effectively.' The two who selected not effectively were offered the opportunity to explain their selection. One respondent noted identifying at-risk youth as difficult, with the other noting that some of the youth and their families targeted for SFP are low-risk because they are familiar with the supports available in the community.

Moreover, in the Implementation Phase report, the Liaison/Outreach Worker was asked to expand on any concerns he or she may have had with the recruitment process. The concerns he or she relayed focused on timing. There were concerns that the recruitment process should begin early on when an incident occurs with a youth rather than follow-up with the youth his/her family to recruit months after. To garner more detail on the success and challenges a focus group and interview by phone with the CASO and OPS staff who conducted the Outreach work was done by the Evaluation Team. The successes illuminated by the Outreach workers are discussed first, followed by the challenges.

The knowledge and expertise both CASO and OPS staff could bring to the table to target at-risk youth was a strength in the outreach process. The information OPS staff received from the Guns and Gangs Unit was harmonized well with the data CASO had on families, and then triangulated further with the partnering agencies to target families in need. These checks and balances assured those families which were targeted fit SFP's criteria, particularly with regards to the younger siblings of gang members who were at-risk of gang involvement.

Not only was the information CASO and OPS staff were privy to useful in the outreach, but the experience and knowledge of how to interact with at-risk populations was crucial to engaging families to participate. Both CASO and OPS staff highlighted in the focus group that sensitivity from staff at both organizations on how to speak to marginalized populations was a key component to an effective sales pitch for services. CASO and OPS staff worked hand in hand to listen and take into consideration the concerns of the families. Despite the success of the outreach process focus group highlighted many challenges and ideas for improving the outreach process.

Staff from both sides of CASO and OPS noted some scepticism in the presence of having one another arrive unannounced at prospective client's houses. Having a CAS worker or police officer arrive unannounced contained some shock factor for the parents, and this presented difficulties initially in

explaining to the parents why they were present at the family's home. OPS staff also noted that the areas where the outreach was conducted was not necessarily the safest neighbourhoods and there was always a concern that there was potential for a scenario where safety of the Outreach Worker was compromised.

While the information that was vetted and harmonized across CASO and OPS produced the target population intended for SFP, the focus group did note that this was a very time consuming process. The timing of the information was highlighted again in the focus groups as a concern, as it was difficult at time to explain the relevance to parents of providing services in response to an old incident by the youth who was targeted. Moreover, OPS staff noted that a lot of time was spent inefficiently driving to residences to explain the pilot services in person to families, when a phone call before visiting may have saved resources and travel time.

Although there were many challenges in conducting the outreach, the process itself referred the target population. A large number of youth who participated in SFP had direct or indirect linkages to gang involvement, as highlighted in the Pilot Participants section of this report. Some focus group participants did feel low-risk participants should have been referred to other programs rather than the intensive supports provided through SFP. However, the youth who were low-risk overall nonetheless faced considerable risks of future gang-involvement, and the flexibility of SFP allowed families and youth to define the intensity and duration of the services.

#### *Program Inputs*

To evaluate the case planning and program delivery processes for SFP the Evaluation Team reviewed findings from the Partner Satisfaction Surveys, particularly the Implementation Phase Report, the case notes for participants, and focus groups with both Front-line staff and Supervisors. The focus groups built off of the findings from the Implementation Phase Report, and the tracking tools from the lead agencies. Many successes and challenges were noted on how program inputs (staff training, case processing) was utilized through the course of delivering services. Before illuminating and discussing the challenges a brief overview of the findings from the Implementation Phase report as well as the case notes provide a backdrop to the discussion which occurred during the focus groups.

The Implementation Phase Report noted key successes and challenges with regards to planning and delivering services for SFP. Some of the most noted successes in this report highlighted how services were more connected, strengths based, and how the case planning elicited the perspectives of both youth and parents. One Case Worker also noted in this report that motivational interviewing techniques were helpful when engaging youth to develop goals. The Implementation Phase Report noted that all twelve of the respondents who were familiar with the case planning process either selected 'satisfied' ( $n=11$ ) or 'very satisfied' ( $n=1$ ) with its implementation. In terms of information sharing, one partner felt that the consent processes across multiple agencies may have slowed down service provision. Moreover, Case Workers highlighted the 6 month timeframe for delivering services as problematic and rare in the SFP. Nonetheless, the findings from the Implementation Phase report were positive overall, and noted that while it took time to operationalize and implement SFP there were noticeable improvements in service delivery and co-ordination among the partners.

As noted throughout this report there was no set 'program' participants of SFP went through. Participants played a significant role in defining the kind and levels of services they would receive

through the pilot. The SFP's role in connecting at-risk families to the supports they needed and desired was key to the service delivery model. In doing so, the lead agencies involved with administering SFP had to connect participants to a vast array of services to meet unique needs. When reviewing the case notes of participants and the types of services they received it was clear that SFP was effective in co-ordinating and connecting supports families requested.

The following list provides examples of the types of supports which were provided families either in-house from the lead agency themselves or through co-ordination with another agency:

- Employment services and supports (resume writing)
- Health care connection (autism supports)
- Financial supports (connection to funding sources for extra-curricular activities)
- Counselling (general, anger management)
- Parenting supports
- Collaborative Problem Solving
- Healthy relationship training/counselling
- Living skills

This information collected from the Partner Satisfaction Surveys and the lead agencies' tracking tools were all supplemented with focus groups to highlight areas where program delivery was particularly successful, and where there were areas for improvement.

The focus group with Front-Line staff noted the gateway meetings with the CASO and OPS worked well in most cases because of the soft skills the Liaison Workers used in engaging families. Front-line staff noted that these soft skills were a core competency for effectively transitioning families through the triage to service provision process. Front-Line staff also viewed their involvement with low risk families to be sufficient although brief. In these low risk cases Front-Line staff noted that they felt it was effective how the focused on strengthening protective factors and connecting participants to resources, rather than inject intensive services. Staff also liked working with the whole family unit, as opposed to their normal service delivery models which focus on individuals. Finally, some staff noted that SFP provide an opportunity for staff learn more about prevention work, as well as develop new relationships with partnering agencies.

The successes of the unique service delivery model in SFP also produced unanticipated challenges, some which were overcome while others require future consideration and guidance. Scheduling conflicts have been noted across previous Partner Satisfaction Surveys, and were mentioned in the focus groups as particularly difficult for organizing a gateway meeting. One of the biggest challenges Front-Line staff mentioned was the difficulty in navigating the language of a service targeting youth at risk of gang involvement without alerting the parents that gang involvement was a concern. Explaining why particular families were targeted for service without mentioning gang involvement was difficult, especially considering some tools asked gang specific questions.

A second challenge for staff providing programming was when they were working with younger children. Staff noted some confusion as to why Crossroads was not involved more in the programming when children under the age of 12 required services. One unique challenge that arose during the programming was difficult in engaging families who wanted supports for younger siblings, however, the families wished to continue enjoying the proceeds of gang member involvement. Finally, some staff noted challenges in

utilizing the CPS model when many of the partners had minimal expertise in utilizing such an approach. Staff also felt SFP should not have run exclusively through a CPS model, but offered it as a framework among a menu of other available techniques.

#### *Exit Strategy*

As mentioned above, SFP did not have a set 'program' as the service was driven by client needs. Some of the participants had services which lasted beyond a year with complex needs, while others cut contact after the appropriate referrals to health or employment agencies. There was therefore no appropriate exit strategy for participants. The Focus Groups noted that participation dwindled in SFP rather than with any clear exits, and as contact dissipated so did the odds of conducting closure assessments.

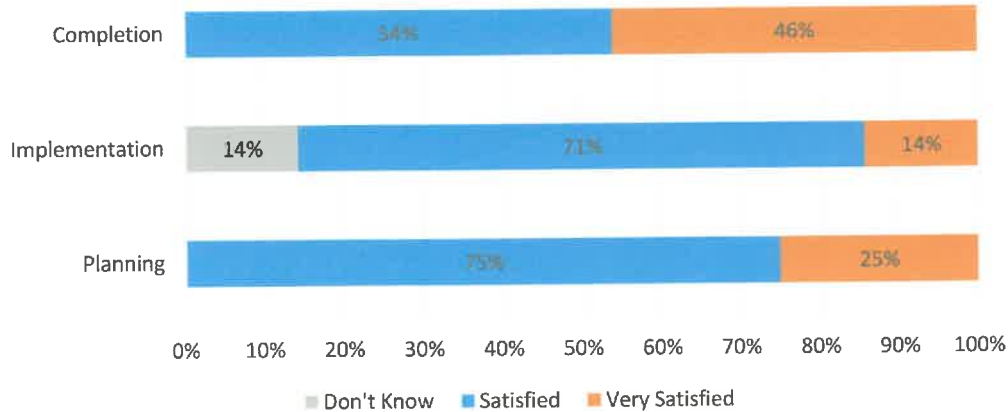
The lack of a clear exit strategy for participants was particularly problematic for the evaluation of the pilot, and substantially hindered the evaluation. For instance, only two youth completed the Satisfaction Survey after completion of services, and additionally only two parents-both connected to one family-completed the Parent Satisfaction Survey. This hindered the Process Evaluation in relation to verifying the types of services both youth and parents received, as well as their opinions of the usefulness of SFP. The lack of a clear exit point from SFP meant there was no measure of impact or effectiveness of service delivery for families whose involvement with SFP was short, as no Exit Surveys were completed for participants who dropped out of SFP. The latter sections of this report will further articulate potential solutions as well as the lessons learned in relation to the exit strategy for SFP. Alongside the resources allocated to documenting and assessing program the Evaluation Team spent considerable time documenting and analyzing whether SFP improved service system coordination amongst the partners involved. The following section of the Process Evaluation reveals how collaboration of partners operated through the course of the project.

#### **Service System Coordination**

Documenting and evaluating how the SFP collaboration developed and operationalized overtime was an important piece of the evaluation. It is rare when so many agencies with varying mandates come together to operate a single service initiative. Capturing the success and challenges of this unique experience was a key component to validating whether the pilot was implemented and completed successfully, as well as ensuring any important lessons were captured. This element of the Process Evaluation was tracked primarily through the three Partner Satisfaction Surveys, and triangulated with responses by focus group members wherever possible. Results for the Partner Satisfaction Surveys were presented to the Steering Committee once completed, except for the Completion Phase report which was completed in conjunction with this final report. This final Partner Satisfaction Survey is attached as a standalone report, similar to the preceding two partner satisfaction reports, in Appendix C. The analysis presented here on Service System Coordination is a broader narrative evaluating the satisfaction and involvement among the partners.

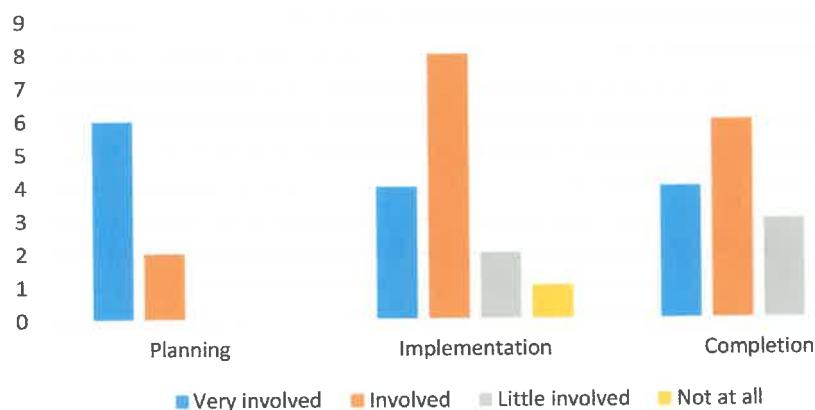
The growth and impact of the partnership evolved overtime. In order to capture this growth some questions were asked in a repeated measures design in order to track over the course of the pilot how engagement and satisfaction varied. Figure 7 below illustrates how overall satisfaction with SFP remained high throughout the course of the pilot.

Figure7: Overall Satisfaction with SFP among the Partners



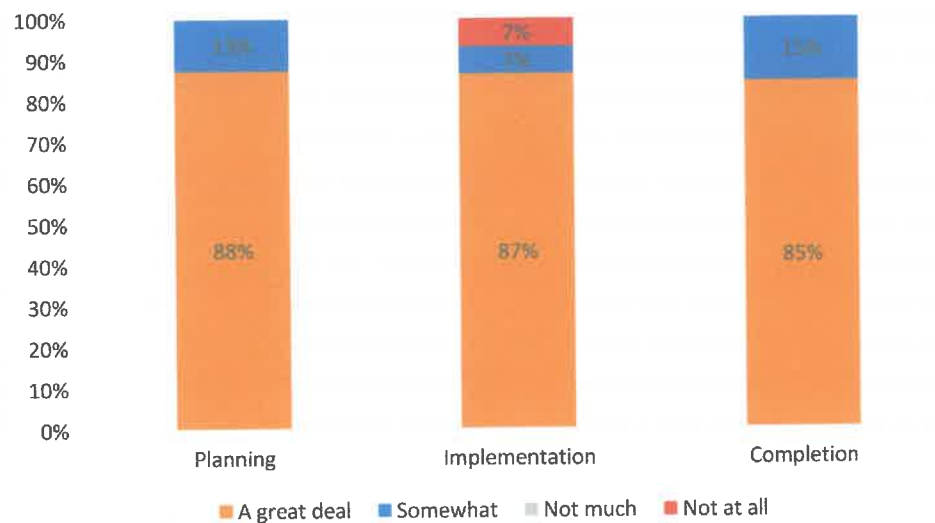
The overall satisfaction among the partners likely remained high because the operational pieces of the collaboration worked cohesively. In other words, support of the pilot was encouraged from an organization level, even when involvement in the pilot dissipated. For instance, figure 8 below highlights how partner involvement was characterized by the phase at which the pilot was in. The planning phase required the most involvement, with the implementation phase likely decreased involvement from the partners responsible for the referral component. Partner involvement in the pilot increased during the completion phases of the pilot, in part due to the needs in wrapping up the pilot and evaluation components.

Figure 8: Partner Level of Involvement by Pilot Phase



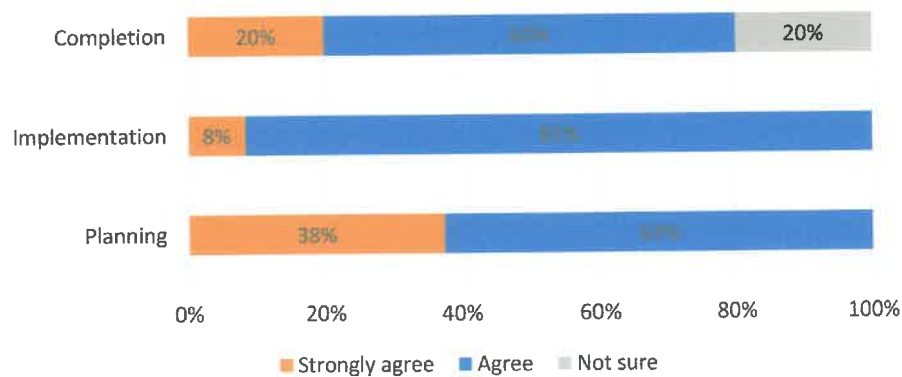
Despite these changes in engagement with the pilot, the organizational support partner’s received was consistent throughout the course of the pilot. Figure 9 below illustrates this consistency through the course of the pilot.

Figure 9: To what extent does your organization encourage your involvement with the SFP?

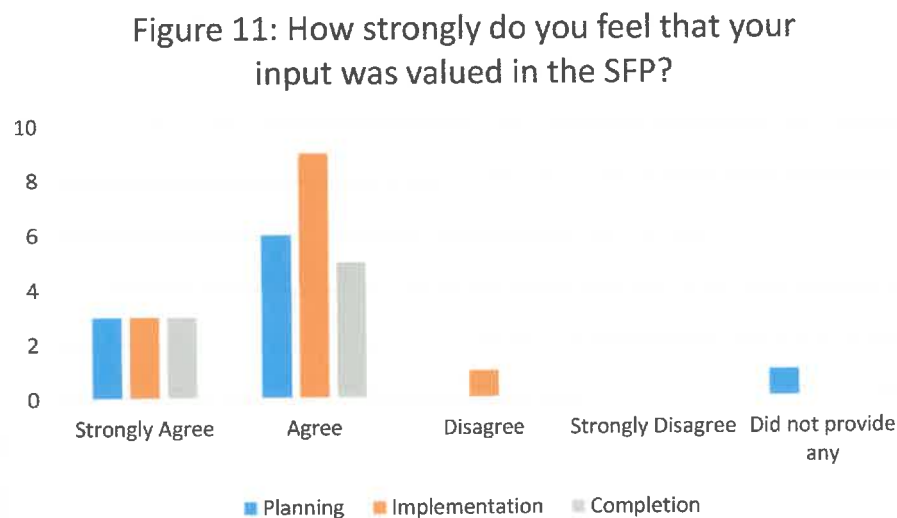


The consistency in the satisfaction among the partners stems in large part from the success of the governance structure of SFP. Throughout the course of the pilot the partners tended to select either ‘agree’ or ‘strongly agree’ when assessing their comfort levels in bringing up issues to the Steering Committee. The results are illustrated in figure 10 below.

Figure 10: Partner Comfort in Bringing an Issue up to the Steering Committee



While comfort levels in figure 10 tapered off from the planning to the completion phase of the program, they were nonetheless high to begin with and sustained fairly well by the partners through the course of the pilot. The high comfort levels in communicating with the Steering Committee was reflective of the strong communication across the partners as a whole. Figure 11 below demonstrates that partners overwhelmingly felt their opinions were valued through each phase of the pilot. This strong communication and valuing of differing opinions speak to the strength and ability of the collaboration in coordinating a cohesive service system.



Although the collaboration among the partners was viewed as a success overall, there were some areas where the collaboration may have produced increased engagement and satisfaction among the partners. Concerns were noted in the focus groups in relation to what happened to the families once they were referred and the gateway meeting was completed. Outreach Workers wished to know followed up with families they referred or know their outcomes. During the focus group Outreach Workers noted that they often felt as though they were selling program to which they were not aware was effective. The focus groups among the Front-Line Workers also noted a concern in relation to the partnership with Crossroads, as the role of this organization in a consulting capacity was not entirely clear to staff.

Nevertheless despite these concerns, the partners noticed stronger service coordination and impact through collaboration in the pilot. For instance, in the Completion Phase Satisfaction Survey partners noted 'more effective collaboration between community organizations,' 'better understanding of gang-related issues,' and 'better coordination of services' as the top 3 benefits they noticed, outside of at least somewhat reducing the risk of gang involvement. Essentially, the partnerships and collaborations were a strength of this pilot. The collaboration, early buy-in, and continued engagement were strengths in implementing a targeted pilot to a specific at-risk population. Reaching that population, through multiple sources and verified information meant appropriate families were targeted for this pilot, despite the inclusion of low risk participants.

## Outcome Evaluation Results

The Outcome Evaluation was designed to track if changed occurred among participants of SFP, and if so how did that change occur? The design of the Outcome Evaluation was largely based on pre and post-test risk assessments. The Evaluation Team analysed pre and post-test assessments for the data received, as well as any Satisfaction Surveys, and focus group findings which could triangulate the findings.

Nevertheless, there were unanticipated challenges with regards to collecting post-test data. There was a lack of clear guidelines as to when participants exited SFP, which produced significant limitations for the Evaluation Teams' ability to conduct an Outcome Evaluation. Some of the tools which were designed to be implemented at program completion were not completed by participants. This is in large part because staff lost contact with those participants after they received services or connected with referral sources. These limitations hindered the analysis for the short term outcomes, as very few parents and youth completed their respective Satisfaction Surveys. Similarly the analysis for the intermediate outcomes is hampered by the fact that only a few participants had a risk assessment at both intake and completion. Despite these limitations the Evaluation Team analyzed the data available and has tempered many of the findings with the qualification that the results are likely biased for participants who were co-operative and engaged with the pilot for a longer period of time. The results and analysis for the short and intermediate term long-terms are discussed below.

### Short Term Outcomes

The short term outcomes expected from the pilot were an increase in knowledge about the services available for participants and whether attitudes and beliefs changed among the partners with regards to the need to extend service mandates to meet family needs. Increases in parent and youth knowledge about the risks of crime and the supports available were to be expressed in the parent and youth Satisfaction Surveys, which were completed at program exit. Unfortunately, only one family (two parents) submitted parent satisfaction surveys, and only two youth, each from separate families, submitted a youth satisfaction survey. Due to this low response rate for the satisfaction surveys and the limited qualitative information on partner mandates a short narrative of the findings are presented below. For more details on the responses for the four satisfaction surveys, see the Outcome Evaluation Results Matrix in Appendix B.

The four participants were asked questions about whether their involvement in SFP improved their knowledge about the risks associated with crime and gang involvement. Both parent's noted they agreed strongly that SFP increased their knowledge about the criminal justice system or gangs and the associated risks. Of the two who youth completed the youth satisfaction survey, one youth selected 'yes, much more' when noting whether he or she understood the risks of being involved in crime better after their involvement with SFP. The other youth selected 'yes, more' to the same question. Both parents selected

'agree strongly' when answering whether SFP increased their knowledge about the criminal justice system or gangs and the associated risks. From the two youth who completed the satisfaction survey, one selected 'Yes, more' and the other 'no change' when answering whether he or she understood the risks of being involved with gangs better after their involvement with SFP. From this limited sample, there are signs that SFP did help to improve the knowledge of participants in relation to the risks of being involved in crime or gangs.

Accompanying these increases in knowledge regarding risks was a better awareness from the parents on the supports and techniques available to address these risks. Both parents selected 'agree somewhat' when answering whether involvement with SFP increased their knowledge about where to go to for help when they needed it. One parent noted 'agree somewhat' with the other selecting 'disagree somewhat' when asked if they had a better understanding of how to reduce their children's risk of gang and/or criminal justice after involvement with SFP. One parent selected 'agree strongly' with the other parent selecting 'disagree somewhat' when asked if they had a better understanding of the areas in which their children needed support after involvement with SFP. The responses in this area were mixed, with one parent increasing their knowledge more than the other through their involvement with SFP. Nevertheless, both parents were from the same family, hence, any knowledge gained from one parent would likely be relayed to the other parent or the rest of the family. Overall, the experience of SFP did improve the knowledge regarding risk and access to supports for this family.

With very few respondents and Satisfaction Surveys completed the information regarding short-term outcomes is limited at best. Nonetheless, the few youth and parents who completed the Satisfaction Surveys were both involved in the pilot for a long period and generally reflected on SFP in a positive light. The limited responses to the Satisfaction Surveys means there are few conclusions which can be made on SFP's ability to improve short term outcomes related to increasing the knowledge of risks and supports for families.

In relation to the increase in recognition amongst SFP partners to transcend their service mandates to meet family needs, a focus group among Supervisors provided clear commentary on the importance of partners coming together to provide services. The Supervisors noted in a focus group, which was held towards the end of the pilot, that SFP was able to provide services to support families that could not be supported within each organization's own justice mandate alone. A large portion of this understanding is also reflected in the strong target and outreach work which was able to garner the appropriate population for the service, as well as the strong coordination work among the partners to conduct gateway meetings and the triage process towards service as a whole. Hence, the SFP was able to not only increase perception but materially improve the recognition among partners for the need to improve service mandates to meet family needs.

### Intermediate Outcomes

The intermediate outcomes were also largely analysed through pre and post risk assessments. These risk assessment were analysed in conjunction with the degree of engagement participants had with SFP. Engagement with SFP was determined through the total number of service hours a family received by the time they had exited the pilot.

Similar to the short term outcomes highlighted above, there were limitations due to the low response rate in pre and post-test risk assessments and survey instruments. The attitude and belief changes among

parents which were expected to occur through the course of participating in SFP were to be captured by the Parent Satisfaction Survey, which unfortunately obtained a low response rate. Furthermore, while pre-test instruments were completed for many of the participants (i.e. YLS-CMI, TSI, or YASI at intake), these results are only valuable for the Outcome Evaluation in so far as there are post-test measures to compare any changes against. In light of these limitations with regards to data collection the outcome analysis presented here is also tempered with regards to the claims the SFP can make in relation to impact. The analysis begins with a brief overview in the total risk factors for youth with pre and post-test YLS-CMI scores. Following this overview, the Outcome Evaluation summarizes any changes experienced among participants across several factors including: attitudes and beliefs, peer group, individual level behaviour, school/work, and family functioning. Finally, the Outcome Evaluation concludes with an analysis on the impact or changes to the service provision amongst the partners.

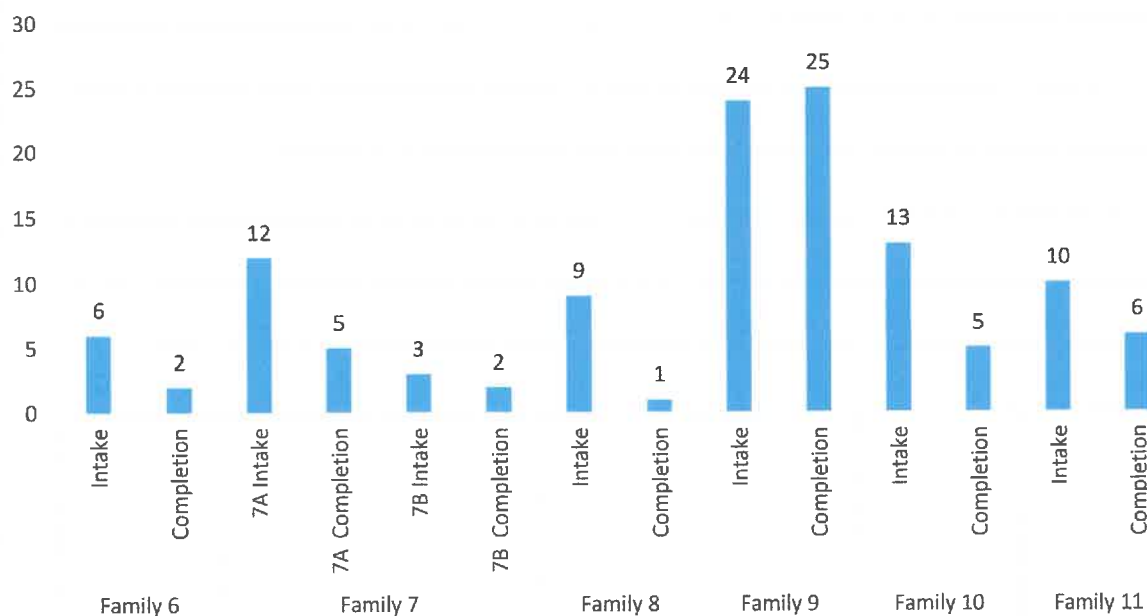
### Total Risk Factors

The total risk factors presented here are for participants with completed YLS-CMI scores only. This tool was the primary tool utilized for measuring a reduction in risk in this evaluation since most of the participants were between the ages of 12-18 for SFP. Moreover, there were very few participants who had either YASI or other CANS completed, any conclusions or changes attributed to one or two assessments would be limited in their external validity, particularly in comparison to the potential for learning from the YLS-CMI since more participants received this assessment. Since the Evaluation Team focused its efforts on impacts it could reasonably articulate or note as promising, an analysis of YLS-CMI scores is presented below.

A total of 7 youth participants from 6 families had YLS-CMI risk assessments completed at both intake and program completion. These 6 families were on the top end of service hours received. This is expected since families one through five received lower hours of service, and therefore staff had fewer opportunities to conduct post-test risk assessments. It was the participants who stayed in SFP longer where staff could maintain contact and complete post-test risk assessments. Hence, the Outcome Evaluation is only able to present findings for participants from families six through eleven.

The total pre and post-test risk scores for participants is presented in figure 12 below, and is broken down by the families, with a higher family number indicating a higher number of service hours received.

Figure 12: Total YLS Risk Score



Overall, figure 12 shows that nearly all of the participants had their risk scores lowered after involvement with SFP, with the exception of the one youth whose score increased by one point after involvement. It is important to note that 3 of the 7 youth shown in figure 12 were categorized as low risk before their involvement with SFP. Although these 3 youth were low-risk prior to entering the pilot, their risk scores nonetheless all dropped even further after engaging in the pilot.

One concern is the youth from family 9 whose risk score remained relatively high throughout the course of the pilot, despite receiving more hours of service than families 6 through 8. This youth may have required more intensive engagement in the pilot, as the participants in families 10 and 11 had moderate risk levels of risk prior to their engagement with SFP, but were categorized as low-risk by program completion. This claim for more needs to be qualified by the fact that families 10 and 11 received an inordinate degree of services relative to the other families (90+ hours of service), whereas family 9 received a total of 34 hours of service. Hence, it is not clear whether the participant would have benefitted from double (60 hours) or triple their service hours (90) in order to have his or her risk factors addressed.

The risk scores were lowered for nearly all of the participants who were involved with SFP. Although this sample size is too small to produce any external validity claims, it nonetheless alludes to the promise of the pilot in addressing the risk factors youth face. The following sections of this report delve deeper into specific areas and categories of risk, many of which were assessed by the YLS-CMI but were also supplemented with other findings.

## Attitudes & Beliefs

The Evaluation Team reviewed three instruments when analysing whether changes in attitudes and beliefs occurred for participants in SFP. The first tool was the Parent Satisfaction Survey, which asked parents to reflect back on the changes they experienced throughout the course of the pilot. The second tool was the YLS-CMI risk assessment which indicated whether antisocial attitudes were a risk factor for the youth participant. Finally, attitudes on the justifiability of violence to resolve arguments were extracted from the YASI or the Information Supplement Forms at intake and program completion.

Unfortunately, changes to the attitudes and beliefs were difficult to measure for this evaluation. Three of the five items which assessed changes in belief and attitudes related to the parents, whose opinions were only captured in the Parent Satisfaction Survey. Moreover, one of the assessments regarding opinions and attitudes of youth towards gangs was connected to the screener of the YLS-CMI but was not administered at program completion. The only measures for assessing change in attitudes and beliefs were in item 8 of the YLS-CMI and the Supplement Forms. The analysis from the limited data and sources on attitudes and beliefs is provided below.

As noted earlier, only one family completed the Parent Satisfaction Survey, producing a total of two responses from parents. Each of these outcomes: the willingness to seek support; improving the ease of finding services; and increased confidence in parenting, were expected to occur at the intermediate phase of programming. Both parents selected 'agree somewhat' in response to whether they were more willing to seek support from service providers after their involvement with SFP. Both parents also selected 'agree somewhat' in response to whether they find it easier now to find the services they need after their involvement with SFP. Finally, both parents selected 'agree somewhat' in response to whether they have increased their confidence in parenting skills after their involvement with SFP. Considering these results are only for one family, the SFP showed promise in its ability to improve parents' willingness to seek support, ease in finding services, and confidence.

Item 8 of the YLS-CMI provides indicators on the attitudes and behaviours of youth. For the sample of 7 youth who had pre and post-tests, behaviour tended to be a strength for most participants prior to their engagement with SFP. 4 of the 7 youth had strength indicated as a strength on their YLS-CMI. One youth was noted as having prosocial attitudes as a strength at program completion, when it was not noted as a strength at intake. Antisocial attitudes was indicated a risk factor for one youth at program intake but was no longer a risk at program completion. For another youth defiance of authority was noted as a risk factor at intake but no longer an issue at program completion. Hence, there was some change among 3 of the 7 youth participants with regards to attitudes and behaviour. For the one youth from family 9 whose risk score remained high, there were no changes in attitudes and behaviour from intake to program completion. The Gang Screener accompanying the YLS-CMI Screener at intake was not administered again at program completion, thus there is no measure for change for the 9 youth who reported an interest in gangs at intake.

Lastly, 8 participants had pre and post measurements risk extracted from the YASI and Information Supplement Forms which assessed their beliefs on the use of violence to resolve conflicts. None of these youth showed any changes from their pre-test to post-test scores in regards to whether violence was justifiable to solve conflicts or problems. One youth's response worsened from 'rarely' to 'sometimes' in regards to whether verbal aggression was appropriate to solve conflicts or problems. However, another youth improved from 'sometimes' to 'rarely' at program completion with regards to the same question.

The YASI and Supplement Forms did not reveal much in relation to change with regards to attitude or beliefs, likely because this was noted as a strength for most the youth at intake.

The positive and negative changes for both parents and youth with regards to behaviour may be marginal. The two parents who completed the Satisfaction Surveys were slightly more likely to access services. However, the majority of youth in the program did not change from their pre and post-test measures with regards to attitudes and beliefs. Considering the small sample size and the marginal shifts, no conclusions can be drawn as to whether SFP essentially improved or even worsened the attitudes and beliefs of youth participants.

### Peer Group

Success in reducing associations to negative peer groups was measured by tracking scores in item 4 of the YLS-CMI. Seven youth participants had both pre and post-tests of the YLS-CMI completed. Two of these youth were reported to have peer groups as a strength at program completion, whereas it was not a strength prior to their involvement with SFP. For two participants 'delinquent youth' was noted as a risk factor at intake, but was no longer listed as a risk factor at program completion. Unfortunately, the one youth from Family 9 increased his involvement with negative peer groups. Overall, three of these seven youth had reduced the number of risk items in the peer relations category of the YLS-CMI.

This youth had two indicators noting negative peers associations at the outset of his involvement, but by program completion he had all four risk factors associated with negative peer groups. The case notes also noted that by the end of his involvement with SFP he was predominately spending his free time with negative peers at school and in the community. While this was disconcerting for the youth, especially when considering SFP was designed to reduce the likelihood of youth involvement in gangs, the relationship between negative peer associations and outcomes is more complex for this target group.

For two of the seven youth who had pre and post-tests of YLS-CMI completed, their risk scores in regards to negative peer associations remained the same through the course of the program. However, the case notes stated that the youth had a combination of negative and positive peer associations. Similarly, contact with an unhealthy peer group remained for two youth whose risk factors dropped in relation to negative peer relations. The target population for SFP were younger siblings of individuals who had ties to gang involvement. SFP's objective was not to sever these ties but to bolster protective factors which would reduce the likelihood of gang involvement. Connecting these youth to healthy peer groups is crucial for this target population, and SFP accomplished this task by connecting youth recreation supports. By the end of their involvement with six of these youth had peer relations as a strength factor in their YLS-CMI assessments, and most had a mix of prosocial and antisocial friends. The aims to establish stronger connections with positive peer groups was accompanied with a concerted effort to improve the individual behaviour of the youth themselves. The following section unpacks the degree to which the SFP was able to impact the behaviour of participants.

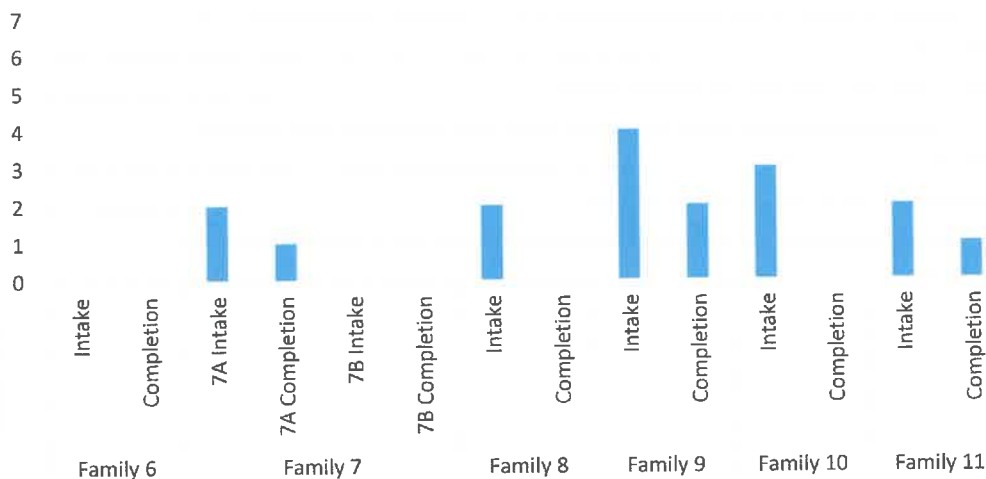
### Individual Level Behaviour

One aim of the SFP was to change the negative behaviour traits youth participants. Pre and post-tests measures of the YLS-CMI and the TSI assessments were administered to track the behavioural changes

witnessed among participants. Similar to the number of pre and post YLS-CMI assessments, there were few participants who had TSIs completed at least once at intake and again at program completion. Only four youth had TSIs measures at intake and at program completion. The assessments for the four participants were analyzed in conjunction with the 7 youth who had pre and post YLS-CMI to assess whether changes in behaviour occurred. Participants families 7, 8, and 10 had TSI assessments completed at intake and completion, and as analysed throughout the Outcome Evaluation participants from families 7 through 11 had pre and post YLS-CMI assessments completed. Although the sample sizes are limited the findings from the YLS-CMI assessments suggest the SFP may be effective in changing the negative behaviour of youth who are at risk of gang-involvement

Figure 13 below illustrates how each of the participants who had behavioural risk factors at intake had their total number of risk factors in this category reduced by completion. In particular, the drop experienced by the participant from family 9 is important considering this youth had other risk factors which were not reduced. The youth from family 9 was high risk at intake and increased his associations with negative peer groups after completion. Yet, through the course of SFP this participant no longer had indicators noting physically aggressive and short attention span as behavioural risk factors. While this is a small victory in a large program it nonetheless highlights a potential strength of SFP, which may be the ability to curb negative behaviour among youth who are at risk of gang involvement.

Figure 13: Behaviour Total Risk Factors



Scores from the YLS-CMI were analysed in conjunction with the TSI assessments to gauge changes in behaviour. Unfortunately, only four youth had TSIs completed at least once at intake and again at program completion, and therefore producing limited results. Three of these four youth improved in some aspect of the social skills score. No youth regressed in their post-test assessments, as each participant who had a behavioural strength at intake retained it at completion. Two youth improved their scores in the 'Thinks before responding' indicator. On the "Empathizes with others, appreciates others' perspectives or points of view" measure none of the youth regressed, and one youth improved from 'sometimes difficult' with empathizing with others at intake to 'sometimes a strength' at program

completion. The changes in TSI scores were relatively marginal, and unfortunately the youth from family 9 did not have post-test TSI assessment to triangulate the change in behavioural risk factors noted in the YLS-CMI.

While the results of the behavioural assessments are limited in so far as the sample sizes are small, they nonetheless point to a potential success of the program service delivery. The CPS model was utilized as a framework underpinning service delivery to ultimately impart new cognitive skills. The Outcome Evaluation conducted did not have the capacity to measuring the implementation and effectiveness of the CPS. The results indicated here note the importance of examining the impact if any the CPS model has in reducing problematic behaviours. Yet, success in reducing behavioural issues cannot be attributed to a framework alone, as external services such as recreational supports can effect behavioural changes.

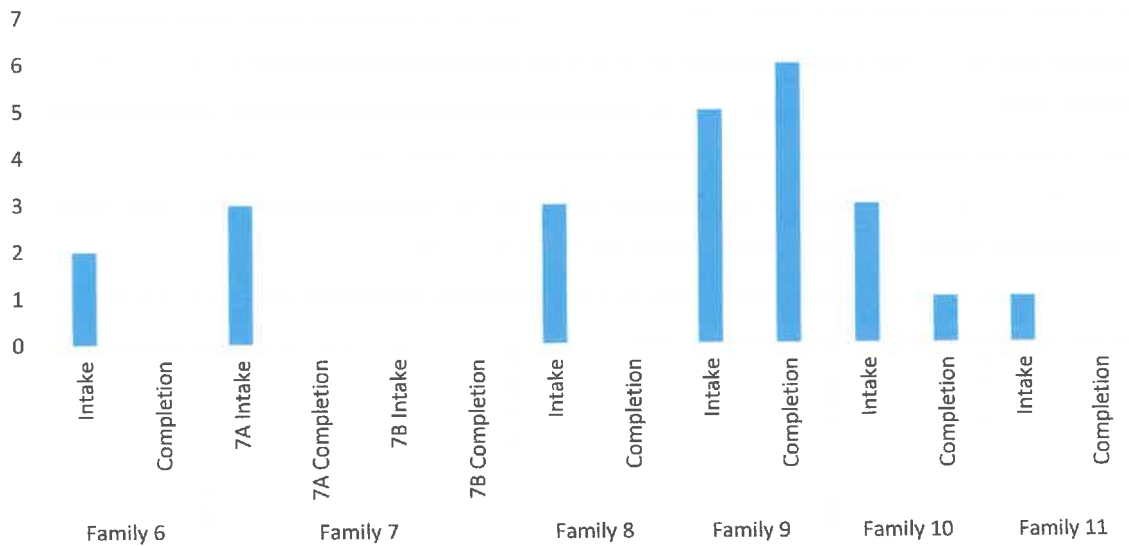
SFP in particular provided services which connected youth to prosocial recreational activities. Three youth had 'could make better use of time' noted as a risk factor at intake, but it was no longer noted as a risk factor at program completion. For one youth leisure/recreation was not noted as a strength at intake, but it was noted as a strength at program completion. Connecting youth to prosocial leisure activities may have also contributed to improving behavioural issues through team working and communication. Future evaluations should attempt to note the interactive effects of programming, how certain supports interact with one another produce impacts.

### School/Work

Improvements in relation to the youth's participation or willingness to attend school or work were measured through pre and post-test assessments of the YLS-CMI and an Information Supplement Form. The Information Supplement Form was utilized for participants who were not administered a SPIN assessment. Two measures from the Information Supplement Form rated participants on their motivation to find and their performance at work. The employment sections of the Information Supplement Form only applied to four the eight participants had pre and post assessments from the Information Supplement Form. Findings from these two assessments are articulated below.

Figure 14 below shows that the majority of the participants who had YLS-CMI assessments at both intake and completion showed some improvement in reducing their risk factors in relation to school or employment. Six of the seven of the youth showed some level of reduction in their school/work risk factors. For four of these participants school/work risk factor were a concern at intake, but by program completion there were no risk factors in this area.

Figure 14: Education/Employment Risk Factors



As for the results from the Information Supplement Form, one of the four youth who had these assessments completed was noted as improving their motivation to find and maintain employment. The other three youth already had a high levels of motivation to find and maintain employment. The SFP did not need to change motivation levels but rather connect these youth to employment services. When reviewing the case notes for these participants each of them received some degree of employment support. One was connected to the Canadian Forces, others were connected to educational achievement programs, and employment supports which provided resume writing and mock interview services. Since these participants did not complete Participation Satisfaction Surveys, there is no data to triangulate whether these employment supports produced fruitful results.

SFP produced promising results with regards to changing the behaviour and attendance of participants at school. The anomaly in the results was the participant from Family 9, whose risk factors in relation to school rose through the course of the program. However, there was limited information available with respect to the participants who received employment supports and the effectiveness of these services in producing meaningful employment.

### Family Functioning

Changes in family dynamics and relationships within the family were measured through changes in the YLS-CMI scores and the TSI. This was then triangulated with information from the Parent Satisfaction Survey. Unfortunately only one family completed the Parent Satisfaction Survey, and only one of the parents responded to the question asking whether it was easier now to talk to their children after their involvement with SFP. The parent who responded selected 'agree somewhat.' Similarly, only one parent responded to whether they gained more strategies to give their children the support they need after their involvement with SFP. The lone respondent selected 'disagree somewhat.'

In regards to opportunities for youth to participate in family activities and decisions affecting them 4 of the 8 respondents had ‘some opportunities for involvement provided,’ with two an additional two assessments noting ‘family provides many opportunities.’ Since 6 of the 8 youth reported at least some degree of involvement in family decision prior to engaging SFP there was not much room for improvement. The degree of the youth’s involvement family decision making only improved for one youth. For the remainder of the 7 participants there was no change reported. Since 6 of the 8 youth reported at least some degree of involvement in family decision prior to engaging SFP there was an area where there may not have been much room for improvement.

Lastly, the items scoring family circumstances are illustrated below in figure 15. This table highlights how there were very marginal gains overall in relation to improving parenting and relations among the 7 youth who had pre and post-test measures. Only one youth had an assessment which indicated change across two indicators, this youth had improved their relations with their mother and alleviated concerns about inappropriate discipline. The length of service delivery, or degree of engagement with SFP, also did not have an impact on improving family circumstances. Family 10 had already parenting noted as a strength at intake, and family 11 which engaged with SFP the longest did not show any noticeable improvements in family circumstances. In particular, poor relations with fathers remained an issue for the majority of the youth, regardless of the degree of engagement in SFP.

Figure 15: YLS-CMI Family Circumstance Item #2							
Assessment Period	Inadequate Supervision	Difficulty in Controlling Behaviour	Inappropriate Discipline	Inconsistent Parenting	Poor Relations with Father	Poor Relations with Mother	Parenting is a Strength
Intake	2	2	3	3	6	4	5
Program Completion	1	1	2	3	5	3	4

This marginal change in family relationships and circumstance is also reflective of the responses from the two youth who completed the Youth Satisfaction Survey. One youth selected ‘better’ and the other ‘no change’ when comparing whether their family relationships had changed after their involvement with SFP. Since only two participants these findings cannot be extended to the program as a whole. Nonetheless, it adds to the inconclusive findings of SFP’s impact on the relationships between parents and youth.

### Service System

Finally, the Outcome Evaluation asked SFP Partners questions regarding their thoughts on whether SFP provided benefits to the service delivery system. The Partner Satisfaction Surveys asked Partners to select any benefits they noticed from the implementation of SFP. The Partner Satisfaction Surveys were administered during the planning, implementation, and completion phases of the project. Figure 16 below provides a breakdown of the benefits Partners noted over the course of the pilot.

Figure 16: Benefits of SFP Reported by Partners

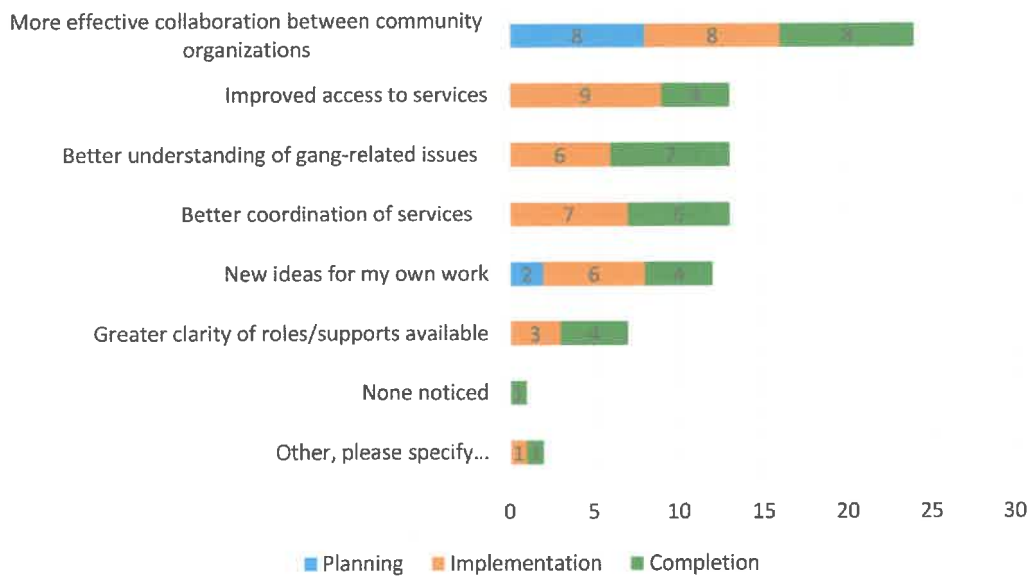


Figure 16 demonstrates that 'more effective collaboration between community organizations' was the benefit noted the most by the partners over the course of the pilot. This was followed by 'improved access to services,' 'better understanding of gang-related issues,' and 'better coordination of services' as benefits of the SFP. Through the course of the pilot on

Fewer benefits were mentioned during the planning only because the only benefits other options were not available for Partner's to select. The Partner Satisfaction Surveys administered at the implementation and completion phases included more options. Also, more benefits may have been noted by the partners during the Implementation phase compared to the other two survey rounds because the work was on-going and the results were more visible. Whereas, by the completion phase much of the work had begun to be wrapped up among the partners in terms of service delivery. The results of the Partner Satisfaction Surveys could not be triangulated with results from the Family and Youth Satisfaction Surveys, due to the low response rates. Nonetheless, the findings across the three Partner Satisfaction Survey reports consistently highlighted improvements in service coordination through the implementation of the pilot. The SFP was successful in improving the service delivery system, and the lessons learned in implementing this pilot are invaluable for future iterations of the service. The following sections of the report highlight the challenges, successes, and lessons learned in implementing SFP.

## Challenges & Lessons Learned

Throughout the report there have been indicators noting successes and challenges in implementing, delivering and evaluating SFP. While successes and challenges were predominately in juxtaposition to each other in this report, this is not necessarily the case. The challenges presented are also opportunities to learn and improve future collaborations, programs, and evaluations. This section of the report thematically organizes and summarizes the most prominent challenges and lessons learned through the course of the evaluation.

### Collaboration & Coordination

The primary challenge in this evaluation was implementing a collaborative service delivery model. The challenges presented in designing separate components of service delivery, with varying roles and responsibilities for each organization, then liaising with the partner organizations to provide a cohesive program were all significant hurdles, which were overcome by the partnering organizations. SFP operated as a truly unique pilot with some members responsible for the intake and others with service planning and programming. The most important lessons learned through the course of the evaluation is that through a strong governance model, open and frequent communication, service providers can overcome organizational service mandates and barriers to collaboration to uniquely target and service hard to reach populations.

Successful collaboration and coordination not only arises out of strong governance structures but strong staff who share a commitment to collaborating and developing solutions. Front-line staff noted the strong soft skills of the Outreach Workers as crucial in transitioning families to services after referrals. Soft skills such as patience, listening, and speaking in the appropriate tone were noted as essential skills in translating referrals to pilot participants.

Another key ingredient to fostering and facilitating the collaborative process was the role the external Project Coordinator played in managing the pilot. While the effectiveness of this role was not formally measured or evaluated through the course of the pilot, the Evaluators did recognize the impact the Project Coordinator had in ensuring the pilot and the collaboration operated smoothly. The advantage of a Project Coordinator for SFP was noticeable considering there were two lead agencies. The Project Coordinator was able to handle the administrative and facilitation responsibilities of chairing meetings among partners. This indirectly played a positive role between the internal dynamics of the two lead agencies, as both agencies shared responsibility and one was not overburdened by facilitating the partnerships. The Project Coordinator complimented the role of the Evaluators, by providing a leadership role without compromising the Evaluator's objectivity in shaping the design of pilot. The various mandates, multitude of priorities, as well as the administrative scheduling of the Steering Committee could easily have been too much for a lead agency-or in this case two lead agencies- to effectively navigate, coordinate and execute. Hence, an external Project Coordinator provided a structure and leadership role in meetings, scheduling, and addressing any issues which may arise in the collaboration.

Lastly, scheduling conflicts were noted as a roadblock in effectively collaborating amongst the various partners. However, this challenge is more of an inevitable speed bump than a true hindrance to collaboration, since scheduling conflicts are likely to occur when so many agencies partner together.

## Program Delivery

The overall implementation and delivery of SFP was very successful. The partners were able to target the right population for which SFP was designed, and the lead agencies delivering services were flexible in their mandates and the services they provided. While this flexibility produced challenges for the evaluation, and are articulated in more detail below, it was nonetheless a key strength of the pilot. Engaging and providing services to hard to reach populations—who are often skeptical of programming—is a difficult task. Flexibility among the agencies and the partners to schedule in services which are convenient to the family are critical to maintaining engagement among participants. All of the partnering agencies were flexible in meeting with participants to provide the level of services the families desired.

Although program delivery and implementation was successful overall, there were areas for improvement. The outreach work was excellent as the information was validated across service agencies and partners to target the appropriate population. However, it took a very long time to complete the referral and triage process. The delays in recruitment is one of the main reasons why SFP was unable to reach its target of 14 families at the time of writing this report. The Partner Satisfaction Surveys and the focus groups did provide some valuable lessons for improving the intake process. It was noted that knocking on doors unannounced may not be effective, as potential participants and their families may simply not be home during the recruitment hours. Connecting by phone or mail earlier may improve the efficiency of the intake as well as the ease referral process for Outreach Workers who have to explain why they are contacting a particular family. It was also noted that the outreach process may not require so many staff from varying agencies. The most valuable component of the referral process was the information sharing which validated gang involvement and family risks, which ensured the right population was targeted.

Lastly, another challenge in program delivery was in regards to navigating the language of the pilot as a service which is meant to reduce the risks of gang involvement of the younger siblings of identified gang members, yet withholding this sensitive information on gang involvement to families and participants. Alerting the families that one of their children had gang involvement may exacerbate issues within the household or alter how services are perceived from participants. How to navigate the language around services which increase protective factors, yet the tools implemented to assess risk and appropriateness of service ask gang specific questions, are avenues for further discussion among program staff and Evaluators.

## Lessons for Evaluation

The challenges in relation to the evaluation of SFP largely related to the lack of a clear exit strategy for program participants. An accurate and robust Outcome Evaluation could not be completed because all of the tools were not consistently completed. The design of the Outcome Evaluation hinged on pre/post-test measures of risk scores, as well as clear exit points from service for participants to provide a retrospective evaluation of the programs and services delivered.

Although this challenge could not be overcome for this evaluation, it provided an important lesson learned. This lesson is to develop an evaluation framework which employs a repeated measures design and administers tools based on timeframes (i.e. intake, 2-months, 6-months, etc.,) rather than service completion. Employing such methods would also help to better control for duration and dosage of programming.

The shorter timeframes for assessment completion would also allow for more reactive evaluation and programming. There would be quick around times between outcomes measured for participants and alerting program staff of any concerns or changes which need to be addressed. In the focus groups some of the partner's noted that once they had completed their role in the intake process they felt as though they were left in the dark as to what happened with youth and their families. By implementing an evaluation framework with shorter timelines, which does not wait for program completion to assess outcomes, will provide an avenue for greater information sharing and program responsiveness across the partners.

While reformulating the evaluation design will greatly improve the utilization of the evaluation tools, there were nonetheless some forms and tools which were not submitted but would have been helpful for the Process Evaluation. The Referral forms were not sent along to the Evaluation Team, this would have helped to produce a measure for how many contacts were required for before successful referrals were made. Future iterations and evaluations of the SFP should design an Information Management System, or Monitoring component which collects forms and data through an-ongoing process, rather than as a data dump at the end of the program.

Finally, future evaluations of the SFP should conduct a closer examination of the implementation and effectiveness of the CPS model. Throughout this Evaluation Report there were mixed reviews from partners on the usefulness of the CPS model, in particular its applicability across other cultures. Despite these concerns, some of the most impactful outcomes of the SFP occurred amongst the behavioural risk factors, which the CPS model directly targets. Unpacking whether the CPS model was truly the cause for reductions in behavioural risk factors, and whether it is culturally appropriate is a crucial learning gap which should be addressed in future evaluations of SFP.

## Conclusion

The Final Evaluation Report presented here highlighted successes and challenges with regards to implementing and assessing the impact of SFP. Overall, the pilot was successful in its implementation of services and in particular in fostering a partnering model which can be potentially be replicated in a similar fashion for other areas of services. The governance model and communication among the partners was a key piece to the pilot's functioning and completion. Future service delivery models which wish to adopt a similar collaborative model must lay a similar foundation in communication and early Process Evaluation to ensure the partnership is implemented as intended. Although the Outcome Evaluation among participants was limited in its findings, there were nonetheless some promising results. Yet, potential without action will not bear any fruit. Hence, continuing to build upon the efforts of the SFP with further communication and evaluation will ensure the strength and growth of the collaboration.

## Appendices

### Appendix A- Process Evaluation Results Matrix

Supporting Families Pilot: Process Evaluation Results Matrix				
Process Evaluation Question	Performance Area	Output Indicator	Result	Data Sources
<b>Project Participants</b>				
1. Did the project enrol the planned number of participants	# of participants	14 families	<ul style="list-style-type: none"> <li>15 families signed consents to participate in SFP. Of the 15 families there were a total of 56 potential youth participants in SFP.</li> <li>13 families were provided services through the course of the pilot, with two families receiving on-going services from the time of writing this report.</li> <li>A total of 22 youth (14 from Youturn and 8 John Howard Society of Ottawa) received some level of service.</li> </ul>	Youturn JHS-Ottawa tracking tools
2. Did the participant target group meet the pilot criteria in risk levels, sibling gang involvement? (i.e. Youth with a sibling who is gang-involved)	Participant risk profile/reaching priority groups	#, % of families corresponding to priority group - older sibling involved in a gang	<p>Each of the families who received services had some form of gang involvement occurring in one the sibling's lives. Out of the 15 youth who received services and completed the Gang Strength and Supplements:</p> <ul style="list-style-type: none"> <li>13 (87%) had a family member who was a gang member in the past.</li> <li>9 (60%) had a family member who was currently a gang member.</li> <li>8 (53%) had some friends or acquaintances who were gang members.</li> <li>7 (47%) lived in a neighbourhood or went to a school with known gangs.</li> <li>7 (47%) lived in a community where gang members were actively recruiting</li> </ul>	YLS-CMI Screen, Gang and Strength Supplements, Full YLS-CMI during intake

			<ul style="list-style-type: none"> <li>○ 5 (33%) of the youth expressed interest in joining a gang.</li> </ul>	
3. How engaged were the participants in the pilot?	Dropout rate Duration of program involvement	<p># of families completing the pilot, as per the following criteria:</p> <ul style="list-style-type: none"> <li>● Average hours of service for all families in the pilot since it started</li> <li>● # of families who dropped out of the project since it started</li> <li>● Family and youth dropout rates</li> <li>● # of gang-involved family members who participated</li> <li>● Average duration (hours) for those who dropped out of the program</li> <li>● Reasons for dropping out</li> <li>● Level of satisfaction with program activities, quality and type of services/support provided</li> </ul>	<ul style="list-style-type: none"> <li>○ 13 of the 15 families who had participants sign consents received some level of services.</li> <li>○ Youturn and the John Howard Society of Ottawa delivered a total of 522 hours of services to 13 families.</li> <li>○ Since 11 families exited SFP, it is more accurate to frame a picture of their duration in the program: <ul style="list-style-type: none"> <li>○ 3 families received between 3 to 4 hours of service.</li> <li>○ 3 families received between 14 to 17 hours of service.</li> <li>○ 3 families received between 23 and 34 hours of service.</li> <li>○ 2 families received between 98 to 142 hours of service.</li> </ul> </li> </ul> <p>Participants were considered dropped out if they received no services after signing consent.</p> <ul style="list-style-type: none"> <li>○ 2 of the 15 families who had participants sign consents dropped out of the pilot after it started. Leaving a family dropout rate of (13%).</li> <li>○ From the 56 potential youth participants 22 youth received some level of services, an additional 22 were never engaged for services (i.e. no needs, not living with family), and 12 youth disengaged early and received no services when staff attempted to connect them.</li> <li>○ These latter 12 youth form the drop-out group. Through the outreach and triage process 34 youth were identified as potential</li> </ul>	Youturn JHS-Ottawa tracking tools Family Exit Interview

			<p>participants in SFP. This creates an attrition rate for the pilot at 35%.</p> <ul style="list-style-type: none"> <li>○ Of the two families which dropped out SFP, one family disengaged early in the process, and the second family noted they were too busy to schedule in time for services and did not provide any availability.</li> <li>○ 2 of the 11 youth participants who had a full YLS-CMI completed were identified as having gang involvement.</li> <li>○ Only two parents completed the exit survey, both noting primarily positive changes in their child after involvement with SFP. Both parents also noted that they would recommend SFP another family.</li> </ul>	
<p><i>Analysis:</i> The outreach process was effective at garnering a high proportion of youth into SFP with gang involvement or with ties to individuals who are gang related. The attrition rate among families was low (13%), however, the real attrition occurred within families as young persons over the age of 20 and youth under the age 10 tended not to receive services through SFP.</p>				
<p><i>Conclusion:</i> SFP targeted the population designed for the program effectively and managed to provide some degree of services to most of the families who signed consents to participate in the pilot.</p>				
<b>Implementation</b>				
4. How well did the Ottawa Supporting Families Project adhere to Gang Prevention Strategy principles and Framework description?	Program fidelity	Extent to which principles are reflected in program delivery	<p>On 7 of the 13 principles reflecting fidelity, the Supervisors and Case Manager of the pilot all selected 'full' when asked the degree of compliance to the principles of the Ottawa Gang Strategy. These 7 principles reflected whether a needs based approach was adopted; participant perspectives were elicited; initiatives were adaptive to community needs; shared assessment tools; addressed broad youth issues; and fostered openness to lawful and appropriate data sharing.</p> <p>Two of the three respondents selected 'full' on 4 of the remaining 6 principles. These principles reflected</p>	Fidelity Checklist

			<p>whether youth were given opportunities to provide their perspective; plans provided options and choices reflecting the family's values; service provider worked co-operatively; and the plan's reflected a blend team member perspectives.</p> <p>On the remaining 2 principles, only one principle reflecting youth empowerment in service delivery received a 'limited/none' compliance response. Finally, Two of the three Supervisors also selected 'partial' when reflecting on whether the service delivery was culturally sensitive.</p>	
5. How effectively did the program work with project partners?	Program fidelity	<ul style="list-style-type: none"> <li>• Extent to which partners contributed to the Framework development</li> <li>• Extent to which partners feel engaged, committed</li> <li>• Extent to which partners are involved in the joint service planning process</li> </ul>	<p>In the Planning Satisfaction Report all of the partners reported themselves as either 'very satisfied' (n=2) or satisfied (n=7) with the development of SFP. A follow up question also highlighted that all partners either strongly agreed or agreed that planning SFP had been a positive experience.</p> <p>In all three of Partner Satisfaction Surveys the majority of the partners consistently indicated they were involved in the pilot and that their involvement was encouraged by their organization.</p> <p>The Implementation Report noted that all 12 of respondents (partners and staff) who were familiar with the case planning process were either satisfied (n=11) or very satisfied (n=1).</p>	Fidelity Checklist, Partner Satisfaction Survey, Partner focus group
6. How effective was the referral process?	Program referrals	<ul style="list-style-type: none"> <li>• # of participants referred to pilot, by referral source</li> </ul>	<p>Respondents in the Implementation Report noted there was difficulty in recruiting. These challenges were reiterated in the focus group discussion. The</p>	Youturn JHS-Ottawa tracking tools,

		<ul style="list-style-type: none"> <li>• # of partners referring participants to program</li> <li>• Suitability of referred individuals for program participation</li> </ul>	<p>Outreach and referral process exceeded the time partner's initially expected.</p> <p>15 families signed consent forms to participate in the pilot, with presumably all of the referrals coming from the outreach done by CASO and OPS.</p> <p>The focus groups highlighted that nearly all of the referrals came from the two partners (CASO and OPS) in charge of the outreach process.</p> <p>The families referred to SFP were suitable considering the large number of youth who participated and had direct or indirect linkages to gang involvement indicated on the Gang and Strength Supplements (refer to results in question 2 of this matrix). However, some focus group participants did feel low-risk participants should have been referred to other programs.</p>	YLS-CMI Screen, Gang and Strength Supplements, Partner Focus Group
7. How effective were the information sharing protocols?	Program referrals	# of partners expressing satisfaction with information sharing protocols	<p>The Implementation Report noted that one partner felt that the consent processes across multiple agencies may have slowed down service provision.</p> <p>However, in the fidelity checklist, the Supervisors and Case Manager noted full compliance in openly, appropriately, and lawfully sharing data.</p>	Partner Satisfaction Survey, Focus Group
8. Was the intake and assessment process effective?	Intake	<ul style="list-style-type: none"> <li>• # of intakes completed</li> <li>• Time from referral to intake</li> </ul>	<p>Intakes were completed on the 13 families who received some level of service.</p> <p>In the focus groups front-line staff highlighted scheduling constraints as a challenge. Front-line staff did note that the gateway meetings with CASO</p>	Focus Group

			Worker were effective. Focus groups also relayed that the triage process (targeting, outreach, referral, and intake) was too lengthy of a process.	
9. Are all data collection tools being utilized/ administered at required times (i.e. intake, during program, and exit)?	Data collection	Administration of measures at intake, throughout program, exit, and follow-up	Most of the early intake and pre-test assessment tools were utilized. The problems were with completing follow-up assessment and post-tests and as participant exit from the pilot was not clearly defined.	Youturn JHS-Ottawa tracking tools,
10. How adequate was the training for implementing and delivering the Ottawa Supporting Families Pilot?	Service providers	<ul style="list-style-type: none"> <li>• # hours spent in training</li> <li>• Amount and type of training provided (initial training, professional development, etc.)</li> </ul>	<p>Two Case Workers in the Implementation Phase Report noted they had received training to improve their effectiveness. One Case Worker noted motivational interviewing techniques as helpful when engaging youth to create goals.</p> <p>Additional training with respect to language barriers was noted as challenge in the Implementation Report. Moreover, in the Completion Satisfaction Survey front-line workers noted training with regards to the CPS philosophy, as well as broader training on structure of the service delivery of the pilot as concerns.</p>	Partner Satisfaction Survey
11. Were partners able to fulfill their commitments to the project within their existing resources?	Service providers	<ul style="list-style-type: none"> <li>• # and type (qualifications) of people resources required to run the program effectively</li> <li>• # and type of resources (equipment, space, budget, in-</li> </ul>	<p>Staff were experienced at both John Howard Society of Ottawa and Youturn in managing both high-risk and low-risk participants.</p> <p>OPS officers noted lowering visibility by arriving at targeted addresses for outreach with unmarked police vehicles. Officers noted maintaining low visibility as important to the outreach process.</p>	Partner Satisfaction Survey, Focus Group

		kind contributions) available to the program	Focus Group found that there were difficulties in engaging youth under the age of 12 and further involvement with Crossroads beyond a consultation role may have been beneficial.	
12. How effectively did the project's governance structure support the project?	Service providers	<ul style="list-style-type: none"> <li>• # of meetings of governance structures</li> <li>• Level and type of support provided</li> </ul>	<p>In the Final Partner Satisfaction Survey all of the respondents (n = 13) were either 'satisfied' or 'very satisfied' with the frequency and method of communication between the partners.</p> <p>In the Final Partner Satisfaction Survey the majority (10 of 13) responded that their current level of involvement with the SFP was either 'very involved' or 'involved.'</p>	Partner Satisfaction Survey, Partner Focus Group
13. How appropriate was the exit strategy for families and youth upon program completion?	Exit strategy	<ul style="list-style-type: none"> <li>• # of participants exiting at program completion</li> <li>• # of participants receiving extended service</li> <li>• Efficacy of exit strategy</li> </ul>	<p>SFP did not have a set 'program' as it was service and client oriented. Some participants had services which lasted beyond a year with complex needs, while others cut contact after the appropriate referrals to health or employment agencies.</p> <p>There was therefore no appropriate exit strategy for participants. The Focus Groups noted that participation dwindled in SFP rather than ending with any clear exit plans.</p>	Partner Satisfaction Survey, Partner Focus Group
<p><i>Analysis:</i> Overall partners were satisfied with the implementation of SFP. Challenges in relation to the outreach and triage process delayed the start of the pilot. There were also unanticipated challenges with regards to exiting SFP, participants dwindled rather than formally exited. Despite these challenges, the outreach targeted a gang-involved or at-risk of gang involvement population and the Partners worked effectively together to reach fidelity principles.</p>				
<p><i>Conclusion:</i> There were unanticipated roadblocks between the referral, triage, and exiting process but the strong buy-in and collaboration among the partners led to a reflexive and responsive pilot which managed to deliver services despite these unforeseen circumstances.</p>				
<b>Program Delivery</b>				

14. To what extent did the participants receive regular case planning services?	Service planning provided	Completion of services as identified by service plan: <ul style="list-style-type: none"> <li>• Initial service plan</li> <li>• Regular follow up Meetings</li> <li>• Documentation of service planning process</li> </ul>	Of the 13 families who received services through SFP, each of the families received at least one meeting after intake to connect participants to the appropriate services. Follow up meetings were common, but not necessary for all participants as three families exited or terminated services quickly (between 2-6 hours) once they were connected to an appropriate service.  Each family and participant was documented for the types of services they received, as well as the service hours spent.	Family and Youth Satisfaction Surveys, Youturn JHS-Ottawa tracking tools,
15. To what extent did the participants receive the planned programming?	Fidelity to service plans	Types of services provided	SFP did not have a set 'program' as it was based on client needs. Participants all did receive the planned service approach which emphasized collaboration and choice for participants.  Types of services provided included-but not limited to the following: <ul style="list-style-type: none"> <li>○ Employment services and supports (resume writing)</li> <li>○ Health care connection (autism supports)</li> <li>○ Financial supports (connection to funding sources for extra-curricular activities)</li> <li>○ Counselling (general, anger management)</li> <li>○ Parenting supports</li> <li>○ Collaborative Problem Solving</li> <li>○ Living skills</li> </ul>	Youturn JHS-Ottawa tracking tools,
<p><i>Analysis:</i> Program delivery varied immensely, with one family receiving 2.5 hours of services and another receiving over 140 hours of service. Implementing a service delivery model where family members played a significant role in the development and implementation of the service plan, led to flexibility as well as uncertainty with regards to whether families cut services short because they only required a few supports or they wished to exit the program early.</p> <p><i>Conclusion:</i> The flexibility of the service plan was both a strength and limitation for SFP. A strength in the sense of empowering participants to define their level of service and for the pilot to adhere to a key fidelity principle from the Ottawa Gang Strategy. A limitation in the sense that</p>				

the program interacted differently with each family, creating difficulties in capturing what precisely SFP offers and its effects in terms of dosage and duration.

#### Service System Coordination

16. What are Partners' views on the success of the project?	Partnerships	<ul style="list-style-type: none"> <li>• # of Partners satisfied with the project</li> <li>• Level of satisfaction with project</li> <li>• Feedback about perceived project outcomes</li> <li>• Identification of pilot strengths and weaknesses</li> </ul>	<p>In all three of the Partner Satisfaction Surveys the partners were overwhelmingly satisfied with SFP.</p> <p>Overall ratings across three surveys:</p> <ul style="list-style-type: none"> <li>○ Planning Phase- 7 noted satisfied and 2 noted very satisfied (total 9 respondents).</li> <li>○ Implementation Phase-10 noted satisfied and 2 noted very satisfied (12 total respondents).</li> <li>○ Completion Phase- 6 noted very satisfied and 7 selected satisfied (13 total respondents).</li> </ul> <p>Partners were satisfied with the communication, the effectiveness of targeting at-risk youth and/or families.</p> <p>In the Completion Phase Satisfaction Survey partners noted 'more effective collaboration between community organizations,' 'better understanding of gang-related issues,' and 'better coordination of services' as the top 3 benefits they noticed, outside of at least somewhat reducing the risk of gang involvement.</p> <p>A key strength of SFP was partner engagement and collaboration. The strong partnerships and knowledge exchange led to targeting the intended populations.</p> <p>Weaknesses of the pilot included the lack of uniform training and understand of the CPS model, and scheduling across the different agencies.</p>	Partner Satisfaction Survey, Partner Focus Group
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17. How effective was the relationship amongst Partners?	Partnerships	Qualitative feedback about the relationship between community partners, project coordinator	<p>SFP was perceived as effective across the partners. The joint service planning was noted as effective, and the skill of the CASO and OPS Liaison workers in engaging families was noted as a crucial ingredient for laying the foundation of service delivery.</p> <p>Concerns were noted in the focus groups in relation to what happened to the families once they were referred and gateway meeting completed. Outreach workers wished to know followed up with families they referred or know their outcomes.</p>	Partner Satisfaction Survey, Partner Focus Group
18. How were partners involved in coordinated service delivery with the project?	Partnerships	<ul style="list-style-type: none"> <li>• Type of partners and type of contribution</li> <li>• # of referrals to/ from partner organizations</li> </ul>	<p>CASO, OPS, and MCYS (Probation Services) lead the targeting and outreach process for SFP. The John Howard Society of Ottawa and Youturn were the lead agencies providing and connecting services to participants. Crossroads operated as a primarily consulting agency with regards to youth under the age of 12.</p> <p>As noted in the focus groups, nearly all of the referrals occurred through the CASO and OPS targeting and outreach work.</p> <p>The Implementation Phase Survey found that the majority of the respondents (over 50%) felt all of the necessary local agencies were involved and actively engaged with SFP.</p>	Partner Satisfaction Survey, Partner Focus Group
<p><i>Analysis:</i> The Partnerships were the strength of this pilot. The collaboration, early buy-in, and continued engagement were strengths in implementing a targeted pilot to a specific at-risk population. Reaching that population, through multiple sources and verified information meant appropriate families were targeted for this pilot, despite the inclusion of some low risk participants.</p>				
<p><i>Conclusion:</i> SFP led to increased collaboration, dialogue, and knowledge exchange regarding gang-risks and programming among partners who work with at-risk populations.</p>				

Challenges/Lessons Learned/Opportunities				
19. What were the challenges / lessons learned as a result of implementing the pilot?	Lessons Learned	Qualitative explanations regarding implementation challenges/lessons learned / opportunities.	<p>A number of challenges and lessons were noted, some of which included:</p> <ul style="list-style-type: none"> <li>○ Participants tend to dwindle rather than exit formally.</li> <li>○ The outreach process took longer than expected.</li> <li>○ Utilizing the CPS model when not all of the partners were trained in this approach.</li> <li>○ Navigating the language of a program targeting risk of gang involvement without alerting parents of youth that it is targeting families with gang involvement risk.</li> <li>○ Scheduling across the various partners.</li> </ul>	Partner Satisfaction Survey, Partner Focus Group
<p><i>Analysis:</i> There were several key challenges and lessons learned across the course of the pilot. Some of these challenges were overcome, such as scheduling, while others remained unresolved or with imprecise solutions (i.e. the language of the program).</p>				
<p><i>Conclusion:</i> Despite the challenges of the program, the strong partnerships and governance structure meant the implementation of the pilot was at no point in jeopardy.</p>				

## Appendix B-Outcome Evaluation Results Matrix

Supporting Families Pilot: Outcome Evaluation Results Matrix				
Outcome Evaluation Question	Performance Area	Output Indicator	Result	Data Sources
<b>Short term outcomes</b>				
20. Have families and youth increased their knowledge about crime and its associated risks?	Knowledge	# and % of families and youth reporting an increase in knowledge about crime and its associated risks	<p>Only one family completed the family satisfaction survey, producing two responses. Both parent's noted they agreed strongly that SFP increased their knowledge about the criminal justice system or gangs and the associated risks.</p> <p>Only two youth completed the youth satisfaction survey, each from different families. One youth selected 'yes, much more' when noting whether he or she understood the risks of being involved in crime better after their involvement with SFP. The other youth selected 'yes, more' to the same question.</p>	Family and Youth Satisfaction surveys
21. Have families and youth increased their knowledge about gangs and associated risks?	Knowledge	# and % of families and youth reporting an increase in knowledge about gangs and associated risks	<p>Only one family completed the family satisfaction survey, producing two responses. Both parents selected 'agree strongly' when answering whether SFP increased their knowledge about the criminal justice system or gangs and the associated risks.</p> <p>Only two youth completed the youth satisfaction survey, each from different families. One youth selected 'Yes, more' and the other 'no change' when answering whether he or she understood the risks of being involved with gangs better after their involvement with SFP.</p>	Family and Youth Satisfaction surveys

22. Have families increased their understanding of strategies to reduce the risk of gang engagement?	Knowledge	# and % of families reporting an increase in understanding of strategies to reduce the risk of gang engagement	One parent noted 'agree somewhat' with the other selecting 'disagree somewhat' when asked if they had a better understanding of how to reduce their children's risk of gang and/or criminal justice after involvement with SFP.	Family satisfaction survey
23. Have families increased their understanding of the supports available?	Knowledge	# and % of families reporting an increase in understanding of the supports available	Only one family completed the family satisfaction survey, producing two responses. Both parents selected 'agree somewhat' when answering whether they knew more to go to for help they needed it, after being involved with SFP.	Family satisfaction survey
24. Have families increased their understanding of their children's skill gaps and areas which they need to strengthen?	Knowledge	# and % of families reporting an increase in knowledge of areas in which their children need to strengthen skills	Only one family completed the family satisfaction survey, producing two responses. One parent selected 'agree strongly' with the other parent selecting 'disagree somewhat' when asked if they had a better understanding of the areas in which their children needed support after involvement with SFP.	Family satisfaction survey
25. To what extent do partners recognize the need to transcend service mandates to meet families' needs?	Attitudes & Beliefs	# and % of partners recognizing the need to transcend mandates to meet families' service needs	A focus group with the SFP Supervisors noted that the pilot was able to provide services to support families that could not be supported within each organization's own justice mandate alone.	Focus Group
<i>Analysis:</i> With an extremely limited number of respondents and Satisfaction Surveys completed the information regarding short-term outcomes is limited at best. Nonetheless, the few youth and parents who completed the Satisfaction surveys were both involved in the pilot for a long period and generally reflected on SFP in a positive light.				
<i>Conclusion:</i> The limited responses to the Satisfaction surveys means there are few conclusions which can be made on SFP's ability to improve short term outcomes related to increasing the knowledge of risks and supports for families.				
<b>Intermediate Outcomes</b>				
26. Have families' acceptance of support from service providers increased?	Attitudes & Beliefs	# and % of families reporting increased acceptance of support from service providers	Only one family completed the family satisfaction survey, producing two responses. Both parents selected 'agree somewhat' in response to whether	Family satisfaction survey

			they were more willing to seek support from service providers after their involvement with SFP.	
27. Have families' levels of engagement with service providers increased?	Attitudes & Beliefs	# and % of families reporting an increased level of engagement with service providers	Only one family completed the family satisfaction survey, producing two responses. Both parents selected 'agree somewhat' in response to whether they find it easier now to find the services they need after their involvement with SFP.	Family satisfaction survey
28. Have parents/ caregivers' confidence in their parenting skills increased?	Attitudes & Beliefs	# and % of families reporting increased confidence in parenting skills	Only one family completed the family satisfaction survey, producing two responses. Both parents selected 'agree somewhat' in response to whether they have increased their confidence in parenting skills after their involvement with SFP.	Family satisfaction survey
29. Have youth increased their prosocial attitudes and beliefs?	Attitudes & Beliefs	# and % of youth reporting an increase in pro-social attitudes and beliefs	Only one youth was noted as having attitudes as a strength at program completion, when it was not noted as a strength at intake.  For one youth 'defies authority' was noted a risk factor at intake, but no longer at program completion. However, for another youth 'defies authority' was not noted at intake as risk factor, but was noted at program completion as a new risk factor.	YLS-CMI Item #8
30. Have youth decreased their positive attitudes towards gangs?	Attitudes & Beliefs	# and % of youth reporting a decrease in positive attitudes toward gangs	Out of the 29 youth who had the Gang Screener at intake 9 reported an interest in gangs. This screener was not administered again at program completion, thus there is no measure for change.	Gang Screen, Item #6
31. Have youth reduced their perception of the benefits of aggression and violence?	Attitudes & Beliefs	# and % of youth who report a reduced perception of the	None of the youth showed any changes from their pre-test scores in regards to whether violence was justifiable to solve conflicts or problems.	YASI (Item 7-4, 7-5) and SPIn (Items C12-

		benefits of aggression and violence	One youth's response worsened from 'rarely' to 'sometimes' in regards to whether verbal aggression was appropriate to solve conflicts or problems. However, another youth improved from 'sometimes' to 'rarely' at program completion with regards to the same question.	C14 ) Data Supplement
<p><i>Analysis:</i> The positive and negative changes for both parents and youth with regards to behaviour may be marginal. The two parents who completed the Satisfaction Survey were slightly more likely to access services. However, the majority of youth in the program did not change from their pre and post-test measures with regards to attitudes and beliefs.</p> <p><i>Conclusion:</i> Considering the small sample size and the marginal shifts, no conclusions can be drawn whether SFP essentially improved or even worsened the attitudes and beliefs of youth participants.</p>				
32. Have youth increased involvement with pro-social/healthy peers?	Peer group	# and % of youth reporting an increase in pro-social behaviour with peers # and % of youth reporting positive peers	<p>7 youth participants had both pre and post-tests of the YLS-CMI. 2 of these youth were reported to have peer groups as a strength at program completion, whereas it was not at intake.</p> <p>3 out of 7 youth had reduced their risk items in the peer relations item of the YLS-CMI.</p>	YLS-CMI Screen, Strength Item #3 Full YLS-CMI, Item #4, Strength
33. Have youth decreased their involvement with negative peers?	Peer group	# and % of youth with a decrease in involvement with anti-social peers # and % of youth with a decrease in anti-social behaviour	<p>7 youth participants had both pre and post-tests of the YLS-CMI. For 2 participants 'delinquent youth' was noted as a risk factor at intake, but was no longer listed as a risk factor at program completion.</p> <p>For one youth 'some delinquent friends' and 'no/few positive friends' were not risk factors at intake, but at program completion these were noted as risk factors.</p>	YLS-CMI Screen, Item #3
34. Have youth increased their involvement in positive, structured activities?	Pro-social behaviour Leisure/ Recreation	# and % of youth reporting an increase in pro-social activities (organized sports,	For one youth leisure/recreation was not noted as a strength at intake, but it was noted as a strength at program completion.	YLS-CMI, Item #5 Full YLS-CMI, Item #6

		recreation, arts, culture, for example)	7 youth participants had both pre and post-tests of the YLS-CMI. For 3 youth 'could make better use of time' was noted as a risk factor at intake, but was no longer noted as a risk factor at program completion.	
35. Improved social skills/functioning	Pro-social behaviour	# and % of youth showing an improvement in social functioning	<p>Only 4 youth participants had TSIs completed at least once at intake and again at program completion. 3 of the 4 youths improved in some aspect of the social skills score.</p> <p>No youth regressed, strengths remained, and only one of the four youth did not improve from intake to completion in their social skills score.</p>	TSI, Social Skills score
36. Do youth show reduced impulsiveness & risk-taking behaviour?	Individual-level behaviour	# and % of youth showing improved ratings on Executive Functioning, Emotional Regulation Skills	<p>2 of the 4 youth who had TSIs completed at least once at intake and again at program completion improved their scores in the 'Thinks before responding' indicator.</p> <p>For the other two youth it remained a strength. No youth regressed in this measure.</p>	TSI item, "Thinks before responding"
37. Do youth show a reduced level of aggression?	Individual-level behaviour	# and % of youth showing a decrease in level of aggression	On the "Empathizes with others, appreciates others' perspectives or points of view" measure none of the youth regressed. And one youth improved from 'sometimes difficult' with empathizing with others at intake to 'sometimes a strength' at program completion.	TSI
38. Have youth reduced their involvement in gangs?	Individual-level Behaviour/ Peer	# and % of gang-involved youth reporting they are no longer involved in a gang	2 youth were noted as having gang involvement prior to their involvement with SFP. In one case a follow up was not conducted to measure whether he or she was no longer involved in gangs. For the second youth,	Gang screen, YLS-CMI notes

			gang involvement and negative peers remained a risk factor.	
<i>Analysis:</i> The behavioural and pro-social supports provided through SFP seemed to have the most positive impacts on youth, however, the sample size was small and the Evaluation Team recommends to follow these developments more closely in future iterations.				
<i>Conclusion:</i> Although the sample size was small the results here were promising, and the improvements in behaviour may point to the counselling component of SFP as an important piece in linking the pilot with any overall reductions in risk.				
39. Have youth improved their school behavior (as applicable)?	School/work	# and % of youth showing an improvement in school/work behaviour	6 of the 7 youth who had both pre and post-test YLS - CMI assessments showed some improvement in their school/work risk factors.	YLS-CMI Item #2
40. Do youth show an improvement in employment motivation and/or performance?	School/work	# and % of youth showing improvement in employment motivation and/or performance?	The employment sections applied to 4 of the 8 participants who had pre and post assessments from the Supplement Form. 1 of the 4 youth who had these assessments completed was noted as improving their motivation to find and maintain employment. The other 3 youth already had a high level of motivation to find and maintain employment.	SPIn, Item G-2, G-5 Information Supplement
41. Have youth improved attendance at school (as applicable)?	School/work	# and % of youth reporting an increase in school/work attendance	2 youth no longer had truancy indicated as a risk factor on their YLS-CMI assessment at program completion.  1 youth did not have truancy indicated as a risk factor during intake, however, did have it indicated as a risk factor at completion. This youth was switching school at intake and had improved his or her attendance at a new school, yet concerns remained whether school attendance had been resolved.	Test – school/work items YLS-CMI Screen, Item #2
<i>Analysis:</i> The SFP may show promise in reducing risk factors related to school, however, that claim has to be qualified by the fact that one participant had their risk factors in relation to school and work increase over the course their involvement with SFP. Outcomes with respect to employment also were not clear, as participants were connected to the appropriate supports but the lack of Participation Surveys from the youth leaves little sources to triangulate the usefulness of these services in producing outcomes.				

*Conclusion:* The SFP may show promise in reducing risk factors related to school, however, it is not clear how success may unfold among these participants. The same can be said for improving employment outcomes.

42. Do parents have an increased capacity to intervene and solve issues as a family	Family functioning	# and % of families showing an increase in capacity to solve issues as a family	<p>Only one family completed the Family Satisfaction Survey, and only one of the parents responded to the question asking whether it was easier now to talk to their children after their involvement with SFP. The parent who responded selected 'agree somewhat.'</p> <p>Similarly, only 1 parent responded to whether they gained more strategies to give their children the support they need after their involvement with SFP. The lone respondent selected 'disagree somewhat.'</p>	Family Satisfaction Survey
43. Does the family show increased collaboration and joint problem-solving?	Family functioning	# and % of families showing an increase in joint problem-solving	8 participants had pre and post-tests of the YASI measures and supplement forms capturing family functioning. The degree of the youth's involvement family decision making only improved for one youth. For the remainder of the 7 participants there was no change reported.	YASI, Item 2-13 Data Supplement
44. Have youth had an increase in supportive relationships with family/care givers?	Family functioning	# and % of youth reporting improved relationships with family members	<p>Very marginal gains among the 7 participants who had pre and post YLS-CMI assessments completed. One youth improved their relations with their mother, and alleviated concerns about inappropriate discipline.</p> <p>Only two youth completed the youth satisfaction survey, each from different families. One youth selected 'better' and the other 'no change' when comparing whether their family relationships had changed after their involvement with SFP.</p>	YLS-CMI Item 2, Youth Satisfaction Survey

*Analysis:* Any gains in relation to improving family functioning from the YLS-CMI indicators were very marginal. The results in regards to SFP impact in improving family functioning are inconclusive and limited.

<p><i>Conclusion:</i> No concrete conclusions could be drawn from the degree of impact SFP had on improving family functioning, as there was limited data from the opinions of parents and youth, and the indicators from the YLS-CMI and Supplement Information Form revealed little to no change.</p>				
45. Have youth reduced their overall risk level?	Risk factors	# and % youth that decreased risk factor on YLS-CMI	6 of the 7 youth who had YLS-CMI assessments completed at intake and program completion had their risk scores reduced. 3 of the 7 youth were already categorized as low-risk but nonetheless their risk scores were lowered even further.	YLS-CMI-total risk factor score
<p><i>Analysis:</i> The total risk scores for nearly all of the participants who had pre and post-test YLS-CMI assessments were lowered. There is a concern that three of the youth whose scores were lowered were low risk to begin their involvement, with another two participants falling in the moderate risk category. The lone participant who was high risk at program intake actually had his risk score increase at the end of the program.</p>				
<p><i>Conclusion:</i> The SFP shows promise with regards to reducing risk factors, particularly among low and moderate risk youth for prevention based programming, however, there are concerns whether it can reduce risk factors for youth entrenched in negative peer group environments. All of these conclusions are qualified by the fact that the sample sizes were very small to draw any conclusive statements about the pilot.</p>				
46. Is there increased coordination in service planning?	Service system	# and % of partners reporting increased coordination in service planning	Increased coordination of services was noted as a benefit by the partners at both the implementation and completion phases of the pilot. Seven partners noted better coordination of services as a benefit at the Implementation phase, and 6 partners noted it as a benefit at the completion phase.	Partner satisfaction Survey and Partner Focus Group
47. Is there increased understanding of roles, supports available for families?	Service system	# and % of partners reporting increased clarity in roles and supports for families	3 partners noted greater clarity of roles/supports available at the implementation phase of the pilot, and 4 Partners noted it as a benefit at the completion phase of the pilot.	Partner satisfaction Survey and Partner Focus Group
48. Has there been an increase in access to required services and supports for families?	Service system	# and % of families and youth reporting an increase in access to social services	Only 1 family completed the Family Satisfaction Survey, producing two responses. Both parents selected 'agree somewhat' in response to whether they find it easier now to find the services they need after their involvement with SFP.	Family Satisfaction Survey

49. Has there been an increase in accessibility of required services?	Service system	<ul style="list-style-type: none"> <li>• # and % of partners reporting better accessibility of services and supports</li> <li>• # and % clients reporting better client access to services and supports</li> </ul>	<p>9 partners noted 'improved access to services' in the Partner Satisfaction Survey conducted during the implementation phase, and four partners noted it during completion phase as a benefit.</p> <p>Only 1 family completed the family satisfaction survey, producing two responses. Both parents selected 'agree somewhat' in response to whether they were more willing to seek support from service providers after their involvement with SFP.</p>	Partner Satisfaction Survey and Family Satisfaction Survey
<p><i>Analysis:</i> The partners involved with SFP consistently showed high levels of satisfaction with the collaboration, and overwhelmingly indicated the SFP as providing benefits to the wider service delivery system.</p>				
<p><i>Conclusion:</i> SFP was successful in improving coordination access to services across the delivery system among the various partners involved with the pilot.</p>				

## Appendix C-Final Partner & Staff Satisfaction Survey

*Period Covered: February 17, 2016 to May 12, 2016*

### Executive Summary

The Supporting Families Pilot (SFP) was a collaborative gang-prevention pilot project conducted by a consortium of Ottawa-based service providers, with the John Howard Society of Ottawa and Youturn acting as the project co-leads. The intent of the pilot was to target youth in gangs and, more specifically, their at-risk younger siblings. Utilizing a Collaborative Problem Solving (CPS) framework, the partners screened, developed, and implemented a service plan targeting youth and their families.

This report presents the results of the third and final Partner Satisfaction Survey. The findings for this report are presented thematically. Detailed findings for the fixed responses are presented in Appendix D. Four thematic categories were used to measure the effectiveness of the SFP pilot: respondent characteristics, internal dynamics, impact, and areas for improvement. Key findings from each of these categories include:

#### Respondent Characteristics

- Most respondents had been involved in the SFP for over a year.
- The majority (10 of 13) responded that their current level of involvement with the SFP was either 'very involved' or 'involved.'
- All respondents indicated that, overall, they were either 'satisfied' or 'very satisfied' with the SFP and that they would recommend the program to referring agencies or workers.

#### Internal Dynamics

- All of the respondents ( $n = 13$ ) were either 'satisfied' or 'very satisfied' with the frequency and method of communication between the partners.
- All of the respondents that provided input to the SFP ( $n = 9$ ) either 'agreed' or 'strongly agreed' that their input was valued.
- All participants indicated that their experience with the SFP had been a positive one ( $n = 10$ ).

#### Impact

- 9 of 10 respondents felt the SFP was either 'effectively' or 'very effectively' targeting at-risk youth and and/or their families.
- 9 of 10 respondents believed that the SFP was effectively targeting at-risk youth and that the program was having a positive impact on those youth.
- All respondents ( $n = 10$ ) at least 'somewhat' agreed that the SFP was helping youth to reduce their risk of involvement in gang activities.

#### Areas for Improvement

- Respondents suggested that there was not always an equal amount of engagement among the participating organizations.
- Because of the large number of agencies and staff involved in the pilot, problems with scheduling and disproportionate workloads sometimes arose.
- Several respondents indicated that there could be better training and more clarity in service delivery for front-line workers.

## Introduction

The Centre of Research, Policy & Program Development (the Centre) at the John Howard Society of Ontario was contracted to develop and execute an evaluation plan for Ottawa's Supporting Families Pilot (SFP) in February 2014. This report presents findings from the last of three scheduled Partner Satisfaction Surveys and covers the partners' overall perceptions of the SFP and its effectiveness. The report begins by outlining the methodology of the survey. Findings from the third Partner Satisfaction Survey are then presented thematically.

## Methodology

As noted earlier, three different surveys were developed to measure partner satisfaction at varying points in the pilot project: when the planning phase was completed, when the implementation phase was completed, and when the pilot project as a whole was completed. This report presents findings from the third survey, which relates to the project completion phase.

The Centre designed a survey to examine partner and staff satisfaction with regards to the overall planning and delivery of the pilot project. The survey was administered online through Fluid Surveys between May 06, 2016 and May 12, 2016. All of the respondents were asked 20 questions relating to the administration, impact, and successes/failures of the project.

The questionnaire itself documented four areas that were crucial to understanding the effectiveness of the SFP. The four categories were: respondent characteristics; internal dynamics; impact; and areas for improvement. The following section begins by providing a background on the survey respondents, then presents results for questions that relate to each of the other three categories.

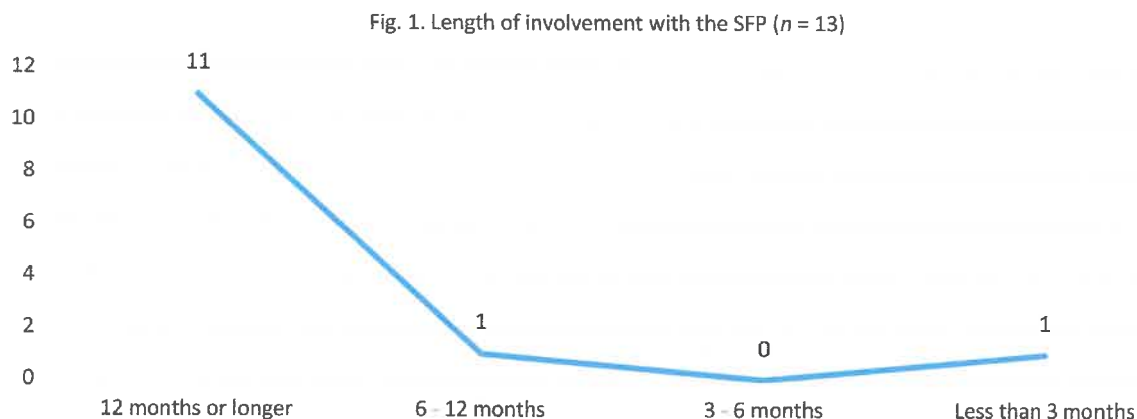
## Findings

Two items in the questionnaire were asked to measure the overall satisfaction of partners with the SFP and the likelihood that they would recommend the program to potential referring agencies or workers. In both cases the response was unanimously positive, with all respondents indicating that they were either 'satisfied' or 'very satisfied' overall with the SFP ( $n = 13$ ), and that they would recommend the program ( $n = 10$ ).

### Respondent Characteristics

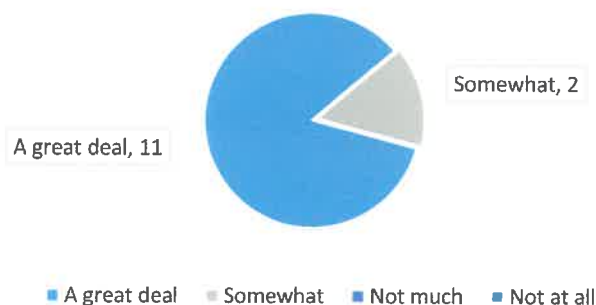
A total of 13 individuals responded to the third Partner Satisfaction Survey, of which 10 completed the entire survey. Each of the three who did not complete the survey responded to at least five questions; their data is used when reporting on those questions. The survey link was sent out to 13 individuals who represented partners and staff involved with SFP, who then were expected to forward the link to staff who were involved with SFP. Calculating an accurate response rate is therefore imprecise. Considering that only staff involved with the pilot were forwarded the survey link, a maximum of 18 individuals may have received the link for the survey. This leaves the response rate at approximately 72% for individuals who responded to the survey, and 56% for individuals who both responded and completed the survey.

The length of involvement for each of the 13 individuals who did respond to the survey is shown below. Figure 1 shows that the majority of the respondents had been involved with SFP for over a year. Most of the individuals who completed this survey, then, were a part of the SFP since its inception or early stages and have detailed knowledge of the program.



Most of the respondents characterized their participation in SFP as either 'very involved' (4) or 'involved' (6), with the remaining three selecting 'little involved.' All but two of the respondents selected 'a great deal' when asked to characterize the extent to which their organization/supervisor encourages his or her involvement in SFP (Figure 2).

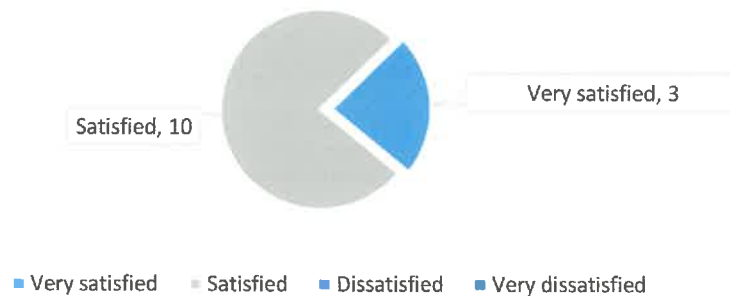
Fig. 2. To what extent does your organization encourage your involvement with the SFP Program? (n = 13)



### Internal Dynamics

Six questions were asked that related to internal perceptions and communications among partner organizations. All of the respondents were either 'satisfied' or 'very satisfied' with the frequency and method of communication between themselves and other partners or staff, represented in figure 3 below. 10 of the 13 respondents to this question selected 'satisfied' while the remaining three selected 'very satisfied.'

Fig. 3. How satisfied are you with the frequency and method of communication between yourself and the SFP? ( $n = 13$ )



Respondents to the survey were also asked if they would feel comfortable bringing an issue to the attention of the SFP Steering Committee and how strongly they felt their input was valued within the SFP. Most of the participants felt that they would be comfortable bringing an issue forward; only two indicated that they were 'not sure.' All but one either 'agreed' or 'strongly agreed' that their input was valued. This one individual indicated that he or she did not provide any input to the SFP during the course of the program. These findings are represented in figures 4 and 5 below.

Fig. 4. I would be comfortable bringing an issue to the attention of the SFP Steering Committee ( $n = 10$ )

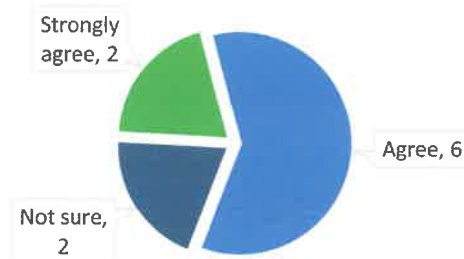
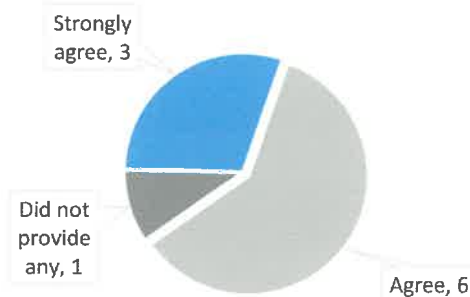
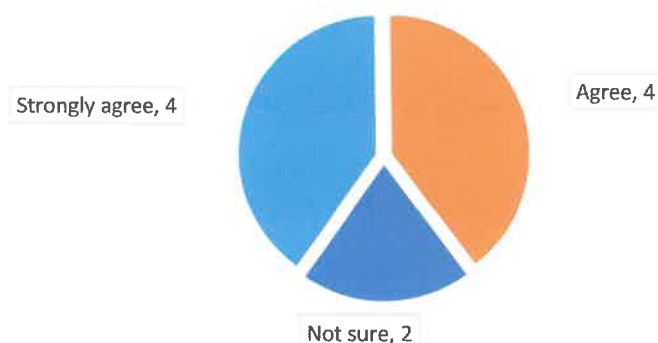


Fig. 5. Do you agree that your input is valued in the SFP? ( $n = 10$ )



A further survey question inquired as to whether respondents perceived program staff to be, in general, a competent group of workers. Most agreed that they were, though two indicated that they were 'not sure' (Figure 6).

Fig. 6. SFP program staff are a competent group of workers, as a whole (n = 10)



Finally, participants were asked whether their overall experience with the SFP had been a positive one. All of the participants selected 'agree' or strongly that it was.

### Impact

Seven questions were asked about how significant an impact the program had on families and at-risk youth. All but one respondent replied that the program was either 'effectively' or 'very effectively' targeting at-risk youth and/or their families (Figure 7).

Fig. 7. How effectively do you feel the program is targeting at-risk youth and/or their families? (n = 10)



The lone dissenting respondent provided the following explanation, indicating concerns about both recruitment and implementation:

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*In my experience, family and siblings did not present risk, and service felt unclear to both family and worker.*

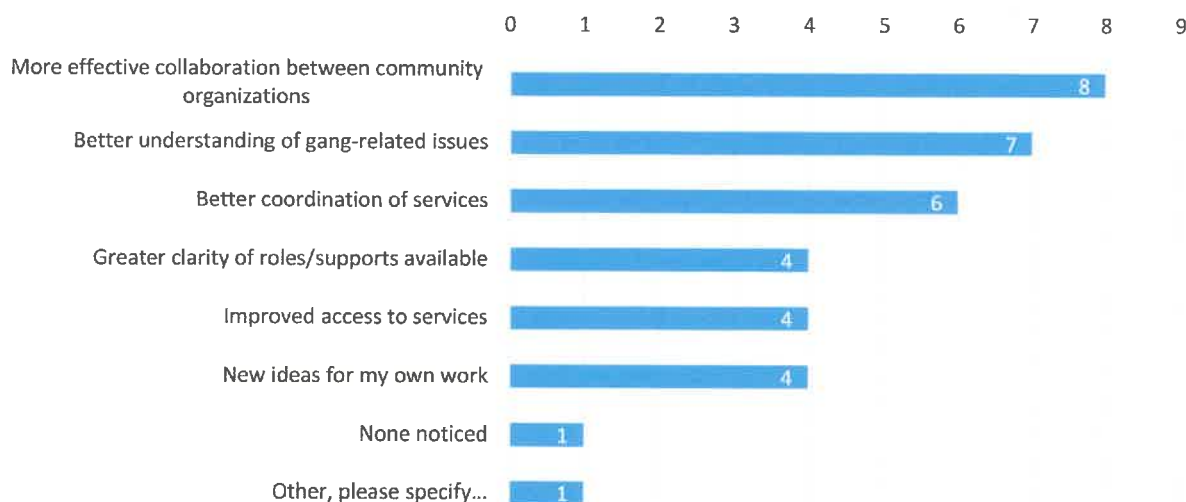
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Participants were asked whether they believed the SFP was an efficient way to have a positive impact on youth at risk. All but one of the respondents agreed that SFP was an efficient way to have a

positive impact on youth at risk. More specifically, respondents were asked about the extent to which they think the SFP helped youth reduce their risk of involvement in youth gangs or gang activity. All responded that they believed it helped at least ‘somewhat’ and elaborated in a follow-up, open-ended question. Some concerns with the program emerged from these open-text responses. Concerns revolved around the program not targeting youth at the “crisis point” and that gang involvement was not explicitly talked about with some families. However, another respondent was more positive, noting that in some cases not only did a younger sibling participate in the program, but so too did the identified gang member “despite initially being reluctant.”

In a further question, respondents were requested to indicate what other benefits – aside from the impact on clients – the program has had on their own work, inter-agency collaboration, or the provision of services to the community. They were asked to select all that applied and the results are visually represented in Figure 8 below. ‘More effective collaboration between community organizations’ was recognized the most by the respondents as an added benefit SFP, followed by ‘better understanding of gang-related issues,’ and ‘better coordination of services.’ The one respondent who selected the ‘other’ category wrote of the “expansion of services within the region as funding has been received to continue some of the work started within the pilot.”

Fig. 8. Please indicate other benefits of the SFP that you may have noticed (Select all that apply):  
(n = 10)



The survey also allowed the opportunity for the participants to identify any additional positive characteristics of the program. They were asked to explain what, from their perspective, the best features of the program were. From the open-ended responses, several key themes emerged: targeting the entire family unit was seen as important; the collaborative aspect and building of partnerships was appreciated; and the way this collaboration allowed the extension of various services across different sectors was perceived as valuable. The potential for new sources of funding was also identified as an additional benefit, as in the following response:

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*Service providers coming together to provide something that does not otherwise exist and as a result we have seen funders get on board and create new funding.*

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Finally, as a way to track the uniqueness of the SFP within the larger environmental context and to rule out certain confounding factors during analysis, survey participants were asked whether, to their knowledge, any clients were exposed to similar services in the past year. Eight respondents said 'no' and two said 'yes.' A set of options to characterize those other services was provided as a follow-up question for the two who selected 'yes.' One respondent noted that at least one client was exposed to "Information presented in another community program," as well as through probation. While the other respondent selected "Another program targeting gang prevention/exit."

### **Areas for Improvement**

Survey respondents were asked two open-ended questions intended to gather ideas on how to improve the delivery and implementation of the SFP, as well as any lessons learned. The first question asked participants what they perceived as the weakest or most challenging aspects of the SFP. The second question asked respondents for suggestions on how the SFP could be improved. Several themes emerged from the responses.

It was suggested that there was not always an equal level of engagement from the participating organizations, or that they did not provide equal support to their respective workers. Going forward, one respondent stressed that any collaborations should involve the "right partners" and that those partners all need to be "committed to the process" – suggesting that this may not have been the case during the pilot. Another expressed the need to "focus on the expertise that each involved agency can bring to the table" and to minimize any bureaucratic boundaries to effective communication between and within agencies. While admitting that the collaboration was at times "challenging," however, a further respondent stated that it was nonetheless "a great opportunity for collaboration" and that "issues were able to be worked through." The same respondent highlighted how much all the partners were "committed to the process."

Another issue that was identified, one which intersects to some degree with the first, has to do with scheduling and time constraints. In some cases this was identified as an effect of the collaboration between numerous and varied agencies, as with one respondent who noted that "Scheduling was also difficult, because of the number of agencies and staff involved." However, another participant reflected that the project demanded "a lot of extra time on the behalf of those directly involved with the families and the offer of service ... with no extra funding provided." Similarly, it was observed that the program was "very much dependent on service providers' willingness to contribute in a time of lots of constraint."

A third criticism and area for improvement had to do with the training of front-line workers and their understanding of the theoretical foundations of the project. One respondent highlighted the need to ensure staff "are trained and demonstrably capable of working from the CPS philosophy." Another worried about "unclear information provided to family, lack of structure in the program, lack of clarity for front line workers" and a third had the following to say:

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*The project is grounded in a philosophy that some stakeholders are not even trained in, or have limited experience implementing.*

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Respondents suggested that the program could be improved by reducing the number and type of staff involved at the outreach level. Fewer staff and more consistent involvement with families throughout the program was seen as a way of enabling a more “meaningful experience with this population.”

## **Conclusions**

For the most part, participants in the third Partner Satisfaction Survey found the SFP to be successful. Nearly all of the respondents felt the pilot had effectively targeted at-risk youth and were satisfied with the partner collaboration process. Thus, the pilot project was implemented successfully with regards to two of its key components: targeting at-risk youth and fostering a collaborative environment for both partners and clients. Partner engagement was also a key goal of the pilot, and most respondents indicated that they felt involved in the program, that their organization encouraged and supported their involvement, and that their input was valued.

Though the SFP was generally perceived as being effective, there were nonetheless some areas of concern for the partners. One such concern related to the preparation of staff, and it was suggested that front-line workers could be more fully trained in CPS and more consistent in the delivery of service to families. A reduction of the number of Outreach Workers and the number of agencies involved in the initial recruitment stage was also suggested. Another concern noted was the difficulty in scheduling and the division of labour among partner agencies. This may be unavoidable with the number of organizations involved, however, and most partners valued the collaborative nature of the program. Even so, some respondents did imply that the number and mix of partners collaborating in the pilot may not have been ideal. Even when considering these obstacles, however, 9 of the 10 respondents agreed that SFP was an efficient way to positively impact at-risk youth. The recommendations for improvement generally related to ironing out the processes to make the collaborative operate more efficiently and effectively. As with previous iterations of the Partner Satisfaction Survey, the Partners were overwhelmingly satisfied with the overall operation and outcomes stemming from the pilot.

## Appendix D: Final Partner Satisfaction Survey Fixed Responses

<b>1. How long have you been involved with the Ottawa SFP?</b>		<b>Count</b>
Less than 3 months		1
3 - 6 months		0
6 - 12 months		1
12 months or longer		11
Total responses		13
<b>2. To what extent does your organization encourage your involvement with the SFP Program?</b>		
A great deal		11
Somewhat		2
Not much		0
Not at all		0
<b>3. Rate your current level of overall satisfaction with the SFP. Check one:</b>		
Very satisfied		6
Satisfied		7
Dissatisfied		0
Very dissatisfied		0
<b>4. How would you describe your current level of involvement with the SFP program?</b>		
Very involved		4
Involved		6
Little involved		3
Not at all		0
<b>5. How satisfied are you with the frequency and method of communication between yourself and the SFP?</b>		
Very satisfied		3
Satisfied		10
Dissatisfied		0
Very dissatisfied		0
<b>6. How strongly do you feel that your input is valued in the SFP?</b>		
Strongly agree		3
Agree		6
Disagree		0
Strongly disagree		0

Did not provide any	1
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**7. How strongly do you agree that your experience with the SFP has been a positive one?**

Strongly agree	3
Agree	7
Disagree	0
Strongly disagree	0

**10. How did you find out about the SFP initiative? (Select all that apply)**

Through my agency/supervisor	7
Through Ottawa Gang Strategy	3
Other	2
At a presentation	1
Word of mouth	1
E-mail	1

**11. How effectively do you feel the program is targeting at-risk youth and/or their families?**

Very effectively	2
Effectively	7
Not too effectively	1
Not at all effectively	0

**12. I would be comfortable bringing an issue to the attention of the SFP Steering Committee.**

Strongly agree	2
Agree	6
Disagree	0
Strongly disagree	0
Not sure	2

**13. The SFP is an efficient way to have a positive impact on youth at risk.**

Strongly agree	4
Agree	5
Disagree	1
Strongly disagree	0
Not sure	0

**14. SFP program staff are a competent group of workers, as a whole.**

Strongly agree	4
Agree	4
Disagree	0
Strongly disagree	0
Not sure	2

**15. To what extent do you think the SFP is helping youth to reduce their risk of involvement in youth gangs/gang activities?**

A great deal	4
Somewhat	6
Not much	0
Not at all	0

**17. Do you know whether any participants were exposed to any other services/sources of information on gang prevention or gang exiting in the past year?**

Yes	2
No	8

**[Select all that apply...]**

Information presented in a school setting	
Information presented in another community program	1
Another program targeting gang prevention/exit	1
Other, please specify...	1

**18. Would you recommend this program to potential referring agencies/workers?**

Yes	10
No	0